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

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TABLE ND.2
CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a, b}
NONDUAL BENEFICIARIES, KANSAS, 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	215,889	1,701	35,478	39,404	139,051	255	1,123,993	18,051	358,897	127,061	617,990	1,994
Age												
5 and younger	65,817	0	1,818	0	63,999	0	269,639	0	17,104	0	252,535	0
6-14	60,012	0	6,383	0	53,629	0	313,177	0	66,179	0	246,998	0
15-20	31,935	0	4,580	6,152	21,201	2	186,013	0	47,292	21,773	116,931	17
21-44	41,200	0	9,430	31,436	222	112	200,145	0	98,564	99,319	1,526	736
45-64	15,074	5	13,118	1,810	0	141	135,480	47	128,257	5,935	0	1,241
65-74	1,066	923	137	6	0	0	11,187	9,796	1,357	34	0	0
75-84	431	419	12	0	0	0	4,491	4,347	144	0	0	0
85 and older	354	354	0	0	0	0	3,861	3,861	0	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	121,187	1,120	17,207	33,858	68,747	255	603,053	12,089	175,968	109,497	303,505	1,994
Male	94,697	581	18,271	5,546	70,299	0	520,930	5,962	182,929	17,564	314,475	0
Unknown	5	0	0	0	5	0	10	0	0	0	10	0
Race												
White	125,667	762	25,113	26,062	73,523	207	667,916	8,267	252,956	81,183	323,841	1,669
African American	34,113	234	6,367	6,522	20,978	12	175,602	2,535	65,792	19,865	87,327	83
Other/unknown	56,109	705	3,998	6,820	44,550	36	280,475	7,249	40,149	26,013	206,822	242
Use of Nursing Facilities^c												
Entire year	428	117	311	0	0	0	4,505	1,270	3,235	0	0	0
Part year	452	67	382	3	0	0	4,400	599	3,790	11	0	0
None	215,009	1,517	34,785	39,401	139,051	255	1,115,088	16,182	351,872	127,050	617,990	1,994
Maintenance Assistance Status												
Cash	82,858	912	27,950	22,684	31,312	0	488,255	10,211	293,988	74,373	109,683	0
Medically needy	3,484	327	1,724	620	813	0	22,452	3,025	11,996	3,145	4,286	0
Poverty-related	100,401	39	402	12,874	86,831	255	374,784	366	2,798	38,087	331,539	1,994
Other/unknown	29,146	423	5,402	3,226	20,095	0	238,502	4,449	50,115	11,456	172,482	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	92,939	1,700	34,379	11,217	45,391	252	776,066	18,042	351,713	49,374	354,963	1,974
FFS part year, with Rx claims	37,876	1	833	12,739	24,301	2	124,723	9	5,722	37,769	81,207	16
FFS part year, no Rx claims	85,074	0	266	15,448	69,359	1	223,204	0	1,462	39,918	181,820	4

Source: Data for this table are from the MAX 2007 file for Kansas, released by CMS in 3/2010. This table was produced on 10/06/2010.

a. Table ND.2 includes the beneficiaries represented by Cell K 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.

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 ND.3
ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC^{a, b}
NONDUAL BENEFICIARIES, KANSAS, 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	42.7	6.9	\$593	\$86	\$5,150	11.5	215,889
Age							
5 and younger	32.4	1.5	132	87	2,721	4.8	65,817
6-14	37.9	4.1	434	106	3,210	13.5	60,012
15-20	48.3	6.0	606	101	5,535	11.0	31,935
21-44	50.7	8.0	716	90	7,314	9.8	41,200
45-64	71.7	37.6	2,752	73	15,927	17.3	15,074
65-74	71.1	36.4	2,287	63	14,690	15.6	1,066
75-84	56.4	19.8	1,046	53	9,208	11.4	431
85 and older	22.3	8.6	320	37	6,618	4.8	354
Unknown	0.0	0.0	0	0	0	0.0	0
Basis of Eligibility^e							
Aged	62.0	29.1	1,719	59	12,392	13.9	1,701
Disabled	75.7	29.2	2,657	91	17,007	15.6	35,478
Adults	43.1	2.0	85	43	3,509	2.4	39,404
Children	33.9	2.3	195	87	2,491	7.8	139,051
Unknown	64.7	17.9	1,121	63	11,113	10.1	255
Gender							
Female	43.7	7.2	538	75	4,858	11.1	121,187
Male	41.5	6.4	663	103	5,524	12.0	94,697
Unknown	0.0	0.0	0	0	163	0.0	5
Race							
White	47.2	8.7	770	88	5,989	12.9	125,667
African American	37.6	5.7	494	87	5,217	9.5	34,113
Other/unknown	36.0	3.4	256	75	3,231	7.9	56,109
Use of Nursing Facilities^f							
Entire year	91.4	98.4	6,872	70	51,523	13.3	428
Part year	95.4	75.1	4,732	63	74,253	6.4	452
None	42.5	6.5	572	88	4,913	11.6	215,009
Maintenance Assistance Status							
Cash	49.4	12.1	1,057	87	7,524	14.0	82,858
Medically needy	48.3	9.0	643	71	10,277	6.3	3,484
Poverty related	31.3	1.2	71	58	2,090	3.4	100,401
Other/unknown	62.4	11.0	1,065	97	8,332	12.8	29,146

Source: Data for this table are from the MAX 2007 file for Kansas, released by CMS in 3/2010. This table was produced on 10/06/2010.

a. Table ND.3 includes beneficiaries represented by Cell K 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 ND.4
MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a, b}
NONDUAL BENEFICIARIES, KANSAS, 2007

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	1.3	\$114	11.5	57.3	27.2	5.9	6.2	2.6	0.8	\$989	215,889	1,123,993
Age												
5 and younger	0.4	32	4.8	67.6	26.9	3.5	1.7	0.2	0.0	664	65,817	269,639
6-14	0.8	83	13.5	62.1	26.3	5.5	5.2	0.9	0.1	615	60,012	313,177
15-20	1.0	104	11.0	51.7	32.3	7.3	6.8	1.8	0.1	950	31,935	186,013
21-44	1.6	147	9.8	49.3	29.2	8.0	8.8	3.7	0.9	1,506	41,200	200,145
45-64	4.2	306	17.3	28.3	17.5	9.2	20.1	16.9	8.0	1,772	15,074	135,480
65-74	3.5	218	15.6	28.9	14.8	9.8	22.4	17.6	6.4	1,400	1,066	11,187
75-84	1.9	100	11.4	43.6	19.5	9.7	16.9	8.4	1.9	884	431	4,491
85 and older	0.8	29	4.8	77.7	8.8	1.7	5.9	5.1	0.8	607	354	3,861
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	2.7	162	13.9	38.0	15.6	8.9	19.0	13.9	4.5	1,168	1,701	18,051
Disabled	2.9	263	15.6	24.3	28.6	11.3	19.8	11.7	4.4	1,681	35,478	358,897
Adults	0.6	26	2.4	56.9	29.3	7.0	5.3	1.3	0.2	1,088	39,404	127,061
Children	0.5	44	7.8	66.1	26.4	4.2	2.8	0.4	0.0	560	139,051	617,990
Unknown	2.3	143	10.1	35.3	27.5	9.8	18.8	7.8	0.8	1,421	255	1,994
Gender												
Female	1.4	108	11.1	56.3	27.9	5.9	6.0	2.9	1.1	976	121,187	603,053
Male	1.2	121	12.0	58.5	26.4	5.9	6.5	2.2	0.5	1,004	94,697	520,930
Unknown	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	0.0	82	5	10
Race												
White	1.6	145	12.9	52.8	27.8	7.0	7.8	3.4	1.1	1,127	125,667	667,916
African American	1.1	96	9.5	62.4	24.7	5.1	5.2	2.0	0.5	1,014	34,113	175,602
Other/unknown	0.7	51	7.9	64.0	27.5	4.1	3.2	0.9	0.2	646	56,109	280,475
Use of Nursing Facilities^f												
Entire year	9.3	653	13.3	8.6	4.9	1.9	14.7	30.6	39.3	4,895	428	4,505
Part year	7.7	486	6.4	4.6	7.5	5.8	24.6	33.2	24.3	7,628	452	4,400
None	1.3	110	11.6	57.5	27.3	5.9	6.2	2.4	0.7	947	215,009	1,115,088
Maintenance Assistance Status												
Cash	2.1	179	14.0	50.6	25.8	7.1	9.5	5.2	1.8	1,277	82,858	488,255
Medically needy	1.4	100	6.3	51.7	26.3	7.8	10.1	3.4	0.8	1,595	3,484	22,452
Poverty related	0.3	19	3.4	68.7	25.3	3.8	2.0	0.2	0.0	560	100,401	374,784
Other/unknown	1.3	130	12.8	37.6	38.0	9.6	10.9	3.2	0.7	1,018	29,146	238,502

Source: Data for this table are from the MAX 2007 file for Kansas, released by CMS in 3/2010. This table was produced on 10/06/2010.

a. Table ND.4 includes the beneficiaries represented by Cell K 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 ND.5
AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC^{a, b, c}
NONDUAL BENEFICIARIES, KANSAS, 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	1.3	\$114	\$86	0.5	\$92	\$182	0.0	\$4	\$98	0.8	\$18	\$23
Age												
5 and younger	0.4	32	87	0.1	26	252	0.0	1	62	0.3	5	20
6-14	0.8	83	106	0.4	71	173	0.0	3	101	0.3	9	26
15-20	1.0	104	101	0.5	86	180	0.0	5	120	0.5	13	25
21-44	1.6	147	90	0.6	118	208	0.0	5	112	1.0	25	24
45-64	4.2	306	73	1.4	234	168	0.1	10	88	2.7	62	23
65-74	3.5	218	63	1.2	169	137	0.1	11	83	2.1	38	18
75-84	1.9	100	53	0.6	70	110	0.1	6	66	1.2	24	20
85 and older	0.8	29	37	0.3	20	81	0.0	2	49	0.5	7	14
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Basis of Eligibility^d												
Aged	2.7	162	59	1.0	123	127	0.1	8	77	1.7	30	18
Disabled	2.9	263	91	1.1	212	194	0.1	9	102	1.7	41	24
Adults	0.6	26	43	0.1	16	121	0.0	1	83	0.5	9	20
Children	0.5	44	87	0.2	36	164	0.0	2	95	0.3	6	23
Unknown	2.3	143	63	0.7	112	167	0.0	3	68	1.6	28	18
Gender												
Female	1.4	108	75	0.5	84	165	0.0	4	91	0.9	20	23
Male	1.2	121	103	0.5	100	202	0.0	4	107	0.6	16	25
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Race												
White	1.6	145	88	0.6	117	184	0.1	5	100	1.0	23	24
African American	1.1	96	87	0.4	78	192	0.0	3	99	0.7	15	22
Other/unknown	0.7	51	75	0.3	41	162	0.0	2	88	0.4	9	21
Use of Nursing Facilities^e												
Entire year	9.3	653	70	3.0	483	163	0.2	14	86	6.2	154	25
Part year	7.7	486	63	2.4	353	149	0.2	16	96	5.1	115	22
None	1.3	110	88	0.5	89	183	0.0	4	99	0.7	17	23
Maintenance Assistance Status												
Cash	2.1	179	87	0.7	144	192	0.1	6	100	1.2	29	24
Medically needy	1.4	100	71	0.4	77	189	0.0	3	83	1.0	20	21
Poverty related	0.3	19	58	0.1	14	136	0.0	1	75	0.2	5	21
Other/unknown	1.3	130	97	0.6	109	169	0.0	5	103	0.7	16	25

Source: Data for this table are from the MAX 2007 file for Kansas, released by CMS in 3/2010. This table was produced on 10/06/2010.

a. Table ND.5 includes the beneficiaries represented by Cell K 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 other than the original patent holder. In Kansas, 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.

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 ND.6
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d}
 NONDUAL BENEFICIARIES, KANSAS, 2007

Therapeutic Category	Number of Rx per Benefit Month Among Users			\$ per Benefit Month Among Users			\$ per Rx			Users ^e			As a Percentage of All Benes	Number of Benefit Months			
	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 of Users
Anti-infective Agents	0.3	0.0	0.0	0.3	\$16	\$9	\$1	\$6	\$51	\$282	\$102	\$22	136,779	\$7,030,683	54,551	25.3	447,601
Biologicals	0.5	0.5	0.0	0.0	713	713	0	0	1371	1,371	0	0	1,484	2,034,606	346	0.2	2,854
Antineoplastic Agents	0.5	0.2	0.0	0.4	175	154	4	16	319	851	1,318	45	3,629	1,157,551	658	0.3	6,621
Endocrine/Metabolic Drugs	0.7	0.2	0.0	0.4	41	33	1	8	62	131	33	20	128,369	7,995,699	21,489	10.0	193,095
Cardiovascular Agents	1.2	0.3	0.1	0.9	45	28	4	13	37	101	65	14	192,076	7,018,602	15,640	7.2	156,757
Respiratory Agents	0.5	0.3	0.0	0.2	39	32	2	5	73	103	75	25	144,739	10,633,729	32,276	15.0	271,612
Gastrointestinal Agents	0.6	0.3	0.0	0.3	63	51	2	11	109	170	119	40	76,590	8,338,339	14,013	6.5	132,205
Genitourinary Agents	0.4	0.2	0.0	0.2	24	18	0	5	61	98	63	27	17,975	1,100,071	5,233	2.4	45,325
CNS Drugs	1.2	0.6	0.0	0.6	158	144	1	13	136	244	97	23	293,550	39,868,051	26,911	12.5	252,157
Stimulants/Anti-obesity/Anorexia	0.8	0.7	0.0	0.1	86	83	1	3	108	125	43	22	76,281	8,249,817	10,594	4.9	95,978
Miscellaneous Psychological/ Neurological Agents	0.3	0.3	0.0	0.0	68	66	0	1	218	223	0	114	7,559	1,650,542	2,379	1.1	24,416
Analgesics and Anesthetics	0.6	0.0	0.0	0.6	28	8	1	19	43	204	227	31	149,865	6,380,260	26,557	12.3	230,718
Neuromuscular Agents	0.9	0.4	0.1	0.4	101	78	11	12	107	179	170	27	149,888	16,019,288	15,865	7.3	159,118
Nutritional Products	0.4	0.0	0.0	0.4	8	1	0	6	17	32	11	16	23,648	407,413	7,272	3.4	53,966
Hematological Agents	0.7	0.2	0.0	0.4	214	208	0	6	317	839	25	14	19,265	6,100,063	2,854	1.3	28,440
Topical Products	0.2	0.1	0.0	0.2	11	7	0	3	45	104	61	20	54,781	2,460,403	24,806	11.5	221,085
Miscellaneous Products	0.6	0.3	0.0	0.3	229	196	4	28	381	703	216	94	3,676	1,399,384	584	0.3	6,118
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	19	0	0	0	106	0	0	0	1,416	149,695	772	0.4	7,786
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.	1,481,570	127,994,196	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2007 file for Kansas, released by CMS in 3/2010. This table was produced on 10/06/2010.

a. Table ND.6 includes the beneficiaries represented by Cell K of Table 1. 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.

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 Kansas, 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.

For information about this classification method, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

e. 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 ND.7
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP^{a, b, c}
 NONDUAL BENEFICIARIES, KANSAS, 2007

Top 10 Drug Groups	Users			Among Users			
	Total Medicaid Rx \$	Number of Users	As a Percentage of All Beneficiaries	Number of Benefit Months	Number of Rx per Benefit Month	Rx \$ per Rx	Rx \$ per Benefit Month
ANTIPSYCHOTICS	\$31,758,059	17,410	8.1	181,758	0.7	\$265	\$175
ANTICONVULSANT	15,190,988	14,811	6.9	153,837	0.8	130	99
STIMULANTS/ANTI-OBESITY/ANOREXIANTS	8,248,252	12,675	5.9	118,579	0.6	108	70
ANTIASTHMATIC	7,873,864	30,412	14.1	270,146	0.3	84	29
ANTIDEPRESSANTS	6,643,165	22,634	10.5	218,595	0.5	56	30
ULCER DRUGS	6,039,081	12,538	5.8	125,020	0.5	104	48
ANALGESICS - Narcotic	4,626,232	30,129	14.0	275,032	0.4	41	17
ANTIDIABETIC	4,385,497	8,065	3.7	82,686	0.7	80	53
MISC. HEMATOLOGICAL	4,072,638	1,034	0.5	10,993	0.6	633	370
ANTHYPERLIPIDEMIC	2,977,729	6,046	2.8	65,696	0.6	77	45
Total	91,815,505	155,754	n.a.	1,502,342	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2007 file for Kansas, released by CMS in 3/2010. This table was produced on 10/06/2010.

a. Table ND.7 includes the beneficiaries represented by Cell K 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 ND.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}
 NONDUAL BENEFICIARIES, KANSAS, 2007

Beneficiary Characteristics	All Top 10 Drug Groups		ANTIPSYCHOTICS					ANTICONVULSANT				
	Number of Rx	Rx \$	Number of Users	Users as % of All 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 All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	795,872	\$91,815,505	17,410	8.1	181,758	0.7	\$175	14,811	6.9	153,837	0.8	\$99
Female												
All Females	437,927	44,310,767	7,622	6.3	78,986	0.6	166	8,193	6.8	83,354	0.7	92
Female, Disabled												
All Ages	329,569	34,424,683	4,926	28.6	55,134	0.6	177	5,957	34.6	66,789	0.7	95
5 and younger	3,213	358,134	21	2.7	191	0.4	72	104	13.3	1,119	0.9	135
6-14	19,207	2,555,718	614	30.6	6,619	0.6	157	523	26.1	5,720	0.7	117
15-20	17,976	2,274,985	551	32.0	6,109	0.6	147	508	29.5	5,714	0.8	130
21-44	89,870	10,447,377	1,738	34.7	19,632	0.6	180	2,105	42.0	23,711	0.8	111
45-64	199,007	18,730,843	2,000	26.3	22,559	0.7	189	2,715	35.7	30,503	0.7	70
65-74	296	57,626	2	2.5	24	0.9	645	2	2.5	22	0.7	73
75-84	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
Female, Other Eligibles												
All Ages	108,358	9,886,084	2,696	2.6	23,852	0.6	140	2,236	2.2	16,565	0.6	78
5 and younger	7,114	569,072	55	0.2	522	0.5	90	61	0.2	421	0.7	78
6-14	28,416	3,333,971	846	3.2	8,683	0.6	157	402	1.5	3,952	0.7	93
15-20	28,482	3,216,470	1,038	6.4	10,336	0.6	141	628	3.8	6,158	0.6	102
21-44	24,116	1,219,920	569	2.1	2,475	0.4	78	889	3.2	3,776	0.5	44
45-64	4,133	246,299	60	4.6	379	0.3	33	104	8.0	558	0.5	32
65-74	13,056	1,112,720	98	15.2	1,126	0.9	228	126	19.5	1,405	0.8	54
75-84	2,216	145,018	20	8.4	240	0.5	39	21	8.8	239	0.7	38
85 and older	825	42,614	10	4.2	91	0.5	24	5	2.1	56	0.7	14
Male												
All Males	357,945	47,504,738	9,788	10.3	102,772	0.7	182	6,618	7.0	70,483	0.8	107
Male, Disabled												
All Ages	248,679	33,662,953	5,980	32.7	66,140	0.7	192	4,920	26.9	55,107	0.8	112
5 and younger	4,586	1,768,672	60	5.8	554	0.5	112	103	9.9	1,140	0.6	60
6-14	55,836	8,759,732	1,955	44.7	21,478	0.7	169	1,131	25.8	12,705	0.8	108
15-20	35,252	5,105,317	1,231	43.1	13,556	0.7	179	848	29.7	9,540	0.9	134
21-44	63,257	9,422,783	1,631	36.9	18,399	0.7	235	1,619	36.6	18,340	0.9	140
45-64	89,660	8,599,007	1,101	20.0	12,139	0.6	185	1,217	22.1	13,373	0.7	67
65-74	88	7,442	2	3.6	14	0.2	16	2	3.6	9	0.7	27
75-84	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
Male, Other Eligibles												
All Ages	109,266	13,841,785	3,808	5.0	36,632	0.7	163	1,698	2.2	15,376	0.7	90
5 and younger	10,941	1,235,101	111	0.3	1,084	0.5	102	114	0.3	944	0.5	38
6-14	53,496	7,055,161	1,922	7.1	18,825	0.7	170	716	2.6	6,982	0.7	89
15-20	34,465	4,735,396	1,593	14.5	15,571	0.7	161	653	5.9	6,199	0.7	108
21-44	3,537	246,729	108	2.5	474	0.5	118	137	3.2	584	0.6	65
45-64	1,248	101,237	26	4.0	136	0.6	115	34	5.2	171	0.5	41
65-74	4,087	371,780	41	14.5	468	0.7	196	38	13.4	431	0.7	38
75-84	1,129	76,069	4	2.2	38	0.5	82	5	2.8	53	0.5	3
85 and older	363	20,312	3	2.6	36	0.1	3	1	0.9	12	0.2	4
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 Kansas, released by CMS in 3/2010. This table was produced on 10/06/2010.
 a. Table ND.7A includes the beneficiaries represented by Cell K 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.

TABLE ND.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}
 NONDUAL BENEFICIARIES, KANSAS, 2007

Beneficiary Characteristics	STIMULANTS/ANTI-OBESITY/ANOREXIANTS					ANTIASTHMATIC					ANTIDEPRESSANTS				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	12,675	5.9	118,579	0.6	\$70	30,412	14.1	270,146	0.3	\$29	22,634	10.5	218,595	0.5	\$30
Female															
All Females	3,822	3.2	35,821	0.6	67	16,132	13.3	145,346	0.4	30	14,601	12.0	137,047	0.5	33
Female, Disabled															
All Ages	1,344	7.8	14,675	0.6	69	7,551	43.9	85,170	0.4	35	8,699	50.6	97,072	0.6	36
5 and younger	31	4.0	311	0.4	38	378	48.4	4,042	0.3	30	22	2.8	202	0.3	3
6-14	655	32.7	6,911	0.6	69	635	31.7	7,069	0.3	27	440	21.9	4,728	0.5	18
15-20	281	16.3	3,164	0.6	66	411	23.9	4,655	0.3	22	645	37.5	7,058	0.5	25
21-44	203	4.1	2,331	0.6	70	1,834	36.6	20,912	0.3	27	2,781	55.5	31,186	0.5	37
45-64	173	2.3	1,948	0.5	78	4,279	56.3	48,405	0.5	42	4,800	63.1	53,810	0.6	39
65-74	1	1.2	10	0.1	2	14	17.3	87	0.7	109	11	13.6	88	0.7	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
Female, Other Eligibles															
All Ages	2,478	2.4	21,146	0.6	65	8,581	8.3	60,176	0.3	22	5,902	5.7	39,975	0.5	23
5 and younger	94	0.3	806	0.4	37	2,780	8.9	20,573	0.2	20	22	0.1	217	0.4	8
6-14	1,525	5.8	13,163	0.7	69	2,561	9.7	18,267	0.3	24	733	2.8	6,700	0.5	21
15-20	636	3.9	6,068	0.6	61	1,466	9.0	11,794	0.3	21	1,748	10.7	15,846	0.4	22
21-44	191	0.7	919	0.5	53	1,397	5.1	6,046	0.3	20	2,793	10.2	12,205	0.4	24
45-64	26	2.0	118	0.6	67	140	10.7	792	0.3	27	342	26.1	1,975	0.5	31
65-74	5	0.8	60	0.6	54	193	29.9	2,206	0.5	46	220	34.1	2,557	0.6	29
75-84	1	0.4	12	0.1	21	29	12.2	318	0.4	33	33	13.9	370	0.6	21
85 and older	0	0.0	0	0.0	0	15	6.3	180	0.4	31	11	4.6	105	0.9	29
Male															
All Males	8,853	9.3	82,758	0.7	71	14,280	15.1	124,800	0.3	28	8,033	8.5	81,548	0.6	27
Male, Disabled															
All Ages	3,624	19.8	39,578	0.7	72	5,134	28.1	56,867	0.4	33	5,146	28.2	56,597	0.6	29
5 and younger	66	6.4	620	0.4	34	625	60.3	6,782	0.3	29	21	2.0	225	0.5	6
6-14	2,336	53.4	25,339	0.7	72	1,433	32.7	16,019	0.3	26	980	22.4	10,719	0.6	19
15-20	924	32.3	10,244	0.7	75	624	21.8	7,006	0.3	25	860	30.1	9,447	0.6	27
21-44	219	5.0	2,499	0.7	78	686	15.5	7,803	0.4	32	1,399	31.6	15,672	0.6	32
45-64	79	1.4	876	0.5	50	1,761	31.9	19,224	0.5	44	1,882	34.1	20,522	0.6	33
65-74	0	0.0	0	0.0	0	5	8.9	33	0.3	37	4	7.1	12	0.8	57
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	5,229	6.8	43,180	0.6	70	9,146	12.0	67,933	0.3	24	2,887	3.8	24,951	0.5	22
5 and younger	173	0.5	1,536	0.4	39	4,096	12.5	30,497	0.2	21	34	0.1	322	0.3	7
6-14	3,682	13.5	29,174	0.7	70	3,583	13.2	25,572	0.3	27	1,076	4.0	10,051	0.5	18
15-20	1,326	12.0	12,235	0.6	75	1,118	10.1	9,413	0.3	22	1,328	12.0	12,183	0.5	26
21-44	39	0.9	175	0.5	51	161	3.7	626	0.4	25	297	6.8	1,268	0.4	24
45-64	7	1.1	36	0.3	35	44	6.8	179	0.5	45	75	11.6	302	0.5	29
65-74	2	0.7	24	0.7	133	99	35.0	1,128	0.6	64	53	18.7	576	0.6	21
75-84	0	0.0	0	0.0	0	36	19.9	410	0.5	46	17	9.4	180	0.5	19
85 and older	0	0.0	0	0.0	0	9	7.7	108	0.7	47	7	6.0	69	0.8	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 Kansas, released by CMS in 3/2010. This table was produced on 10/06/2010.
 a. Table ND.7B includes the beneficiaries represented by Cell K 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.

TABLE ND.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}
 NONDUAL BENEFICIARIES, KANSAS, 2007

Beneficiary Characteristics	ULCER DRUGS					ANALGESICS - Narcotic					ANTIDIABETIC				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	12,538	5.8	125,020	0.5	\$48	30,129	14.0	275,032	0.4	\$17	8,065	3.7	82,686	0.7	\$53
Female															
All Females	8,225	6.8	82,129	0.5	49	20,917	17.3	185,129	0.4	16	5,547	4.6	56,708	0.7	53
Female, Disabled															
All Ages	5,386	31.3	61,062	0.5	57	10,784	62.7	121,666	0.5	22	4,168	24.2	46,979	0.7	56
5 and younger	135	17.3	1,388	0.5	39	82	10.5	938	0.1	1	4	0.5	46	0.8	88
6-14	178	8.9	1,964	0.4	37	226	11.3	2,571	0.2	2	34	1.7	381	0.6	48
15-20	248	14.4	2,843	0.4	34	537	31.2	6,046	0.2	2	75	4.4	861	0.6	40
21-44	1,524	30.4	17,319	0.4	46	3,596	71.8	40,539	0.4	19	897	17.9	10,176	0.6	55
45-64	3,293	43.3	37,487	0.5	65	6,330	83.3	71,481	0.6	26	3,155	41.5	35,489	0.7	57
65-74	8	9.9	61	0.6	68	13	16.0	91	0.7	222	3	3.7	26	1.0	69
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	2,839	2.7	21,067	0.3	29	10,133	9.7	63,463	0.3	5	1,379	1.3	9,729	0.6	40
5 and younger	491	1.6	3,380	0.3	14	331	1.1	2,711	0.1	1	7	0.0	49	0.8	66
6-14	398	1.5	3,434	0.3	24	644	2.4	5,331	0.2	2	112	0.4	717	0.6	43
15-20	626	3.8	5,581	0.2	20	2,336	14.3	18,764	0.2	1	148	0.9	1,106	0.6	35
21-44	852	3.1	3,976	0.3	27	5,923	21.6	28,976	0.4	6	587	2.1	2,663	0.5	32
45-64	135	10.3	802	0.4	41	477	36.5	2,868	0.5	12	143	10.9	884	0.5	32
65-74	261	40.4	3,012	0.6	60	324	50.2	3,710	0.4	11	310	48.0	3,567	0.7	49
75-84	57	23.9	664	0.5	45	74	31.1	847	0.3	4	54	22.7	558	0.6	33
85 and older	19	8.0	218	0.7	41	24	10.1	256	0.5	21	18	7.6	185	0.9	43
Male															
All Males	4,313	4.6	42,891	0.5	46	9,212	9.7	89,903	0.4	18	2,518	2.7	25,978	0.7	52
Male, Disabled															
All Ages	2,852	15.6	31,726	0.5	54	5,924	32.4	65,269	0.5	24	2,039	11.2	22,362	0.7	53
5 and younger	153	14.8	1,554	0.5	42	118	11.4	1,326	0.1	1	3	0.3	36	0.6	229
6-14	263	6.0	2,982	0.4	45	397	9.1	4,598	0.1	2	75	1.7	846	0.8	76
15-20	259	9.1	2,973	0.4	47	588	20.6	6,631	0.2	2	67	2.3	789	0.7	50
21-44	791	17.9	9,006	0.5	52	1,590	36.0	17,655	0.4	18	378	8.6	4,169	0.7	53
45-64	1,382	25.0	15,186	0.5	59	3,225	58.5	35,026	0.6	34	1,512	27.4	16,474	0.7	52
65-74	4	7.1	25	0.7	91	6	10.7	33	0.2	7	4	7.1	48	0.4	28
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	1,461	1.9	11,165	0.3	26	3,288	4.3	24,634	0.2	5	479	0.6	3,616	0.6	47
5 and younger	599	1.8	4,082	0.2	13	476	1.5	4,057	0.1	1	5	0.0	47	0.4	32
6-14	285	1.0	2,541	0.3	27	686	2.5	5,855	0.1	1	93	0.3	562	0.6	43
15-20	278	2.5	2,458	0.3	28	1,027	9.3	8,969	0.2	1	79	0.7	608	0.8	74
21-44	138	3.2	519	0.4	36	759	17.5	3,189	0.5	15	85	2.0	443	0.5	47
45-64	35	5.4	172	0.5	50	172	26.5	741	0.6	40	60	9.3	272	0.5	48
65-74	95	33.6	1,045	0.5	56	129	45.6	1,391	0.3	14	113	39.9	1,179	0.7	44
75-84	23	12.7	252	0.5	24	32	17.7	352	0.4	10	34	18.8	394	0.6	36
85 and older	8	6.8	96	0.9	71	7	6.0	80	0.1	1	10	8.5	111	0.4	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 2007 file for Kansas, released by CMS in 3/2010. This table was produced on 10/06/2010.
 a. Table ND.7C includes the beneficiaries represented by Cell K 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.

TABLE ND.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}
 NONDUAL BENEFICIARIES, KANSAS, 2007

Beneficiary Characteristics	MISC. HEMATOLOGICAL					ANTIHYPERLIPIDEMIC					Number of Beneficiaries	Number of Benefit Months
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month		
All	1,034	0.5	10,993	0.6	\$371	6,046	2.8	65,696	0.6	\$45	215,889	1,123,993
Female												
All Females	565	0.5	6,160	0.6	70	3,875	3.2	42,433	0.6	46	121,187	603,053
Female, Disabled												
All Ages	487	2.8	5,390	0.6	67	3,226	18.7	36,747	0.6	46	17,207	175,968
5 and younger	0	0.0	0	0.0	0	5	0.6	60	0.1	2	781	7,337
6-14	0	0.0	0	0.0	0	5	0.2	60	0.4	15	2,006	20,524
15-20	0	0.0	0	0.0	0	12	0.7	140	0.5	35	1,721	17,738
21-44	51	1.0	553	0.5	51	560	11.2	6,405	0.5	41	5,009	52,790
45-64	435	5.7	4,832	0.6	69	2,640	34.7	30,057	0.6	47	7,601	76,676
65-74	1	1.2	5	0.6	69	4	4.9	25	0.4	32	81	807
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	8	96
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
Female, Other Eligibles												
All Ages	78	0.1	770	0.7	92	649	0.6	5,686	0.6	46	103,980	427,085
5 and younger	1	0.0	2	1.0	132	16	0.1	134	0.1	2	31,348	122,844
6-14	1	0.0	6	0.2	6	3	0.0	21	0.6	29	26,445	120,623
15-20	0	0.0	0	0.0	0	19	0.1	166	0.3	27	16,331	78,628
21-44	11	0.0	47	0.4	216	152	0.6	677	0.4	31	27,427	87,665
45-64	9	0.7	74	0.4	49	111	8.5	668	0.5	38	1,308	5,235
65-74	40	6.2	459	0.7	90	269	41.6	3,122	0.7	52	646	6,976
75-84	12	5.0	144	0.8	98	67	28.2	762	0.7	56	238	2,493
85 and older	4	1.7	38	0.8	44	12	5.1	136	0.6	50	237	2,621
Male												
All Males	469	0.5	4,833	0.6	754	2,171	2.3	23,263	0.6	45	94,697	520,930
Male, Disabled												
All Ages	400	2.2	4,325	0.6	704	1,877	10.3	20,975	0.6	45	18,271	182,929
5 and younger	6	0.6	68	0.9	19,737	4	0.4	37	0.2	4	1,037	9,767
6-14	8	0.2	96	0.7	11,564	9	0.2	108	0.4	16	4,377	45,655
15-20	2	0.1	18	0.5	59	31	1.1	358	0.6	39	2,859	29,554
21-44	21	0.5	221	0.6	1,577	427	9.7	4,828	0.6	46	4,421	45,774
45-64	362	6.6	3,910	0.6	62	1,405	25.5	15,632	0.6	46	5,517	51,581
65-74	1	1.8	12	0.7	85	1	1.8	12	0.6	14	56	550
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	4	48
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
Male, Other Eligibles												
All Ages	69	0.1	508	0.5	1,172	294	0.4	2,288	0.5	37	76,426	338,001
5 and younger	6	0.0	49	0.7	6,707	16	0.0	159	0.2	4	32,647	129,687
6-14	2	0.0	15	0.9	16,156	14	0.1	65	0.4	24	27,183	126,369
15-20	1	0.0	12	0.1	1	18	0.2	178	0.5	40	11,024	60,093
21-44	11	0.3	34	0.8	74	68	1.6	266	0.4	28	4,343	13,916
45-64	16	2.5	49	0.6	50	51	7.9	198	0.6	35	648	1,988
65-74	18	6.4	185	0.4	48	81	28.6	886	0.6	44	283	2,854
75-84	12	6.6	138	0.5	58	38	21.0	442	0.6	43	181	1,854
85 and older	3	2.6	26	0.7	88	8	6.8	94	0.7	41	117	1,240
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	5	10

Source: Data for this table are from the MAX 2007 file for Kansas, released by CMS in 3/2010. This table was produced on 10/06/2010.
 a. Table ND.7D includes the beneficiaries represented by Cell K 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.

TABLE ND.8
MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
BY BENEFICIARY CHARACTERISTIC^{a, b}
NONDUAL BENEFICIARIES, KANSAS, 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	\$653	9.3	428	4,505
Age				
0-64	786	10.9	310	3,233
65-74	524	7.8	53	599
75-84	210	4.1	22	244
85 and older	85	2.7	43	429
Unknown	0	0.0	0	0
Gender				
Female	692	9.6	262	2,797
Male	588	8.9	166	1,708
Unknown	0	0.0	0	0
Race				
White	635	9.2	350	3,668
African American	678	9.8	43	467
Other/unknown	798	10.7	35	370
Basis of Eligibility^c				
Aged	316	5.4	117	1,270
Disabled	785	10.9	311	3,235
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 Kansas, released by CMS in 3/2010. This table was produced on 10/06/2010.
a. Table ND.8 includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their 2007 Medicaid enrollment. A total of 452 beneficiaries who were in nursing facilities for part of their enrollment and their 4,400 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 ND.9
MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d, e}
NONDUAL BENEFICIARIES, KANSAS, 2007

Therapeutic Category	Number of Rx per Benefit Month Among Users			\$ per Benefit Month Among Users									Total Number of Rx	Total Rx \$	Number of Users	As a Percentage of All-Year Nursing Facility Residents	Number of Benefit Months
	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						
Anti-infective Agents	0.4	0.1	0.0	0.3	\$25	\$9	\$1	\$15	\$57	\$113	\$168	\$42	1,257	\$71,625	261	61.0	2,911
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	0.7	0.2	0.0	0.5	91	67	0	24	137	388	76	50	140	19,168	19	4.4	210
Endocrine/Metabolic Drugs	1.6	0.8	0.0	0.8	91	79	1	11	57	104	142	13	4,072	230,723	232	54.2	2,537
Cardiovascular Agents	2.4	0.4	0.1	1.9	69	33	6	30	29	88	63	16	7,811	226,539	297	69.4	3,281
Respiratory Agents	0.9	0.3	0.1	0.5	56	35	8	13	63	106	104	27	1,598	100,203	167	39.0	1,792
Gastrointestinal Agents	1.2	0.4	0.0	0.8	86	63	2	21	72	155	121	28	2,826	203,747	217	50.7	2,368
Genitourinary Agents	0.8	0.3	0.0	0.4	48	30	0	18	63	92	23	42	872	55,122	103	24.1	1,138
CNS Drugs	2.6	1.3	0.0	1.4	324	284	1	39	123	225	70	29	9,771	1,205,226	342	79.9	3,721
Stimulants/Anti-obesity/Anorexia	1.0	0.2	0.0	0.8	76	65	0	11	78	331	0	14	84	6,541	10	2.3	86
Miscellaneous Psychological/Neurological Agents	1.0	1.0	0.0	0.0	141	139	0	2	145	145	0	137	723	105,105	68	15.9	744
Analgesics and Anesthetics	1.5	0.1	0.0	1.4	63	7	0	56	43	113	33	40	3,340	144,306	216	50.5	2,302
Neuromuscular Agents	2.0	0.6	0.1	1.3	137	95	8	35	69	150	125	27	5,310	366,776	247	57.7	2,674
Nutritional Products	0.8	0.0	0.0	0.8	14	0	0	14	18	11	16	18	1,213	21,326	134	31.3	1,503
Hematological Agents	1.4	0.3	0.0	1.1	91	79	0	12	64	267	6	11	1,890	121,738	127	29.7	1,338
Topical Products	0.5	0.2	0.0	0.4	25	18	0	7	49	116	51	20	1,050	51,608	184	43.0	2,039
Miscellaneous Products	0.3	0.0	0.0	0.3	7	1	0	6	21	80	0	19	76	1,597	21	4.9	230
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	34	0	0	0	133	0	0	0	73	9,678	27	6.3	286
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.	42,106	2,941,028	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2007 file for Kansas, released by CMS in 3/2010. This table was produced on 10/06/2010.

- a. Table ND.9 includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2007. A total of 452 beneficiaries who were in nursing facilities for part of their enrollment and their 4,400 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 Kansas, 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.

Nondual Medicaid Beneficiaries

TABLE ND.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}
 NONDUAL BENEFICIARIES, KANSAS, 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	
ANTIPSYCHOTICS	\$929,733	343	80.1	3,777	1.0	\$238	\$246	
ANTICONVULSANT	306,672	297	69.4	3,233	1.2	81	95	
ANTIDEPRESSANTS	244,647	403	94.2	4,437	0.9	60	55	
ANTIDIABETIC	167,398	230	53.7	2,509	1.1	62	67	
ULCER DRUGS	138,909	230	53.7	2,546	0.7	75	55	
ANALGESICS - Narcotic	125,483	268	62.6	2,867	1.0	46	44	
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	105,522	91	21.3	989	0.7	143	107	
ANTIHYPERLIPIDEMIC	103,701	169	39.5	1,898	0.8	66	55	
ANTIASTHMATIC	83,606	203	47.4	2,152	0.6	67	39	
MISC. ENDOCRINE	55,910	34	7.9	381	0.7	204	147	
Total	2,261,581	2,268	n.a.	24,789	n.a.	n.a.	n.a.	

Source: Data for this table are from the MAX 2007 file for Kansas, released by CMS in 3/2010. This table was produced on 10/06/2010.

a. Table ND.10 includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2007. A total of 452 beneficiaries who were in nursing facilities for part of their enrollment and their 4,400 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.

Nondual Medicaid Beneficiaries

TABLE ND.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}
 NONDUAL BENEFICIARIES, KANSAS, 2007

Beneficiary Characteristics	All Top 10 Drug Groups			ANTIPSYCHOTICS				ANTICONVULSANT				
	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	22,870	\$2,261,581	343	80.1	3,777	1.0	\$246	297	69.4	3,233	1.2	\$95
Female												
All Females	15,028	1,530,190	225	85.9	2,525	1.1	267	195	74.4	2,151	1.2	96
Female, Disabled												
All Ages	12,058	1,275,815	189	104.4	2,115	1.1	267	158	87.3	1,733	1.2	105
64 or younger	12,058	1,275,815	189	104.4	2,115	1.1	267	158	87.3	1,733	1.2	105
65-74	0	0	0	0.0	0	0.0	0	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
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles												
All Ages	2,970	254,375	36	44.4	410	1.1	270	37	45.7	418	1.2	61
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	2,083	210,245	28	70.0	314	1.3	341	28	70.0	314	1.4	75
75-84	396	18,859	4	25.0	48	0.7	44	7	43.8	80	0.8	23
85 and older	491	25,271	4	16.0	48	0.7	31	2	8.0	24	1.0	2
Male												
All Males	7,842	731,391	118	71.1	1,252	0.9	204	102	61.4	1,082	1.2	92
Male, Disabled												
All Ages	7,147	684,093	109	83.8	1,144	1.0	212	97	74.6	1,031	1.2	94
64 or younger	7,147	684,093	109	84.5	1,144	1.0	212	97	75.2	1,031	1.2	94
65-74	0	0	0	0.0	0	0.0	0	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
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male, Other Eligibles												
All Ages	695	47,298	9	25.0	108	0.6	121	5	13.9	51	1.0	59
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	487	39,772	7	58.3	84	0.8	154	4	33.3	39	1.2	76
75-84	82	4,636	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	126	2,890	2	11.1	24	0.1	4	1	5.6	12	0.2	4
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 Kansas, released by CMS in 3/2010. This table was produced on 10/06/2010.

a. Table ND.10A includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2007. A total of 452 beneficiaries who were in nursing facilities for part of their enrollment and their 4,400 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.

Nondual Medicaid Beneficiaries

TABLE ND.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
NONDUAL BENEFICIARIES, KANSAS, 2007

Beneficiary Characteristics	ANTIDEPRESSANTS					ANTIDIABETIC					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	403	94.2	4,437	0.9	\$55	230	53.7	2,509	1.1	\$67	230	53.7	2,546	0.7	\$55
Female															
All Females	266	101.5	2,972	0.9	57	147	56.1	1,633	1.1	70	144	55.0	1,621	0.7	55
Female, Disabled															
All Ages	223	123.2	2,476	0.9	60	113	62.4	1,230	1.1	76	111	61.3	1,240	0.7	56
64 or younger	223	123.2	2,476	0.9	60	113	62.4	1,230	1.1	76	111	61.3	1,240	0.7	56
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	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
Female, Other Eligibles															
All Ages	43	53.1	496	0.9	39	34	42.0	403	1.0	52	33	40.7	381	0.7	53
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	30	75.0	344	0.9	41	25	62.5	295	0.9	56	19	47.5	217	0.7	61
75-84	8	50.0	92	0.9	31	4	25.0	48	0.9	56	4	25.0	48	0.5	10
85 and older	5	20.0	60	1.0	39	5	20.0	60	1.5	27	10	40.0	116	0.7	54
Male															
All Males	137	82.5	1,465	0.9	52	83	50.0	876	1.0	61	86	51.8	925	0.8	53
Male, Disabled															
All Ages	126	96.9	1,353	0.9	54	63	48.5	681	1.0	65	75	57.7	800	0.7	55
64 or younger	126	97.7	1,353	0.9	54	63	48.8	681	1.0	65	75	58.1	800	0.7	55
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	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	11	30.6	112	0.9	22	20	55.6	195	0.9	48	11	30.6	125	0.9	40
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	6	50.0	56	0.9	13	20	166.7	195	0.9	48	7	58.3	77	0.8	59
75-84	1	16.7	12	0.9	30	0	0.0	0	0.0	0	2	33.3	24	1.0	9
85 and older	4	22.2	44	0.8	31	0	0.0	0	0.0	0	2	11.1	24	1.0	9
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 Kansas, released by CMS in 3/2010. This table was produced on 10/06/2010.

a. Table ND.10B includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2007. A total of 452 beneficiaries who were in nursing facilities for part of their enrollment and their 4,400 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.

Nondual Medicaid Beneficiaries

TABLE ND.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}
 NONDUAL BENEFICIARIES, KANSAS, 2007

Beneficiary Characteristics	ANALGESICS - Narcotic					MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL					ANTIHYPERLIPIDEMIC				
	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	268	62.6	2,867	1.0	\$44	91	21.3	989	0.7	\$107	169	39.5	1,898	0.8	\$55
Female															
All Females	173	66.0	1,895	0.8	35	64	24.4	715	0.7	102	103	39.3	1,182	0.8	54
Female, Disabled															
All Ages	148	81.8	1,605	0.8	39	45	24.9	487	0.7	103	74	40.9	839	0.8	53
64 or younger	148	81.8	1,605	0.8	39	45	24.9	487	0.7	103	74	40.9	839	0.8	53
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	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
Female, Other Eligibles															
All Ages	25	30.9	290	0.8	15	19	23.5	228	0.7	101	29	35.8	343	0.8	57
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	13	32.5	146	0.8	11	10	25.0	120	0.8	115	20	50.0	235	0.8	59
75-84	4	25.0	48	1.0	7	3	18.8	36	0.5	80	4	25.0	48	0.9	55
85 and older	8	32.0	96	0.8	24	6	24.0	72	0.8	88	5	20.0	60	0.6	55
Male															
All Males	95	57.2	972	1.2	60	27	16.3	274	0.8	118	66	39.8	716	0.8	55
Male, Disabled															
All Ages	87	66.9	894	1.3	65	23	17.7	235	0.8	120	60	46.2	653	0.8	55
64 or younger	87	67.4	894	1.3	65	23	17.8	235	0.8	120	60	46.5	653	0.8	55
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	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	8	22.2	78	0.2	4	4	11.1	39	0.7	107	6	16.7	63	0.8	64
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	6	50.0	54	0.3	5	2	16.7	15	0.5	46	5	41.7	51	0.8	67
75-84	1	16.7	12	0.3	2	2	33.3	24	0.9	144	0	0.0	0	0.0	0
85 and older	1	5.6	12	0.1	1	0	0.0	0	0.0	0	1	5.6	12	1.0	51
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 Kansas, released by CMS in 3/2010. This table was produced on 10/06/2010.

a. Table ND.10C includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2007. A total of 452 beneficiaries who were in nursing facilities for part of their enrollment and their 4,400 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.

Nondual Medicaid Beneficiaries

TABLE ND.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}
 NONDUAL BENEFICIARIES, KANSAS, 2007

Beneficiary Characteristics	ANTIASTHMATIC						MISC. ENDOCRINE					
	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-Year Nursing Facility Residents	Benefit Months Among All-Year Nursing Facility Residents
All	203	47.4	2,152	0.6	\$39	34	7.9	381	0.7	\$147	428	4,505
Female												
All Females	119	45.4	1,292	0.6	41	26	9.9	296	0.7	67	262	2,797
Female, Disabled												
All Ages	91	50.3	972	0.7	45	20	11.0	224	0.8	78	181	1,913
64 or younger	91	50.3	972	0.7	45	20	11.0	224	0.8	78	181	1,913
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
Female, Other Eligibles												
All Ages	28	34.6	320	0.5	28	6	7.4	72	0.5	33	81	884
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	16	40.0	176	0.5	31	3	7.5	36	0.4	36	40	469
75-84	6	37.5	72	0.3	29	3	18.8	36	0.5	29	16	176
85 and older	6	24.0	72	0.4	23	0	0.0	0	0.0	0	25	239
Male												
All Males	84	50.6	860	0.6	36	8	4.8	85	0.6	426	166	1,708
Male, Disabled												
All Ages	76	58.5	771	0.5	32	8	6.2	85	0.6	426	130	1,322
64 or younger	76	58.9	771	0.5	32	8	6.2	85	0.6	426	129	1,320
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	2
75-84	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
Male, Other Eligibles												
All Ages	8	22.2	89	1.1	68	0	0.0	0	0.0	0	36	386
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	4	33.3	41	0.7	120	0	0.0	0	0.0	0	12	128
75-84	3	50.0	36	0.6	17	0	0.0	0	0.0	0	6	68
85 and older	1	5.6	12	3.9	47	0	0.0	0	0.0	0	18	190
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 Kansas, released by CMS in 3/2010. This table was produced on 10/06/2010.

a. Table ND.10D includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2007. A total of 452 beneficiaries who were in nursing facilities for part of their enrollment and their 4,400 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 ND.11
USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
AMONG NONDUALS, BY BENEFICIARY CHARACTERISTIC^{a,b}
KANSAS, 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 Nondual Rx \$	Total Number of Beneficiaries	
All	22,544	10.4	0.5	104,792	\$6	\$1,259,597	\$12	1.0	215,889	
Age										
5 and younger	3,859	5.9	0.1	7,458	1	91,671	12	1.1	65,817	
6-14	4,818	8.0	0.2	12,104	3	175,713	15	0.7	60,012	
15-20	3,241	10.1	0.3	9,091	6	177,813	20	0.9	31,935	
21-44	4,743	11.5	0.6	26,444	6	267,653	10	0.9	41,200	
45-64	5,370	35.6	3.0	45,471	33	496,982	11	1.2	15,074	
65-74	377	35.4	2.9	3,127	37	39,376	13	1.6	1,066	
75-84	93	21.6	1.5	664	16	6,707	10	1.5	431	
85 and older	43	12.1	1.2	433	10	3,682	9	3.3	354	
Unknown	0	0.0	0.0	0	0	0	0	0.0	0	
Basis of Eligibility^c										
Aged	502	29.5	2.4	4,162	29	48,886	12	1.7	1,701	
Disabled	10,799	30.4	2.2	78,293	27	940,897	12	1.0	35,478	
Adults	2,239	5.7	0.1	4,604	1	37,469	8	1.1	39,404	
Children	8,949	6.4	0.1	17,414	2	228,658	13	0.8	139,051	
Unknown	55	21.6	1.3	319	14	3,687	12	1.3	255	
Gender										
Female	13,178	10.9	0.5	65,502	6	739,954	11	1.1	121,187	
Male	9,366	9.9	0.4	39,290	5	519,643	13	0.8	94,697	
Unknown	0	0.0	0.0	0	0	0	0	0.0	5	
Race										
White	15,429	12.3	0.6	80,314	8	978,173	12	1.0	125,667	
African American	2,727	8.0	0.4	11,945	4	135,226	11	0.8	34,113	
Other/unknown	4,388	7.8	0.2	12,533	3	146,198	12	1.0	56,109	
Use of Nursing Facilities^d										
Entire year	336	78.5	10.9	4,676	126	53,931	12	1.8	428	
Part year	345	76.3	7.4	3,336	92	41,738	13	2.0	452	
None	21,863	10.2	0.5	96,780	5	1,163,928	12	0.9	215,009	
Maintenance Assistance Status										
Cash	12,630	15.2	0.9	77,929	11	876,213	11	1.0	82,858	
Medically needy	549	15.8	0.6	2,115	6	20,905	10	0.9	3,484	
Poverty related	4,780	4.8	0.1	7,789	1	96,388	12	1.3	100,401	
Other/unknown	4,585	15.7	0.6	16,959	9	266,091	16	0.9	29,146	

Source: Data for this table are from the MAX 2007 file for Kansas, released by CMS in 3/2010. This table was produced on 10/06/2010.

a. Table ND.11 includes the beneficiaries represented by Cell K of Table 1. Beneficiaries include all nondual 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 ND.12
USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
AMONG NONDUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a,b}
KANSAS, 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	0.1	\$1	\$12	\$0	\$0	1,123,993
Age						
5 and younger	0.0	0	12	0	0	269,639
6-14	0.0	1	15	0	0	313,177
15-20	0.0	1	20	0	0	186,013
21-44	0.1	1	10	0	0	200,145
45-64	0.3	4	11	0	1	135,480
65-74	0.3	4	13	0	1	11,187
75-84	0.1	1	10	0	0	4,491
85 and older	0.1	1	9	0	0	3,861
Unknown	0.0	0	0	0	0	0
Basis of Eligibility^c						
Aged	0.2	3	12	0	0	18,051
Disabled	0.2	3	12	0	1	358,897
Adults	0.0	0	8	0	0	127,061
Children	0.0	0	13	0	0	617,990
Unknown	0.2	2	12	0	1	1,994
Gender						
Female	0.1	1	11	0	0	603,053
Male	0.1	1	13	0	0	520,930
Unknown	0.0	0	0	0	0	10
Race						
White	0.1	1	12	0	0	667,916
African American	0.1	1	11	0	0	175,602
Other/unknown	0.0	1	12	0	0	280,475
Use of Nursing Facilities^d						
Entire year	1.0	12	12	0	3	4,505
Part year	0.8	9	13	0	3	4,400
None	0.1	1	12	0	0	1,115,088
Maintenance Assistance Status						
Cash	0.2	2	11	0	0	488,255
Medically needy	0.1	1	10	0	0	22,452
Poverty related	0.0	0	12	0	0	374,784
Other/unknown	0.1	1	16	0	0	238,502

Source: Data for this table are from the MAX 2007 file for Kansas, released by CMS in 3/2010. This table was produced on 10/06/2010.

a. Table ND.12 includes the beneficiaries represented by Cell K of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits. Beneficiaries include all nondual 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.

TABLE ND.13
USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D FOR SELECTED DRUG CATEGORIES AMONG NONDUALS^{a,b,c}
KANSAS, 2007

Drug Category	Number of Users	Rx \$ per User	Total Rx \$	Rx \$ as a Percentage of All Part D Excluded Rx \$			Number Rx as a Percentage of All Part D Excluded Rx	
				Excluded Rx \$	Total Number Rx.	\$ per Rx	Percentage of All Part D Excluded Rx	Percentage of All Part D Excluded Rx
All	27,100	\$46	\$1,259,597	100.0	104,792	\$12	100.0	100.0
Anorexia or weight loss/gain	15	75	1,132	0.1	40	28	0.0	0.0
Fertility drugs	2	145	290	0.0	4	73	0.0	0.0
Drugs for cosmetic purposes	0	0	0	0.0	0	0	0.0	0.0
Cough and cold medications	4,596	25	116,308	9.2	6,461	18	6.2	6.2
Vitamins and minerals	3,103	90	278,322	22.1	15,241	18	14.5	14.5
Non-prescription drugs	11,173	39	435,727	34.6	35,356	12	33.7	33.7
Barbiturates	400	53	21,071	1.7	3,486	6	3.3	3.3
Benzodiazepines	7,245	39	285,592	22.7	42,388	7	40.4	40.4
Other Part D Excl Rx Drugs	566	214	121,155	9.6	1,816	67	1.7	1.7

Source: Data for this table are from the MAX 2007 file for Kansas, released by CMS in 3/2010. This table was produced on 10/06/2010.

a. Table ND.13 includes the beneficiaries represented by Cell K of Table 1. Beneficiaries include all nondual 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 ND11.

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.

Nondual Medicaid Beneficiaries

APPENDIX TABLE A.1
CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY^{a, b}
NONDUAL BENEFICIARIES, KANSAS, 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	286,530	1,701	35,485	51,325	197,764	255	2,522,107	18,054	364,159	369,557	1,768,332	2,005
Age												
5 and younger	96,799	0	1,818	0	94,981	0	851,724	0	18,430	0	833,294	0
6-14	81,004	0	6,383	0	74,621	0	758,114	0	68,295	0	689,819	0
15-20	40,156	0	4,580	7,634	27,940	2	346,592	0	47,820	55,063	243,692	17
21-44	50,752	0	9,430	40,988	222	112	395,168	0	99,272	293,622	1,527	747
45-64	15,968	5	13,125	2,697	0	141	150,946	47	128,841	20,817	0	1,241
65-74	1,066	923	137	6	0	0	11,211	9,799	1,357	55	0	0
75-84	431	419	12	0	0	0	4,491	4,347	144	0	0	0
85 and older	354	354	0	0	0	0	3,861	3,861	0	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	159,666	1,120	17,212	43,485	97,594	255	1,380,879	12,092	178,402	314,021	874,359	2,005
Male	126,858	581	18,273	7,840	100,164	0	1,141,212	5,962	185,757	55,536	893,957	0
Unknown	6	0	0	0	6	0	16	0	0	0	16	0
Race												
White	167,647	762	25,117	34,161	107,400	207	1,462,944	8,270	256,160	243,525	953,309	1,680
African American	45,541	234	6,370	8,856	30,069	12	418,469	2,535	67,089	69,646	279,116	83
Other/unknown	73,342	705	3,998	8,308	60,295	36	640,694	7,249	40,910	56,386	535,907	242
Use of Nursing Facilities^c												
Entire year	428	117	311	0	0	0	4,505	1,270	3,235	0	0	0
Part year	453	67	382	4	0	0	4,439	599	3,802	38	0	0
None	285,649	1,517	34,792	51,321	197,764	255	2,513,163	16,185	357,122	369,519	1,768,332	2,005
Maintenance Assistance Status												
Cash	107,010	912	27,956	30,839	47,303	0	986,221	10,214	297,771	243,150	435,086	0
Medically needy	3,484	327	1,724	620	813	0	24,124	3,025	12,182	3,452	5,465	0
Poverty related	142,326	39	402	14,954	126,676	255	1,185,413	366	2,847	83,225	1,096,970	2,005
Other/unknown	33,710	423	5,403	4,912	22,972	0	326,349	4,449	51,359	39,730	230,811	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	92,939	1,700	34,379	11,217	45,391	252	776,066	18,042	351,713	49,374	354,963	1,974
FFS part year, with Rx claims	37,876	1	833	12,739	24,301	2	375,106	12	9,579	113,337	252,155	23
FFS part year, no Rx claims	85,074	0	266	15,448	69,359	1	820,916	0	2,790	129,762	688,356	8
MC all year, with Rx claims	33	0	0	1	32	0	334	0	0	12	322	0
MC all year, no Rx claims	70,608	0	7	11,920	58,681	0	549,685	0	77	77,072	472,536	0

Source: Data for this table are from the MAX 2007 file for Kansas, released by CMS in 3/2010. This table was produced on 10/06/2010.

- a. Table A.1 includes the beneficiaries represented by Cell J 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.
- 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.2
MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS^a
NONDUAL BENEFICIARIES, KANSAS, 2007

	Beneficiaries and Benefit Months in Cell J of Table 1		Included in Cell K of Table 1		Excluded from Cell K 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	286,530	2,522,107	215,889	1,123,993	0	1,398,114
Fee-for-service (FFS) all year	92,939	776,066	92,939	776,066	0	0
FFS part year, with Rx claims	37,876	375,106	37,876	124,723	0	250,383
FFS part year, with no Rx claims	85,074	820,916	85,074	223,204	0	597,712
Managed care (MC) all year, with Rx claims	33	334	0	0	0	334
MC all year, with no Rx claims	70,608	549,685	0	0	0	549,685

Source: Data for this table are from the MAX 2007 file for Kansas, released by CMS in 3/2010. 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 & Medicaid Services; FFS = fee-for-service pharmacy benefit; MAX = Medicaid Analytic Extract; MC = managed care; Rx = pharmacy benefit.

Nondual Medicaid Beneficiaries