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STATISTICAL COMPENDIUM:
MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2007
LOUISIANA

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TABLE D.2
CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a, b}
DUAL ELIGIBLE BENEFICIARIES, LOUISIANA, 2007

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown
All	107,200	60,970	45,632	523	11	64	1,180,169	656,625	518,340	4,485	124	595
Age												
5 and younger	8	0	8	0	0	0	93	0	93	0	0	0
6-14	25	0	22	0	3	0	299	0	263	0	36	0
15-20	350	0	339	3	8	0	3,998	0	3,885	25	88	0
21-44	19,443	0	19,053	385	0	5	221,003	0	217,612	3,332	0	59
45-64	25,843	32	25,654	128	0	29	292,368	360	290,659	1,067	0	282
65-74	24,571	24,155	379	7	0	30	273,784	269,586	3,883	61	0	254
75-84	21,338	21,201	137	0	0	0	230,531	229,008	1,523	0	0	0
85 and older	15,622	15,582	40	0	0	0	158,093	157,671	422	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	69,699	45,330	23,914	384	7	64	770,003	492,765	273,289	3,278	76	595
Male	37,501	15,640	21,718	139	4	0	410,166	163,860	245,051	1,207	48	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	44,310	24,875	19,153	245	5	32	479,524	259,403	217,662	2,084	60	315
African American	48,748	25,489	22,979	247	4	29	546,033	282,355	261,237	2,146	40	255
Other/unknown	14,142	10,606	3,500	31	2	3	154,612	114,867	39,441	255	24	25
Use of Nursing Facilities^c												
Entire year	13,577	11,983	1,594	0	0	0	139,872	122,235	17,637	0	0	0
Part year	9,826	8,592	1,234	0	0	0	99,072	85,831	13,241	0	0	0
None	83,797	40,395	42,804	523	11	64	941,225	448,559	487,462	4,485	124	595
Maintenance Assistance Status												
Cash	65,313	34,703	30,288	321	1	0	745,392	396,421	346,068	2,891	12	0
Medically needy	83	56	18	9	0	0	799	525	196	78	0	0
Poverty-related	3,049	1,034	1,842	100	9	64	32,351	11,212	19,778	666	100	595
Other/unknown	38,755	25,177	13,484	93	1	0	401,627	248,467	152,298	850	12	0
Dual Medicare Status^d												
Full dual, all year	101,563	58,067	42,921	500	11	64	1,118,679	624,947	488,774	4,239	124	595
Full dual, part year	5,637	2,903	2,711	23	0	0	61,490	31,678	29,566	246	0	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	107,190	60,961	45,631	523	11	64	1,180,086	656,550	518,332	4,485	124	595
FFS part year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
FFS part year, no Rx claims	10	9	1	0	0	0	83	75	8	0	0	0

Source: Data for this table are from the MAX 2007 file for Louisiana, released by CMS in 5/2010. This table was produced on 10/06/2010.

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 2007. 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, LOUISIANA, 2007

Beneficiary Characteristics	Percentage with at Least One Rx	Mean Number of Rx	Mean Rx \$	\$ per Rx	Mean \$, All Medicaid FFS \$ ^c	Rx \$ as a Percentage of All Medicaid FFS \$ ^d	Number of Beneficiaries
All	36.6	4.5	\$219	\$48	\$12,785	1.7	107,200
Age							
5 and younger	25.0	1.6	127	78	3,158	4.0	8
6-14	60.0	15.0	2,598	174	10,526	24.7	25
15-20	66.0	9.0	1,045	117	10,290	10.2	350
21-44	33.9	4.6	332	72	11,231	3.0	19,443
45-64	40.5	5.9	311	52	14,360	2.2	25,843
65-74	34.0	4.7	230	48	8,740	2.6	24,571
75-84	34.9	3.2	78	24	13,043	0.6	21,338
85 and older	39.3	3.4	79	23	18,189	0.4	15,622
Unknown	0.0	0.0	0	0	0	0.0	0
Basis of Eligibility^e							
Aged	35.6	3.8	131	35	12,648	1.0	60,970
Disabled	37.6	5.3	316	60	13,059	2.4	45,632
Adults	67.1	19.8	1,629	82	4,951	32.9	523
Children	63.6	28.6	2,734	96	21,693	12.6	11
Unknown	76.6	29.5	2,867	97	10,394	27.6	64
Gender							
Female	38.5	4.8	232	48	12,061	1.9	69,699
Male	33.1	4.0	194	49	14,130	1.4	37,501
Unknown	0.0	0.0	0	0	0	0.0	0
Race							
White	44.4	5.8	259	45	17,274	1.5	44,310
African American	30.3	3.5	195	55	9,631	2.0	48,748
Other/unknown	34.2	4.0	173	44	9,590	1.8	14,142
Use of Nursing Facilities^f							
Entire year	54.7	7.1	223	31	31,314	0.7	13,577
Part year	57.9	5.7	196	35	21,163	0.9	9,826
None	31.2	4.0	221	56	8,801	2.5	83,797
Maintenance Assistance Status							
Cash	31.5	4.2	238	57	5,210	4.6	65,313
Medically needy	56.6	9.0	590	66	30,783	1.9	83
Poverty related	38.8	6.3	466	74	2,881	16.2	3,049
Other/unknown	45.0	5.0	166	33	26,292	0.6	38,755

Source: Data for this table are from the MAX 2007 file for Louisiana, released by CMS in 5/2010. This table was produced on 10/06/2010.

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 eight states (DE, IA, IL, NE, NY, TN, TX, 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 eight states (DE, IA, IL, NE, NY, TN, TX, 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, LOUISIANA, 2007

Beneficiary Characteristics	Number of Rx, Percentage with:										Number	
	Mean Number of Rx	Mean Rx \$	Rx \$ as a Percentage of All Medicaid FFS \$ ^c		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	0.4	\$20	1.7	63.4	29.1	3.9	2.5	0.9	0.2	\$1,161	107,200	1,180,169
Age												
5 and younger	0.1	11	4.0	75.0	25.0	0.0	0.0	0.0	0.0	272	8	93
6-14	1.3	217	24.7	40.0	40.0	8.0	8.0	0.0	4.0	880	25	299
15-20	0.8	92	10.2	34.0	51.4	6.9	5.4	2.3	0.0	901	350	3,998
21-44	0.4	29	3.0	66.1	26.2	3.7	3.0	1.0	0.1	988	19,443	221,003
45-64	0.5	28	2.2	59.5	30.5	4.8	3.5	1.4	0.3	1,269	25,843	292,368
65-74	0.4	21	2.6	66.0	26.4	3.5	2.6	1.1	0.3	784	24,571	273,784
75-84	0.3	7	0.6	65.1	29.7	3.3	1.3	0.4	0.1	1,207	21,338	230,531
85 and older	0.3	8	0.4	60.7	33.2	4.2	1.5	0.4	0.1	1,797	15,622	158,093
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	0.3	12	1.0	64.4	29.3	3.6	1.8	0.6	0.2	1,174	60,970	656,625
Disabled	0.5	28	2.4	62.4	28.8	4.3	3.1	1.2	0.2	1,150	45,632	518,340
Adults	2.3	190	32.9	32.9	25.2	9.2	22.0	9.8	1.0	577	523	4,485
Children	2.5	243	12.6	36.4	18.2	9.1	9.1	27.3	0.0	1,924	11	124
Unknown	3.2	308	27.6	23.4	20.3	9.4	25.0	21.9	0.0	1,118	64	595
Gender												
Female	0.4	21	1.9	61.5	30.7	4.0	2.6	1.0	0.2	1,092	69,699	770,003
Male	0.4	18	1.4	66.9	26.1	3.8	2.3	0.7	0.1	1,292	37,501	410,166
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	0.5	24	1.5	55.6	34.4	5.4	3.1	1.2	0.3	1,596	44,310	479,524
African American	0.3	17	2.0	69.7	24.7	2.8	2.0	0.7	0.1	860	48,748	546,033
Other/unknown	0.4	16	1.8	65.8	27.6	3.3	2.2	0.8	0.2	877	14,142	154,612
Use of Nursing Facilities^f												
Entire year	0.7	22	0.7	45.3	40.2	8.7	3.9	1.4	0.4	3,040	13,577	139,872
Part year	0.6	19	0.9	42.1	48.2	5.6	2.7	1.0	0.3	2,099	9,826	99,072
None	0.4	20	2.5	68.8	25.0	3.0	2.2	0.8	0.1	784	83,797	941,225
Maintenance Assistance Status												
Cash	0.4	21	4.6	68.5	25.3	3.0	2.2	0.9	0.2	457	65,313	745,392
Medically needy	0.9	61	1.9	43.4	34.9	12.0	6.0	3.6	0.0	3,198	83	799
Poverty related	0.6	44	16.2	61.2	26.4	4.4	5.9	2.0	0.1	272	3,049	32,351
Other/unknown	0.5	16	0.6	55.0	35.7	5.5	2.7	0.9	0.2	2,537	38,755	401,627

Source: Data for this table are from the MAX 2007 file for Louisiana, released by CMS in 5/2010. This table was produced on 10/06/2010.

- 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 eight states (DE, IA, IL, NE, NY, TN, TX, 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 eight states (DE, IA, IL, NE, NY, TN, TX, 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); 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, LOUISIANA, 2007

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	0.4	\$20	\$48	0.1	\$12	\$126	0.0	\$1	\$88	0.3	\$7	\$22
Age												
5 and younger	0.1	11	78	0.0	10	227	0.0	0	7	0.1	1	13
6-14	1.3	217	174	0.5	196	381	0.1	4	33	0.6	16	27
15-20	0.8	92	117	0.3	70	239	0.1	6	111	0.4	16	35
21-44	0.4	29	72	0.1	19	193	0.0	2	120	0.3	8	28
45-64	0.5	28	52	0.1	16	138	0.0	2	97	0.4	9	24
65-74	0.4	21	48	0.1	12	119	0.0	1	81	0.3	7	23
75-84	0.3	7	24	0.1	3	51	0.0	0	46	0.2	4	17
85 and older	0.3	8	23	0.1	3	49	0.0	0	33	0.3	4	16
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Basis of Eligibility^d												
Aged	0.3	12	35	0.1	6	84	0.0	1	65	0.3	5	19
Disabled	0.5	28	60	0.1	17	159	0.0	2	104	0.3	9	25
Adults	2.3	190	82	0.7	127	175	0.1	11	115	1.5	52	35
Children	2.5	243	96	0.7	148	208	0.1	2	16	1.7	93	55
Unknown	3.2	308	97	1.0	234	228	0.1	15	126	2.0	60	30
Gender												
Female	0.4	21	48	0.1	13	124	0.0	1	84	0.3	7	22
Male	0.4	18	49	0.1	10	129	0.0	1	97	0.3	6	23
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Race												
White	0.5	24	45	0.1	13	120	0.0	2	93	0.4	9	22
African American	0.3	17	55	0.1	11	138	0.0	1	88	0.2	5	23
Other/unknown	0.4	16	44	0.1	9	109	0.0	1	68	0.3	6	22
Use of Nursing Facilities^e												
Entire year	0.7	22	31	0.1	11	74	0.0	1	56	0.5	10	19
Part year	0.6	19	35	0.1	10	83	0.0	1	55	0.4	8	20
None	0.4	20	56	0.1	12	146	0.0	1	97	0.3	6	24
Maintenance Assistance Status												
Cash	0.4	21	57	0.1	13	148	0.0	2	98	0.3	6	24
Medically needy	0.9	61	66	0.2	38	169	0.0	2	102	0.7	21	30
Poverty related	0.6	44	74	0.2	29	168	0.0	3	96	0.4	12	31
Other/unknown	0.5	16	33	0.1	8	82	0.0	1	64	0.4	7	19

Source: Data for this table are from the MAX 2007 file for Louisiana, released by CMS in 5/2010. This table was produced on 10/06/2010.

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, LOUISIANA, 2007

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	\$25	\$18	\$1	\$7	\$97	\$349	\$204	\$32	12,096	\$1,168,483	4,238	4.0	46,236
Biologicals	0.1	0.1	0.0	0.0	164	164	0	0	1233	1,233	0	0	10	12,329	7	0.0	75
Antineoplastic Agents	0.4	0.1	0.0	0.2	118	95	0	22	329	773	62	96	1,309	430,107	391	0.4	3,660
Endocrine/Metabolic Drugs	0.5	0.2	0.0	0.3	34	27	1	6	67	133	39	21	20,353	1,366,222	3,891	3.6	40,773
Cardiovascular Agents	0.9	0.2	0.1	0.6	49	25	6	19	55	110	70	32	54,417	3,015,157	5,929	5.5	61,020
Respiratory Agents	0.4	0.2	0.0	0.2	27	20	2	4	66	102	61	25	15,019	991,262	3,396	3.2	36,615
Gastrointestinal Agents	0.4	0.2	0.0	0.1	47	37	4	7	116	154	130	48	15,339	1,781,773	3,667	3.4	37,861
Genitourinary Agents	0.3	0.1	0.0	0.1	19	11	1	7	67	84	90	50	3,255	218,559	1,102	1.0	11,213
CNS Drugs	0.6	0.1	0.0	0.5	23	11	1	10	36	153	126	18	159,166	5,777,990	22,707	21.2	252,003
Stimulants/Anti-obesity/Anorexia	0.3	0.3	0.0	0.0	57	56	0	0	197	206	156	30	1,519	299,517	459	0.4	5,284
Miscellaneous Psychological/Neurological Agents	0.3	0.3	0.0	0.0	57	57	0	1	172	173	0	84	2,725	467,962	909	0.8	8,180
Analgesics and Anesthetics	0.5	0.0	0.0	0.4	24	8	4	13	54	321	301	31	31,475	1,701,227	6,358	5.9	69,760
Neuromuscular Agents	0.6	0.1	0.0	0.5	27	12	2	14	48	166	125	28	46,406	2,212,123	7,302	6.8	81,173
Nutritional Products	0.5	0.1	0.0	0.4	8	3	0	6	16	21	16	14	55,744	871,145	9,407	8.8	103,155
Hematological Agents	0.5	0.2	0.0	0.3	20	15	0	4	37	78	24	14	57,461	2,147,972	9,931	9.3	109,307
Topical Products	0.3	0.1	0.0	0.1	17	12	1	5	64	103	77	32	7,263	462,726	2,547	2.4	27,257
Miscellaneous Products	0.4	0.3	0.0	0.1	212	198	8	6	564	731	236	86	871	490,874	213	0.2	2,316
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	14	0	0	0	65	0	0	0	592	38,639	241	0.2	2,719
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.	485,020	23,454,067	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2007 file for Louisiana, released by CMS in 5/2010. This table was produced on 10/06/2010.

- 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 Louisiana, 0.2 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. For information about this classification method, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.
- f. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 2007.
 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, LOUISIANA, 2007

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
ANTIANKXIETY AGENTS	\$2,034,497	17,315	16.2	193,969	0.5	\$20	\$10
ANTIPSYCHOTICS	2,015,199	2,043	1.9	21,505	0.4	246	94
ANTICONVULSANT	1,944,490	6,567	6.1	73,189	0.5	50	27
HEMATOPOIETIC AGENTS	1,783,026	13,924	13.0	154,918	0.5	24	12
ULCER DRUGS	1,333,345	3,258	3.0	34,130	0.3	124	39
ANALGESICS - Narcotic	1,032,972	5,908	5.5	64,462	0.3	57	16
ANTIDIABETIC	1,023,217	3,330	3.1	35,110	0.4	83	29
ANTIDEPRESSANTS	902,906	3,933	3.7	41,415	0.3	67	22
ANTHYPERLIPIDEMIC	881,485	2,680	2.5	28,580	0.3	91	31
ANTHYPERTENSIVE	851,736	5,036	4.7	53,182	0.3	48	16
Total	13,802,873	63,994	n.a.	700,460	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2007 file for Louisiana, released by CMS in 5/2010. This table was produced on 10/06/2010.
 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 2007. 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 2007. 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); CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement; n.a. = not applicable.

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, LOUISIANA, 2007

Beneficiary Characteristics	All Top 10 Drug Groups		ANTIANSXIETY AGENTS					ANTIPSYCHOTICS				
	Number of Rx	Rx \$	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	308,793	\$13,802,873	17,315	16.2	193,969	0.5	\$11	2,043	1.9	21,505	0.4	\$94
Female												
All Females	217,679	9,497,209	12,474	17.9	140,058	0.5	10	1,206	1.7	12,730	0.4	91
Female, Disabled												
All Ages	92,282	5,335,743	4,633	19.4	53,546	0.5	10	742	3.1	8,458	0.4	102
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	47	5,686	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	522	74,016	17	12.9	204	0.3	6	18	13.6	216	0.3	138
21-44	28,374	1,905,963	1,418	16.1	16,492	0.5	10	397	4.5	4,598	0.4	96
45-64	60,366	3,103,883	3,126	21.4	36,082	0.5	10	310	2.1	3,459	0.4	102
65-74	2,814	243,390	60	23.9	624	0.6	13	17	6.8	185	0.7	188
75-84	128	2,371	10	9.6	120	0.5	13	0	0.0	0	0.0	0
85 and older	31	434	2	7.1	24	0.5	4	0	0.0	0	0.0	0
Female, Other Eligibles												
All Ages	125,397	4,161,466	7,841	17.1	86,512	0.5	10	464	1.0	4,272	0.4	69
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	17	131	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	86	6,239	2	25.0	24	0.3	19	0	0.0	0	0.0	0
21-44	2,849	237,733	67	21.5	708	0.5	9	49	15.8	507	0.3	76
45-64	1,670	144,090	36	27.9	389	0.5	10	13	10.1	136	0.4	109
65-74	49,278	2,302,543	2,718	16.8	30,981	0.5	10	194	1.2	2,124	0.5	95
75-84	38,386	813,861	2,767	17.3	30,650	0.5	10	118	0.7	840	0.3	24
85 and older	33,111	656,869	2,251	17.2	23,760	0.5	10	90	0.7	665	0.3	29
Male												
All Males	91,114	4,305,664	4,841	12.9	53,911	0.5	11	837	2.2	8,775	0.4	98
Male, Disabled												
All Ages	53,447	2,932,699	2,878	13.3	33,065	0.6	12	603	2.8	6,739	0.4	104
5 and younger	14	119	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	32	7,414	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	732	94,577	12	5.8	144	0.2	3	42	20.3	502	0.3	91
21-44	20,963	1,389,172	1,092	10.7	12,635	0.5	12	324	3.2	3,798	0.4	120
45-64	30,552	1,374,678	1,749	15.8	20,022	0.6	12	230	2.1	2,374	0.3	81
65-74	1,114	65,414	21	16.4	224	0.4	8	7	5.5	65	0.5	78
75-84	29	1,215	4	12.1	40	0.5	26	0	0.0	0	0.0	0
85 and older	11	110	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male, Other Eligibles												
All Ages	37,667	1,372,965	1,963	12.4	20,846	0.5	11	234	1.5	2,036	0.4	79
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	0.0	0
15-20	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	1,311	122,966	22	27.8	224	0.5	14	8	10.1	95	0.6	166
45-64	573	44,065	14	23.3	131	0.7	7	1	1.7	12	0.7	160
65-74	19,390	817,344	936	11.7	10,332	0.6	12	107	1.3	1,022	0.5	115
75-84	10,563	253,455	660	12.8	6,954	0.5	10	68	1.3	555	0.3	29
85 and older	5,830	135,135	331	13.3	3,205	0.5	10	50	2.0	352	0.3	28
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 2007 file for Louisiana, released by CMS in 5/2010. This table was produced on 10/06/2010.
 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 2007. 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 2007. 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.

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, LOUISIANA, 2007

Beneficiary Characteristics	ANTICONVULSANT					HEMATOPOIETIC AGENTS					ULCER DRUGS				
	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	6,567	6.1	73,189	0.5	\$27	13,924	13.0	154,918	0.5	\$12	3,258	3.0	34,130	0.3	\$39
Female															
All Females	4,362	6.3	48,917	0.5	25	10,193	14.6	114,094	0.5	12	2,279	3.3	24,139	0.3	40
Female, Disabled															
All Ages	2,468	10.3	28,304	0.5	31	2,481	10.4	29,024	0.4	14	1,279	5.3	14,371	0.3	41
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	6	75.0	72	0.2	55	2	25.0	24	0.1	8
15-20	22	16.7	264	0.4	76	18	13.6	215	0.2	28	10	7.6	120	0.3	33
21-44	983	11.2	11,352	0.5	37	855	9.7	10,074	0.3	12	393	4.5	4,467	0.3	34
45-64	1,424	9.8	16,257	0.5	26	1,540	10.6	17,999	0.4	14	828	5.7	9,270	0.3	43
65-74	39	15.5	431	0.6	48	43	17.1	460	0.4	42	45	17.9	478	0.6	74
75-84	0	0.0	0	0.0	0	14	13.5	162	0.4	3	1	1.0	12	0.1	13
85 and older	0	0.0	0	0.0	0	5	17.9	42	0.5	8	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	1,894	4.1	20,613	0.5	18	7,712	16.8	85,070	0.5	11	1,000	2.2	9,768	0.3	38
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	100.0	24	0.1	2	1	50.0	12	0.3	1
15-20	0	0.0	0	0.0	0	4	50.0	48	0.3	16	3	37.5	36	0.5	84
21-44	73	23.5	784	0.5	67	44	14.1	464	0.2	5	55	17.7	594	0.3	49
45-64	32	24.8	324	0.5	44	11	8.5	106	0.3	245	31	24.0	303	0.4	58
65-74	833	5.1	9,435	0.5	20	2,006	12.4	22,988	0.4	14	531	3.3	5,966	0.3	44
75-84	612	3.8	6,467	0.6	11	2,759	17.2	30,725	0.5	9	206	1.3	1,552	0.3	20
85 and older	344	2.6	3,603	0.6	10	2,886	22.1	30,715	0.5	10	173	1.3	1,305	0.3	19
Male															
All Males	2,205	5.9	24,272	0.6	29	3,731	9.9	40,824	0.5	11	979	2.6	9,991	0.3	38
Male, Disabled															
All Ages	1,632	7.5	18,542	0.6	31	1,341	6.2	15,330	0.5	12	585	2.7	6,329	0.3	38
5 and younger	0	0.0	0	0.0	0	2	28.6	24	0.5	4	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	7	50.0	84	0.3	79	1	7.1	12	0.1	16
15-20	38	18.4	455	0.4	59	15	7.2	180	0.3	14	16	7.7	192	0.3	38
21-44	790	7.7	9,120	0.6	37	373	3.6	4,369	0.5	11	227	2.2	2,559	0.3	35
45-64	791	7.1	8,811	0.6	24	917	8.3	10,360	0.5	12	320	2.9	3,335	0.3	38
65-74	13	10.2	156	0.8	53	23	18.0	265	0.6	19	21	16.4	231	0.5	64
75-84	0	0.0	0	0.0	0	3	9.1	36	0.3	5	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	1	8.3	12	0.9	9	0	0.0	0	0.0	0
Male, Other Eligibles															
All Ages	573	3.6	5,730	0.5	21	2,390	15.1	25,494	0.5	10	394	2.5	3,662	0.3	38
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	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	31	39.2	326	0.5	49	5	6.3	49	0.2	4	18	22.8	196	0.5	79
45-64	9	15.0	91	0.5	38	3	5.0	29	0.4	6	15	25.0	169	0.2	37
65-74	299	3.7	3,192	0.6	23	945	11.8	10,465	0.5	9	223	2.8	2,253	0.4	44
75-84	152	2.9	1,363	0.5	12	867	16.8	9,187	0.5	11	86	1.7	644	0.2	18
85 and older	82	3.3	758	0.5	11	570	22.8	5,764	0.6	10	52	2.1	400	0.2	17
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 2007 file for Louisiana, released by CMS in 5/2010. This table was produced on 10/06/2010.
 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 2007. 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 2007. 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.

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, LOUISIANA, 2007

Beneficiary Characteristics	ANALGESICS - Narcotic					ANTIDIABETIC					ANTIDEPRESSANTS				
	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	5,908	5.5	64,462	0.3	\$16	3,330	3.1	35,110	0.4	\$29	3,933	3.7	41,415	0.3	\$22
Female															
All Females	4,072	5.8	45,055	0.3	16	2,373	3.4	25,519	0.4	30	2,868	4.1	30,549	0.3	22
Female, Disabled															
All Ages	2,709	11.3	30,815	0.3	15	1,314	5.5	14,723	0.4	32	1,790	7.5	20,185	0.3	22
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	1	12.5	12	0.1	1	1	12.5	12	0.2	12	0	0.0	0	0.0	0
15-20	51	38.6	612	0.1	2	7	5.3	84	0.3	44	18	13.6	216	0.3	25
21-44	1,087	12.3	12,468	0.2	17	272	3.1	3,037	0.3	33	677	7.7	7,769	0.3	22
45-64	1,509	10.3	17,097	0.3	14	970	6.7	10,893	0.4	30	1,045	7.2	11,706	0.3	21
65-74	61	24.3	626	0.4	33	64	25.5	697	0.6	54	49	19.5	482	0.6	47
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	1.0	12	0.1	1
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	1,363	3.0	14,240	0.3	19	1,059	2.3	10,796	0.3	28	1,078	2.4	10,364	0.3	21
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	5	62.5	56	0.2	6	0	0.0	0	0.0	0	1	12.5	12	0.5	17
21-44	198	63.7	2,183	0.3	17	30	9.6	295	0.4	44	120	38.6	1,318	0.4	32
45-64	89	69.0	932	0.4	14	29	22.5	294	0.5	45	53	41.1	579	0.4	36
65-74	774	4.8	8,651	0.3	23	740	4.6	8,222	0.4	31	481	3.0	5,282	0.4	22
75-84	167	1.0	1,364	0.3	6	166	1.0	1,259	0.3	14	244	1.5	1,811	0.3	14
85 and older	130	1.0	1,054	0.3	6	94	0.7	726	0.2	10	179	1.4	1,362	0.3	12
Male															
All Males	1,836	4.9	19,407	0.3	16	957	2.6	9,591	0.3	26	1,065	2.8	10,866	0.3	22
Male, Disabled															
All Ages	1,327	6.1	14,375	0.3	16	513	2.4	5,376	0.3	26	700	3.2	7,651	0.3	21
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	14.3	12	0.3	2
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	38	18.4	446	0.2	2	3	1.4	32	0.3	27	27	13.0	323	0.3	22
21-44	613	6.0	6,703	0.2	14	141	1.4	1,530	0.3	30	330	3.2	3,764	0.3	21
45-64	649	5.9	6,933	0.3	19	356	3.2	3,674	0.3	24	330	3.0	3,422	0.3	20
65-74	27	21.1	293	0.3	12	13	10.2	140	0.7	33	12	9.4	130	0.6	27
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	509	3.2	5,032	0.3	15	444	2.8	4,215	0.4	27	365	2.3	3,215	0.4	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	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	81	102.5	862	0.4	28	14	17.7	146	0.6	76	49	62.0	494	0.4	47
45-64	37	61.7	394	0.6	54	2	3.3	20	0.3	16	20	33.3	209	0.4	25
65-74	294	3.7	3,074	0.3	9	284	3.6	2,991	0.4	29	152	1.9	1,496	0.4	24
75-84	68	1.3	456	0.3	4	95	1.8	725	0.3	14	93	1.8	668	0.3	13
85 and older	29	1.2	246	0.2	3	49	2.0	333	0.3	13	51	2.0	348	0.3	13
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 2007 file for Louisiana, released by CMS in 5/2010. This table was produced on 10/06/2010.
 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 2007. 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 2007. 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.

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, LOUISIANA, 2007

Beneficiary Characteristics	ANTIHYPERLIPIDEMIC					ANTIHYPERTENSIVE					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	2,680	2.5	28,580	0.3	\$31	5,036	4.7	53,182	0.3	\$16	107,200	1,180,169
Female												
All Females	1,812	2.6	19,657	0.3	31	3,348	4.8	36,019	0.3	17	69,699	770,003
Female, Disabled												
All Ages	933	3.9	10,564	0.3	31	1,803	7.5	20,365	0.3	17	23,914	273,289
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12
6-14	2	25.0	24	0.6	45	2	25.0	24	0.5	12	8	95
15-20	0	0.0	0	0.0	0	11	8.3	132	0.4	18	132	1,506
21-44	168	1.9	1,896	0.3	31	389	4.4	4,431	0.3	15	8,807	101,282
45-64	725	5.0	8,235	0.3	31	1,332	9.1	15,049	0.3	17	14,583	166,310
65-74	38	15.1	409	0.6	52	68	27.1	717	0.6	32	251	2,605
75-84	0	0.0	0	0.0	0	1	1.0	12	0.1	5	104	1,180
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	28	299
Female, Other Eligibles												
All Ages	879	1.9	9,093	0.3	30	1,545	3.4	15,654	0.3	17	45,785	496,714
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	3	150.0	36	0.3	2	2	24
15-20	1	12.5	12	0.7	57	4	50.0	48	0.4	17	8	77
21-44	23	7.4	257	0.3	30	49	15.8	522	0.3	20	311	2,672
45-64	24	18.6	248	0.4	34	52	40.3	521	0.5	22	129	1,209
65-74	604	3.7	6,808	0.4	34	987	6.1	11,011	0.4	19	16,211	182,978
75-84	148	0.9	1,129	0.3	17	247	1.5	1,968	0.3	9	16,040	175,447
85 and older	79	0.6	639	0.2	13	203	1.6	1,548	0.3	10	13,084	134,307
Male												
All Males	868	2.3	8,923	0.3	31	1,688	4.5	17,163	0.3	14	37,501	410,166
Male, Disabled												
All Ages	473	2.2	5,075	0.3	31	997	4.6	10,526	0.3	14	21,718	245,051
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	7	81
6-14	1	7.1	12	0.5	51	1	7.1	12	0.1	1	14	168
15-20	3	1.4	36	0.2	24	18	8.7	216	0.2	8	207	2,379
21-44	141	1.4	1,570	0.3	29	347	3.4	3,724	0.3	13	10,246	116,330
45-64	317	2.9	3,332	0.3	31	604	5.5	6,263	0.3	14	11,071	124,349
65-74	11	8.6	125	0.8	84	27	21.1	311	0.6	27	128	1,278
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	33	343
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	12	123
Male, Other Eligibles												
All Ages	395	2.5	3,848	0.3	31	691	4.4	6,637	0.3	14	15,783	165,115
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	1	12
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	36
21-44	16	20.3	178	0.4	37	33	41.8	307	0.4	25	79	719
45-64	7	11.7	75	0.3	21	19	31.7	202	0.3	15	60	500
65-74	246	3.1	2,630	0.4	35	426	5.3	4,533	0.3	16	7,981	86,923
75-84	87	1.7	679	0.2	19	132	2.6	1,015	0.3	9	5,161	53,561
85 and older	39	1.6	286	0.2	18	81	3.2	580	0.3	10	2,498	23,364
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 2007 file for Louisiana, released by CMS in 5/2010. This table was produced on 10/06/2010.
 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 2007. 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 2007. 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, LOUISIANA, 2007

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	\$22	0.7	13,577	139,872
Age				
0-64	38	1.0	1,543	17,099
65-74	41	1.0	2,390	25,682
75-84	15	0.6	4,384	45,011
85 and older	12	0.5	5,260	52,080
Unknown	0	0.0	0	0
Gender				
Female	19	0.7	9,330	96,270
Male	27	0.8	4,247	43,602
Unknown	0	0.0	0	0
Race				
White	21	0.7	8,091	82,383
African American	22	0.6	3,511	37,367
Other/unknown	25	0.7	1,975	20,122
Basis of Eligibility^c				
Aged	19	0.6	11,983	122,235
Disabled	42	1.1	1,594	17,637
Adults	0	0.0	0	0
Children	0	0.0	0	0
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 2007 file for Louisiana, released by CMS in 5/2010. This table was produced on 10/06/2010.

a. Table D.8 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their 2007 Medicaid enrollment. A total of 9,826 beneficiaries who were in nursing facilities for part of their enrollment and their 99,072 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, LOUISIANA, 2007

Therapeutic Category	Number of Rx per Benefit Month Among Users			\$ per Benefit Month Among Users									\$ per Rx					Users	
	Patented Brand-Name	Off-Patent Brand-Name	Generic	Patented Brand-Name	Off-Patent Brand-Name	Generic	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total Number of Rx	Total Rx \$	Number of Users	As a Percentage of Dual All-Year Nursing Facility Residents	Number of Benefit Months	
Anti-infective Agents	0.3	0.1	0.0	0.2	\$27	\$20	\$0	\$6	\$90	\$297	\$118	\$27	859	\$77,476	347	2.6	2,905		
Biologicals	0.0	0.0	0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0.0	0		
Antineoplastic Agents	0.3	0.0	0.0	0.3	45	9	0	36	132	201	0	121	210	27,721	89	0.7	617		
Endocrine/Metabolic Drugs	0.6	0.2	0.0	0.3	33	25	2	7	57	102	53	22	2,011	113,625	439	3.2	3,421		
Cardiovascular Agents	1.0	0.2	0.1	0.8	40	11	5	24	38	66	60	31	6,263	239,359	780	5.7	6,037		
Respiratory Agents	0.5	0.2	0.0	0.3	23	14	2	6	48	91	64	22	1,191	56,626	300	2.2	2,460		
Gastrointestinal Agents	0.5	0.2	0.0	0.3	36	25	3	8	73	125	67	32	2,055	149,312	513	3.8	4,117		
Genitourinary Agents	0.4	0.2	0.0	0.2	24	14	1	9	63	74	84	51	676	42,696	223	1.6	1,804		
CNS Drugs	0.7	0.1	0.0	0.7	24	10	1	13	32	120	108	20	32,410	1,031,389	4,160	30.6	43,300		
Stimulants/Anti-obesity/Anorexia	0.4	0.3	0.0	0.1	67	64	0	4	150	197	0	29	90	13,539	21	0.2	201		
Miscellaneous Psychological/Neurological Agents	0.5	0.5	0.0	0.0	51	51	0	0	103	103	0	71	1,149	118,276	309	2.3	2,310		
Analgesics and Anesthetics	0.5	0.0	0.0	0.5	15	1	2	12	29	57	239	25	1,894	55,464	430	3.2	3,704		
Neuromuscular Agents	0.8	0.1	0.0	0.7	26	7	2	18	33	141	113	24	7,719	257,676	960	7.1	9,752		
Nutritional Products	0.8	0.2	0.0	0.6	10	3	0	7	14	21	15	12	20,593	285,117	2,577	19.0	27,384		
Hematological Agents	0.7	0.3	0.0	0.5	19	14	0	5	26	53	22	12	18,639	492,906	2,429	17.9	25,489		
Topical Products	0.4	0.2	0.0	0.2	21	12	1	7	51	77	73	32	1,108	56,751	326	2.4	2,701		
Miscellaneous Products	0.2	0.0	0.0	0.2	25	3	0	23	116	76	0	123	39	4,512	21	0.2	180		
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	18	0	0	0	61	0	0	0	93	5,718	28	0.2	314		
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.	96,999	3,028,163	n.a.	n.a.	n.a.		

Source: Data for this table are from the MAX 2007 file for Louisiana, released by CMS in 5/2010. This table was produced on 10/06/2010.

- 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 2007. A total of 9,826 beneficiaries who were in nursing facilities for part of their enrollment and their 99,072 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 2007. 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 Louisiana, 0.2 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, LOUISIANA, 2007

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	
HEMATOPOIETIC AGENTS	\$492,352	3,854	28.4	41,617	0.6	\$18	\$12	
ANTIANSXIETY AGENTS	459,054	3,189	23.5	34,013	0.6	21	13	
ANTIPSYCHOTICS	272,202	386	2.8	3,277	0.5	177	83	
ANTICONVULSANT	236,149	952	7.0	9,775	0.7	32	24	
MULTIVITAMINS	215,578	1,989	14.6	21,711	0.8	12	10	
HYPNOTICS	191,607	979	7.2	10,237	0.7	26	19	
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	118,276	431	3.2	3,186	0.4	103	37	
ULCER DRUGS	112,610	427	3.1	3,464	0.4	92	33	
ANTIHISTAMINES	112,216	1,647	12.1	18,287	0.5	13	6	
ANTIDEPRESSANTS	108,526	526	3.9	4,278	0.4	62	25	
Total	2,318,570	14,380	n.a.	149,845	n.a.	n.a.	n.a.	

Source: Data for this table are from the MAX 2007 file for Louisiana, released by CMS in 5/2010. This table was produced on 10/06/2010.

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 2007. A total of 9,826 beneficiaries who were in nursing facilities for part of their enrollment and their 99,072 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 2007. 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 2007 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.

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, LOUISIANA, 2007

Beneficiary Characteristics	HEMATOPOIETIC AGENTS								ANTIANKXIETY 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	94,871	\$2,318,570	3,854	28.4	41,617	0.6	\$12	3,189	23.5	34,013	0.6	\$14	
Female													
All Females	64,867	1,511,004	2,715	29.1	29,428	0.6	12	2,255	24.2	24,076	0.6	13	
Female, Disabled													
All Ages	6,289	212,123	143	24.0	1,623	0.7	14	200	33.5	2,241	0.7	17	
64 or younger	5,832	171,687	136	23.9	1,539	0.7	15	192	33.7	2,161	0.6	17	
65-74	400	39,152	4	23.5	48	0.5	5	6	35.3	56	1.0	19	
75-84	45	1,152	3	50.0	36	0.1	3	2	33.3	24	0.7	32	
85 and older	12	132	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
Female, Other Eligibles													
All Ages	58,578	1,298,881	2,572	29.5	27,805	0.6	12	2,055	23.5	21,835	0.6	13	
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
65-74	11,588	378,349	342	27.9	3,857	0.7	13	373	30.4	4,052	0.7	15	
75-84	21,594	439,772	943	30.2	10,334	0.7	12	774	24.8	8,307	0.7	13	
85 and older	25,396	480,760	1,287	29.3	13,614	0.6	11	908	20.7	9,476	0.6	12	
Male													
All Males	30,004	807,566	1,139	26.8	12,189	0.7	12	934	22.0	9,937	0.6	14	
Male, Disabled													
All Ages	9,582	261,127	218	21.9	2,462	0.7	11	317	31.8	3,583	0.7	18	
64 or younger	9,334	250,732	210	21.6	2,366	0.7	11	313	32.1	3,540	0.7	18	
65-74	221	10,021	6	33.3	72	0.8	22	3	16.7	31	0.2	2	
75-84	4	132	1	33.3	12	0.2	7	1	33.3	12	0.2	5	
85 and older	23	242	1	50.0	12	0.9	9	0	0.0	0	0.0	0	
Male, Other Eligibles													
All Ages	20,422	546,439	921	28.3	9,727	0.7	12	617	19.0	6,354	0.6	13	
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
65-74	9,101	295,324	323	28.7	3,520	0.7	11	238	21.1	2,549	0.7	15	
75-84	7,015	156,097	335	26.7	3,527	0.7	13	227	18.1	2,318	0.6	11	
85 and older	4,306	95,018	263	30.4	2,680	0.7	11	152	17.6	1,487	0.5	11	
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 2007 file for Louisiana, released by CMS in 5/2010. This table was produced on 10/06/2010.

- Table D.10A includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2007. A total of 9,826 beneficiaries who were in nursing facilities for part of their enrollment and their 99,072 benefit months were excluded from the analysis.
- A user is a beneficiary who had at least one prescription filled in a given drug group during 2007. 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.
- Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
- The top 10 drug groups were determined based on total 2007 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, LOUISIANA, 2007

Beneficiary Characteristics	ANTIPSYCHOTICS					ANTICONVULSANT					MULTIVITAMINS				
	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	386	2.8	3,277	0.5	\$83	952	7.0	9,775	0.7	\$24	1,989	14.6	21,711	0.8	\$10
Female															
All Females	218	2.3	1,840	0.5	82	596	6.4	6,207	0.7	21	1,306	14.0	14,309	0.8	10
Female, Disabled															
All Ages	26	4.4	266	0.5	107	112	18.8	1,279	0.7	31	99	16.6	1,135	0.8	10
64 or younger	20	3.5	194	0.4	70	106	18.6	1,207	0.7	29	92	16.2	1,051	0.8	10
65-74	6	35.3	72	0.6	207	6	35.3	72	0.8	70	5	29.4	60	0.6	8
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	16.7	12	1.0	11
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	20.0	12	1.0	11
Female, Other Eligibles															
All Ages	192	2.2	1,574	0.5	78	484	5.5	4,928	0.7	19	1,207	13.8	13,174	0.8	10
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	74	6.0	763	0.6	131	134	10.9	1,424	0.8	30	206	16.8	2,311	0.8	10
75-84	63	2.0	418	0.4	29	212	6.8	2,118	0.8	16	383	12.3	4,227	0.8	10
85 and older	55	1.3	393	0.3	27	138	3.1	1,386	0.7	12	618	14.1	6,636	0.8	10
Male															
All Males	168	4.0	1,437	0.5	85	356	8.4	3,568	0.7	29	683	16.1	7,402	0.8	10
Male, Disabled															
All Ages	39	3.9	367	0.4	65	152	15.2	1,667	0.8	34	201	20.2	2,276	0.7	9
64 or younger	37	3.8	348	0.4	67	150	15.4	1,643	0.8	33	197	20.2	2,228	0.7	9
65-74	2	11.1	19	0.5	31	2	11.1	24	0.9	82	3	16.7	36	0.9	11
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	1	50.0	12	1.0	11
Male, Other Eligibles															
All Ages	129	4.0	1,070	0.5	91	204	6.3	1,901	0.7	25	482	14.8	5,126	0.8	10
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	58	5.1	548	0.7	145	101	9.0	1,065	0.7	33	217	19.3	2,378	0.8	10
75-84	43	3.4	347	0.3	36	69	5.5	559	0.6	15	164	13.0	1,771	0.8	10
85 and older	28	3.2	175	0.3	32	34	3.9	277	0.6	14	101	11.7	977	0.8	10
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 2007 file for Louisiana, released by CMS in 5/2010. This table was produced on 10/06/2010.

- 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 2007. A total of 9,826 beneficiaries who were in nursing facilities for part of their enrollment and their 99,072 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 2007. 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 2007 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, LOUISIANA, 2007

Beneficiary Characteristics	HYPNOTICS					MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL					ULCER DRUGS				
	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	979	7.2	10,237	0.7	\$19	431	3.2	3,186	0.4	\$37	427	3.1	3,464	0.4	\$33
Female															
All Females	623	6.7	6,508	0.7	21	285	3.1	2,053	0.4	35	260	2.8	2,023	0.4	34
Female, Disabled															
All Ages	82	13.7	867	0.8	15	10	1.7	96	0.7	83	35	5.9	371	0.6	68
64 or younger	78	13.7	819	0.8	15	8	1.4	72	0.5	39	29	5.1	299	0.5	58
65-74	4	23.5	48	0.7	16	2	11.8	24	1.3	213	6	35.3	72	0.8	111
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
Female, Other Eligibles															
All Ages	541	6.2	5,641	0.7	22	275	3.1	1,957	0.3	33	225	2.6	1,652	0.3	26
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	130	10.6	1,399	0.8	18	44	3.6	352	0.4	58	53	4.3	503	0.4	40
75-84	215	6.9	2,216	0.7	18	123	3.9	810	0.4	29	83	2.7	549	0.3	19
85 and older	196	4.5	2,026	0.7	28	108	2.5	795	0.3	26	89	2.0	600	0.3	21
Male															
All Males	356	8.4	3,729	0.7	15	146	3.4	1,133	0.4	41	167	3.9	1,441	0.3	31
Male, Disabled															
All Ages	136	13.6	1,560	0.8	11	12	1.2	118	0.3	40	46	4.6	483	0.3	31
64 or younger	135	13.9	1,553	0.8	11	12	1.2	118	0.3	40	40	4.1	416	0.3	30
65-74	1	5.6	7	0.7	6	0	0.0	0	0.0	0	6	33.3	67	0.4	42
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	220	6.8	2,169	0.7	19	134	4.1	1,015	0.4	41	121	3.7	958	0.3	30
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	78	6.9	823	0.8	16	36	3.2	323	0.5	66	50	4.4	458	0.4	41
75-84	89	7.1	861	0.6	19	62	4.9	424	0.3	32	43	3.4	292	0.3	19
85 and older	53	6.1	485	0.6	25	36	4.2	268	0.3	23	28	3.2	208	0.2	20
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 2007 file for Louisiana, released by CMS in 5/2010. This table was produced on 10/06/2010.

- Table D.10C includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2007. A total of 9,826 beneficiaries who were in nursing facilities for part of their enrollment and their 99,072 benefit months were excluded from the analysis.
- A user is a beneficiary who had at least one prescription filled in a given drug group during 2007. 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.
- Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
- The top 10 drug groups were determined based on total 2007 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, LOUISIANA, 2007

Beneficiary Characteristics	ANTIHISTAMINES					ANTIDEPRESSANTS					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	1,647	12.1	18,287	0.5	\$6	526	3.9	4,278	0.4	\$25	13,577	139,872
Female												
All Females	1,186	12.7	13,204	0.5	6	338	3.6	2,687	0.4	24	9,330	96,270
Female, Disabled												
All Ages	116	19.4	1,313	0.5	6	40	6.7	418	0.6	44	597	6,615
64 or younger	110	19.3	1,241	0.5	6	36	6.3	370	0.5	40	569	6,326
65-74	4	23.5	48	0.3	4	4	23.5	48	1.1	71	17	157
75-84	2	33.3	24	0.5	7	0	0.0	0	0.0	0	6	72
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	5	60
Female, Other Eligibles												
All Ages	1,070	12.3	11,891	0.5	6	298	3.4	2,269	0.4	20	8,733	89,655
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	206	16.8	2,387	0.5	7	83	6.8	770	0.5	28	1,228	13,280
75-84	397	12.7	4,379	0.5	6	116	3.7	794	0.3	18	3,118	32,332
85 and older	467	10.6	5,125	0.5	6	99	2.3	705	0.3	14	4,387	44,043
Male												
All Males	461	10.9	5,083	0.5	6	188	4.4	1,591	0.4	28	4,247	43,602
Male, Disabled												
All Ages	126	12.6	1,421	0.5	7	68	6.8	658	0.4	34	997	11,022
64 or younger	123	12.6	1,385	0.5	7	64	6.6	610	0.4	33	974	10,773
65-74	3	16.7	36	0.8	10	4	22.2	48	0.6	47	18	189
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	2	24
Male, Other Eligibles												
All Ages	335	10.3	3,662	0.4	6	120	3.7	933	0.5	24	3,250	32,580
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	141	12.5	1,610	0.4	6	51	4.5	482	0.6	32	1,127	12,056
75-84	106	8.4	1,156	0.5	6	46	3.7	323	0.3	15	1,257	12,571
85 and older	88	10.2	896	0.4	5	23	2.7	128	0.4	18	866	7,953
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 2007 file for Louisiana, released by CMS in 5/2010. This table was produced on 10/06/2010.

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 2007. A total of 9,826 beneficiaries who were in nursing facilities for part of their enrollment and their 99,072 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 2007. 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 2007 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}
 LOUISIANA, 2007

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	34,137	31.8	2.5	264,147	\$42	\$4,462,443	\$17	19.0	107,200	
Age										
5 and younger	5	62.5	3.4	27	31	250	9	24.6	8	
6-14	17	68.0	4.4	109	73	1,823	17	2.8	25	
15-20	78	22.3	0.9	313	14	4,967	16	1.4	350	
21-44	4,934	25.4	1.8	35,813	36	706,177	20	10.9	19,443	
45-64	8,947	34.6	2.8	72,553	51	1,306,057	18	16.3	25,843	
65-74	7,270	29.6	2.3	57,053	38	926,746	16	16.4	24,571	
75-84	7,066	33.1	2.6	54,667	40	850,108	16	51.2	21,338	
85 and older	5,820	37.3	2.8	43,612	43	666,315	15	53.7	15,622	
Unknown	0	0.0	0.0	0	0	0	0	0.0	0	
Basis of Eligibility^c										
Aged	19,963	32.7	2.5	153,705	40	2,418,901	16	30.4	60,970	
Disabled	13,959	30.6	2.4	109,129	44	2,014,811	18	14.0	45,632	
Adults	179	34.2	2.1	1,111	48	25,117	23	2.9	523	
Children	6	54.5	4.4	48	57	632	13	2.1	11	
Unknown	30	46.9	2.4	154	47	2,982	19	1.6	64	
Gender										
Female	23,849	34.2	2.6	182,180	45	3,105,015	17	19.2	69,699	
Male	10,288	27.4	2.2	81,967	36	1,357,428	17	18.7	37,501	
Unknown	0	0.0	0.0	0	0	0	0	0.0	0	
Race										
White	17,588	39.7	3.4	150,902	58	2,586,093	17	22.5	44,310	
African American	12,251	25.1	1.7	81,755	28	1,358,302	17	14.3	48,748	
Other/unknown	4,298	30.4	2.2	31,490	37	518,048	16	21.1	14,142	
Use of Nursing Facilities^d										
Entire year	7,079	52.1	5.3	71,419	85	1,155,561	16	38.2	13,577	
Part year	5,330	54.2	3.8	37,049	61	595,852	16	31.0	9,826	
None	21,728	25.9	1.9	155,679	32	2,711,030	17	14.7	83,797	
Maintenance Assistance Status										
Cash	17,213	26.4	1.9	123,500	33	2,144,031	17	13.8	65,313	
Medically needy	31	37.3	2.9	240	74	6,173	26	12.6	83	
Poverty related	695	22.8	1.0	2,900	17	50,928	18	3.6	3,049	
Other/unknown	16,198	41.8	3.5	137,507	58	2,261,311	16	35.1	38,755	

Source: Data for this table are from the MAX 2007 file for Louisiana, released by CMS in 5/2010. This table was produced on 10/06/2010.

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 2007.

b. The statute establishing the Medicare Part D prescription program that started in 2007 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 2007 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}
 LOUISIANA, 2007

Beneficiary Characteristics	Number Rx per Benefit Month	Rx \$ per Benefit Month	\$ per Rx	Barbiturate \$ per Benefit Month	Benzodiazepine \$ per Benefit Month	Number of Benefit Months
All	0.2	\$4	\$17	\$0	\$2	1,180,169
Age						
5 and younger	0.3	3	9	0	0	93
6-14	0.4	6	17	0	0	299
15-20	0.1	1	16	0	0	3,998
21-44	0.2	3	20	0	2	221,003
45-64	0.2	4	18	0	3	292,368
65-74	0.2	3	16	0	2	273,784
75-84	0.2	4	16	0	2	230,531
85 and older	0.3	4	15	0	2	158,093
Unknown	0.0	0	0	0	0	0
Basis of Eligibility^c						
Aged	0.2	4	16	0	2	656,625
Disabled	0.2	4	18	0	2	518,340
Adults	0.2	6	23	0	3	4,485
Children	0.4	5	13	1	0	124
Unknown	0.3	5	19	0	3	595
Gender						
Female	0.2	4	17	0	2	770,003
Male	0.2	3	17	0	2	410,166
Unknown	0.0	0	0	0	0	0
Race						
White	0.3	5	17	0	4	479,524
African American	0.1	2	17	0	1	546,033
Other/unknown	0.2	3	16	0	2	154,612
Use of Nursing Facilities^d						
Entire year	0.5	8	16	0	5	139,872
Part year	0.4	6	16	0	4	99,072
None	0.2	3	17	0	2	941,225
Maintenance Assistance Status						
Cash	0.2	3	17	0	2	745,392
Medically needy	0.3	8	26	0	5	799
Poverty related	0.1	2	18	0	1	32,351
Other/unknown	0.3	6	16	0	3	401,627

Source: Data for this table are from the MAX 2007 file for Louisiana, released by CMS in 5/2010. This table was produced on 10/06/2010.

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 2007.

b. The statute establishing the Medicare Part D prescription program that started in 2007 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 2007 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}
LOUISIANA, 2007

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	
All	42,701	\$105	\$4,462,443	100.0	264,147	\$17	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	0	0	0	0.0	0	0	0.0
Cough and cold medications	485	61	29,617	0.7	1,124	26	0.4
Vitamins and minerals	8,149	82	671,670	15.1	49,284	14	18.7
Non-prescription drugs	10,015	53	529,574	11.9	50,754	10	19.2
Barbiturates	1,466	97	141,547	3.2	13,853	10	5.2
Benzodiazepines	21,037	129	2,715,345	60.8	143,216	19	54.2
Other Part D Excl Rx Drugs	1,549	242	374,690	8.4	5,916	63	2.2

Source: Data for this table are from the MAX 2007 file for Louisiana, released by CMS in 5/2010. This table was produced on 10/06/2010.

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 2007. A user is a beneficiary who had at least one prescription filled for a Part D excluded drug in 2007. 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 2007 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 2007 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.

SUPPLEMENTAL TABLE 1
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES^{a, b}
 LOUISIANA, 2007

Total Number of Dual Eligible Beneficiaries: 107,200
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries: \$23,454,067
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary: \$218

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	67,942	63.4	\$0	0.0
1-500	31,745	29.6	4,031,834	17.2
501-1,000	3,142	2.9	2,179,815	9.3
1,001-1,500	1,185	1.1	1,452,083	6.2
1,501-2,000	634	0.6	1,097,806	4.7
2,001-2,500	487	0.5	1,090,419	4.6
2,501-3,000	330	0.3	900,588	3.8
3,001-3,500	274	0.3	885,562	3.8
3,501-4,000	205	0.2	769,244	3.3
4,001-4,500	185	0.2	783,332	3.3
4,501-5,000	155	0.1	736,714	3.1
5,001-5,500	121	0.1	633,146	2.7
5,501-6,000	96	0.1	550,329	2.3
6,001-6,500	95	0.1	592,644	2.5
6,501-7,000	58	0.1	390,414	1.7
7,001-7,500	63	0.1	454,955	1.9
7,501-8,000	47	0.0	365,635	1.6
8,001-8,500	56	0.1	461,008	2.0
8,501-9,000	37	0.0	322,763	1.4
9,001-9,500	31	0.0	286,474	1.2
9,501-10,000	32	0.0	311,186	1.3
10,001+	280	0.3	5,158,116	22.0

Source: Data for this table are from the MAX 2007 file for Louisiana, released by CMS in 5/2010. This table was produced on 10/06/2010.

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 2007.

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
 LOUISIANA, 2007

Total Number of Disabled Dual Eligible Beneficiaries, Age < 65: 45,076
 Total Pharmacy Reimbursement for Disabled Dual Eligible Beneficiaries, Age < 65: \$13,915,664
 Mean Pharmacy Reimbursement per Disabled Dual Eligible Beneficiary, Age < 65: \$308

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Disabled Dual Beneficiaries, Age < 65	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	28,150	62.5	\$0	0.0
1-500	12,787	28.4	1,674,661	12.0
501-1,000	1,489	3.3	1,045,143	7.5
1,001-1,500	651	1.4	805,171	5.8
1,501-2,000	378	0.8	654,214	4.7
2,001-2,500	288	0.6	647,151	4.7
2,501-3,000	205	0.5	561,719	4.0
3,001-3,500	182	0.4	588,077	4.2
3,501-4,000	134	0.3	500,528	3.6
4,001-4,500	114	0.3	482,153	3.5
4,501-5,000	88	0.2	419,417	3.0
5,001-5,500	77	0.2	402,327	2.9
5,501-6,000	59	0.1	338,177	2.4
6,001-6,500	57	0.1	354,795	2.5
6,501-7,000	40	0.1	269,969	1.9
7,001-7,500	37	0.1	265,974	1.9
7,501-8,000	36	0.1	279,842	2.0
8,001-8,500	40	0.1	330,010	2.4
8,501-9,000	25	0.1	218,376	1.6
9,001-9,500	20	0.0	184,819	1.3
9,501-10,000	22	0.0	214,537	1.5
10,001+	197	0.4	3,678,604	26.4

Source: Data for this table are from the MAX 2007 file for Louisiana, released by CMS in 5/2010. This table was produced on 10/06/2010.

- 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 2007.
- 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}
 LOUISIANA, 2007

Total Number of Dual Eligible Beneficiaries, Age 65+: 61,531
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65+: \$8,540,611
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65+: \$138

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 65+	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	39,591	64.3	\$0	0.0
1-500	18,820	30.6	2,338,772	27.4
501-1,000	1,605	2.6	1,099,249	12.9
1,001-1,500	500	0.8	605,515	7.1
1,501-2,000	233	0.4	403,097	4.7
2,001-2,500	170	0.3	377,640	4.4
2,501-3,000	117	0.2	317,049	3.7
3,001-3,500	78	0.1	252,016	3.0
3,501-4,000	56	0.1	211,872	2.5
4,001-4,500	57	0.1	242,110	2.8
4,501-5,000	57	0.1	270,575	3.2
5,001-5,500	34	0.1	178,698	2.1
5,501-6,000	33	0.1	189,440	2.2
6,001-6,500	30	0.0	188,110	2.2
6,501-7,000	16	0.0	107,321	1.3
7,001-7,500	21	0.0	153,169	1.8
7,501-8,000	9	0.0	70,081	0.8
8,001-8,500	14	0.0	114,693	1.3
8,501-9,000	9	0.0	78,035	0.9
9,001-9,500	8	0.0	73,649	0.9
9,501-10,000	8	0.0	77,549	0.9
10,001+	65	0.1	1,191,971	14.0

Source: Data for this table are from the MAX 2007 file for Louisiana, released by CMS in 5/2010. This table was produced on 10/06/2010.

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 2007.

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}
 LOUISIANA, 2007

Total Number of Dual Eligible Beneficiaries, Age 65-74: 24,571
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65-74: \$5,639,983
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65-74: \$229

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 65-74	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	16,224	66.0	\$0	0.0
1-500	6,625	27.0	827,515	14.7
501-1,000	623	2.5	434,249	7.7
1,001-1,500	279	1.1	339,948	6.0
1,501-2,000	139	0.6	241,442	4.3
2,001-2,500	132	0.5	293,173	5.2
2,501-3,000	91	0.4	246,298	4.4
3,001-3,500	59	0.2	190,997	3.4
3,501-4,000	51	0.2	193,281	3.4
4,001-4,500	50	0.2	212,685	3.8
4,501-5,000	55	0.2	261,164	4.6
5,001-5,500	32	0.1	168,053	3.0
5,501-6,000	32	0.1	183,737	3.3
6,001-6,500	30	0.1	188,110	3.3
6,501-7,000	16	0.1	107,321	1.9
7,001-7,500	20	0.1	146,032	2.6
7,501-8,000	9	0.0	70,081	1.2
8,001-8,500	14	0.1	114,693	2.0
8,501-9,000	9	0.0	78,035	1.4
9,001-9,500	8	0.0	73,649	1.3
9,501-10,000	8	0.0	77,549	1.4
10,001+	65	0.3	1,191,971	21.1

Source: Data for this table are from the MAX 2007 file for Louisiana, released by CMS in 5/2010. This table was produced on 10/06/2010.

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 2007.

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}
 LOUISIANA, 2007

Total Number of Dual Eligible Beneficiaries, Age 75-84: 21,338
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 75-84: \$1,659,567
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 75-84: \$77

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 75-84	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	13,891	65.1	\$0	0.0
1-500	6,648	31.2	831,689	50.1
501-1,000	557	2.6	378,142	22.8
1,001-1,500	120	0.6	144,308	8.7
1,501-2,000	50	0.2	86,237	5.2
2,001-2,500	27	0.1	59,972	3.6
2,501-3,000	17	0.1	46,385	2.8
3,001-3,500	10	0.0	31,922	1.9
3,501-4,000	5	0.0	18,591	1.1
4,001-4,500	7	0.0	29,425	1.8
4,501-5,000	2	0.0	9,411	0.6
5,001-5,500	2	0.0	10,645	0.6
5,501-6,000	1	0.0	5,703	0.3
6,001-6,500	0	0.0	0	0.0
6,501-7,000	0	0.0	0	0.0
7,001-7,500	1	0.0	7,137	0.4
7,501-8,000	0	0.0	0	0.0
8,001-8,500	0	0.0	0	0.0
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+	0	0.0	0	0.0

Source: Data for this table are from the MAX 2007 file for Louisiana, released by CMS in 5/2010. This table was produced on 10/06/2010.

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 2007.

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}
 LOUISIANA, 2007

Total Number of Dual Eligible Beneficiaries, Age 85+: 15,622
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 85+: \$1,241,061
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 85+: \$79

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 85+	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	9,476	60.7	\$0	0.0
1-500	5,547	35.5	679,568	54.8
501-1,000	425	2.7	286,858	23.1
1,001-1,500	101	0.6	121,259	9.8
1,501-2,000	44	0.3	75,418	6.1
2,001-2,500	11	0.1	24,495	2.0
2,501-3,000	9	0.1	24,366	2.0
3,001-3,500	9	0.1	29,097	2.3
3,501-4,000	0	0.0	0	0.0
4,001-4,500	0	0.0	0	0.0
4,501-5,000	0	0.0	0	0.0
5,001-5,500	0	0.0	0	0.0
5,501-6,000	0	0.0	0	0.0
6,001-6,500	0	0.0	0	0.0
6,501-7,000	0	0.0	0	0.0
7,001-7,500	0	0.0	0	0.0
7,501-8,000	0	0.0	0	0.0
8,001-8,500	0	0.0	0	0.0
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+	0	0.0	0	0.0

Source: Data for this table are from the MAX 2007 file for Louisiana, released by CMS in 5/2010. This table was produced on 10/06/2010.

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 2007.

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, LOUISIANA, 2007

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	107,207	60,977	45,632	523	11	64	1,180,206	656,658	518,344	4,485	124	595
Age												
5 and younger	8	0	8	0	0	0	93	0	93	0	0	0
6-14	25	0	22	0	3	0	299	0	263	0	36	0
15-20	350	0	339	3	8	0	3,998	0	3,885	25	88	0
21-44	19,443	0	19,053	385	0	5	221,003	0	217,612	3,332	0	59
45-64	25,843	32	25,654	128	0	29	292,372	360	290,663	1,067	0	282
65-74	24,573	24,157	379	7	0	30	273,791	269,593	3,883	61	0	254
75-84	21,339	21,202	137	0	0	0	230,541	229,018	1,523	0	0	0
85 and older	15,626	15,586	40	0	0	0	158,109	157,687	422	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	69,703	45,334	23,914	384	7	64	770,027	492,785	273,293	3,278	76	595
Male	37,504	15,643	21,718	139	4	0	410,179	163,873	245,051	1,207	48	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	44,312	24,877	19,153	245	5	32	479,529	259,408	217,662	2,084	60	315
African American	48,753	25,494	22,979	247	4	29	546,063	282,381	261,241	2,146	40	255
Other/unknown	14,142	10,606	3,500	31	2	3	154,614	114,869	39,441	255	24	25
Use of Nursing Facilities^c												
Entire year	13,577	11,983	1,594	0	0	0	139,872	122,235	17,637	0	0	0
Part year	9,826	8,592	1,234	0	0	0	99,072	85,831	13,241	0	0	0
None	83,804	40,402	42,804	523	11	64	941,262	448,592	487,466	4,485	124	595
Maintenance Assistance Status												
Cash	65,313	34,703	30,288	321	1	0	745,394	396,423	346,068	2,891	12	0
Medically needy	83	56	18	9	0	0	799	525	196	78	0	0
Poverty related	3,049	1,034	1,842	100	9	64	32,351	11,212	19,778	666	100	595
Other/unknown	38,762	25,184	13,484	93	1	0	401,662	248,498	152,302	850	12	0
Dual Status^d												
Full dual, all year	101,570	58,074	42,921	500	11	64	1,118,695	624,963	488,774	4,239	124	595
Full dual, part year	5,637	2,903	2,711	23	0	0	61,511	31,695	29,570	246	0	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	107,190	60,961	45,631	523	11	64	1,180,086	656,550	518,332	4,485	124	595
FFS part year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
FFS part year, no Rx claims	10	9	1	0	0	0	106	94	12	0	0	0
MC all year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
MC all year, no Rx claims	7	7	0	0	0	0	14	14	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 2007 file for Louisiana, released by CMS in 5/2010. This table was produced on 10/06/2010.

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 2007. 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, LOUISIANA, 2007

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	107,207	1,180,206	107,200	1,180,169	0	37
Fee-for-service (FFS) all year	107,190	1,180,086	107,190	1,180,086	0	0
FFS part year, with Rx claims	0	0	0	0	0	0
FFS part year, with no Rx claims	10	106	10	83	0	23
Managed care (MC) all year, with Rx claims	0	0	0	0	0	0
MC all year, with no Rx claims	7	14	0	0	0	14

Source: Data for this table are from the MAX 2007 file for Louisiana, released by CMS in 5/2010. This table was produced on 10/06/2010.

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