

# STATISTICAL COMPENDIUM: MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2004 KANSAS

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TABLE ND.2  
CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY<sup>a, b</sup>  
NONDUAL BENEFICIARIES, KANSAS, 2004

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown
<b>All</b>	<b>239,108</b>	<b>1,180</b>	<b>30,999</b>	<b>48,915</b>	<b>157,900</b>	<b>114</b>	<b>1,769,660</b>	<b>11,826</b>	<b>320,991</b>	<b>274,341</b>	<b>1,161,617</b>	<b>885</b>
<b>Age</b>												
5 and younger	74,217	0	1,613	0	72,604	0	523,250	0	15,972	0	507,278	0
6-14	67,377	0	5,512	0	61,865	0	536,517	0	57,812	0	478,705	0
15-20	34,562	0	3,820	7,375	23,367	0	258,872	0	40,368	43,250	175,254	0
21-44	48,536	0	9,345	39,105	64	22	315,853	0	99,058	216,264	380	151
45-64	13,210	1	10,686	2,431	0	92	123,126	6	107,589	14,797	0	734
65-74	795	768	23	4	0	0	8,259	8,037	192	30	0	0
75-84	272	272	0	0	0	0	2,537	2,537	0	0	0	0
85 and older	139	139	0	0	0	0	1,246	1,246	0	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
<b>Gender</b>												
Female	134,376	799	15,660	40,257	77,546	114	971,588	8,052	163,933	228,015	570,703	885
Male	104,720	381	15,339	8,658	80,342	0	798,055	3,774	157,058	46,326	590,897	0
Unknown	12	0	0	0	12	0	17	0	0	0	17	0
<b>Race</b>												
White	145,095	494	22,196	32,927	89,394	84	1,075,470	4,895	228,957	182,821	658,143	654
African American	38,605	147	5,644	8,035	24,769	10	293,452	1,620	59,673	47,140	184,955	64
Other/unknown	55,408	539	3,159	7,953	43,737	20	400,738	5,311	32,361	44,380	318,519	167
<b>Use of Nursing Facilities<sup>c</sup></b>												
Entire year	413	134	279	0	0	0	4,195	1,296	2,899	0	0	0
Part year	416	47	366	1	0	2	4,124	450	3,653	11	0	10
None	238,279	999	30,354	48,914	157,900	112	1,761,341	10,080	314,439	274,330	1,161,617	875
<b>Maintenance Assistance Status</b>												
Cash	97,972	725	25,714	30,221	41,312	0	764,941	8,050	274,707	179,896	302,288	0
Medically needy	2,957	244	1,690	420	603	0	19,667	1,963	12,113	2,055	3,536	0
Poverty-related	109,787	3	26	13,026	96,618	114	732,877	10	141	58,774	673,067	885
Other/unknown	28,392	208	3,569	5,248	19,367	0	252,175	1,803	34,030	33,616	182,726	0
<b>Managed Care (MC) Status</b>												
Fee-for-service (FFS) all year	188,016	1,179	30,462	35,253	121,008	114	1,624,628	11,822	317,782	237,409	1,056,730	885
FFS part year, with Rx claims	16,857	0	392	5,915	10,550	0	63,397	0	2,545	19,032	41,820	0
FFS part year, no Rx claims	34,235	1	145	7,747	26,342	0	81,635	4	664	17,900	63,067	0

Source: Data for this table are from the MAX 2004 file for Kansas, released by CMS in 02/2008. This table was produced on 03/25/2008.

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<sup>a, b</sup>  
NONDUAL BENEFICIARIES, KANSAS, 2004

Beneficiary Characteristics	Percentage with at Least One Rx	Mean Number of Rx	Mean Rx \$	\$ per Rx	Mean \$, All Medicaid FFS \$ <sup>c</sup>	Rx \$ as a Percentage of All Medicaid FFS \$ <sup>d</sup>	Number of Beneficiaries
<b>All</b>	<b>55.7 %</b>	<b>7.0</b>	<b>\$476</b>	<b>\$68</b>	<b>\$3,785</b>	<b>12.6 %</b>	<b>239,108</b>
<b>Age</b>							
5 and younger	51.2	2.6	120	46	1,822	6.6	74,217
6-14	50.6	4.6	348	75	2,776	12.5	67,377
15-20	57.6	6.4	491	77	4,484	11.0	34,562
21-44	60.9	8.8	625	71	5,144	12.1	48,536
45-64	79.3	36.4	2,410	66	12,384	19.5	13,210
65-74	82.8	37.4	2,037	55	11,882	17.1	795
75-84	77.6	30.0	1,498	50	9,394	15.9	272
85 and older	81.3	40.5	1,678	41	17,446	9.6	139
Unknown	0.0	0.0	0	0	0	0.0	0
<b>Basis of Eligibility<sup>e</sup></b>							
Aged	81.1	35.7	1,855	52	11,937	15.5	1,180
Disabled	80.3	28.5	2,226	78	14,890	14.9	30,999
Adults	56.8	4.6	209	45	2,357	8.9	48,915
Children	50.3	3.3	204	61	1,980	10.3	157,900
Unknown	71.9	18.1	1,044	58	11,360	9.2	114
<b>Gender</b>							
Female	57.8	7.6	463	61	3,510	13.2	134,376
Male	52.9	6.3	492	78	4,137	11.9	104,720
Unknown	0.0	0.0	0	0	87	0.0	12
<b>Race</b>							
White	59.9	8.6	606	70	4,419	13.7	145,095
African American	49.9	5.6	364	64	3,590	10.1	38,605
Other/unknown	48.6	3.7	211	57	2,260	9.3	55,408
<b>Use of Nursing Facilities<sup>f</sup></b>							
Entire year	97.8	85.4	5,681	67	41,532	13.7	413
Part year	98.3	72.3	4,622	64	53,081	8.7	416
None	55.5	6.8	459	68	3,633	12.6	238,279
<b>Maintenance Assistance Status</b>							
Cash	59.1	10.8	755	70	5,134	14.7	97,972
Medically needy	55.0	12.5	1,056	85	9,712	10.9	2,957
Poverty related	49.5	2.6	119	47	1,610	7.4	109,787
Other/unknown	67.3	10.8	830	77	6,921	12.0	28,392

Source: Data for this table are from the MAX 2004 file for Kansas, released by CMS in 02/2008. This table was produced on 03/25/2008.

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

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

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

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

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

TABLE ND.4  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT *PER BENEFIT MONTH*, BY BENEFICIARY CHARACTERISTIC<sup>a, b</sup>  
 NONDUAL BENEFICIARIES, KANSAS, 2004

Beneficiary Characteristics	Mean Number of Rx	Mean Rx \$	Rx \$ as a Percentage of All Medicaid FFS \$ <sup>c</sup>	Number of Rx, Percentage with:						Mean \$, All Medicaid FFS \$ <sup>d</sup>	Number	
				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		Beneficiaries	Benefit Months
<b>All</b>	<b>0.9</b>	<b>\$64</b>	<b>12.6 %</b>	<b>44.3 %</b>	<b>41.5 %</b>	<b>6.0 %</b>	<b>5.6 %</b>	<b>2.1 %</b>	<b>0.5 %</b>	<b>\$511</b>	<b>239,108</b>	<b>1,769,660</b>
<b>Age</b>												
5 and younger	0.4	17	6.6	48.8	46.7	3.2	1.2	0.1	0.0	258	74,217	523,250
6-14	0.6	44	12.5	49.4	40.8	4.9	4.2	0.7	0.0	349	67,377	536,517
15-20	0.9	66	11.0	42.4	42.8	7.3	6.0	1.4	0.1	599	34,562	258,872
21-44	1.4	96	12.1	39.1	39.4	9.3	8.6	3.0	0.5	791	48,536	315,853
45-64	3.9	259	19.5	20.7	21.0	11.7	23.0	17.5	6.1	1,329	13,210	123,126
65-74	3.6	196	17.1	17.2	20.4	15.7	23.9	17.1	5.7	1,144	795	8,259
75-84	3.2	161	15.9	22.4	27.6	9.9	19.5	15.8	4.8	1,007	272	2,537
85 and older	4.5	187	9.6	18.7	12.9	10.1	20.1	29.5	8.6	1,946	139	1,246
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<b>Basis of Eligibility<sup>e</sup></b>												
Aged	3.6	185	15.5	18.9	21.2	14.0	22.4	18.1	5.5	1,191	1,180	11,826
Disabled	2.7	215	14.9	19.7	30.7	12.9	21.5	11.8	3.4	1,438	30,999	320,991
Adults	0.8	37	8.9	43.2	41.9	8.2	5.4	1.1	0.1	420	48,915	274,341
Children	0.5	28	10.3	49.7	43.6	3.9	2.4	0.4	0.0	269	157,900	1,161,617
Unknown	2.3	135	9.2	28.1	34.2	9.6	21.1	6.1	0.9	1,463	114	885
<b>Gender</b>												
Female	1.0	64	13.2	42.2	42.8	6.3	5.6	2.4	0.7	486	134,376	971,588
Male	0.8	65	11.9	47.1	39.7	5.7	5.5	1.7	0.3	543	104,720	798,055
Unknown	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	0.0	61	12	17
<b>Race</b>												
White	1.2	82	13.7	40.1	42.2	7.2	7.0	2.8	0.7	596	145,095	1,075,470
African American	0.7	48	10.1	50.1	38.8	5.0	4.4	1.6	0.3	472	38,605	293,452
Other/unknown	0.5	29	9.3	51.4	41.4	3.8	2.7	0.6	0.1	313	55,408	400,738
<b>Use of Nursing Facilities<sup>f</sup></b>												
Entire year	8.4	559	13.7	2.2	3.1	3.6	18.6	44.6	27.8	4,089	413	4,195
Part year	7.3	466	8.7	1.7	8.4	9.6	24.0	34.4	21.9	5,355	416	4,124
None	0.9	62	12.6	44.5	41.6	6.0	5.5	2.0	0.4	492	238,279	1,761,341
<b>Maintenance Assistance Status</b>												
Cash	1.4	97	14.7	40.9	38.6	7.3	8.3	3.9	1.0	658	97,972	764,941
Medically needy	1.9	159	10.9	45.0	24.6	10.3	13.0	6.1	1.0	1,460	2,957	19,667
Poverty related	0.4	18	7.4	50.5	43.9	3.9	1.7	0.1	0.0	241	109,787	732,877
Other/unknown	1.2	94	12.0	32.7	43.8	9.5	10.4	3.2	0.5	779	28,392	252,175

Source: Data for this table are from the MAX 2004 file for Kansas, released by CMS in 02/2008. This table was produced on 03/25/2008.

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

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

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

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

Bene(s) = beneficiary (or beneficiaries); 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<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, KANSAS, 2004

Beneficiary 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
<b>All</b>	<b>0.9</b>	<b>\$64</b>	<b>\$68</b>	<b>0.4</b>	<b>\$52</b>	<b>\$124</b>	<b>0.0</b>	<b>\$3</b>	<b>\$68</b>	<b>0.5</b>	<b>\$10</b>	<b>\$20</b>
<b>Age</b>												
5 and younger	0.4	17	46	0.1	13	92	0.0	1	39	0.2	3	15
6-14	0.6	44	75	0.3	38	112	0.0	1	60	0.2	5	21
15-20	0.9	66	77	0.4	55	128	0.0	2	60	0.4	8	21
21-44	1.4	96	71	0.5	76	146	0.1	6	77	0.8	15	19
45-64	3.9	259	66	1.5	198	128	0.2	15	85	2.2	45	21
65-74	3.6	196	55	1.5	154	101	0.2	8	52	1.9	34	18
75-84	3.2	161	50	1.4	126	90	0.2	8	51	1.7	27	16
85 and older	4.5	187	41	1.6	136	83	0.3	12	35	2.5	39	15
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
<b>Basis of Eligibility<sup>d</sup></b>												
Aged	3.6	185	52	1.5	145	97	0.2	8	48	1.9	32	17
Disabled	2.7	215	78	1.2	173	142	0.1	11	84	1.4	30	22
Adults	0.8	37	45	0.3	27	104	0.0	2	51	0.5	8	15
Children	0.5	28	61	0.2	23	103	0.0	1	48	0.2	4	18
Unknown	2.3	135	58	0.7	101	137	0.1	5	38	1.5	29	20
<b>Gender</b>												
Female	1.0	64	61	0.4	50	118	0.1	4	65	0.6	11	19
Male	0.8	65	78	0.4	54	131	0.0	3	73	0.4	8	22
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
<b>Race</b>												
White	1.2	82	70	0.5	66	126	0.1	4	71	0.6	12	20
African American	0.7	48	64	0.3	39	124	0.0	2	65	0.4	7	18
Other/unknown	0.5	29	57	0.2	23	107	0.0	1	51	0.3	5	17
<b>Use of Nursing Facilities<sup>e</sup></b>												
Entire year	8.4	559	67	3.2	426	133	0.5	34	64	4.6	99	21
Part year	7.3	466	64	2.6	352	135	0.4	27	70	4.3	86	20
None	0.9	62	68	0.4	50	123	0.0	3	68	0.5	9	20
<b>Maintenance Assistance Status</b>												
Cash	1.4	97	70	0.6	77	133	0.1	5	78	0.7	15	20
Medically needy	1.9	159	85	0.7	130	175	0.1	8	91	1.0	21	20
Poverty related	0.4	18	47	0.2	14	87	0.0	1	43	0.2	3	16
Other/unknown	1.2	94	77	0.7	80	119	0.1	3	57	0.5	10	21

Source: Data for this table are from the MAX 2004 file for Kansas, released by CMS in 02/2008. This table was produced on 03/25/2008.

- 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, 0.4 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 combined. For information about this classification method, see Wolters Kluwer Health, <http://www.medispn.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).
- 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<sup>a, b, c, d</sup>  
 NONDUAL BENEFICIARIES, KANSAS, 2004

Therapeutic Category	Number of Rx per Benefit Month Among Users					\$ per Benefit Month Among Users					\$ per Rx				Users <sup>e</sup>		
	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	As a Percentage of All Benes	Number of Benefit Months
Anti-infective Agents	0.3	0.1	0.0	0.2	\$12	\$8	\$1	\$3	\$46	\$88	\$66	\$20	213,193	\$9,793,173	87,110	36.4 %	839,566
Biologicals	0.4	0.4	0.0	0.0	512	458	7	47	1154	1,122	2,147	1,453	1,566	1,807,019	394	0.2	3,527
Antineoplastic Agents	0.5	0.2	0.0	0.3	131	112	2	17	265	701	122	53	3,292	871,336	649	0.3	6,641
Endocrine/Metabolic Drugs	0.5	0.2	0.1	0.2	25	20	2	4	51	104	26	16	145,791	7,493,202	30,286	12.7	296,490
Cardiovascular Agents	1.1	0.4	0.0	0.7	37	27	1	9	34	73	38	13	181,487	6,129,858	16,022	6.7	164,501
Respiratory Agents	0.4	0.2	0.0	0.2	21	18	0	3	55	83	31	18	190,056	10,412,004	49,594	20.7	487,580
Gastrointestinal Agents	0.5	0.3	0.0	0.2	45	40	2	3	93	144	71	16	82,102	7,609,751	16,968	7.1	169,291
Genitourinary Agents	0.3	0.1	0.0	0.1	14	11	1	2	53	80	41	20	19,590	1,031,481	7,602	3.2	72,075
CNS Drugs	0.9	0.6	0.0	0.3	106	93	3	9	114	165	82	29	279,581	32,006,047	30,405	12.7	301,959
Stimulants/Anti-obesity/Anorexia	0.8	0.6	0.0	0.1	62	57	0	5	82	91	41	37	88,186	7,192,430	11,534	4.8	116,683
Miscellaneous Psychological/																	
Neurological Agents	0.4	0.3	0.0	0.1	123	117	1	5	322	388	101	77	3,279	1,054,430	829	0.3	8,548
Analgesics and Anesthetics	0.5	0.1	0.0	0.4	22	14	1	7	45	159	176	18	191,153	8,612,684	40,992	17.1	392,645
Neuromuscular Agents	0.8	0.4	0.1	0.3	68	50	10	8	87	143	121	22	134,765	11,702,055	16,737	7.0	172,237
Nutritional Products	0.3	0.0	0.0	0.3	5	1	0	4	15	17	15	14	33,152	484,450	11,094	4.6	95,429
Hematological Agents	0.6	0.2	0.0	0.4	110	103	1	5	185	489	47	14	17,421	3,225,138	2,939	1.2	29,413
Topical Products	0.2	0.1	0.0	0.1	8	5	0	3	39	72	46	21	84,764	3,324,625	42,232	17.7	421,753
Miscellaneous Products	0.5	0.1	0.0	0.3	89	58	13	18	186	432	258	62	4,327	803,521	882	0.4	9,050
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	8	0	0	0	33	0	0	0	4,495	146,678	1,804	0.8	18,981
<b>TOTAL NO. OF RX AND RX \$</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>1,678,200</b>	<b>113,699,882</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>

Source: Data for this table are from the MAX 2004 file for Kansas, released by CMS in 02/2008. This table was produced on 03/25/2008.

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.medispans.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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, 0.4 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.medispans.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

e. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 2004.

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<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, KANSAS, 2004

Top 10 Drug Groups	Total Medicaid Rx \$	Users			Among Users		
		Number of Users	As a Percentage of All Beneficiaries	Number of Benefit Months	Number of Rx per Benefit Month	\$ per Rx	Rx \$ per Benefit Month
ANTIPSYCHOTICS	\$22,051,028	17,465	7.3 %	187,880	0.6	\$201	\$117
ANTICONVULSANT	10,975,866	14,402	6.0	152,168	0.7	105	72
ANTIDEPRESSANTS	8,929,179	29,421	12.3	295,765	0.5	62	30
ANTIASTHMATIC	7,338,807	40,129	16.8	403,327	0.3	65	18
STIMULANTS/ANTI-OBESITY/ANOREXIANTS	7,192,516	14,040	5.9	144,532	0.6	82	50
ULCER DRUGS	5,392,903	14,851	6.2	151,941	0.4	90	35
ANALGESICS - Narcotic	5,085,623	42,975	18.0	418,442	0.3	40	12
ANTIDIABETIC	3,193,607	7,819	3.3	81,596	0.6	61	39
MISC. ENDOCRINE	2,689,802	1,990	0.8	21,945	0.5	252	123
ANTIVIRAL	2,541,606	2,447	1.0	24,521	0.3	367	104
<b>Total</b>	<b>75,390,937</b>	<b>185,539</b>		<b>1,882,117</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>

Source: Data for this table are from the MAX 2004 file for Kansas, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004. 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 2004. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispans.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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.

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<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, KANSAS, 2004

Beneficiary Characteristics	All Top 10 Drug Groups		ANTIPSYCHOTICS					ANTICONVULSANT				
	Number of Rx	Rx \$	Number of Users	Users as % of All Benes	Number of Months Among Users	Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Months Among Users	Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
<b>All</b>	<b>816,391</b>	<b>\$75,390,937</b>	<b>17,465</b>	<b>7.3 %</b>	<b>187,880</b>	<b>0.6</b>	<b>\$117</b>	<b>14,402</b>	<b>6.0 %</b>	<b>152,168</b>	<b>0.7</b>	<b>\$72</b>
<b>Female</b>	461,757	39,037,123	8,324	6.2	89,077	0.6	110	8,292	6.2	86,635	0.7	69
<b>Disabled</b>	277,627	26,223,702	4,949	31.6	55,215	0.6	127	5,415	34.6	60,255	0.7	76
5 and younger	2,495	225,702	23	3.6	252	0.5	67	92	14.6	977	0.8	78
6-14	15,754	1,717,063	408	23.4	4,435	0.6	95	474	27.2	5,306	0.8	103
15-20	16,076	1,779,266	478	31.9	5,264	0.6	103	471	31.4	5,265	0.8	100
21-44	89,198	9,119,789	2,005	38.4	22,625	0.6	130	2,164	41.5	24,354	0.7	78
45-64	153,736	13,354,026	2,030	31.0	22,579	0.6	138	2,207	33.7	24,296	0.7	63
65-74	368	27,856	5	31.3	60	1.0	133	7	43.8	57	0.8	35
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
<b>Other Eligibles</b>	184,130	12,813,421	3,375	2.8	33,862	0.5	81	2,877	2.4	26,380	0.5	52
5 and younger	13,118	814,346	59	0.2	593	0.5	90	100	0.3	925	0.5	34
6-14	43,373	3,790,726	957	3.1	10,467	0.5	97	521	1.7	5,453	0.7	76
15-20	38,636	3,040,798	1,148	6.4	12,114	0.5	85	638	3.6	6,465	0.6	68
21-44	69,390	3,826,781	996	3.1	8,542	0.3	50	1,364	4.2	11,089	0.4	33
45-64	7,967	552,531	85	5.4	687	0.4	83	138	8.8	1,157	0.5	42
65-74	8,428	603,200	90	17.0	1,047	0.8	131	81	15.3	919	0.9	59
75-84	1,820	109,548	21	12.4	210	0.7	91	22	13.0	225	0.7	47
85 and older	1,398	75,491	19	18.4	202	0.8	68	13	12.6	147	0.9	52
<b>Male</b>	354,634	36,353,814	9,141	8.7	98,803	0.6	124	6,110	5.8	65,533	0.7	77
<b>Disabled</b>	195,344	21,908,413	5,149	33.6	57,088	0.6	140	4,123	26.9	45,770	0.8	84
5 and younger	3,948	326,727	64	6.5	704	0.5	75	138	14.1	1,466	0.6	58
6-14	45,738	4,840,198	1,477	39.2	16,398	0.6	107	930	24.7	10,462	0.8	86
15-20	28,084	3,605,086	947	40.8	10,651	0.7	131	655	28.2	7,411	0.8	105
21-44	54,230	6,957,380	1,674	40.6	18,480	0.7	167	1,431	34.7	15,916	0.9	95
45-64	63,175	6,167,513	987	23.9	10,855	0.7	156	967	23.4	10,491	0.7	55
65-74	169	11,509	0	0.0	0	0.0	0	2	28.6	24	1.0	37
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
<b>Other Eligibles</b>	159,290	14,445,401	3,992	4.5	41,715	0.6	103	1,987	2.2	19,763	0.6	60
5 and younger	20,204	1,383,533	118	0.3	1,228	0.4	81	139	0.4	1,341	0.5	44
6-14	81,519	7,912,611	2,179	6.9	23,722	0.6	108	879	2.8	9,363	0.6	64
15-20	38,617	3,789,643	1,420	11.0	14,380	0.6	100	611	4.7	6,137	0.6	69
21-44	10,828	675,297	178	2.7	1,414	0.3	63	248	3.7	1,875	0.4	30
45-64	4,189	355,949	35	3.7	299	0.4	85	73	7.6	624	0.5	39
65-74	2,654	232,860	39	16.1	432	0.9	151	25	10.3	294	0.8	66
75-84	786	60,285	9	8.7	98	0.7	100	8	7.8	85	0.8	40
85 and older	493	35,223	14	38.9	142	0.6	79	4	11.1	44	0.6	19
<b>Unknown</b>	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 2004 file for Kansas, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004. 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 2004. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispn.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, KANSAS, 2004

Beneficiary Characteristics	ANTIDEPRESSANTS					ANTIASTHMATIC					STIMULANTS/ANTI-OBESITY/ANOREXIANTS				
	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	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
<b>All</b>	<b>29,421</b>	<b>12.3 %</b>	<b>295,765</b>	<b>0.5</b>	<b>\$30</b>	<b>40,129</b>	<b>16.8 %</b>	<b>403,327</b>	<b>0.3</b>	<b>\$18</b>	<b>14,040</b>	<b>5.9 %</b>	<b>144,532</b>	<b>0.6</b>	<b>\$50</b>
<b>Female</b>	19,754	14.7	195,499	0.5	30	21,317	15.9	214,800	0.3	18	4,030	3.0	41,369	0.6	45
<b>Disabled</b>	9,033	57.7	100,401	0.5	35	6,547	41.8	73,909	0.4	25	1,053	6.7	11,797	0.6	48
5 and younger	16	2.5	185	0.4	8	264	41.8	2,928	0.3	21	23	3.6	249	0.4	28
6-14	365	21.0	4,018	0.5	23	494	28.4	5,678	0.3	27	502	28.9	5,609	0.6	50
15-20	624	41.7	6,776	0.5	33	378	25.2	4,337	0.3	18	229	15.3	2,498	0.6	47
21-44	3,378	64.7	37,723	0.5	35	1,915	36.7	21,716	0.3	20	162	3.1	1,889	0.5	48
45-64	4,641	70.8	51,606	0.6	37	3,488	53.2	39,212	0.4	29	137	2.1	1,552	0.5	46
65-74	9	56.3	93	1.0	36	8	50.0	38	0.6	42	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
<b>Other Eligibles</b>	10,721	9.0	95,098	0.4	25	14,770	12.4	140,891	0.2	14	2,977	2.5	29,572	0.5	44
5 and younger	48	0.1	463	0.3	9	4,889	13.8	47,793	0.2	13	142	0.4	1,475	0.3	25
6-14	1,360	4.5	14,171	0.5	25	4,206	13.8	41,935	0.2	16	1,963	6.4	19,816	0.6	46
15-20	2,597	14.5	25,024	0.4	26	2,282	12.8	22,246	0.2	14	587	3.3	5,948	0.5	45
21-44	5,935	18.3	48,395	0.3	23	2,944	9.1	24,509	0.2	12	264	0.8	2,185	0.4	37
45-64	532	33.9	4,318	0.4	28	235	15.0	1,993	0.3	21	19	1.2	131	0.3	30
65-74	173	32.6	1,962	0.6	29	169	31.9	1,971	0.5	29	1	0.2	12	1.0	25
75-84	44	26.0	432	0.7	31	35	20.7	338	0.5	26	0	0.0	0	0.0	0
85 and older	32	31.1	333	0.9	46	10	9.7	106	0.3	26	1	1.0	5	0.8	116
<b>Male</b>	9,667	9.2	100,266	0.5	30	18,812	18.0	188,527	0.3	19	10,010	9.6	103,163	0.6	52
<b>Disabled</b>	4,980	32.5	54,476	0.6	34	4,175	27.2	46,243	0.4	26	2,975	19.4	32,679	0.7	55
5 and younger	27	2.7	301	0.3	14	490	49.9	5,358	0.3	21	84	8.6	833	0.5	31
6-14	983	26.1	10,773	0.5	26	1,148	30.4	12,803	0.3	21	2,004	53.1	21,895	0.7	55
15-20	790	34.0	8,759	0.6	34	424	18.3	4,902	0.3	25	697	30.0	7,817	0.7	57
21-44	1,539	37.3	16,971	0.6	38	659	16.0	7,558	0.3	22	139	3.4	1,574	0.7	51
45-64	1,638	39.7	17,644	0.6	35	1,446	35.0	15,548	0.5	35	51	1.2	560	0.5	40
65-74	3	42.9	28	0.8	39	8	114.3	74	0.6	54	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
<b>Other Eligibles</b>	4,687	5.2	45,790	0.5	27	14,637	16.4	142,284	0.2	16	7,035	7.9	70,484	0.6	50
5 and younger	75	0.2	775	0.3	8	7,021	18.9	68,144	0.2	14	363	1.0	3,656	0.4	30
6-14	1,880	6.0	19,694	0.5	26	5,336	17.0	52,237	0.3	18	5,212	16.6	52,412	0.6	51
15-20	1,773	13.8	17,417	0.5	29	1,755	13.6	17,391	0.3	17	1,394	10.8	13,935	0.6	53
21-44	672	10.0	5,192	0.3	21	331	4.9	2,626	0.3	11	55	0.8	395	0.4	38
45-64	194	20.3	1,686	0.4	28	82	8.6	625	0.4	26	10	1.0	74	0.5	52
65-74	61	25.2	685	0.5	31	78	32.2	907	0.6	42	0	0.0	0	0.0	0
75-84	14	13.6	164	0.7	33	18	17.5	209	0.3	32	0	0.0	0	0.0	0
85 and older	18	50.0	177	0.6	43	16	44.4	145	0.3	25	1	2.8	12	0.8	97
<b>Unknown</b>	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 2004 file for Kansas, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004. 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 2004. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispain.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, KANSAS, 2004

Beneficiary Characteristics	ULCER DRUGS					ANALGESICS - Narcotic					ANTIDIABETIC				
	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	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
<b>All</b>	<b>14,851</b>	<b>6.2 %</b>	<b>151,941</b>	<b>0.4</b>	<b>\$36</b>	<b>42,975</b>	<b>18.0 %</b>	<b>418,442</b>	<b>0.3</b>	<b>\$12</b>	<b>7,819</b>	<b>3.3 %</b>	<b>81,596</b>	<b>0.6</b>	<b>\$39</b>
<b>Female</b>	9,988	7.4	102,443	0.4	36	31,650	23.6	303,438	0.3	11	5,472	4.1	57,107	0.6	39
<b>Disabled</b>	4,974	31.8	56,438	0.5	49	9,868	63.0	111,767	0.4	24	3,777	24.1	42,434	0.7	42
5 and younger	91	14.4	1,015	0.4	26	55	8.7	609	0.1	2	0	0.0	0	0.0	0
6-14	122	7.0	1,419	0.4	35	146	8.4	1,681	0.1	2	24	1.4	259	0.6	27
15-20	209	14.0	2,357	0.3	33	433	28.9	4,893	0.2	9	64	4.3	744	0.6	31
21-44	1,517	29.1	17,244	0.4	43	3,852	73.8	43,873	0.4	19	844	16.2	9,588	0.6	38
45-64	3,030	46.2	34,349	0.5	54	5,371	81.9	60,623	0.5	29	2,836	43.3	31,737	0.7	43
65-74	5	31.3	54	0.8	91	11	68.8	88	0.4	27	9	56.3	106	0.7	52
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
<b>Other Eligibles</b>	5,014	4.2	46,005	0.3	21	21,782	18.3	191,671	0.2	4	1,695	1.4	14,673	0.6	31
5 and younger	754	2.1	6,555	0.2	10	807	2.3	8,483	0.1	1	12	0.0	86	0.5	39
6-14	589	1.9	6,071	0.2	13	1,650	5.4	17,042	0.1	1	127	0.4	1,193	0.7	47
15-20	1,007	5.6	9,759	0.2	18	4,440	24.9	41,233	0.2	1	191	1.1	1,737	0.5	29
21-44	2,106	6.5	18,145	0.3	22	13,782	42.4	114,691	0.3	5	809	2.5	6,209	0.5	26
45-64	250	15.9	2,159	0.4	42	729	46.5	6,218	0.4	16	244	15.6	2,024	0.6	30
65-74	212	40.0	2,373	0.6	54	259	48.9	2,865	0.3	10	244	46.0	2,689	0.7	38
75-84	61	36.1	607	0.5	37	67	39.6	698	0.4	9	43	25.4	458	0.6	33
85 and older	35	34.0	336	0.7	48	48	46.6	441	0.6	19	25	24.3	277	0.7	24
<b>Male</b>	4,863	4.6	49,498	0.4	34	11,325	10.8	115,004	0.3	14	2,347	2.2	24,489	0.7	40
<b>Disabled</b>	2,380	15.5	26,636	0.5	45	4,682	30.5	51,966	0.4	25	1,730	11.3	18,864	0.7	40
5 and younger	112	11.4	1,192	0.4	27	80	8.1	922	0.1	2	5	0.5	58	0.5	16
6-14	205	5.4	2,358	0.4	33	375	9.9	4,404	0.1	2	51	1.4	590	0.6	38
15-20	194	8.4	2,218	0.4	34	434	18.7	4,880	0.2	3	35	1.5	403	0.6	39
21-44	720	17.5	8,124	0.5	43	1,489	36.1	16,498	0.4	21	376	9.1	4,161	0.6	37
45-64	1,145	27.7	12,710	0.5	52	2,301	55.7	25,236	0.5	37	1,257	30.4	13,580	0.7	41
65-74	4	57.1	34	0.8	109	3	42.9	26	0.3	4	6	85.7	72	0.5	24
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
<b>Other Eligibles</b>	2,483	2.8	22,862	0.3	21	6,643	7.4	63,038	0.2	6	617	0.7	5,625	0.7	39
5 and younger	980	2.6	8,476	0.2	10	1,110	3.0	11,557	0.1	1	22	0.1	220	0.5	33
6-14	462	1.5	4,896	0.2	15	1,613	5.1	16,896	0.1	1	121	0.4	1,193	0.7	48
15-20	421	3.3	4,118	0.3	22	1,625	12.6	15,809	0.2	2	103	0.8	963	0.8	49
21-44	401	6.0	3,232	0.3	33	1,772	26.4	14,078	0.4	13	153	2.3	1,153	0.6	35
45-64	119	12.4	1,038	0.4	48	397	41.5	3,319	0.5	34	111	11.6	953	0.5	27
65-74	58	24.0	660	0.5	55	79	32.6	887	0.3	11	69	28.5	745	0.7	40
75-84	27	26.2	306	0.5	57	31	30.1	335	0.3	19	33	32.0	350	0.6	26
85 and older	15	41.7	136	0.6	43	16	44.4	157	0.6	16	5	13.9	48	0.8	29
<b>Unknown</b>	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 2004 file for Kansas, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004. 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 2004. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispain.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, KANSAS, 2004

Beneficiary Characteristics	MISC. ENDOCRINE					ANTIVIRAL					Number of Beneficiaries	Number of Benefit Months
	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		
<b>All</b>	<b>1,990</b>	<b>0.8 %</b>	<b>21,945</b>	<b>0.5</b>	<b>\$123</b>	<b>2,447</b>	<b>1.0 %</b>	<b>24,521</b>	<b>0.3</b>	<b>\$104</b>	<b>239,108</b>	<b>1,769,660</b>
<b>Female</b>	1,132	0.8	12,538	0.5	85	1,607	1.2	15,860	0.3	80	134,376	971,588
<b>Disabled</b>	687	4.4	7,877	0.5	85	485	3.1	5,423	0.3	148	15,660	163,933
5 and younger	15	2.4	158	0.5	218	5	0.8	60	0.1	2	631	6,273
6-14	64	3.7	735	0.4	206	22	1.3	241	0.2	52	1,740	18,343
15-20	31	2.1	357	0.7	418	25	1.7	282	0.2	12	1,498	15,669
21-44	102	2.0	1,145	0.5	52	211	4.0	2,329	0.4	190	5,220	55,914
45-64	475	7.2	5,482	0.5	50	221	3.4	2,508	0.3	136	6,555	67,591
65-74	0	0.0	0	0.0	0	1	6.3	3	0.3	40	16	143
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
<b>Other Eligibles</b>	445	0.4	4,661	0.5	85	1,122	0.9	10,437	0.2	45	118,716	807,655
5 and younger	14	0.0	142	0.3	65	166	0.5	1,653	0.1	3	35,489	248,590
6-14	216	0.7	2,235	0.4	126	146	0.5	1,582	0.1	5	30,507	235,568
15-20	41	0.2	442	0.4	66	189	1.1	1,875	0.2	25	17,861	123,107
21-44	28	0.1	278	0.4	52	583	1.8	4,948	0.3	78	32,489	182,503
45-64	15	1.0	106	0.5	32	21	1.3	188	0.3	141	1,568	9,814
65-74	86	16.2	985	0.6	40	13	2.5	156	0.2	10	530	5,595
75-84	33	19.5	337	0.6	39	3	1.8	27	0.6	9	169	1,564
85 and older	12	11.7	136	0.5	32	1	1.0	8	0.1	2	103	914
<b>Male</b>	858	0.8	9,407	0.5	173	840	0.8	8,661	0.3	147	104,720	798,055
<b>Disabled</b>	348	2.3	3,999	0.5	226	415	2.7	4,423	0.5	252	15,339	157,058
5 and younger	13	1.3	155	0.4	84	5	0.5	54	0.1	3	982	9,699
6-14	169	4.5	1,921	0.5	166	34	0.9	388	0.1	7	3,772	39,469
15-20	74	3.2	853	0.5	527	17	0.7	182	0.2	20	2,322	24,699
21-44	45	1.1	535	0.6	145	209	5.1	2,146	0.6	264	4,125	43,144
45-64	47	1.1	535	0.6	87	150	3.6	1,653	0.6	327	4,131	39,998
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	7	49
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
<b>Other Eligibles</b>	510	0.6	5,408	0.4	133	425	0.5	4,238	0.2	37	89,381	640,997
5 and younger	23	0.1	220	0.4	134	164	0.4	1,685	0.1	6	37,103	258,671
6-14	384	1.2	4,075	0.4	112	142	0.5	1,524	0.2	22	31,358	243,137
15-20	88	0.7	951	0.5	235	60	0.5	544	0.1	6	12,881	95,397
21-44	1	0.0	12	0.1	7	44	0.7	349	0.2	141	6,702	34,292
45-64	6	0.6	54	0.4	71	11	1.2	88	0.5	544	956	5,723
65-74	3	1.2	36	0.5	36	3	1.2	36	0.4	331	242	2,472
75-84	3	2.9	36	0.9	64	0	0.0	0	0.0	0	103	973
85 and older	2	5.6	24	0.5	36	1	2.8	12	0.1	14	36	332
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	12	17

Source: Data for this table are from the MAX 2004 file for Kansas, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004. 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 2004. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispn.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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<sup>a, b</sup>  
 NONDUAL BENEFICIARIES, KANSAS, 2004

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
<b>All</b>	<b>\$559</b>	<b>8.4</b>	<b>413</b>	<b>4,195</b>
<b>Age</b>				
0-64	657	9.0	276	2,863
65-74	472	8.4	44	494
75-84	347	7.7	32	274
85 and older	244	6.0	61	564
Unknown	0	0.0	0	0
<b>Gender</b>				
Female	548	8.5	265	2,714
Male	580	8.1	148	1,481
Unknown	0	0.0	0	0
<b>Race</b>				
White	550	8.3	331	3,377
African American	522	8.6	49	491
Other/unknown	716	9.5	33	327
<b>Basis of Eligibility<sup>c</sup></b>				
Aged	343	7.1	134	1,296
Disabled	656	9.0	279	2,899
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 2004 file for Kansas, released by CMS in 02/2008. This table was produced on 03/25/2008.

a. Table ND.8 includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their 2004 Medicaid enrollment. A total of 416 beneficiaries who were in nursing facilities for part of their enrollment and their 4,124 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<sup>a, b, c, d, e</sup>  
 NONDUAL BENEFICIARIES, KANSAS, 2004

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				\$ per Rx				Users				
	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	As a Percentage of All-Year Nursing Facility Residents	Number of Benefit Months
Anti-infective Agents	0.5	0.2	0.0	0.3	\$38	\$26	\$2	\$9	\$73	\$154	\$65	\$30	1,560	\$114,309	290	70.2 %	3,037
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	0.4	0.3	0.0	0.2	71	56	0	15	159	222	0	78	62	9,866	13	3.1	138
Endocrine/Metabolic Drugs	1.3	0.6	0.1	0.6	64	55	2	8	48	92	14	12	2,833	135,093	197	47.7	2,107
Cardiovascular Agents	2.1	0.5	0.1	1.6	54	32	2	20	26	65	35	13	6,158	158,506	288	69.7	2,943
Respiratory Agents	0.8	0.4	0.0	0.4	40	31	0	8	50	86	43	19	1,288	63,922	155	37.5	1,610
Gastrointestinal Agents	1.2	0.5	0.1	0.6	81	69	2	10	67	130	32	15	2,930	195,934	240	58.1	2,428
Genitourinary Agents	0.7	0.4	0.1	0.2	45	36	5	4	67	85	72	22	804	54,032	116	28.1	1,201
CNS Drugs	2.2	1.3	0.1	0.8	252	211	9	32	114	163	69	40	7,567	859,600	323	78.2	3,407
Stimulants/Anti-obesity/Anorexia	1.0	0.2	0.0	0.8	43	27	0	16	45	133	0	21	82	3,663	8	1.9	85
Miscellaneous Psychological/																	
Neurological Agents	0.9	0.9	0.0	0.0	165	164	0	0	182	183	0	57	590	107,318	65	15.7	652
Analgesics and Anesthetics	1.3	0.4	0.0	0.8	65	47	4	14	50	115	86	17	3,208	161,248	240	58.1	2,486
Neuromuscular Agents	1.7	0.4	0.3	1.0	113	56	27	30	66	136	95	29	4,231	277,174	230	55.7	2,445
Nutritional Products	0.9	0.0	0.0	0.9	15	0	1	14	17	12	25	17	1,303	21,931	140	33.9	1,461
Hematological Agents	1.2	0.4	0.1	0.7	121	108	3	10	99	252	50	14	1,372	136,283	108	26.2	1,130
Topical Products	0.4	0.1	0.0	0.3	17	10	1	5	40	82	37	20	1,026	41,317	222	53.8	2,429
Miscellaneous Products	0.4	0.0	0.0	0.3	15	0	7	8	42	20	227	25	71	2,994	18	4.4	195
Unknown Therapeutic Category	0.5	0.0	0.0	0.0	9	0	0	0	19	0	0	0	169	3,215	31	7.5	362
<b>TOTAL NO. OF RX AND RX \$</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>35,254</b>	<b>2,346,405</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>

Source: Data for this table are from the MAX 2004 file for Kansas, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004. A total of 416 beneficiaries who were in nursing facilities for part of their enrollment and their 4,124 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 2004. 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.medispn.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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.medispn.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

In Kansas, 0.4 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 ND.10  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS,  
 BY TOP-10 DRUG GROUP<sup>a, b, c, d</sup>  
 NONDUAL BENEFICIARIES, KANSAS, 2004

Top 10 Drug Groups in Nursing Facilities	Total Medicaid Rx \$	Users			Among Users		
		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	\$631,930	320	77.5 %	3,513	1.0	\$182	\$180
ANTICONVULSANT	230,211	273	66.1	2,901	1.1	75	79
ANTIDEPRESSANTS	210,920	362	87.7	3,945	0.9	61	53
ULCER DRUGS	142,679	247	59.8	2,527	0.8	74	56
ANALGESICS - Narcotic	108,431	257	62.2	2,627	0.9	48	41
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	108,603	84	20.3	853	0.8	169	127
ANTIDIABETIC	88,954	165	40.0	1,763	1.0	52	50
HEMATOPOIETIC AGENTS	65,539	34	8.2	355	0.8	237	185
ANTIASTHMATIC	51,071	158	38.3	1,591	0.6	53	32
ANTIHYPERLIPIDEMIC	46,743	84	20.3	927	0.7	68	50
<b>Total</b>	<b>1,685,081</b>	<b>1,984</b>		<b>21,002</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>

Source: Data for this table are from the MAX 2004 file for Kansas, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004. A total of 416 beneficiaries who were in nursing facilities for part of their enrollment and their 4,124 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 2004. 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 2004 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispn.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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.



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<sup>a, b, c, d</sup>  
 NONDUAL BENEFICIARIES, KANSAS, 2004

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 \$
<b>All</b>	<b>18,449</b>	<b>\$1,685,081</b>	<b>320</b>	<b>77.5 %</b>	<b>3,513</b>	<b>1.0</b>	<b>\$180</b>	<b>273</b>	<b>66.1 %</b>	<b>2,901</b>	<b>1.1</b>	<b>\$79</b>
<b>Female</b>	12,007	1,101,555	201	75.8	2,231	1.0	187	174	65.7	1,792	1.1	79
<b>Disabled</b>	9,105	899,533	163	97.6	1,825	1.1	202	140	83.8	1,425	1.1	82
64 or younger	8,953	887,096	160	97.0	1,789	1.1	203	139	84.2	1,413	1.1	83
65-74	152	12,437	3	150.0	36	1.1	170	1	50.0	12	1.0	13
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
<b>Other Eligibles</b>	2,902	202,022	38	38.8	406	0.9	120	34	34.7	367	1.1	65
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	1,267	108,699	18	64.3	216	0.9	153	20	71.4	231	1.3	71
75-84	609	34,669	7	28.0	54	1.0	84	7	28.0	54	0.9	30
85 and older	1,026	58,654	13	28.9	136	0.9	83	7	15.6	82	0.9	69
<b>Male</b>	6,442	583,526	119	80.4	1,282	0.9	167	99	66.9	1,109	1.0	81
<b>Disabled</b>	5,215	501,887	98	87.5	1,054	0.9	181	88	78.6	979	1.0	79
64 or younger	5,191	500,995	98	88.3	1,054	0.9	181	86	77.5	955	1.0	80
65-74	24	892	0	0.0	0	0.0	0	2	200.0	24	1.0	37
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
<b>Other Eligibles</b>	1,227	81,639	21	58.3	228	0.8	101	11	30.6	130	1.1	93
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	656	48,764	10	76.9	114	1.1	121	7	53.8	84	1.2	129
75-84	206	10,510	4	57.1	38	0.5	80	2	28.6	22	0.6	25
85 and older	365	22,365	7	43.8	76	0.6	81	2	12.5	24	1.0	28
<b>Unknown</b>	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 2004 file for Kansas, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004. A total of 416 beneficiaries who were in nursing facilities for part of their enrollment and their 4,124 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 2004. 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 2004 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medspan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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.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<sup>a, b, c, d</sup>  
 NONDUAL BENEFICIARIES, KANSAS, 2004

Beneficiary Characteristics	ANTIDEPRESSANTS					ULCER DRUGS					ANALGESICS - Narcotic				
	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 \$
<b>All</b>	<b>362</b>	<b>87.7 %</b>	<b>3,945</b>	<b>0.9</b>	<b>\$54</b>	<b>247</b>	<b>59.8 %</b>	<b>2,527</b>	<b>0.8</b>	<b>\$57</b>	<b>257</b>	<b>62.2 %</b>	<b>2,627</b>	<b>0.9</b>	<b>\$41</b>
<b>Female</b>	223	84.2	2,445	0.9	54	159	60.0	1,621	0.8	58	161	60.8	1,664	0.8	27
<b>Disabled</b>	165	98.8	1,857	0.9	55	108	64.7	1,154	0.8	59	114	68.3	1,237	0.9	29
64 or younger	162	98.2	1,821	0.9	55	105	63.6	1,118	0.8	60	112	67.9	1,213	0.9	30
65-74	3	150.0	36	1.0	60	3	150.0	36	0.8	41	2	100.0	24	0.5	12
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
<b>Other Eligibles</b>	58	59.2	588	0.9	50	51	52.0	467	0.8	56	47	48.0	427	0.7	21
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	21	75.0	239	0.9	53	14	50.0	151	0.8	87	9	32.1	71	0.5	6
75-84	18	72.0	156	0.9	40	19	76.0	149	0.7	32	14	56.0	118	0.7	33
85 and older	19	42.2	193	1.0	55	18	40.0	167	0.8	48	24	53.3	238	0.8	19
<b>Male</b>	139	93.9	1,500	0.8	53	88	59.5	906	0.7	54	96	64.9	963	0.9	66
<b>Disabled</b>	110	98.2	1,192	0.8	56	68	60.7	711	0.8	55	72	64.3	731	1.0	83
64 or younger	110	99.1	1,192	0.8	56	68	61.3	711	0.8	55	72	64.9	731	1.0	83
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
<b>Other Eligibles</b>	29	80.6	308	0.8	42	20	55.6	195	0.7	47	24	66.7	232	0.5	13
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	12	92.3	132	0.9	47	4	30.8	48	1.0	101	4	30.8	42	0.6	11
75-84	6	85.7	69	0.8	39	8	114.3	80	0.5	20	8	114.3	71	0.3	2
85 and older	11	68.8	107	0.7	38	8	50.0	67	0.7	42	12	75.0	119	0.7	21
<b>Unknown</b>	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 2004 file for Kansas, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004. A total of 416 beneficiaries who were in nursing facilities for part of their enrollment and their 4,124 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 2004. 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 2004 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispn.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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.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<sup>a, b, c, d</sup>  
 NONDUAL BENEFICIARIES, KANSAS, 2004

Beneficiary Characteristics	MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL					ANTIDIABETIC					HEMATOPOIETIC AGENTS				
	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 \$
<b>All</b>	<b>84</b>	<b>20.3 %</b>	<b>853</b>	<b>0.8</b>	<b>\$127</b>	<b>165</b>	<b>40.0 %</b>	<b>1,763</b>	<b>1.0</b>	<b>\$51</b>	<b>34</b>	<b>8.2 %</b>	<b>355</b>	<b>0.8</b>	<b>\$185</b>
<b>Female</b>	60	22.6	625	0.7	139	111	41.9	1,209	1.0	51	23	8.7	241	0.9	235
<b>Disabled</b>	39	23.4	452	0.7	152	73	43.7	811	1.0	54	13	7.8	150	1.1	344
64 or younger	38	23.0	440	0.7	153	73	44.2	811	1.0	54	13	7.9	150	1.1	344
65-74	1	50.0	12	0.8	102	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
<b>Other Eligibles</b>	21	21.4	173	0.9	108	38	38.8	398	0.9	43	10	10.2	91	0.5	56
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	4	14.3	39	1.1	140	20	71.4	201	0.9	55	4	14.3	48	0.3	101
75-84	10	40.0	73	0.7	88	3	12.0	30	0.8	22	1	4.0	12	0.1	1
85 and older	7	15.6	61	0.9	111	15	33.3	167	0.9	33	5	11.1	31	0.9	8
<b>Male</b>	24	16.2	228	0.8	94	54	36.5	554	1.0	50	11	7.4	114	0.6	78
<b>Disabled</b>	19	17.0	197	0.9	102	38	33.9	386	1.0	48	9	8.0	90	0.5	97
64 or younger	19	17.1	197	0.9	102	38	34.2	386	1.0	48	9	8.1	90	0.5	97
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
<b>Other Eligibles</b>	5	13.9	31	0.6	46	16	44.4	168	0.8	55	2	5.6	24	1.0	5
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	0	0.0	0	0.0	0	11	84.6	126	0.8	57	1	7.7	12	1.0	5
75-84	0	0.0	0	0.0	0	4	57.1	30	0.7	29	1	14.3	12	0.9	5
85 and older	5	31.3	31	0.6	46	1	6.3	12	1.5	92	0	0.0	0	0.0	0
<b>Unknown</b>	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 2004 file for Kansas, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004. A total of 416 beneficiaries who were in nursing facilities for part of their enrollment and their 4,124 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 2004. 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 2004 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispn.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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.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<sup>a, b, c, d</sup>  
 NONDUAL BENEFICIARIES, KANSAS, 2004

Beneficiary Characteristics	ANTIASTHMATIC					ANTHYPERLIPIDEMIC					Benefit Months	
	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	Among All-Year Nursing Facility Residents
<b>All</b>	<b>158</b>	<b>38.3 %</b>	<b>1,591</b>	<b>0.6</b>	<b>\$32</b>	<b>84</b>	<b>20.3 %</b>	<b>927</b>	<b>0.7</b>	<b>\$50</b>	<b>413</b>	<b>4,195</b>
<b>Female</b>	89	33.6	871	0.6	36	57	21.5	641	0.7	56	265	2,714
<b>Disabled</b>	65	38.9	652	0.7	39	28	16.8	328	0.6	54	167	1,769
64 or younger	65	39.4	652	0.7	39	26	15.8	304	0.6	55	165	1,745
65-74	0	0.0	0	0.0	0	2	100.0	24	0.6	44	2	24
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	24	24.5	219	0.5	28	29	29.6	313	0.8	57	98	945
<b>Other Eligibles</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
64 or younger	8	28.6	92	0.3	19	14	50.0	164	0.8	61	28	308
65-74	9	36.0	57	0.9	36	7	28.0	70	0.8	65	25	209
75-84	7	15.6	70	0.4	35	8	17.8	79	0.9	44	45	428
85 and older												
<b>Male</b>	69	46.6	720	0.6	27	27	18.2	286	0.7	39	148	1,481
<b>Disabled</b>	45	40.2	479	0.5	25	21	18.8	229	0.7	35	112	1,130
64 or younger	45	40.5	479	0.5	25	21	18.9	229	0.7	35	111	1,118
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12
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
<b>Other Eligibles</b>	24	66.7	241	0.6	31	6	16.7	57	0.9	55	36	351
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	8	61.5	90	1.0	33	3	23.1	36	0.9	68	13	150
75-84	5	71.4	53	0.5	24	1	14.3	5	1.0	71	7	65
85 and older	11	68.8	98	0.4	34	2	12.5	16	1.1	22	16	136
<b>Unknown</b>	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 2004 file for Kansas, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004. A total of 416 beneficiaries who were in nursing facilities for part of their enrollment and their 4,124 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 2004. 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 2004 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispn.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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<sup>a,b</sup>  
 KANSAS, 2004

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
<b>All</b>	<b>39,272</b>	<b>16.4 %</b>	<b>0.5</b>	<b>121,504</b>	<b>\$10</b>	<b>\$2,367,913</b>	<b>\$19</b>	<b>2.1 %</b>	<b>239,108</b>
<b>Age</b>									
5 and younger	14,154	19.1	0.4	27,898	6	431,616	15	4.9	74,217
6-14	10,231	15.2	0.4	24,391	8	533,405	22	2.3	67,377
15-20	5,028	14.5	0.4	13,388	11	368,586	28	2.2	34,562
21-44	5,323	11.0	0.5	22,914	10	496,475	22	1.6	48,536
45-64	4,114	31.1	2.2	29,523	37	494,565	17	1.6	13,210
65-74	272	34.2	2.7	2,127	36	28,722	14	1.8	795
75-84	82	30.1	2.4	644	26	7,086	11	1.7	272
85 and older	68	48.9	4.5	619	54	7,458	12	3.2	139
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
<b>Basis of Eligibility<sup>c</sup></b>									
Aged	413	35.0	2.8	3,275	36	41,987	13	1.9	1,180
Disabled	9,120	29.4	1.8	55,862	41	1,280,846	23	1.9	30,999
Adults	3,638	7.4	0.2	8,259	3	130,880	16	1.3	48,915
Children	26,081	16.5	0.3	54,047	6	913,260	17	2.8	157,900
Unknown	20	17.5	0.5	61	8	940	15	0.8	114
<b>Gender</b>									
Female	22,319	16.6	0.5	72,917	10	1,366,640	19	2.2	134,376
Male	16,953	16.2	0.5	48,587	10	1,001,273	21	1.9	104,720
Unknown	0	0.0	0.0	0	0	0	0	0.0	12
<b>Race</b>									
White	25,708	17.7	0.6	86,724	12	1,797,984	21	2.0	145,095
African American	4,923	12.8	0.4	14,795	7	278,190	19	2.0	38,605
Other/unknown	8,641	15.6	0.4	19,985	5	291,739	15	2.5	55,408
<b>Use of Nursing Facilities<sup>d</sup></b>									
Entire year	291	70.5	8.1	3,347	109	44,942	13	1.9	413
Part year	292	70.2	6.2	2,593	104	43,300	17	2.3	416
None	38,689	16.2	0.5	115,564	10	2,279,671	20	2.1	238,279
<b>Maintenance Assistance Status</b>									
Cash	17,496	17.9	0.7	71,255	14	1,407,433	20	1.9	97,972
Medically needy	527	17.8	0.7	2,018	11	32,530	16	1.0	2,957
Poverty related	15,529	14.1	0.3	29,379	5	506,644	17	3.9	109,787
Other/unknown	5,720	20.1	0.7	18,852	15	421,306	22	1.8	28,392

Source: Data for this table are from the MAX 2004 file for Kansas, released by CMS in 02/2008. This table was produced on 03/25/2008.

- 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 2004.
- b. The statute establishing the Medicare Part D prescription program that started in 2006 excludes several types of drugs from coverage. State Medicaid programs have been allowed to exclude these drugs since 1990, but many states have chosen to cover them, and if states cover them for any Medicaid beneficiaries they must also cover them for dual eligibles, who as of 2006 receive the remainder of their prescription drug coverage through Part D. Excluded drugs include benzodiazepines; barbiturates; nonprescription (OTC) medications; prescription vitamins and minerals (not including prenatal vitamins and fluoride preparations); and drugs used for anorexia, weight loss, or weight gain. Other excluded drugs include those that promote fertility; those used for cosmetic purposes or hair growth, for symptomatic relief of coughs and colds; or drugs for which the manufacturer requires that associated tests or monitoring services be purchased exclusively from the manufacturer.
- c. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.
- d. Please refer to footnote f on Table 1 for methodology used to determine use of nursing facilities.

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

TABLE ND.12  
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D  
 AMONG NONDUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC<sup>a,b</sup>  
 KANSAS, 2004

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
<b>All</b>	<b>0.1</b>	<b>\$1</b>	<b>\$19</b>	<b>\$0</b>	<b>\$0</b>	<b>1,769,660</b>
<b>Age</b>						
5 and younger	0.1	1	15	0	0	523,250
6-14	0.0	1	22	0	0	536,517
15-20	0.1	1	28	0	0	258,872
21-44	0.1	2	22	0	1	315,853
45-64	0.2	4	17	0	1	123,126
65-74	0.3	3	14	0	0	8,259
75-84	0.3	3	11	0	0	2,537
85 and older	0.5	6	12	0	1	1,246
Unknown	0.0	0	0	0	0	0
<b>Basis of Eligibility<sup>c</sup></b>						
Aged	0.3	4	13	0	0	11,826
Disabled	0.2	4	23	0	1	320,991
Adults	0.0	0	16	0	0	274,341
Children	0.0	1	17	0	0	1,161,617
Unknown	0.1	1	15	0	0	885
<b>Gender</b>						
Female	0.1	1	19	0	0	971,588
Male	0.1	1	21	0	0	798,055
Unknown	0.0	0	0	0	0	17
<b>Race</b>						
White	0.1	2	21	0	0	1,075,470
African American	0.1	1	19	0	0	293,452
Other/unknown	0.0	1	15	0	0	400,738
<b>Use of Nursing Facilities<sup>d</sup></b>						
Entire year	0.8	11	13	0	2	4,195
Part year	0.6	10	17	0	2	4,124
None	0.1	1	20	0	0	1,761,341
<b>Maintenance Assistance Status</b>						
Cash	0.1	2	20	0	1	764,941
Medically needy	0.1	2	16	0	0	19,667
Poverty related	0.0	1	17	0	0	732,877
Other/unknown	0.1	2	22	0	0	252,175

Source: Data for this table are from the MAX 2004 file for Kansas, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004.

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

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

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

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



TABLE ND.13  
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D  
 FOR SELECTED DRUG CATEGORIES AMONG NONDUALS<sup>a,b,c</sup>  
 KANSAS, 2004

Drug Category	Number of Users	Rx \$ per User	Total Rx \$	Rx \$ as a Percentage of All Part D Excluded Rx \$	Total Number Rx.	\$ per Rx	Number Rx as a Percentage of All Part D Excluded Rx
<b>All</b>	<b>46,176</b>	<b>\$51</b>	<b>\$2,367,913</b>	<b>100.0 %</b>	<b>121,504</b>	<b>\$19</b>	<b>100.0 %</b>
Anorexia or weight loss/gain	26	171	4,448	0.2	47	95	0.0
Fertility drugs	3	48	143	0.0	4	36	0.0
Drugs for cosmetic purposes	0	0	0	0.0	0	0	0.0
Cough and cold medications	15,532	28	442,569	18.7	23,277	19	19.2
Vitamins and minerals	4,029	77	312,061	13.2	17,270	18	14.2
Non-prescription drugs	21,724	34	727,983	30.7	55,086	13	45.3
Barbiturates	489	49	23,760	1.0	4,136	6	3.4
Benzodiazepines	3,085	180	556,676	23.5	18,024	31	14.8
Other Part D Excl Rx Drugs	1,288	233	300,273	12.7	3,660	82	3.0

Source: Data for this table are from the MAX 2004 file for Kansas, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004. A user is a beneficiary who had at least one prescription filled for a Part D excluded drug in 2004. 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 2006 excludes several types of drugs from coverage. State Medicaid programs have been allowed to exclude these drugs since 1990, but many states have chosen to cover them, and if states cover them for any Medicaid beneficiaries they must also cover them for dual eligibles, who as of 2006 receive the remainder of their prescription drug coverage through Part D. Excluded drugs include benzodiazepines; barbiturates; nonprescription (OTC) medications; prescription vitamins and minerals (not including prenatal vitamins and fluoride preparations); and drugs used for anorexia, weight loss, or weight gain. Other excluded drugs include those that promote fertility; those used for cosmetic purposes or hair growth, for symptomatic relief of coughs and colds; or drugs for which the manufacturer requires that associated tests or monitoring services be purchased exclusively from the manufacturer.

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

APPENDIX TABLE A.1  
CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY<sup>a, b</sup>  
NONDUAL BENEFICIARIES, KANSAS, 2004

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Disabled	Adults	Children	Unknown	All	Aged	Disabled	Adults	Children	Unknown
<b>All</b>	<b>284,268</b>	<b>1,180</b>	<b>31,008</b>	<b>57,178</b>	<b>194,788</b>	<b>114</b>	<b>2,514,173</b>	<b>11,834</b>	<b>323,904</b>	<b>421,082</b>	<b>1,756,468</b>	<b>885</b>
<b>Age</b>												
5 and younger	93,451	0	1,614	0	91,837	0	830,280	0	16,785	0	813,495	0
6-14	80,899	0	5,513	0	75,386	0	762,683	0	58,740	0	703,943	0
15-20	39,643	0	3,820	8,322	27,501	0	341,567	0	40,640	62,278	238,649	0
21-44	55,381	0	9,346	45,949	64	22	436,507	0	99,656	336,319	381	151
45-64	13,686	1	10,691	2,902	0	92	131,082	6	107,888	22,454	0	734
65-74	797	768	24	5	0	0	8,271	8,045	195	31	0	0
75-84	272	272	0	0	0	0	2,537	2,537	0	0	0	0
85 and older	139	139	0	0	0	0	1,246	1,246	0	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
<b>Gender</b>												
Female	159,279	799	15,665	46,972	95,729	114	1,388,766	8,052	165,221	349,623	864,985	885
Male	124,976	381	15,343	10,206	99,046	0	1,125,387	3,782	158,683	71,459	891,463	0
Unknown	13	0	0	0	13	0	20	0	0	0	20	0
<b>Race</b>												
White	171,534	494	22,202	38,343	110,411	84	1,504,743	4,895	230,803	277,259	991,132	654
African American	47,498	147	5,647	9,915	31,779	10	447,153	1,620	60,488	81,966	303,015	64
Other/unknown	65,236	539	3,159	8,920	52,598	20	562,277	5,319	32,613	61,857	462,321	167
<b>Use of Nursing Facilities<sup>c</sup></b>												
Entire year	413	134	279	0	0	0	4,195	1,296	2,899	0	0	0
Part year	416	47	366	1	0	2	4,133	450	3,662	11	0	10
None	283,439	999	30,363	57,177	194,788	112	2,505,845	10,088	317,343	421,071	1,756,468	875
<b>Maintenance Assistance Status</b>												
Cash	114,329	725	25,721	35,488	52,395	0	1,065,353	8,058	277,178	283,355	496,762	0
Medically needy	2,957	244	1,690	420	603	0	20,243	1,963	12,221	2,175	3,884	0
Poverty related	134,446	3	26	14,181	120,122	114	1,114,764	10	150	78,946	1,034,773	885
Other/unknown	32,536	208	3,571	7,089	21,668	0	313,813	1,803	34,355	56,606	221,049	0
<b>Managed Care (MC) Status</b>												
Fee-for-service (FFS) all year	188,016	1,179	30,462	35,253	121,008	114	1,624,628	11,822	317,782	237,409	1,056,730	885
FFS part year, with Rx claims	16,857	0	392	5,915	10,550	0	167,488	0	4,502	53,730	109,256	0
FFS part year, no Rx claims	34,235	1	145	7,747	26,342	0	327,961	12	1,528	66,158	260,263	0
MC all year, with Rx claims	56	0	0	33	23	0	349	0	0	166	183	0
MC all year, no Rx claims	45,104	0	9	8,230	36,865	0	393,747	0	92	63,619	330,036	0

Source: Data for this table are from the MAX 2004 file for Kansas, released by CMS in 02/2008. This table was produced on 03/25/2008.

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<sup>a</sup>  
 NONDUAL BENEFICIARIES, KANSAS, 2004

	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
<b>All</b>	<b>284,268</b>	<b>2,514,173</b>	<b>239,108</b>	<b>1,769,660</b>	<b>0</b>	<b>744,513</b>
Fee-for-service (FFS) all year	188,016	1,624,628	188,016	1,624,628	0	0
FFS part year, with Rx claims	16,857	167,488	16,857	63,397	0	104,091
FFS part year, with no Rx claims	34,235	327,961	34,235	81,635	0	246,326
Managed care (MC) all year, with Rx claims	56	349	0	0	0	349
MC all year, with no Rx claims	45,104	393,747	0	0	0	393,747

Source: Data for this table are from the MAX 2004 file for Kansas, released by CMS in 02/2008. This table was produced on 03/25/2008.

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.