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**STATISTICAL COMPENDIUM:
MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2006
MISSOURI**

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TABLE D.2
CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a, b}
DUAL ELIGIBLE BENEFICIARIES, MISSOURI, 2006

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown
All	166,495	84,955	80,554	909	43	34	1,691,719	852,607	831,121	7,216	434	341
Age												
5 and younger	3	0	0	0	3	0	28	0	0	0	28	0
6-14	14	0	9	0	5	0	150	0	105	0	45	0
15-20	291	0	259	4	28	0	3,222	0	2,872	33	317	0
21-44	29,912	0	29,199	707	3	3	314,174	0	308,387	5,742	15	30
45-64	50,186	0	49,972	189	2	23	510,783	0	509,139	1,376	14	254
65-74	33,416	32,674	726	7	1	8	338,005	331,585	6,319	41	3	57
75-84	29,954	29,713	239	2	0	0	303,908	301,176	2,708	24	0	0
85 and older	22,719	22,568	150	0	1	0	221,449	219,846	1,591	0	12	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	104,137	61,366	42,112	604	21	34	1,073,096	626,619	441,001	4,915	220	341
Male	62,358	23,589	38,442	305	22	0	618,623	225,988	390,120	2,301	214	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	130,828	67,811	62,281	679	36	21	1,325,845	677,893	641,893	5,505	356	198
African American	29,862	13,741	15,902	200	7	12	307,289	140,033	165,595	1,452	78	131
Other/unknown	5,805	3,403	2,371	30	0	1	58,585	34,681	23,633	259	0	12
Use of Nursing Facilities^c												
Entire year	20,339	17,780	2,558	0	1	0	211,595	182,888	28,695	0	12	0
Part year	13,671	11,429	2,240	1	0	1	131,567	107,867	23,681	7	0	12
None	132,485	55,746	75,756	908	42	33	1,348,557	561,852	778,745	7,209	422	329
Maintenance Assistance Status												
Cash	44,124	17,089	26,362	666	7	0	502,339	195,808	301,332	5,150	49	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0
Poverty-related	4,809	1,583	3,033	150	9	34	50,316	16,524	32,127	1,222	102	341
Other/unknown	117,562	66,283	51,159	93	27	0	1,139,064	640,275	497,662	844	283	0
Dual Medicare Status^d												
Full dual, all year	156,917	81,498	74,458	884	43	34	1,591,595	816,854	766,989	6,977	434	341
Full dual, part year	9,578	3,457	6,096	25	0	0	100,124	35,753	64,132	239	0	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	166,051	84,950	80,273	760	34	34	1,689,193	852,574	829,316	6,586	376	341
FFS part year, with Rx claims	282	3	199	75	5	0	1,750	21	1,339	355	35	0
FFS part year, no Rx claims	162	2	82	74	4	0	776	12	466	275	23	0

Source: Data for this table are from the MAX 2006 file for Missouri, released by CMS in 9/2009. This table was produced on 02/11/2010.

a. Table D.2 includes the beneficiaries represented by Cell G of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

b. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services. The total includes some beneficiaries with unknown basis of eligibility and some whose age categories are not consistent with basis of eligibility.

c. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.

d. The "Full dual, all year" group contains beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefits during all months of Medicaid enrollment in 2006. The "Full dual, part year" group contains beneficiaries who had such benefits for some, but not all, months of their enrollment. Refer to footnote g of Table 1 for more information about how we determined dual eligibility status.

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; FFS = fee-for-service pharmacy benefit; MAX = Medicaid Analytic Extract; Rx = pharmacy benefit.

TABLE D.3
ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC^{a, b}
DUAL ELIGIBLE BENEFICIARIES, MISSOURI, 2006

Beneficiary Characteristics	Percentage with at Least		Mean Number of Rx	Mean Rx \$	\$ per Rx	Rx \$ as a Percentage of All Medicaid		Number of Beneficiaries
	One Rx	Two Rx				FFS \$ ^c	FFS \$ ^d	
All	45.4	6.1	\$287	\$47	\$9,941	2.9	166,495	
Age								
5 and younger	33.3	5.3	221	42	82,789	0.3	3	
6-14	71.4	15.6	3,329	214	13,464	24.7	14	
15-20	74.2	20.0	2,434	121	14,971	16.3	291	
21-44	48.8	8.3	565	68	8,956	6.3	29,912	
45-64	51.1	8.5	418	49	8,748	4.8	50,186	
65-74	41.4	4.9	177	36	7,180	2.5	33,416	
75-84	40.5	3.3	63	19	11,145	0.6	29,954	
85 and older	40.4	3.1	57	19	16,268	0.4	22,719	
Unknown	0.0	0.0	0	0	0	0.0	0	
Basis of Eligibility^e								
Aged	40.8	3.8	101	27	10,982	0.9	84,955	
Disabled	50.2	8.3	467	56	8,895	5.2	80,554	
Adults	54.2	17.7	1,294	73	3,855	33.6	909	
Children	58.1	28.5	5,880	206	36,687	16.0	43	
Unknown	85.3	23.9	3,189	133	13,751	23.2	34	
Gender								
Female	47.8	6.3	277	44	10,189	2.7	104,137	
Male	41.4	5.7	303	53	9,525	3.2	62,358	
Unknown	0.0	0.0	0	0	0	0.0	0	
Race								
White	48.2	6.5	291	45	10,282	2.8	130,828	
African American	34.3	4.2	239	57	9,111	2.6	29,862	
Other/unknown	39.9	7.3	437	60	6,514	6.7	5,805	
Use of Nursing Facilities^f								
Entire year	50.3	5.6	145	26	27,537	0.5	20,339	
Part year	53.7	5.1	148	29	17,522	0.8	13,671	
None	43.8	6.3	323	52	6,457	5.0	132,485	
Maintenance Assistance Status								
Cash	48.8	7.1	334	47	7,148	4.7	44,124	
Medically needy	0.0	0.0	0	0	0	0.0	0	
Poverty related	26.4	2.9	189	65	1,563	12.1	4,809	
Other/unknown	44.9	5.8	273	47	11,331	2.4	117,562	

Source: Data for this table are from the MAX 2006 file for Missouri, released by CMS in 9/2009. This table was produced on 02/11/2010.

a. Table D.3 includes beneficiaries represented by Cell G of Table 1.

b. The Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

c. In ten states (DE, IA, IL, NC, NE, NY, TN, TX, UT, and WV) the expenditures in this column include only Rx drug expenditures for those enrolled in capitated managed care plans, and not expenditures for other services covered by the plans or long-term-care services not covered by the plans. As a result, the amounts shown in this column for all Medicaid fee-for-service expenditures are lower than they would otherwise be.

d. In ten states (DE, IA, IL, NC, NE, NY, TN, TX, UT, and WV) the Rx share of expenditures for all Medicaid services shown in this column is higher than it would be if all expenditures for these other services, including services provided in capitated managed care plans and long-term-care services, were included.

e. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.

f. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.

Bene(s) = beneficiary (or beneficiaries); CMS = Centers for Medicare & Medicaid Services; FFS = fee-for-service; MAX = Medicaid Analytic Extract; OTC = over-the-counter; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.4
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a, b}
 DUAL ELIGIBLE BENEFICIARIES, MISSOURI, 2006

Beneficiary Characteristics	Number of Rx, Percentage with:										Number	
	Mean Number of Rx	Mean Rx \$	Rx \$ as a Percentage of All Medicaid FFS \$ ^c	None	More than 0, but 1 or Less	More than 1, but 2 or Less	More than 2, but 5 or Less	More than 5, but 10 or Less	More than 10	Mean \$, All Medicaid FFS \$ ^d	Beneficiaries	Benefit Months
All	0.6	\$28	2.9	54.6	35.7	4.5	3.2	1.6	0.4	\$978	166,495	1,691,719
Age												
5 and younger	0.6	24	0.3	66.7	0.0	33.3	0.0	0.0	0.0	8,870	3	28
6-14	1.5	311	24.7	28.6	42.9	7.1	7.1	14.3	0.0	1,257	14	150
15-20	1.8	220	16.3	25.8	39.5	9.3	18.6	4.8	2.1	1,352	291	3,222
21-44	0.8	54	6.3	51.2	35.0	5.4	5.0	2.6	0.7	853	29,912	314,174
45-64	0.8	41	4.8	48.9	37.5	5.7	4.6	2.6	0.8	860	50,186	510,783
65-74	0.5	18	2.5	58.6	33.9	4.0	2.2	1.0	0.3	710	33,416	338,005
75-84	0.3	6	0.6	59.5	35.6	3.2	1.3	0.3	0.1	1,099	29,954	303,908
85 and older	0.3	6	0.4	59.6	35.6	2.8	1.4	0.5	0.1	1,669	22,719	221,449
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Basis of Eligibility^e												
Aged	0.4	10	0.9	59.2	35.0	3.4	1.6	0.6	0.2	1,094	84,955	852,607
Disabled	0.8	45	5.2	49.8	36.7	5.6	4.7	2.5	0.7	862	80,554	831,121
Adults	2.2	163	33.6	45.8	20.1	6.5	14.1	11.2	2.3	486	909	7,216
Children	2.8	583	16.0	41.9	14.0	9.3	14.0	16.3	4.7	3,635	43	434
Unknown	2.4	318	23.2	14.7	32.4	14.7	32.4	2.9	2.9	1,371	34	341
Gender												
Female	0.6	27	2.7	52.2	38.0	4.6	3.1	1.6	0.5	989	104,137	1,073,096
Male	0.6	31	3.2	58.6	31.9	4.2	3.3	1.5	0.4	960	62,358	618,623
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	0.6	29	2.8	51.8	37.9	4.9	3.3	1.6	0.5	1,015	130,828	1,325,845
African American	0.4	23	2.6	65.7	27.6	2.9	2.4	1.1	0.3	885	29,862	307,289
Other/unknown	0.7	43	6.7	60.1	28.5	3.5	4.3	2.9	0.7	645	5,805	58,585
Use of Nursing Facilities^f												
Entire year	0.5	14	0.5	49.7	41.0	5.2	2.7	1.0	0.4	2,647	20,339	211,595
Part year	0.5	15	0.8	46.3	45.5	4.5	2.4	0.9	0.4	1,821	13,671	131,567
None	0.6	32	5.0	56.2	33.9	4.4	3.3	1.7	0.5	634	132,485	1,348,557
Maintenance Assistance Status												
Cash	0.6	29	4.7	51.2	37.9	5.4	3.4	1.6	0.5	628	44,124	502,339
Medically needy	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Poverty related	0.3	18	12.1	73.6	21.5	1.5	2.5	0.6	0.2	149	4,809	50,316
Other/unknown	0.6	28	2.4	55.1	35.5	4.3	3.1	1.6	0.4	1,170	117,562	1,139,064

Source: Data for this table are from the MAX 2006 file for Missouri, released by CMS in 9/2009. This table was produced on 02/11/2010.

a. Table D.4 includes the beneficiaries represented by Cell G of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

b. The Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

c. In ten states (DE, IA, IL, NC, NE, NY, TN, TX, UT, and WV) the expenditures in this column include only Rx drug expenditures for those enrolled in capitated managed care plans, and not expenditures for other services covered by the plans or long-term-care services not covered by the plans. As a result, the amounts shown in this column for all Medicaid fee-for-service expenditures are lower than they would otherwise be.

d. In ten states (DE, IA, IL, NC, NE, NY, TN, TX, UT, and WV) the Rx share of expenditures for all Medicaid services shown in this column is higher than it would be if all expenditures for these other services, including services provided in capitated managed care plans and long-term-care services, were included.

e. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.

f. Please refer to footnote 1 of Table 1 for methodology used to determine nursing facility residence.

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; FFS = fee-for-service; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.5
 AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, MISSOURI, 2006

Beneficiary Characteristics	All Rx			Patented Brand-Name Drugs			Off-Patent Brand-Name Drugs			Generic Drugs		
	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx
All	0.6	\$28	\$47	0.1	\$18	\$155	0.0	\$2	\$96	0.5	\$8	\$17
Age												
5 and younger	0.6	24	42	0.1	16	115	0.0	1	14	0.4	7	18
6-14	1.5	311	214	0.7	293	449	0.1	4	63	0.7	13	18
15-20	1.8	220	121	0.7	177	260	0.1	10	95	1.0	33	32
21-44	0.8	54	68	0.2	38	198	0.0	4	125	0.6	12	21
45-64	0.8	41	49	0.2	26	147	0.0	4	107	0.6	12	19
65-74	0.5	18	36	0.1	10	124	0.0	1	68	0.4	6	16
75-84	0.3	6	19	0.0	2	78	0.0	0	35	0.3	4	12
85 and older	0.3	6	19	0.0	2	75	0.0	0	39	0.3	3	12
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Basis of Eligibility^d												
Aged	0.4	10	27	0.0	5	104	0.0	1	51	0.3	4	14
Disabled	0.8	45	56	0.2	30	167	0.0	4	112	0.6	11	19
Adults	2.2	163	73	0.7	109	163	0.1	18	199	1.5	36	25
Children	2.8	583	206	1.1	531	503	0.2	17	93	1.6	35	22
Unknown	2.4	318	133	0.8	254	331	0.1	25	261	1.5	40	26
Gender												
Female	0.6	27	44	0.1	17	148	0.0	2	89	0.5	8	17
Male	0.6	31	53	0.1	20	166	0.0	3	108	0.4	8	18
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Race												
White	0.6	29	45	0.1	18	152	0.0	2	105	0.5	9	17
African American	0.4	23	57	0.1	17	173	0.0	1	57	0.3	5	18
Other/unknown	0.7	43	60	0.2	31	153	0.0	3	114	0.5	9	19
Use of Nursing Facilities^e												
Entire year	0.5	14	26	0.1	7	104	0.0	1	61	0.5	6	13
Part year	0.5	15	29	0.1	8	113	0.0	1	68	0.4	6	14
None	0.6	32	52	0.1	21	162	0.0	3	101	0.5	8	18
Maintenance Assistance Status												
Cash	0.6	29	47	0.1	19	156	0.0	2	93	0.5	8	17
Medically needy	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Poverty related	0.3	18	65	0.1	12	171	0.0	2	157	0.2	4	22
Other/unknown	0.6	28	47	0.1	18	154	0.0	2	97	0.5	8	17

Source: Data for this table are from the MAX 2006 file for Missouri, released by CMS in 9/2009. This table was produced on 02/11/2010.

a. Table D.5 includes the beneficiaries represented by Cell G of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

b. The Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

c. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies combined. For information about this classification method, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

d. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.

e. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.

CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.6
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, MISSOURI, 2006

Therapeutic Category	Number of Rx per Benefit Month Among Users			\$ per Benefit Month Among Users			\$ per Rx			Users ^e							
	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total Number of Rx	Total Rx \$	Number	As a Percentage of Dual Benes	Number of Benefit Months
Anti-infective Agents	0.3	0.1	0.0	0.2	\$35	\$26	\$1	\$8	\$113	\$319	\$115	\$38	24,273	\$2,749,913	7,375	4.4	78,591
Biologicals	0.1	0.1	0.0	0.0	21	21	0	0	198	221	0	33	593	117,550	490	0.3	5,535
Antineoplastic Agents	0.5	0.2	0.0	0.3	269	234	10	25	517	1,153	947	82	2,432	1,258,430	471	0.3	4,686
Endocrine/Metabolic Drugs	0.7	0.3	0.0	0.4	41	32	2	7	60	114	40	20	49,381	2,956,465	6,959	4.2	72,706
Cardiovascular Agents	1.1	0.4	0.0	0.7	49	33	5	12	45	90	109	17	103,684	4,657,742	9,253	5.6	94,180
Respiratory Agents	0.3	0.1	0.0	0.2	13	8	1	4	41	112	47	18	100,159	4,151,562	27,651	16.6	311,634
Gastrointestinal Agents	0.4	0.1	0.0	0.3	21	16	2	4	54	190	316	12	32,519	1,750,254	7,713	4.6	83,487
Genitourinary Agents	0.3	0.2	0.0	0.1	25	18	4	3	73	93	103	29	6,274	459,144	1,712	1.0	18,120
CNS Drugs	0.7	0.1	0.0	0.6	28	17	1	9	37	182	111	14	361,138	13,516,196	44,642	26.8	487,021
Stimulants/Anti-obesity/Anorexia	0.5	0.3	0.0	0.2	64	59	0	6	120	175	19	28	780	93,623	133	0.1	1,460
Miscellaneous Psychological/Neurological Agents	0.5	0.5	0.0	0.0	129	128	0	0	261	262	0	66	4,190	1,092,648	923	0.6	8,498
Analgesics and Anesthetics	0.6	0.1	0.0	0.5	39	13	12	14	60	200	299	25	73,849	4,458,306	10,747	6.5	114,279
Neuromuscular Agents	0.7	0.1	0.0	0.6	29	18	1	11	43	184	85	19	106,819	4,596,117	14,379	8.6	157,036
Nutritional Products	0.5	0.0	0.1	0.4	7	1	1	6	15	21	18	15	42,809	661,568	8,325	5.0	90,188
Hematological Agents	0.6	0.1	0.0	0.5	26	19	1	6	41	136	25	13	86,208	3,577,496	12,681	7.6	138,358
Topical Products	0.3	0.1	0.0	0.2	15	10	1	3	57	134	62	21	15,224	874,478	5,526	3.3	60,200
Miscellaneous Products	0.4	0.2	0.0	0.2	117	93	6	18	288	482	320	91	2,365	680,090	541	0.3	5,794
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	9	0	0	0	46	0	0	0	1,375	63,746	612	0.4	6,769
TOTAL NO. OF RX AND RX \$	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	1,014,072	47,715,328	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2006 file for Missouri, released by CMS in 9/2009. This table was produced on 02/11/2010.
 a. Table D.6 includes the beneficiaries represented by Cell G of Table 1. A beneficiary who used drugs from two or more categories was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
 b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
 c. For information about these therapeutic categories, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.
 d. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In Missouri, 0.3 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.
 e. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 2006.
 Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; CNS = Central Nervous System; MAX = Medicaid Analytic Extract; n.a. = not applicable; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.7
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, MISSOURI, 2006

Top 10 Drug Groups	Users			Among Users			
	Total Medicaid Rx \$	Number of Users	As a Percentage of Dual Beneficiaries	Number of Benefit Months	Number of Rx per Benefit Month	\$ per Rx	Rx \$ per Benefit Month
ANTIPSYCHOTICS	\$5,901,313	4,841	2.9	51,728	0.5	\$231	\$114
ANTICONVULSANT	3,901,244	13,399	8.0	147,335	0.6	44	26
ANTIDEPRESSANTS	3,363,881	10,936	6.6	116,107	0.4	65	29
ANTIANSXIETY AGENTS	3,125,830	36,866	22.1	405,108	0.6	13	8
HEMATOPOIETIC AGENTS	3,015,127	18,865	11.3	208,579	0.5	28	14
ANALGESICS - Narcotic	2,699,589	11,065	6.6	118,172	0.4	61	23
ANTIASTHMATIC	2,244,432	6,452	3.9	69,655	0.4	90	32
COUGH/COLD/ALLERGY	2,158,600	41,760	25.1	478,162	0.2	23	5
ANTIHYPERLIPIDEMIC	2,004,455	4,948	3.0	52,252	0.4	89	38
ANTIDIABETIC	1,884,316	5,174	3.1	54,045	0.5	72	35
Total	30,298,787	154,306	n.a.	1,701,143	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2006 file for Missouri, released by CMS in 9/2009. This table was produced on 02/11/2010.

a. Table D.7 includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2006. A beneficiary who used drugs from two or more groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2006. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

Benef(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement; n.a. = not applicable.

Dual Medicaid Beneficiaries

TABLE D.7A
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS COMBINED
 AND FIRST AND SECOND GROUPS SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, MISSOURI, 2006

Beneficiary Characteristics	All Top 10 Drug Groups		ANTIPSYCHOTICS					ANTICONVULSANT				
	Number of Rx	Rx \$	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	727,908	\$30,298,787	4,841	2.9	51,728	0.5	\$114	13,399	8.0	147,335	0.6	\$27
Female												
All Females	480,446	18,307,974	2,622	2.5	27,855	0.5	103	8,374	8.0	92,669	0.6	25
Female, Disabled												
All Ages	270,268	13,471,462	2,022	4.8	22,071	0.5	111	6,184	14.7	68,920	0.6	28
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	19	201	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	917	86,494	34	31.8	401	0.7	122	20	18.7	225	0.4	51
21-44	85,086	5,157,730	1,076	7.9	11,730	0.5	116	2,572	18.9	28,733	0.6	36
45-64	180,851	8,059,454	909	3.3	9,916	0.5	104	3,560	12.9	39,645	0.6	22
65-74	2,586	155,959	3	0.7	24	0.5	157	25	5.9	233	0.7	78
75-84	514	7,744	0	0.0	0	0.0	0	6	3.5	72	0.4	4
85 and older	295	3,880	0	0.0	0	0.0	0	1	0.8	12	0.7	5
Female, Other Eligibles												
All Ages	210,178	4,836,512	600	1.0	5,784	0.4	72	2,190	3.5	23,749	0.6	14
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	3	357	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	327	53,598	10	52.6	120	0.8	321	4	21.1	48	1.2	137
21-44	5,022	403,924	90	17.0	925	0.4	86	130	24.6	1,322	0.5	71
45-64	1,084	79,606	7	7.4	84	0.3	40	20	21.1	202	0.6	48
65-74	81,085	2,404,120	188	0.9	2,007	0.5	93	1,014	4.8	11,417	0.6	13
75-84	68,760	1,086,855	148	0.7	1,299	0.4	40	623	2.9	6,578	0.6	8
85 and older	53,897	808,052	157	0.8	1,349	0.4	41	399	2.1	4,182	0.6	7
Male												
All Males	247,462	11,990,813	2,219	3.6	23,873	0.5	127	5,025	8.1	54,666	0.6	30
Male, Disabled												
All Ages	181,263	10,142,630	1,948	5.1	21,314	0.5	134	4,301	11.2	47,248	0.6	32
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	22	3,695	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	1,691	252,441	56	36.8	666	0.6	173	50	32.9	591	0.8	151
21-44	73,942	5,150,282	1,334	8.6	14,795	0.5	136	2,159	13.8	24,042	0.6	37
45-64	104,174	4,677,543	555	2.5	5,822	0.5	126	2,079	9.3	22,475	0.7	24
65-74	1,213	55,760	3	1.0	31	0.1	1	12	3.9	128	0.5	22
75-84	145	1,736	0	0.0	0	0.0	0	1	1.5	12	0.2	2
85 and older	76	1,173	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Dual Medicaid Beneficiaries

TABLE D.7A
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS COMBINED
 AND FIRST AND SECOND GROUPS SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, MISSOURI, 2006

Beneficiary Characteristics	All Top 10 Drug Groups		ANTIPSYCHOTICS					ANTICONVULSANT				
	Number of Rx	Rx \$	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month
Male, Other Eligibles												
All Ages	66,199	1,848,183	271	1.1	2,559	0.4	69	724	3.0	7,418	0.5	16
5 and younger	10	545	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	3	1,626	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	201	39,509	6	46.2	72	0.9	229	5	38.5	60	0.7	73
21-44	1,849	174,924	27	14.6	273	0.4	87	50	27.0	456	0.6	65
45-64	1,389	107,987	13	10.9	124	0.5	120	25	21.0	217	0.5	69
65-74	33,710	999,435	114	1.0	1,151	0.4	76	394	3.4	4,212	0.5	13
75-84	19,533	353,013	71	0.9	601	0.4	41	187	2.3	1,848	0.6	8
85 and older	9,504	171,144	40	1.1	338	0.4	30	63	1.7	625	0.4	8
Unknown	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2006 file for Missouri, released by CMS in 9/2009. This table was produced on 02/11/2010.

a. Table D.7A includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2006. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2006. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription (s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.7B
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR THIRD TO FIFTH TOP DRUG GROUPS
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, MISSOURI, 2006

Beneficiary Characteristics	ANTIDEPRESSANTS					ANTIANSXIETY AGENTS					HEMATOPOIETIC AGENTS				
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	10,936	6.6	116,107	0.4	\$29	36,866	22.1	405,108	0.6	\$8	18,865	11.3	208,579	0.5	\$15
Female															
All Females	7,148	6.9	76,338	0.4	29	25,465	24.5	281,607	0.6	8	13,309	12.8	147,893	0.5	13
Female, Disabled															
All Ages	5,619	13.3	61,277	0.4	31	11,868	28.2	133,138	0.6	9	4,133	9.8	47,002	0.5	24
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	1	16.7	12	0.1	1	4	66.7	45	0.4	4
15-20	42	39.3	491	0.5	31	12	11.2	138	0.3	4	12	11.2	141	0.3	3
21-44	2,213	16.3	24,306	0.4	30	3,529	26.0	39,468	0.6	9	1,093	8.0	12,380	0.5	29
45-64	3,320	12.0	36,029	0.5	31	8,192	29.6	92,124	0.6	9	2,936	10.6	33,449	0.5	21
65-74	44	10.5	451	0.6	33	92	21.9	921	0.5	7	42	10.0	453	0.5	50
75-84	0	0.0	0	0.0	0	26	15.2	299	0.5	6	27	15.8	319	0.5	5
85 and older	0	0.0	0	0.0	0	16	12.8	176	0.6	7	19	15.2	215	0.6	7
Female, Other Eligibles															
All Ages	1,529	2.5	15,061	0.4	21	13,597	21.9	148,469	0.6	7	9,176	14.8	100,891	0.5	9
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	8	42.1	96	0.9	56	4	21.1	48	0.5	8	3	15.8	31	0.1	1
21-44	221	41.9	2,267	0.4	34	130	24.6	1,399	0.5	11	44	8.3	414	0.3	10
45-64	52	54.7	555	0.5	41	21	22.1	221	0.4	6	3	3.2	36	0.4	249
65-74	647	3.1	7,041	0.4	21	4,627	22.1	52,068	0.6	7	2,498	11.9	28,206	0.5	13
75-84	307	1.4	2,673	0.3	12	4,821	22.2	52,614	0.6	7	3,305	15.2	36,564	0.5	7
85 and older	294	1.6	2,429	0.3	12	3,994	21.3	42,119	0.5	6	3,323	17.7	35,640	0.5	7
Male															
All Males	3,788	6.1	39,769	0.5	29	11,401	18.3	123,501	0.6	8	5,556	8.9	60,686	0.6	17
Male, Disabled															
All Ages	3,226	8.4	34,541	0.5	31	7,633	19.9	83,925	0.6	9	2,578	6.7	28,807	0.6	26
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	4	133.3	48	0.3	75
15-20	60	39.5	703	0.5	35	16	10.5	186	0.4	6	20	13.2	214	0.5	29
21-44	1,664	10.7	18,217	0.5	30	2,951	18.9	32,855	0.6	8	624	4.0	7,080	0.6	37
45-64	1,485	6.7	15,441	0.5	31	4,622	20.7	50,437	0.7	9	1,886	8.5	20,978	0.6	22
65-74	17	5.6	180	0.5	32	33	10.8	321	0.6	9	29	9.5	308	0.6	7
75-84	0	0.0	0	0.0	0	8	11.8	96	0.5	5	10	14.7	120	0.5	6
85 and older	0	0.0	0	0.0	0	3	12.0	30	0.5	5	5	20.0	59	0.7	9

Dual Medicaid Beneficiaries

TABLE D.7B
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR THIRD TO FIFTH TOP DRUG GROUPS
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, MISSOURI, 2006

Beneficiary Characteristics	ANTIDEPRESSANTS					ANTI-ANXIETY AGENTS					HEMATOPOIETIC AGENTS				
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
Male, Other Eligibles															
All Ages	562	2.3	5,228	0.4	20	3,768	15.8	39,576	0.5	7	2,978	12.5	31,879	0.5	9
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	66.7	20	0.5	25
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	100.0	10	0.3	163
15-20	3	23.1	36	0.6	21	3	23.1	36	0.7	10	3	23.1	35	1.0	469
21-44	82	44.3	723	0.5	33	44	23.8	418	0.6	7	9	4.9	85	0.5	151
45-64	44	37.0	422	0.6	32	24	20.2	203	0.8	17	8	6.7	68	0.3	6
65-74	243	2.1	2,503	0.4	20	1,755	14.9	19,046	0.6	7	1,230	10.5	13,471	0.5	9
75-84	114	1.4	966	0.3	8	1,250	15.6	13,093	0.5	6	1,095	13.6	11,836	0.5	8
85 and older	76	2.0	578	0.3	13	692	18.2	6,780	0.5	5	629	16.5	6,354	0.5	7
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2006 file for Missouri, released by CMS in 9/2009. This table was produced on 02/11/2010.

a. Table D.7B includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2006. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2006. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

Benef(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription (s) or pharmacy benefit; \$ = Medicaid reimbursement.

Dual Medicaid Beneficiaries

TABLE D.7C
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR SIXTH TO EIGHTH TOP DRUG GROUPS
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, MISSOURI, 2006

Beneficiary Characteristics	ANALGESICS - Narcotic					ANTIASTHMATIC					COUGH/COLD/ALLERGY				
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean		Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean		Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean	
				Rx per Benefit Month	Mean Rx \$ per Benefit Month				Rx per Benefit Month	Mean Rx \$ per Benefit Month				Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	11,065	6.6	118,172	0.4	\$23	6,452	3.9	69,655	0.4	\$32	41,760	25.1	478,162	0.2	\$5
Female															
All Females	6,895	6.6	74,305	0.4	20	4,309	4.1	46,999	0.3	32	29,189	28.0	335,556	0.2	5
Female, Disabled															
All Ages	5,428	12.9	59,558	0.4	21	3,326	7.9	36,715	0.3	32	14,680	34.9	169,761	0.2	4
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	41	38.3	490	0.1	2	17	15.9	204	0.2	13	28	26.2	334	0.1	3
21-44	2,067	15.2	22,982	0.3	20	1,032	7.6	11,591	0.3	25	4,660	34.3	53,685	0.2	4
45-64	3,252	11.7	35,369	0.4	23	2,231	8.1	24,410	0.4	35	9,809	35.4	113,656	0.2	5
65-74	66	15.7	708	0.3	10	44	10.5	506	0.5	50	112	26.6	1,267	0.2	4
75-84	2	1.2	9	0.2	4	2	1.2	4	0.5	58	43	25.1	492	0.3	8
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	28	22.4	327	0.2	4
Female, Other Eligibles															
All Ages	1,467	2.4	14,747	0.3	14	983	1.6	10,284	0.3	30	14,509	23.4	165,795	0.2	5
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	2	66.7	24	0.1	15	0	0.0	0	0.0	0
15-20	9	47.4	108	0.2	2	5	26.3	60	0.2	24	5	26.3	57	0.2	7
21-44	265	50.2	2,741	0.4	25	108	20.5	1,079	0.3	38	133	25.2	1,442	0.2	4
45-64	51	53.7	536	0.5	28	17	17.9	192	0.4	37	35	36.8	400	0.2	3
65-74	704	3.4	7,784	0.3	12	616	2.9	6,923	0.4	33	5,778	27.6	66,885	0.2	5
75-84	220	1.0	1,822	0.4	7	116	0.5	979	0.3	15	4,940	22.8	56,725	0.2	5
85 and older	218	1.2	1,756	0.3	9	119	0.6	1,027	0.2	12	3,618	19.3	40,286	0.2	4
Male															
All Males	4,170	6.7	43,867	0.4	28	2,143	3.4	22,656	0.4	34	12,571	20.2	142,606	0.2	5
Male, Disabled															
All Ages	3,505	9.1	37,338	0.4	29	1,636	4.3	17,610	0.4	34	7,826	20.4	89,638	0.2	4
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	2	66.7	24	0.1	1	1	33.3	12	0.1	2	1	33.3	12	0.1	1
15-20	36	23.7	418	0.2	3	27	17.8	318	0.4	35	32	21.1	369	0.1	4
21-44	1,611	10.3	17,458	0.4	28	622	4.0	6,905	0.3	26	2,890	18.5	33,395	0.2	4
45-64	1,831	8.2	19,180	0.4	30	975	4.4	10,282	0.4	38	4,826	21.7	55,018	0.2	5
65-74	25	8.2	258	0.4	14	11	3.6	93	0.8	80	55	18.0	589	0.3	6
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	16	23.5	192	0.2	2
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	6	24.0	63	0.3	8

Dual Medicaid Beneficiaries

TABLE D.7C
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR SIXTH TO EIGHTH TOP DRUG GROUPS
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, MISSOURI, 2006

Beneficiary Characteristics	ANALGESICS - Narcotic					ANTIASTHMATIC					COUGH/COLD/ALLERGY				
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
Male, Other Eligibles															
All Ages	665	2.8	6,529	0.4	24	507	2.1	5,046	0.4	34	4,745	19.8	52,968	0.2	5
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	33.3	10	0.1	4
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	3	23.1	35	0.1	2	0	0.0	0	0.0	0	2	15.4	24	0.1	4
21-44	111	60.0	1,090	0.5	54	15	8.1	128	0.4	36	57	30.8	552	0.1	3
45-64	83	69.7	835	0.5	31	26	21.8	250	0.3	36	31	26.1	303	0.1	2
65-74	335	2.9	3,558	0.3	17	340	2.9	3,682	0.4	36	2,402	20.4	27,359	0.2	5
75-84	74	0.9	577	0.3	5	67	0.8	518	0.3	19	1,514	18.8	16,915	0.2	5
85 and older	59	1.5	434	0.5	15	59	1.5	468	0.5	30	738	19.4	7,805	0.2	5
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2006 file for Missouri, released by CMS in 9/2009. This table was produced on 02/11/2010.

a. Table D.7C includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2006. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2006. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

Benef(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription (s) or pharmacy benefit; \$ = Medicaid reimbursement.

Dual Medicaid Beneficiaries

TABLE D.7D
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR NINTH AND TENTH TOP DRUG GROUPS
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, MISSOURI, 2006

Beneficiary Characteristics	ANTIHYPERTENSIVE					ANTIDIABETIC					Number of Beneficiaries	Number of Benefit Months
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month		
All	4,948	3.0	52,252	0.4	\$38	5,174	3.1	54,045	0.5	\$35	166,495	1,691,719
Female												
All Females	2,965	2.8	31,704	0.4	38	3,309	3.2	35,150	0.5	35	104,137	1,073,096
Female, Disabled												
All Ages	2,006	4.8	21,824	0.4	40	2,202	5.2	23,776	0.5	38	42,112	441,001
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	6	69
15-20	3	2.8	36	0.4	39	11	10.3	129	0.6	32	107	1,160
21-44	404	3.0	4,488	0.4	35	515	3.8	5,697	0.5	40	13,598	144,510
45-64	1,541	5.6	16,709	0.5	41	1,620	5.9	17,364	0.5	37	27,684	288,204
65-74	58	13.8	591	0.6	51	55	13.1	579	0.6	40	421	3,808
75-84	0	0.0	0	0.0	0	1	0.6	7	0.1	6	171	1,914
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	125	1,336
Female, Other Eligibles												
All Ages	959	1.5	9,880	0.4	32	1,107	1.8	11,374	0.4	28	62,025	632,095
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	28
15-20	1	5.3	12	0.8	56	0	0.0	0	0.0	0	19	200
21-44	28	5.3	266	0.5	41	29	5.5	294	0.5	32	528	4,329
45-64	8	8.4	82	0.5	36	11	11.6	122	0.8	58	95	811
65-74	663	3.2	7,351	0.4	36	748	3.6	8,291	0.5	32	20,939	217,171
75-84	163	0.8	1,373	0.3	19	208	1.0	1,708	0.4	14	21,680	224,378
85 and older	96	0.5	796	0.3	22	111	0.6	959	0.3	10	18,761	185,178
Male												
All Males	1,983	3.2	20,548	0.4	40	1,865	3.0	18,895	0.5	36	62,358	618,623
Male, Disabled												
All Ages	1,506	3.9	15,824	0.5	41	1,346	3.5	13,843	0.5	39	38,442	390,120
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
6-14	1	33.3	12	0.2	5	0	0.0	0	0.0	0	3	36
15-20	5	3.3	60	0.3	16	8	5.3	96	0.2	7	152	1,712
21-44	474	3.0	5,201	0.4	38	406	2.6	4,402	0.5	40	15,601	163,877
45-64	996	4.5	10,251	0.5	42	906	4.1	9,107	0.5	39	22,288	220,935
65-74	30	9.8	300	0.6	63	24	7.9	222	0.7	39	305	2,511
75-84	0	0.0	0	0.0	0	2	2.9	16	0.2	3	68	794
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	25	255

Dual Medicaid Beneficiaries

TABLE D.7D
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR NINTH AND TENTH TOP DRUG GROUPS
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, MISSOURI, 2006

Beneficiary Characteristics	ANTIHYPERTENSIVE					ANTIDIABETIC					Number of Beneficiaries	Number of Benefit Months
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month		
Male, Other Eligibles												
All Ages	477	2.0	4,724	0.4	34	519	2.2	5,052	0.5	26	23,916	228,503
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	28
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	17
15-20	1	7.7	11	1.0	84	0	0.0	0	0.0	0	13	150
21-44	27	14.6	215	0.4	35	14	7.6	122	0.6	78	185	1,458
45-64	29	24.4	254	0.6	55	24	20.2	208	0.8	55	119	833
65-74	318	2.7	3,327	0.4	35	334	2.8	3,550	0.4	27	11,751	114,515
75-84	79	1.0	723	0.4	27	84	1.0	695	0.4	13	8,035	76,822
85 and older	23	0.6	194	0.3	19	63	1.7	477	0.5	13	3,808	34,680
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0

Source: Data for this table are from the MAX 2006 file for Missouri, released by CMS in 9/2009. This table was produced on 02/11/2010.

a. Table D.7D includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2006. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2006. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription (s) or pharmacy; \$ = Medicaid reimbursement.

Dual Medicaid Beneficiaries

TABLE D.8
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BENEFICIARY CHARACTERISTIC^{a, b}
 DUAL ELIGIBLE BENEFICIARIES, MISSOURI, 2006

Beneficiary Characteristics	Rx \$ per Benefit Month	Number of Rx per Benefit Month	Number of All-Year Nursing Facility Residents	Benefit Months Among All-Year Nursing Facility Residents
All	\$14	0.5	20,339	211,595
Age				
0-64	36	1.0	2,510	28,238
65-74	22	0.7	2,753	29,427
75-84	10	0.5	6,229	64,299
85 and older	8	0.4	8,847	89,631
Unknown	0	0.0	0	0
Gender				
Female	12	0.5	14,735	154,059
Male	20	0.6	5,604	57,536
Unknown	0	0.0	0	0
Race				
White	14	0.6	17,453	180,487
African American	14	0.5	2,497	27,069
Other/unknown	19	0.5	389	4,039
Basis of Eligibility^c				
Aged	11	0.5	17,780	182,888
Disabled	36	1.0	2,558	28,695
Adults	0	0.0	0	0
Children	0	0.0	1	12
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 2006 file for Missouri, released by CMS in 9/2009. This table was produced on 02/11/2010.

a. Table D.8 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their 2006 Medicaid enrollment. A total of 13,671 beneficiaries who were in nursing facilities for part of their enrollment and their 131,567 benefit months were excluded from the analysis. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

c. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy; \$ = Medicaid reimbursement.

TABLE D.9
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d, e}
 DUAL ELIGIBLE BENEFICIARIES, MISSOURI, 2006

Therapeutic Category	Number of Rx per Benefit Month Among Users			\$ per Benefit Month Among Users			\$ per Rx			Users			As a Percentage of Dual All-Year Nursing Facility Residents	Number of Benefit Months			
	Total	Patented Brand-Name	Off-Patent Brand-Name	Total	Patented Brand-Name	Off-Patent Brand-Name	Total	Patented Brand-Name	Off-Patent Brand-Name	Total Number of Rx	Total Rx \$	Number of Users					
Anti-infective Agents	0.3	0.1	0.0	0.2	\$13	\$7	\$0	\$5	\$42	\$115	\$34	\$22	1,251	\$52,880	439	2.2	4,169
Biologicals	0.1	0.1	0.0	0.0	4	2	0	2	40	43	0	37	18	721	18	0.1	178
Antineoplastic Agents	0.4	0.1	0.0	0.3	49	35	1	13	134	603	261	42	143	19,143	47	0.2	392
Endocrine/Metabolic Drugs	0.6	0.2	0.1	0.4	27	20	2	5	42	82	44	15	3,159	132,774	525	2.6	4,880
Cardiovascular Agents	1.0	0.2	0.0	0.7	30	16	4	10	30	66	94	14	7,776	232,037	861	4.2	7,798
Respiratory Agents	0.3	0.0	0.0	0.2	7	3	1	4	27	84	39	17	6,736	181,053	2,211	10.9	24,608
Gastrointestinal Agents	0.5	0.1	0.0	0.4	17	13	0	4	37	129	42	12	2,127	77,667	470	2.3	4,532
Genitourinary Agents	0.5	0.3	0.0	0.1	30	23	2	4	65	85	59	27	887	57,529	206	1.0	1,948
CNS Drugs	0.7	0.1	0.0	0.6	14	6	1	8	21	126	77	12	48,691	1,029,988	6,560	32.3	71,114
Stimulants/Anti-obesity/Anorexia	0.2	0.2	0.0	0.1	27	27	0	1	120	177	0	7	9	1,081	5	0.0	40
Miscellaneous Psychological/Neurological Agents	0.6	0.6	0.0	0.0	74	74	0	0	133	133	0	0	1,788	237,807	362	1.8	3,220
Analgesics and Anesthetics	0.6	0.1	0.0	0.5	28	11	8	9	43	103	183	18	2,853	124,014	479	2.4	4,486
Neuromuscular Agents	0.8	0.1	0.0	0.8	23	11	0	12	28	157	63	16	9,902	276,578	1,092	5.4	11,881
Nutritional Products	0.5	0.0	0.0	0.4	7	0	0	6	14	21	16	13	5,976	81,721	1,176	5.8	12,256
Hematological Agents	0.7	0.1	0.0	0.6	12	5	0	7	17	80	24	10	20,552	357,187	2,667	13.1	28,930
Topical Products	0.3	0.1	0.0	0.2	12	6	2	4	38	92	60	18	2,208	83,808	711	3.5	7,267
Miscellaneous Products	0.2	0.0	0.0	0.2	14	2	0	12	55	53	0	55	71	3,873	30	0.1	285
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	7	0	0	0	23	0	0	0	189	4,409	55	0.3	598
TOTAL NO. OF RX AND RX \$	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	114,336	2,954,270	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2006 file for Missouri, released by CMS in 9/2009. This table was produced on 02/11/2010.

a. Table D.9 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2006. A total of 13,671 beneficiaries who were in nursing facilities for part of their enrollment and their 131,567 benefit months were excluded from the analysis.

b. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 2006. A beneficiary who used drugs from two or more categories was counted as a user for each category. Therefore, the sum of users across categories may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

c. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

d. For information about these therapeutic categories, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

e. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. For information about this classification method, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

In Missouri, 0.3 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.

Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; CNS = Central Nervous System; MAX = Medicaid Analytic Extract; n.a. = not applicable; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.10
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS,
 BY TOP-10 DRUG GROUP^a, b, c, d
 DUAL ELIGIBLE BENEFICIARIES, MISSOURI, 2006

Top 10 Drug Groups in Nursing Facilities	Users			Among Users			
	Total Medicaid Rx \$	Number of Users	As a Percentage of All-Year Nursing Facility Residents	Number of Benefit Months	Number of Rx per Benefit Month	\$ per Rx	Rx \$ per Benefit Month
ANTIANKXIETY AGENTS	\$438,637	5,823	28.6	63,609	0.6	\$12	\$7
HEMATOPOIETIC AGENTS	376,953	3,950	19.4	43,521	0.6	14	9
ANTIPSYCHOTICS	347,902	423	2.1	4,143	0.5	160	84
COUGH/COLD/ALLERGY	257,070	4,646	22.8	52,526	0.2	20	5
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	237,807	479	2.4	4,211	0.4	133	56
ANTICONVULSANT	226,713	1,051	5.2	11,516	0.8	26	20
ANTIHISTAMINES	206,628	3,098	15.2	35,039	0.4	15	6
ANTIDEPRESSANTS	157,684	694	3.4	6,664	0.5	50	24
ANTIDIABETIC	94,643	366	1.8	3,508	0.5	50	27
ANTHYPERLIPIDEMIC	86,720	263	1.3	2,527	0.4	78	34
Total	2,430,757	20,793	n.a.	227,264	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2006 file for Missouri, released by CMS in 9/2009. This table was produced on 02/11/2010.

a. Table D.10 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2006. A total of 13,671 beneficiaries who were in nursing facilities for part of their enrollment and their 131,567 benefit months were excluded from the analysis.

b. A user is a beneficiary who had at least one prescription filled in a given drug group during 2006. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

c. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

d. The top 10 drug groups were determined based on total 2006 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters

Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement; n.a. = not applicable.

Dual Medicaid Beneficiaries

TABLE D.10A
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR TOP 10 DRUG GROUPS COMBINED AND FIRST
 AND SECOND TOP DRUG GROUPS SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, MISSOURI, 2006

Beneficiary Characteristics	All Top 10 Drug Groups		ANTIAXIETY AGENTS					HEMATOPOIETIC AGENTS				
	Number of Rx	Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
All	109,793	\$2,430,757	5,823	28.6	63,609	0.6	\$7	3,950	19.4	43,521	0.6	\$9
Female												
All Females	79,262	1,587,157	4,273	29.0	46,771	0.6	7	2,916	19.8	32,237	0.6	9
Female, Disabled												
All Ages	11,443	367,660	488	40.9	5,619	0.7	10	206	17.3	2,399	0.7	23
64 or younger	11,291	353,970	487	41.8	5,607	0.7	10	204	17.5	2,375	0.7	23
65-74	112	13,298	1	8.3	12	0.2	1	1	8.3	12	1.1	7
75-84	13	117	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	27	275	0	0.0	0	0.0	0	1	10.0	12	1.0	9
Female, Other Eligibles												
All Ages	67,819	1,219,497	3,785	28.0	41,152	0.6	7	2,710	20.0	29,838	0.6	7
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	11,218	266,104	523	34.4	5,903	0.7	8	311	20.4	3,461	0.6	8
75-84	24,559	429,436	1,360	29.6	14,696	0.6	7	912	19.9	10,096	0.6	8
85 and older	32,042	523,957	1,902	25.6	20,553	0.5	6	1,487	20.0	16,281	0.6	7
Male												
All Males	30,531	843,600	1,550	27.7	16,838	0.6	7	1,034	18.5	11,284	0.6	9
Male, Disabled												
All Ages	11,303	409,548	501	36.7	5,803	0.6	8	218	16.0	2,529	0.6	14
64 or younger	11,141	404,244	497	37.0	5,755	0.6	8	214	15.9	2,481	0.6	14
65-74	151	5,216	4	28.6	48	1.1	24	3	21.4	36	0.9	7
75-84	11	88	0	0.0	0	0.0	0	1	33.3	12	0.9	7
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male, Other Eligibles												
All Ages	19,228	434,052	1,049	24.7	11,035	0.5	6	816	19.2	8,755	0.6	8
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	7,205	193,671	355	29.4	3,924	0.6	7	242	20.1	2,647	0.7	9
75-84	6,842	131,892	370	22.7	3,938	0.5	6	312	19.1	3,337	0.6	7
85 and older	5,181	108,489	324	23.1	3,173	0.4	5	262	18.7	2,771	0.6	7
Unknown	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2006 file for Missouri, released by CMS in 9/2009. This table was produced on 02/11/2010.

a. Table D.10A includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2006. A total of 13,671 beneficiaries who were in nursing facilities for part of their enrollment and their 131,567 benefit months were excluded from the analysis.

b. A user is a beneficiary who had at least one prescription filled in a given drug group during 2006. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

c. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

d. The top 10 drug groups were determined based on total 2006 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.10B
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY
 AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, MISSOURI, 2006

Beneficiary Characteristics	ANTIPSYCHOTICS					COUGH/COLD/ALLERGY					MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL				
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
All	423	2.1	4,143	0.5	\$84	4,646	22.8	52,526	0.2	\$5	479	2.4	4,211	0.4	\$57
Female															
All Females	264	1.8	2,472	0.5	80	3,530	24.0	40,099	0.2	5	316	2.1	2,790	0.4	52
Female, Disabled															
All Ages	49	4.1	531	0.8	141	305	25.6	3,589	0.3	6	7	0.6	73	0.5	261
64 or younger	49	4.2	531	0.8	141	296	25.4	3,485	0.3	6	7	0.6	73	0.5	261
65-74	0	0.0	0	0.0	0	7	58.3	81	0.2	6	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	1	16.7	11	0.1	1	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	1	10.0	12	0.4	5	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	215	1.6	1,941	0.5	63	3,225	23.8	36,510	0.2	5	309	2.3	2,717	0.4	47
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	49	3.2	490	0.7	101	408	26.8	4,759	0.3	6	30	2.0	305	0.4	51
75-84	83	1.8	739	0.4	46	1,135	24.7	12,944	0.2	5	142	3.1	1,200	0.4	45
85 and older	83	1.1	712	0.4	54	1,682	22.6	18,807	0.2	4	137	1.8	1,212	0.4	48
Male															
All Males	159	2.8	1,671	0.5	91	1,116	19.9	12,427	0.3	6	163	2.9	1,421	0.5	65
Male, Disabled															
All Ages	52	3.8	588	0.7	145	259	19.0	3,024	0.3	5	26	1.9	301	0.7	122
64 or younger	51	3.8	576	0.7	148	257	19.1	3,000	0.3	5	26	1.9	301	0.7	122
65-74	1	7.1	12	0.1	1	2	14.3	24	0.1	1	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male, Other Eligibles															
All Ages	107	2.5	1,083	0.4	61	857	20.2	9,403	0.3	6	137	3.2	1,120	0.4	49
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	47	3.9	531	0.4	78	242	20.1	2,741	0.3	7	27	2.2	266	0.5	63
75-84	37	2.3	331	0.4	51	317	19.4	3,474	0.2	5	54	3.3	409	0.4	42
85 and older	23	1.6	221	0.4	35	298	21.3	3,188	0.2	6	56	4.0	445	0.4	48
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2006 file for Missouri, released by CMS in 9/2009. This table was produced on 02/11/2010.
 a. Table D.10B includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2006. A total of 13,671 beneficiaries who were in nursing facilities for part of their enrollment and their 131,567 benefit months were excluded from the analysis.
 b. A user is a beneficiary who had at least one prescription filled in a given drug group during 2006. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
 c. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
 d. The top 10 drug groups were determined based on total 2006 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.
 Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.10C
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY
 AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, MISSOURI, 2006

Beneficiary Characteristics	ANTICONVULSANT					ANTIHISTAMINES					ANTIDEPRESSANTS				
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
All	1,051	5.2	11,516	0.8	\$20	3,098	15.2	35,039	0.4	\$6	694	3.4	6,664	0.5	\$24
Female															
All Females	672	4.6	7,331	0.8	17	2,307	15.7	26,100	0.4	6	438	3.0	4,135	0.4	20
Female, Disabled															
All Ages	181	15.2	2,055	0.9	32	278	23.3	3,248	0.4	6	74	6.2	810	0.6	33
64 or younger	178	15.3	2,019	0.9	27	276	23.7	3,234	0.4	6	73	6.3	798	0.6	30
65-74	1	8.3	12	4.0	836	1	8.3	12	0.3	6	1	8.3	12	2.0	212
75-84	1	16.7	12	1.0	9	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	1	10.0	12	0.7	5	1	10.0	2	1.0	20	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	491	3.6	5,276	0.7	11	2,029	15.0	22,852	0.4	6	364	2.7	3,325	0.4	17
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	124	8.2	1,374	0.8	18	263	17.3	3,047	0.4	6	69	4.5	740	0.5	30
75-84	187	4.1	1,981	0.7	9	729	15.9	8,249	0.4	6	135	2.9	1,220	0.4	14
85 and older	180	2.4	1,921	0.6	8	1,037	13.9	11,556	0.4	6	160	2.2	1,365	0.4	14
Male															
All Males	379	6.8	4,185	0.8	25	791	14.1	8,939	0.4	6	256	4.6	2,529	0.5	29
Male, Disabled															
All Ages	216	15.8	2,463	0.8	34	238	17.4	2,762	0.4	6	98	7.2	1,097	0.7	43
64 or younger	214	15.9	2,439	0.8	34	237	17.6	2,750	0.4	6	93	6.9	1,037	0.7	44
65-74	2	14.3	24	0.8	54	1	7.1	12	0.7	7	5	35.7	60	0.6	40
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male, Other Eligibles															
All Ages	163	3.8	1,722	0.7	11	553	13.0	6,177	0.4	6	158	3.7	1,432	0.4	18
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	73	6.1	817	0.8	12	161	13.3	1,859	0.4	5	56	4.6	577	0.5	29
75-84	57	3.5	584	0.6	10	225	13.8	2,486	0.4	6	55	3.4	484	0.3	8
85 and older	33	2.4	321	0.5	9	167	11.9	1,832	0.4	6	47	3.4	371	0.3	15
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2006 file for Missouri, released by CMS in 9/2009. This table was produced on 02/11/2010.

a. Table D.10C includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2006. A total of 13,671 beneficiaries who were in nursing facilities for part of their enrollment and their 131,567 benefit months were excluded from the analysis.

b. A user is a beneficiary who had at least one prescription filled in a given drug group during 2006. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

c. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

d. The top 10 drug groups were determined based on total 2006 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.10D
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR NINTH AND TENTH TOP DRUG GROUPS
 SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, MISSOURI, 2006

Beneficiary Characteristics	ANTIDIABETIC					ANTIHYPERTENSIVE					All-Year Nursing Facility Residents	Benefit Months Among All-Year Nursing Facility Residents
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$		
All	366	1.8	3,508	0.5	\$27	263	1.3	2,527	0.4	\$34	20,339	211,595
Female												
All Females	211	1.4	1,999	0.5	26	154	1.0	1,421	0.4	29	14,735	154,059
Female, Disabled												
All Ages	35	2.9	393	0.8	48	26	2.2	293	0.5	42	1,193	13,453
64 or younger	35	3.0	393	0.8	48	25	2.1	290	0.5	42	1,165	13,200
65-74	0	0.0	0	0.0	0	1	8.3	3	0.3	11	12	103
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	6	71
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	10	79
Female, Other Eligibles												
All Ages	176	1.3	1,606	0.5	21	128	0.9	1,128	0.4	26	13,542	140,606
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	49	3.2	504	0.6	40	35	2.3	354	0.5	36	1,521	16,441
75-84	65	1.4	529	0.4	16	53	1.2	462	0.3	20	4,587	47,973
85 and older	62	0.8	573	0.4	10	40	0.5	312	0.3	23	7,434	76,192
Male												
All Males	155	2.8	1,509	0.6	28	109	1.9	1,106	0.5	41	5,604	57,536
Male, Disabled												
All Ages	50	3.7	531	0.6	35	39	2.9	438	0.5	52	1,365	15,242
64 or younger	50	3.7	531	0.6	35	39	2.9	438	0.5	52	1,345	15,038
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	14	136
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	36
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	32
Male, Other Eligibles												
All Ages	105	2.5	978	0.5	24	70	1.7	668	0.4	34	4,239	42,294
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	49	4.1	524	0.6	31	30	2.5	316	0.5	41	1,206	12,747
75-84	24	1.5	190	0.5	14	25	1.5	219	0.4	30	1,633	16,219
85 and older	32	2.3	264	0.6	17	15	1.1	133	0.3	23	1,400	13,328
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0

Source: Data for this table are from the MAX 2006 file for Missouri, released by CMS in 9/2009. This table was produced on 02/11/2010.

a. Table D.10D includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2006. A total of 13,671 beneficiaries who were in nursing facilities for part of their enrollment and their 131,567 benefit months were excluded from the analysis.

b. A user is a beneficiary who had at least one prescription filled in a given drug group during 2006. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

c. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

d. The top 10 drug groups were determined based on total 2006 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.11
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
 AMONG DUALS, BY BENEFICIARY CHARACTERISTIC^{a,b}
 MISSOURI, 2006

Beneficiary Characteristics	Number of Beneficiaries with at Least One Part D Excluded Rx	Percentage of Beneficiaries with at Least One Part D Excluded Rx	Number of Part D Excluded Rx per Beneficiary	Total Number Part D Excluded Rx	Part D Excluded Rx \$ per Beneficiary	Total Part D Excluded Rx \$	\$ per Part D Excluded Rx	Part D Excluded Rx \$ as a Percentage of All Dual Rx \$	Total Number of Beneficiaries
All	83,021	49.9	5.0	827,404	\$63	\$10,430,126	\$13	21.9	166,495
Age									
5 and younger	1	33.3	1.3	4	16	49	12	7.4	3
6-14	12	85.7	6.4	89	117	1,642	18	3.5	14
15-20	138	47.4	3.2	934	47	13,572	15	1.9	291
21-44	14,162	47.3	4.7	139,873	63	1,869,855	13	11.1	29,912
45-64	27,087	54.0	6.0	303,389	78	3,935,575	13	18.8	50,186
65-74	15,452	46.2	4.7	155,682	58	1,932,124	12	32.7	33,416
75-84	14,674	49.0	4.6	136,475	54	1,624,098	12	85.7	29,954
85 and older	11,495	50.6	4.0	90,958	46	1,053,211	12	81.2	22,719
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Basis of Eligibility^c									
Aged	41,069	48.3	4.4	377,206	53	4,538,938	12	53.0	84,955
Disabled	41,514	51.5	5.6	447,077	73	5,843,548	13	15.5	80,554
Adults	393	43.2	2.9	2,651	46	41,540	16	3.5	909
Children	25	58.1	7.5	321	98	4,212	13	1.7	43
Unknown	20	58.8	4.4	149	56	1,888	13	1.7	34
Gender									
Female	55,164	53.0	5.3	554,006	67	7,003,666	13	24.3	104,137
Male	27,857	44.7	4.4	273,398	55	3,426,460	13	18.1	62,358
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Race									
White	68,242	52.2	5.3	695,524	68	8,879,834	13	23.3	130,828
African American	12,278	41.1	3.7	109,959	42	1,268,319	12	17.8	29,862
Other/unknown	2,501	43.1	3.8	21,921	49	281,973	13	11.1	5,805
Use of Nursing Facilities^d									
Entire year	12,086	59.4	5.0	100,761	62	1,266,001	13	42.9	20,339
Part year	8,456	61.9	4.9	67,027	60	815,764	12	40.3	13,671
None	62,479	47.2	5.0	659,616	63	8,348,361	13	19.5	132,485
Maintenance Assistance Status									
Cash	24,474	55.5	7.0	308,233	84	3,721,239	12	25.3	44,124
Medically needy	0	0.0	0.0	0	0	0	0	0.0	0
Poverty related	1,211	25.2	1.2	5,622	18	86,538	15	9.5	4,809
Other/unknown	57,336	48.8	4.4	513,549	56	6,622,349	13	20.6	117,562

Source: Data for this table are from the MAX 2006 file for Missouri, released by CMS in 9/2009. This table was produced on 02/11/2010.

a. Table D.11 includes the beneficiaries represented by Cell G of Table 1. Beneficiaries include all dual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2006.

b. The statute establishing the Medicare Part D prescription program that started in 2006 excludes several types of drugs from coverage. State Medicaid programs have been allowed to exclude these drugs since 1990, but many states have chosen to cover them, and if states cover them for any Medicaid beneficiaries they must also cover them for dual eligibles, who as of 2006 receive the remainder of their prescription drug coverage through Part D. Excluded drugs include benzodiazepines; barbiturates; nonprescription (OTC) medications; prescription vitamins and minerals (not including prenatal vitamins and fluoride preparations); and drugs used for anorexia, weight loss, or weight gain. Other excluded drugs include those that promote fertility; those used for cosmetic purposes or hair growth, for symptomatic relief of coughs and colds; or drugs for which the manufacturer requires that associated tests or monitoring services be purchased exclusively from the manufacturer.

c. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.

d. Please refer to footnote f on Table 1 for methodology used to determine use of nursing facilities.

Bene(s) = beneficiary (or beneficiaries); CMS = Centers for Medicare & Medicaid Services; Excl = excluded; MAX = Medicaid Analytic Extract; OTC = over-the-counter; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.12
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
 AMONG DUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a,b}
 MISSOURI, 2006

Beneficiary Characteristics	Number Rx per Benefit Month	Rx \$ per Benefit Month	\$ per Rx	Barbiturate \$ per Benefit Month	Benzodiazapine \$ per Benefit Month	Number of Benefit Months
All	0.5	\$6	\$13	\$0	\$2	1,691,719
Age						
5 and younger	0.1	2	12	0	0	28
6-14	0.6	11	18	0	0	150
15-20	0.3	4	15	0	1	3,222
21-44	0.4	6	13	0	3	314,174
45-64	0.6	8	13	0	3	510,783
65-74	0.5	6	12	0	2	338,005
75-84	0.4	5	12	0	2	303,908
85 and older	0.4	5	12	0	1	221,449
Unknown	0.0	0	0	0	0	0
Basis of Eligibility^c						
Aged	0.4	5	12	0	2	852,607
Disabled	0.5	7	13	0	3	831,121
Adults	0.4	6	16	0	3	7,216
Children	0.7	10	13	0	2	434
Unknown	0.4	6	13	0	2	341
Gender						
Female	0.5	7	13	0	2	1,073,096
Male	0.4	6	13	0	2	618,623
Unknown	0.0	0	0	0	0	0
Race						
White	0.5	7	13	0	3	1,325,845
African American	0.4	4	12	0	1	307,289
Other/unknown	0.4	5	13	0	1	58,585
Use of Nursing Facilities^d						
Entire year	0.5	6	13	0	2	211,595
Part year	0.5	6	12	0	2	131,567
None	0.5	6	13	0	2	1,348,557
Maintenance Assistance Status						
Cash	0.6	7	12	0	3	502,339
Medically needy	0.0	0	0	0	0	0
Poverty related	0.1	2	15	0	1	50,316
Other/unknown	0.5	6	13	0	2	1,139,064

Source: Data for this table are from the MAX 2006 file for Missouri, released by CMS in 9/2009. This table was produced on 02/11/2010.

a. Table D.12 includes the beneficiaries represented by Cell G of Table 1. Beneficiaries include all dual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2006.

b. The statute establishing the Medicare Part D prescription program that started in 2006 excludes several types of drugs from coverage. State Medicaid programs have been allowed to exclude these drugs since 1990, but many states have chosen to cover them, and if states cover them for any Medicaid beneficiaries they must also cover them for dual eligibles, who as of 2006 receive the remainder of their prescription drug coverage through Part D. Excluded drugs include benzodiazepines; barbiturates; nonprescription (OTC) medications; prescription vitamins and minerals (not including prenatal vitamins and fluoride preparations); and drugs used for anorexia, weight loss, or weight gain. Other excluded drugs include those that promote fertility; those used for cosmetic purposes or hair growth, for symptomatic relief of coughs and colds; or drugs for which the manufacturer requires that associated tests or monitoring services be purchased exclusively from the manufacturer.

c. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.

d. Please refer to footnote f on Table 1 for methodology used to determine use of nursing facilities.

Bene(s) = beneficiary (or beneficiaries); CMS = Centers for Medicare & Medicaid Services; Excl = excluded; MAX = Medicaid Analytic Extract; OTC = over-the-counter; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.13
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D FOR SELECTED DRUG CATEGORIES AMONG DUALS^{a,b,c}
 MISSOURI, 2006

Drug Category	Number of Users	Rx \$ per User	Total Rx \$	Rx \$ as a		Number Rx as a	
				Percentage of All Part D Excluded Rx \$	Total Number Rx. \$ per Rx	Percentage of All Part D Excluded Rx	Excluded Rx
All	124,813	\$84	\$10,430,126	100.0	827,404	\$13	100.0
Anorexia or weight loss/gain	0	0	0	0.0	0	0	0.0
Fertility drugs	0	0	0	0.0	0	0	0.0
Drugs for cosmetic purposes	5	13	66	0.0	5	13	0.0
Cough and cold medications	20,055	58	1,162,292	11.1	53,471	22	6.5
Vitamins and minerals	7,450	77	575,177	5.5	38,027	15	4.6
Non-prescription drugs	50,478	88	4,421,791	42.4	392,721	11	47.5
Barbiturates	1,254	95	118,714	1.1	12,509	9	1.5
Benzodiazepines	43,149	91	3,920,852	37.6	321,112	12	38.8
Other Part D Excl Rx Drugs	2,422	95	231,234	2.2	9,559	24	1.2

Source: Data for this table are from the MAX 2006 file for Missouri, released by CMS in 9/2009. This table was produced on 02/11/2010.

a. Table D.13 includes the beneficiaries represented by Cell G of Table 1. Beneficiaries include all dual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2006. A user is a beneficiary who had at least one prescription filled for a Part D excluded drug in 2006. A beneficiary who used drugs from two or more Part D excluded categories was counted as a user for each category. Therefore, the sum of users across drug categories may exceed the total number of individual users as noted on Table D11.

b. Includes OTC drugs as well as prescription drugs.

c. The statute establishing the Medicare Part D prescription program that started in 2006 excludes several types of drugs from coverage. State Medicaid programs have been allowed to exclude these drugs since 1990, but many states have chosen to cover them, and if states cover them for any Medicaid beneficiaries they must also cover them for dual eligibles, who as of 2006 receive the remainder of their prescription drug coverage through Part D. Excluded drugs include benzodiazepines; barbiturates; nonprescription (OTC) medications; prescription vitamins and minerals (not including prenatal vitamins and fluoride preparations); and drugs used for anorexia, weight loss, or weight gain. Other excluded drugs include those that promote fertility; those used for cosmetic purposes or hair growth, for symptomatic relief of coughs and colds; or drugs for which the manufacturer requires that associated tests or monitoring services be purchased exclusively from the manufacturer.

Bene(s) = beneficiary (or beneficiaries); CMS = Centers for Medicare & Medicaid Services; Excl = excluded; MAX = Medicaid Analytic Extract; OTC = over-the-counter; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

Dual Medicaid Beneficiaries

SUPPLEMENTAL TABLE 1
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES^{a, b}
 MISSOURI, 2006

Total Number of Dual Eligible Beneficiaries: 166,495
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries: \$47,715,328
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary: \$286

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	90,863	54.6	\$0	0.0
1-500	64,310	38.6	6,610,412	13.9
501-1,000	3,119	1.9	2,194,470	4.6
1,001-1,500	1,548	0.9	1,904,176	4.0
1,501-2,000	1,066	0.6	1,856,399	3.9
2,001-2,500	816	0.5	1,830,441	3.8
2,501-3,000	639	0.4	1,750,193	3.7
3,001-3,500	533	0.3	1,728,894	3.6
3,501-4,000	439	0.3	1,648,550	3.5
4,001-4,500	400	0.2	1,693,490	3.5
4,501-5,000	330	0.2	1,567,780	3.3
5,001-5,500	293	0.2	1,539,031	3.2
5,501-6,000	239	0.1	1,372,000	2.9
6,001-6,500	217	0.1	1,353,637	2.8
6,501-7,000	177	0.1	1,197,206	2.5
7,001-7,500	144	0.1	1,043,179	2.2
7,501-8,000	119	0.1	922,998	1.9
8,001-8,500	129	0.1	1,062,229	2.2
8,501-9,000	127	0.1	1,109,885	2.3
9,001-9,500	105	0.1	973,500	2.0
9,501-10,000	89	0.1	868,388	1.8
10,001+	793	0.5	13,488,470	28.3

Source: Data for this table are from the MAX 2006 file for Missouri, released by CMS in 9/2009. This table was produced on 02/11/2010.

a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 2006.

b. Medicaid reimbursement amounts in this table do not reflect federally required rebates from drug manufacturers to states.

Dual Medicaid Beneficiaries

SUPPLEMENTAL TABLE 1A
 MEDICAID PHARMACY REIMBURSEMENT FOR DISABLED DUAL ELIGIBLE BENEFICIARIES UNDER AGE 65^{a, b, c}
 MISSOURI, 2006

Total Number of Disabled Dual Eligible Beneficiaries, Age < 65: 79,439
 Total Pharmacy Reimbursement for Disabled Dual Eligible Beneficiaries, Age < 65: \$37,078,200
 Mean Pharmacy Reimbursement per Disabled Dual Eligible Beneficiary, Age < 65: \$466

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Disabled Dual Beneficiaries,		Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
		Age < 65	Pharmacy Reimbursement		
\$0	39,504	49.7	\$0	0.0	
1-500	31,465	39.6	3,568,496	9.6	
501-1,000	2,010	2.5	1,423,868	3.8	
1,001-1,500	1,101	1.4	1,357,464	3.7	
1,501-2,000	788	1.0	1,374,984	3.7	
2,001-2,500	638	0.8	1,430,207	3.9	
2,501-3,000	472	0.6	1,295,152	3.5	
3,001-3,500	427	0.5	1,383,031	3.7	
3,501-4,000	360	0.5	1,352,984	3.6	
4,001-4,500	328	0.4	1,387,958	3.7	
4,501-5,000	277	0.3	1,315,377	3.5	
5,001-5,500	244	0.3	1,282,700	3.5	
5,501-6,000	197	0.2	1,131,292	3.1	
6,001-6,500	175	0.2	1,091,313	2.9	
6,501-7,000	152	0.2	1,028,393	2.8	
7,001-7,500	125	0.2	905,721	2.4	
7,501-8,000	100	0.1	775,202	2.1	
8,001-8,500	113	0.1	929,432	2.5	
8,501-9,000	107	0.1	934,735	2.5	
9,001-9,500	91	0.1	843,547	2.3	
9,501-10,000	78	0.1	761,729	2.1	
10,001+	687	0.9	11,504,615	31.0	

Source: Data for this table are from the MAX 2006 file for Missouri, released by CMS in 9/2009. This table was produced on 02/11/2010.

a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 2006.

b. Medicaid reimbursement amounts in this table do not reflect federally required rebates from drug manufacturers to states.

c. This table is limited to dual eligible beneficiaries who were under age 65 and also indicated as disabled in the MAX files. Therefore, dual eligible beneficiaries under age 65 in "adults" or "children" basis-of-eligibility categories in Table D.2 are excluded because they were not classified as disabled in the MAX files. Disabled dual eligible beneficiaries age 65 and older are included in Supplemental Tables 1B through 1E, depending on their age.

Dual Medicaid Beneficiaries

SUPPLEMENTAL TABLE 1B
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 AND OLDER^{a, b}
 MISSOURI, 2006

Total Number of Dual Eligible Beneficiaries, Age 65+: 86,089
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65+: \$9,105,436
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65+: \$105

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 65+	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	50,932	59.2	\$0	0.0
1-500	32,621	37.9	3,013,384	33.1
501-1,000	1,052	1.2	728,889	8.0
1,001-1,500	407	0.5	498,102	5.5
1,501-2,000	254	0.3	439,791	4.8
2,001-2,500	153	0.2	343,869	3.8
2,501-3,000	141	0.2	385,002	4.2
3,001-3,500	91	0.1	297,904	3.3
3,501-4,000	68	0.1	253,912	2.8
4,001-4,500	54	0.1	228,919	2.5
4,501-5,000	39	0.0	186,098	2.0
5,001-5,500	40	0.0	209,141	2.3
5,501-6,000	35	0.0	200,833	2.2
6,001-6,500	29	0.0	180,954	2.0
6,501-7,000	22	0.0	148,499	1.6
7,001-7,500	17	0.0	122,824	1.3
7,501-8,000	15	0.0	116,154	1.3
8,001-8,500	12	0.0	99,843	1.1
8,501-9,000	13	0.0	113,428	1.2
9,001-9,500	11	0.0	101,802	1.1
9,501-10,000	9	0.0	87,211	1.0
10,001+	74	0.1	1,348,877	14.8

Source: Data for this table are from the MAX 2006 file for Missouri, released by CMS in 9/2009. This table was produced on 02/11/2010.

a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 2006.

b. Medicaid reimbursement amounts in this table do not reflect federally required rebates from drug manufacturers to states.

Dual Medicaid Beneficiaries

SUPPLEMENTAL TABLE 1C
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 TO 74^{a, b}
 MISSOURI, 2006

Total Number of Dual Eligible Beneficiaries, Age 65-74: 33,416
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65-74: \$5,913,823
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65-74: \$177

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 65-74	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	19,568	58.6	\$0	0.0
1-500	12,261	36.7	1,241,540	21.0
501-1,000	531	1.6	371,330	6.3
1,001-1,500	231	0.7	283,809	4.8
1,501-2,000	167	0.5	290,553	4.9
2,001-2,500	111	0.3	249,185	4.2
2,501-3,000	101	0.3	276,396	4.7
3,001-3,500	71	0.2	232,623	3.9
3,501-4,000	55	0.2	205,484	3.5
4,001-4,500	43	0.1	182,125	3.1
4,501-5,000	32	0.1	152,905	2.6
5,001-5,500	36	0.1	188,157	3.2
5,501-6,000	31	0.1	178,153	3.0
6,001-6,500	25	0.1	155,659	2.6
6,501-7,000	18	0.1	120,978	2.0
7,001-7,500	15	0.0	108,658	1.8
7,501-8,000	14	0.0	108,578	1.8
8,001-8,500	9	0.0	74,920	1.3
8,501-9,000	12	0.0	104,711	1.8
9,001-9,500	9	0.0	83,547	1.4
9,501-10,000	9	0.0	87,211	1.5
10,001+	67	0.2	1,217,301	20.6

Source: Data for this table are from the MAX 2006 file for Missouri, released by CMS in 9/2009. This table was produced on 02/11/2010.

a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 2006.

b. Medicaid reimbursement amounts in this table do not reflect federally required rebates from drug manufacturers to states.

Dual Medicaid Beneficiaries

SUPPLEMENTAL TABLE 1D
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 75 TO 84^{a, b}
 MISSOURI, 2006

Total Number of Dual Eligible Beneficiaries, Age 75-84: 29,954
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 75-84: \$1,895,313
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 75-84: \$63

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 75-84	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	17,814	59.5	\$0	0.0
1-500	11,588	38.7	1,056,725	55.8
501-1,000	313	1.0	215,695	11.4
1,001-1,500	103	0.3	125,558	6.6
1,501-2,000	40	0.1	66,848	3.5
2,001-2,500	25	0.1	56,451	3.0
2,501-3,000	25	0.1	67,975	3.6
3,001-3,500	14	0.0	45,611	2.4
3,501-4,000	3	0.0	10,887	0.6
4,001-4,500	7	0.0	30,077	1.6
4,501-5,000	5	0.0	23,674	1.2
5,001-5,500	2	0.0	10,341	0.5
5,501-6,000	0	0.0	0	0.0
6,001-6,500	1	0.0	6,424	0.3
6,501-7,000	3	0.0	20,686	1.1
7,001-7,500	1	0.0	7,164	0.4
7,501-8,000	0	0.0	0	0.0
8,001-8,500	2	0.0	16,450	0.9
8,501-9,000	1	0.0	8,717	0.5
9,001-9,500	2	0.0	18,255	1.0
9,501-10,000	0	0.0	0	0.0
10,001+	5	0.0	107,775	5.7

Source: Data for this table are from the MAX 2006 file for Missouri, released by CMS in 9/2009. This table was produced on 02/11/2010.

a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 2006.

b. Medicaid reimbursement amounts in this table do not reflect federally required rebates from drug manufacturers to states.

Dual Medicaid Beneficiaries

SUPPLEMENTAL TABLE 1E
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 85 AND OLDER^{a, b}
 MISSOURI, 2006

Total Number of Dual Eligible Beneficiaries, Age 85+: 22,719
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 85+: \$1,296,300
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 85+: \$57

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 85+	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	13,550	59.6	\$0	0.0
1-500	8,772	38.6	715,119	55.2
501-1,000	208	0.9	141,864	10.9
1,001-1,500	73	0.3	88,735	6.8
1,501-2,000	47	0.2	82,390	6.4
2,001-2,500	17	0.1	38,233	2.9
2,501-3,000	15	0.1	40,631	3.1
3,001-3,500	6	0.0	19,670	1.5
3,501-4,000	10	0.0	37,541	2.9
4,001-4,500	4	0.0	16,717	1.3
4,501-5,000	2	0.0	9,519	0.7
5,001-5,500	2	0.0	10,643	0.8
5,501-6,000	4	0.0	22,680	1.7
6,001-6,500	3	0.0	18,871	1.5
6,501-7,000	1	0.0	6,835	0.5
7,001-7,500	1	0.0	7,002	0.5
7,501-8,000	1	0.0	7,576	0.6
8,001-8,500	1	0.0	8,473	0.7
8,501-9,000	0	0.0	0	0.0
9,001-9,500	0	0.0	0	0.0
9,501-10,000	0	0.0	0	0.0
10,001+	2	0.0	23,801	1.8

Source: Data for this table are from the MAX 2006 file for Missouri, released by CMS in 9/2009. This table was produced on 02/11/2010.

a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 2006.

b. Medicaid reimbursement amounts in this table do not reflect federally required rebates from drug manufacturers to states.

Dual Medicaid Beneficiaries

APPENDIX TABLE A.3
 CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY^{a, b}
 DUAL ELIGIBLE BENEFICIARIES, MISSOURI, 2006

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Blind/ Disabled	Adults	Children	Other/ Unknown	All	Aged	Blind/ Disabled	Adults	Children	Other/ Unknown
All	166,864	84,956	80,605	1,217	52	34	1,697,576	852,635	832,984	11,048	568	341
Age												
5 and younger	3	0	0	0	3	0	31	0	0	0	31	0
6-14	15	0	10	0	5	0	177	0	117	0	60	0
15-20	301	0	260	6	35	0	3,366	0	2,893	53	420	0
21-44	30,176	0	29,244	924	5	3	318,381	0	309,812	8,511	28	30
45-64	50,278	0	49,976	277	2	23	512,216	0	509,544	2,404	14	254
65-74	33,417	32,674	726	8	1	8	338,036	331,601	6,319	56	3	57
75-84	29,954	29,713	239	2	0	0	303,908	301,176	2,708	24	0	0
85 and older	22,720	22,569	150	0	1	0	221,461	219,858	1,591	0	12	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	104,396	61,367	42,157	815	23	34	1,077,521	626,645	442,505	7,765	265	341
Male	62,468	23,589	38,448	402	29	0	620,055	225,990	390,479	3,283	303	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	131,033	67,812	62,303	855	42	21	1,329,050	677,907	642,887	7,610	448	198
African American	30,006	13,741	15,929	314	10	12	309,576	140,047	166,335	2,943	120	131
Other/unknown	5,825	3,403	2,373	48	0	1	58,950	34,681	23,762	495	0	12
Use of Nursing Facilities^c												
Entire year	20,339	17,780	2,558	0	1	0	211,595	182,888	28,695	0	12	0
Part year	13,671	11,429	2,240	1	0	1	131,573	107,867	23,687	7	0	12
None	132,854	55,747	75,807	1,216	51	33	1,354,408	561,880	780,602	11,041	556	329
Maintenance Assistance Status												
Cash	44,452	17,089	26,385	970	8	0	506,624	195,808	301,973	8,773	70	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0
Poverty related	4,814	1,583	3,034	153	10	34	50,606	16,524	32,259	1,364	118	341
Other/unknown	117,598	66,284	51,186	94	34	0	1,140,346	640,303	498,752	911	380	0
Dual Status^d												
Full dual, all year	157,283	81,499	74,506	1,192	52	34	1,597,272	816,882	768,672	10,809	568	341
Full dual, part year	9,581	3,457	6,099	25	0	0	100,304	35,753	64,312	239	0	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	166,051	84,950	80,273	760	34	34	1,689,193	852,574	829,316	6,586	376	341
FFS part year, with Rx claims	282	3	199	75	5	0	3,105	28	2,249	768	60	0
FFS part year, no Rx claims	162	2	82	74	4	0	1,573	21	865	649	38	0
MC all year, with Rx claims	81	0	21	57	3	0	920	0	243	641	36	0
MC all year, no Rx claims	288	1	30	251	6	0	2,785	12	311	2,404	58	0

Source: Data for this table are from the MAX 2006 file for Missouri, released by CMS in 9/2009. This table was produced on 02/11/2010.

a. Table A.3 includes the beneficiaries represented by Cell F of Table 1. Benefit months are months during which beneficiaries had pharmacy benefit coverage.

b. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services. The total includes some beneficiaries with unknown basis of eligibility and some whose age categories are not consistent with basis of eligibility.

c. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.

d. The "Full dual, all year" group contains beneficiaries who had Medicare as well as Medicaid pharmacy benefits during all months of Medicaid enrollment in 2006. The "Full dual, part year" group contains beneficiaries who had such benefits for some, but not all, months of their enrollment. Refer to footnote g of Table 1 for more information about how we determined dual eligibility status. Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; FFS = fee-for-service pharmacy benefit; MAX = Medicaid Analytic Extract; MC = managed care; Rx = pharmacy benefit.

APPENDIX TABLE A.4
 MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS^a
 DUAL ELIGIBLE BENEFICIARIES, MISSOURI, 2006

Beneficiary Characteristics	Beneficiaries and Benefit Months in Cell F of Table 1		Included in Cell G of Table 1		Excluded from Cell G of Table 1	
	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months
All	166,864	1,697,576	166,495	1,691,719	0	5,857
Fee-for-service (FFS) all year	166,051	1,689,193	166,051	1,689,193	0	0
FFS part year, with Rx claims	282	3,105	282	1,750	0	1,355
FFS part year, with no Rx claims	162	1,573	162	776	0	797
Managed care (MC) all year, with Rx claims	81	920	0	0	0	920
MC all year, with no Rx claims	288	2,785	0	0	0	2,785

Source: Data for this table are from the MAX 2006 file for Missouri, released by CMS in 9/2009. This table was produced on 02/11/2010.

a. Benefit months are months during which beneficiaries had pharmacy benefit coverage.

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Centers for Medicare and Medicaid Services; FFS = fee-for-service pharmacy benefit; MAX = Medicaid Analytic Extract; MC = managed care; Rx = pharmacy benefit.

Dual Medicaid Beneficiaries