

STATISTICAL COMPENDIUM: MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2004 LOUISIANA

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CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a, b}
NONDUAL BENEFICIARIES, LOUISIANA, 2004

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown
All	989,334	2,735	130,184	122,912	732,810	693	9,693,288	28,644	1,400,689	1,000,578	7,258,191	5,186
Age												
5 and younger	310,718	0	8,773	1	301,944	0	2,667,283	0	95,365	8	2,571,910	0
6-14	321,814	0	20,150	24	301,640	0	3,572,429	0	234,159	111	3,338,159	0
15-20	161,176	0	14,766	17,248	129,156	6	1,654,604	0	165,627	141,468	1,347,469	40
21-44	140,732	0	39,487	100,963	65	217	1,240,204	0	420,487	817,590	613	1,514
45-64	52,098	0	46,955	4,673	3	467	529,696	0	484,673	41,374	36	3,613
65-74	1,524	1,466	53	2	0	3	16,624	16,208	378	19	0	19
75-84	766	766	0	0	0	0	7,783	7,783	0	0	0	0
85 and older	504	503	0	1	0	0	4,661	4,653	0	8	0	0
Unknown	2	0	0	0	2	0		0	0	0	4	0
Gender												
Female	550,255	1,795	65,310	116,896	365,561	693	5,321,135	19,112	709,624	954,232	3,632,981	5,186
Male	438,959	933	64,871	6,011	367,144	0	4,371,159	9,505	691,051	46,289	3,624,314	0
Unknown	120	7	3	5	105	0	994	27	14	57	896	0
Race												
White	349,213	957	38,648	46,045	263,241	322	3,289,863	9,717	400,306	343,912	2,533,528	2,400
African American	570,240	1,231	75,644	70,173	422,863	329	5,757,874	13,264	827,169	609,554	4,305,423	2,464
Other/unknown	69,881	547	15,892	6,694	46,706	42	645,551	5,663	173,214	47,112	419,240	322
Use of Nursing Facilities^c												
Entire year	2,613	632	1,979	0	2	0	26,900	6,369	20,507	0	24	0
Part year	1,386	188	1,173	17	8	0	13,035	1,672	11,123	158	82	0
None	985,335	1,915	127,032	122,895	732,800	693	9,653,353	20,603	1,369,059	1,000,420	7,258,085	5,186
Maintenance Assistance Status												
Cash	302,767	1,957	125,174	65,955	109,681	0	3,120,954	21,659	1,351,702	621,153	1,126,440	0
Medically needy	2,233	2	219	1,466	546	0	22,645	12	1,621	15,026	5,986	0
Poverty-related	589,333	10	19	47,578	541,033	693	5,946,675	92	217	287,727	5,653,453	5,186
Other/unknown	95,001	766	4,772	7,913	81,550	0	603,014	6,881	47,149	76,672	472,312	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	989,334	2,735	130,184	122,912	732,810	693	9,693,288	28,644	1,400,689	1,000,578	7,258,191	5,186
FFS part year, with Rx claims	0	0	0	0	0	0		0	0	0	0	0
FFS part year, no Rx claims	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 Louisiana, 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^{a, b}
NONDUAL BENEFICIARIES, LOUISIANA, 2004

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	67.0 %	8.4	\$534	\$64	\$2,596	20.6 %	989,334
Age							
5 and younger	63.0	4.8	270	56	1,561	17.3	310,718
6-14	65.0	5.5	351	64	1,225	28.7	321,814
15-20	66.3	6.1	359	59	1,991	18.0	161,176
21-44	75.6	12.7	838	66	5,356	15.6	140,732
45-64	82.3	41.5	2,837	68	11,006	25.8	52,098
65-74	85.1	49.1	3,084	63	14,976	20.6	1,524
75-84	82.4	45.5	2,437	54	13,312	18.3	766
85 and older	75.6	42.9	2,722	64	15,200	17.9	504
Unknown	0.0	0.0	0	0	0	0.0	2
Basis of Eligibility^e							
Aged	82.6	47.2	2,843	60	14,498	19.6	2,735
Disabled	78.6	27.4	2,189	80	10,446	21.0	130,184
Adults	76.2	8.6	374	43	2,957	12.7	122,912
Children	63.3	4.9	256	53	1,082	23.7	732,810
Unknown	79.1	19.3	2,970	154	17,061	17.4	693
Gender							
Female	69.7	9.4	543	58	2,674	20.3	550,255
Male	63.7	7.2	524	72	2,497	21.0	438,959
Unknown	63.3	5.8	290	50	1,954	14.8	120
Race							
White	73.1	10.6	684	65	2,936	23.3	349,213
African American	63.4	6.9	419	61	2,299	18.2	570,240
Other/unknown	66.1	10.2	724	71	3,314	21.8	69,881
Use of Nursing Facilities^f							
Entire year	96.3	89.1	6,531	73	44,087	14.8	2,613
Part year	96.9	63.1	4,981	79	54,587	9.1	1,386
None	66.9	8.1	512	63	2,412	21.2	985,335
Maintenance Assistance Status							
Cash	72.4	15.6	1,108	71	5,171	21.4	302,767
Medically needy	83.5	12.8	788	62	6,135	12.8	2,233
Poverty related	66.8	5.1	263	52	1,159	22.7	589,333
Other/unknown	50.7	5.9	386	65	3,216	12.0	95,001

Source: Data for this table are from the MAX 2004 file for Louisiana, 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^{a, b}
 NONDUAL BENEFICIARIES, LOUISIANA, 2004

Beneficiary Characteristics	Mean Number of Rx	Mean Rx \$	Rx \$ as a Percentage of All Medicaid FFS \$ ^c	Number of Rx, Percentage with:						Mean \$, All Medicaid FFS \$ ^d	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
All	0.9	\$55	20.6 %	33.0 %	52.5 %	6.8 %	5.3 %	2.0 %	0.4 %	\$265	989,334	9,693,288
Age												
5 and younger	0.6	32	17.3	37.0	54.6	5.9	2.3	0.1	0.0	182	310,718	2,667,283
6-14	0.5	32	28.7	35.0	56.5	5.2	2.9	0.3	0.0	110	321,814	3,572,429
15-20	0.6	35	18.0	33.7	55.5	6.6	3.6	0.5	0.1	194	161,176	1,654,604
21-44	1.4	95	15.6	24.4	49.1	11.2	10.9	3.8	0.6	608	140,732	1,240,204
45-64	4.1	279	25.8	17.7	18.1	11.0	26.3	21.2	5.8	1,083	52,098	529,696
65-74	4.5	283	20.6	14.9	13.1	9.3	28.1	26.6	8.1	1,373	1,524	16,624
75-84	4.5	240	18.3	17.6	11.1	9.5	26.4	27.4	8.0	1,310	766	7,783
85 and older	4.6	294	17.9	24.4	9.9	7.1	22.0	28.2	8.3	1,644	504	4,661
Unknown	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	0.0	0	2	4
Basis of Eligibility^e												
Aged	4.5	272	19.6	17.4	12.0	8.9	26.6	27.2	8.0	1,384	2,735	28,644
Disabled	2.5	203	21.0	21.4	33.3	11.3	19.2	11.8	2.9	971	130,184	1,400,689
Adults	1.1	46	12.7	23.8	55.8	11.0	7.6	1.7	0.1	363	122,912	1,000,578
Children	0.5	26	23.7	36.7	55.6	5.3	2.3	0.2	0.0	109	732,810	7,258,191
Unknown	2.6	397	17.4	20.9	28.0	17.6	24.2	8.7	0.6	2,280	693	5,186
Gender												
Female	1.0	56	20.3	30.3	53.6	7.3	5.8	2.4	0.6	277	550,255	5,321,135
Male	0.7	53	21.0	36.3	51.2	6.2	4.6	1.4	0.3	251	438,959	4,371,159
Unknown	0.7	35	14.8	36.7	50.8	6.7	1.7	3.3	0.8	236	120	994
Race												
White	1.1	73	23.3	26.9	53.6	9.1	7.1	2.7	0.6	312	349,213	3,289,863
African American	0.7	42	18.2	36.6	52.3	5.4	4.0	1.4	0.3	228	570,240	5,757,874
Other/unknown	1.1	78	21.8	33.9	49.0	7.1	6.2	3.0	0.8	359	69,881	645,551
Use of Nursing Facilities^f												
Entire year	8.7	634	14.8	3.7	1.9	2.8	18.2	44.2	29.2	4,283	2,613	26,900
Part year	6.7	530	9.1	3.1	5.6	7.4	30.7	36.0	17.2	5,804	1,386	13,035
None	0.8	52	21.2	33.1	52.7	6.8	5.2	1.8	0.3	246	985,335	9,653,353
Maintenance Assistance Status												
Cash	1.5	108	21.4	27.6	45.6	9.0	11.0	5.6	1.2	502	302,767	3,120,954
Medically needy	1.3	78	12.8	16.5	54.9	13.0	12.1	3.2	0.4	605	2,233	22,645
Poverty related	0.5	26	22.7	33.2	58.4	5.8	2.5	0.2	0.0	115	589,333	5,946,675
Other/unknown	0.9	61	12.0	49.3	38.3	6.2	4.2	1.5	0.5	507	95,001	603,014

Source: Data for this table are from the MAX 2004 file for Louisiana, 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^{a, b, c}
 NONDUAL BENEFICIARIES, LOUISIANA, 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
All	0.9	\$55	\$64	0.4	\$41	\$111	0.1	\$4	\$52	0.4	\$10	\$24
Age												
5 and younger	0.6	32	56	0.2	24	102	0.1	3	32	0.2	5	21
6-14	0.5	32	64	0.3	25	97	0.0	2	47	0.2	5	25
15-20	0.6	35	59	0.3	26	102	0.0	2	52	0.3	7	23
21-44	1.4	95	66	0.5	68	131	0.1	7	71	0.8	20	24
45-64	4.1	279	68	1.7	205	123	0.2	18	74	2.1	56	26
65-74	4.5	283	63	1.9	206	111	0.3	15	55	2.4	62	26
75-84	4.5	240	54	1.8	170	95	0.3	12	38	2.3	57	24
85 and older	4.6	294	64	1.9	183	99	0.4	45	124	2.4	65	27
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Basis of Eligibility^d												
Aged	4.5	272	60	1.8	191	105	0.3	19	64	2.4	61	26
Disabled	2.5	203	80	1.1	154	144	0.2	13	77	1.3	36	28
Adults	1.1	46	43	0.4	30	84	0.1	3	49	0.6	13	20
Children	0.5	26	53	0.2	20	86	0.1	2	36	0.2	5	21
Unknown	2.6	397	154	0.9	343	395	0.1	12	78	1.6	42	27
Gender												
Female	1.0	56	58	0.4	41	104	0.1	4	51	0.5	11	23
Male	0.7	53	72	0.3	41	121	0.1	3	54	0.3	9	27
Unknown	0.7	35	50	0.3	25	91	0.1	2	32	0.4	8	22
Race												
White	1.1	73	65	0.5	55	110	0.1	5	55	0.5	13	24
African American	0.7	42	61	0.3	31	110	0.1	3	49	0.3	8	24
Other/unknown	1.1	78	71	0.5	59	123	0.1	5	60	0.5	14	27
Use of Nursing Facilities^e												
Entire year	8.7	634	73	3.3	453	139	0.6	41	70	4.7	138	29
Part year	6.7	530	79	2.5	377	152	0.5	37	78	3.7	114	31
None	0.8	52	63	0.4	39	110	0.1	4	52	0.4	10	24
Maintenance Assistance Status												
Cash	1.5	108	71	0.6	80	130	0.1	7	66	0.8	20	26
Medically needy	1.3	78	62	0.4	53	124	0.1	6	63	0.7	19	25
Poverty related	0.5	26	52	0.2	19	84	0.0	2	37	0.2	5	21
Other/unknown	0.9	61	65	0.4	46	118	0.1	4	46	0.4	10	23

Source: Data for this table are from the MAX 2004 file for Louisiana, 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 Louisiana, 0.5 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^{a, b, c, d}
 NONDUAL BENEFICIARIES, LOUISIANA, 2004

Therapeutic Category	Number of Rx per Benefit Month Among Users					\$ per Benefit Month Among Users					\$ per Rx					Users ^e		
	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total Number of Rx	Total Rx \$	Number of Users	As a Percentage of All Benes	Number of Benefit Months	
Anti-infective Agents	0.2	0.1	0.0	0.1	\$13	\$9	\$1	\$3	\$53	\$91	\$61	\$24	1,227,787	\$65,233,555	462,237	46.7 %	5,048,156	
Biologicals	0.5	0.5	0.0	0.0	655	632	6	17	1385	1,378	2,287	1,485	17,755	24,591,920	3,946	0.4	37,552	
Antineoplastic Agents	0.4	0.1	0.0	0.3	130	94	7	29	296	870	391	92	14,785	4,370,526	3,171	0.3	33,497	
Endocrine/Metabolic Drugs	0.3	0.1	0.1	0.1	19	13	2	4	54	92	36	25	604,468	32,506,751	159,599	16.1	1,733,471	
Cardiovascular Agents	1.1	0.4	0.0	0.6	46	31	2	13	44	77	47	21	817,156	35,736,052	70,821	7.2	777,716	
Respiratory Agents	0.4	0.2	0.0	0.1	19	16	1	3	52	74	25	22	1,568,067	81,404,716	381,657	38.6	4,197,474	
Gastrointestinal Agents	0.3	0.2	0.0	0.1	32	27	1	4	92	139	78	26	338,629	31,082,190	90,481	9.1	972,250	
Genitourinary Agents	0.2	0.1	0.0	0.1	10	7	2	2	50	72	44	26	94,740	4,756,705	43,624	4.4	453,378	
CNS Drugs	0.7	0.3	0.0	0.3	60	49	2	9	91	167	101	25	855,011	77,813,083	118,014	11.9	1,303,118	
Stimulants/Anti-obesity/Anorexia	0.5	0.5	0.0	0.1	48	45	1	3	92	99	69	42	308,406	28,240,652	50,937	5.1	585,000	
Miscellaneous Psychological/																		
Neurological Agents	0.4	0.3	0.0	0.1	82	75	1	5	222	281	109	57	12,778	2,836,838	3,108	0.3	34,772	
Analgesics and Anesthetics	0.3	0.1	0.0	0.3	13	8	1	5	41	121	122	18	967,585	39,206,723	267,637	27.1	2,915,748	
Neuromuscular Agents	0.6	0.2	0.1	0.3	43	26	8	9	75	139	106	28	407,333	30,431,480	64,294	6.5	715,415	
Nutritional Products	0.2	0.0	0.0	0.2	5	1	0	3	21	28	24	20	215,002	4,603,147	90,283	9.1	936,196	
Hematological Agents	0.4	0.1	0.1	0.2	83	68	2	13	225	467	33	76	116,696	26,214,627	30,764	3.1	317,636	
Topical Products	0.2	0.1	0.0	0.1	11	7	1	3	49	76	49	27	691,799	33,772,279	290,844	29.4	3,195,868	
Miscellaneous Products	0.2	0.1	0.0	0.1	27	17	6	4	135	170	370	50	36,689	4,938,827	16,548	1.7	181,166	
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	5	0	0	0	27	0	0	0	33,094	880,688	16,228	1.6	181,766	
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.	8,327,780	528,620,759	n.a.	n.a.	n.a.	

Source: Data for this table are from the MAX 2004 file for Louisiana, 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 Louisiana, 0.5 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^{a, b, c}
 NONDUAL BENEFICIARIES, LOUISIANA, 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	\$48,720,178	38,969	3.9 %	447,137	0.5	\$219	\$109
ANTIASTHMATIC	41,045,903	225,463	22.8	2,528,478	0.2	72	16
STIMULANTS/ANTI-OBESITY/ANOREXIANTS	28,240,652	63,170	6.4	728,882	0.4	92	39
ANTICONVULSANT	24,701,737	36,730	3.7	414,711	0.6	105	60
DERMATOLOGICAL	24,212,531	302,437	30.6	3,362,588	0.1	52	7
ULCER DRUGS	24,022,202	76,590	7.7	826,114	0.3	101	29
PASSIVE IMMUNIZING AGENTS	23,286,310	3,591	0.4	34,880	0.5	1,329	668
ANTIHISTAMINES	22,545,844	286,740	29.0	3,224,542	0.2	42	7
ANTIDEPRESSANTS	22,124,556	82,389	8.3	909,252	0.4	63	24
ANALGESICS - Narcotic	17,894,247	245,146	24.8	2,658,614	0.2	31	7
Total	276,794,160	1,361,225		15,135,198	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2004 file for Louisiana, 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^{a, b, c}
 NONDUAL BENEFICIARIES, LOUISIANA, 2004

Beneficiary Characteristics	All Top 10 Drug Groups		ANTIPSYCHOTICS					ANTIASTHMATIC				
	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
All	3,516,006	\$276,794,160	38,969	3.9 %	447,137	0.5	\$109	225,463	22.8 %	2,528,478	0.2	\$16
Female	2,009,854	146,993,122	20,268	3.7	231,569	0.5	102	114,847	20.9	1,284,635	0.2	16
Disabled	887,627	79,660,476	14,549	22.3	168,769	0.5	119	27,734	42.5	321,362	0.3	22
5 and younger	21,033	5,331,261	39	1.1	454	0.4	54	2,308	65.1	26,700	0.2	20
6-14	47,787	4,673,966	742	11.2	8,804	0.4	84	2,500	37.8	29,734	0.3	25
15-20	39,270	3,817,248	899	16.1	10,589	0.4	90	1,416	25.3	16,637	0.3	21
21-44	262,866	23,519,011	5,598	26.8	64,832	0.5	117	6,499	31.1	75,490	0.3	18
45-64	516,078	42,257,800	7,261	25.4	83,994	0.6	129	14,994	52.4	172,678	0.4	25
65-74	593	61,190	10	27.8	96	0.6	246	17	47.2	123	0.7	72
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
Other Eligibles	1,122,227	67,332,646	5,719	1.2	62,800	0.3	53	87,113	18.0	963,273	0.2	14
5 and younger	255,139	18,189,292	81	0.1	943	0.3	38	33,731	22.7	364,650	0.2	13
6-14	340,501	22,007,324	1,406	0.9	16,363	0.4	61	30,167	20.0	351,526	0.2	15
15-20	187,524	10,328,592	1,473	1.8	16,493	0.3	50	11,489	13.9	128,678	0.2	13
21-44	285,531	13,117,669	2,165	2.2	22,648	0.2	39	10,134	10.5	101,292	0.2	10
45-64	28,386	1,702,797	209	5.0	2,101	0.3	47	954	22.8	10,023	0.3	17
65-74	15,585	1,220,359	232	22.8	2,654	0.8	128	391	38.4	4,422	0.4	26
75-84	5,934	413,158	86	17.8	892	0.8	110	172	35.6	1,876	0.4	25
85 and older	3,627	353,455	67	22.4	706	0.7	89	75	25.1	806	0.4	23
Male	1,505,879	129,783,276	18,696	4.3	215,535	0.5	117	110,586	25.2	1,243,581	0.2	17
Disabled	582,128	61,912,033	13,160	20.3	152,467	0.6	135	19,093	29.4	220,255	0.3	22
5 and younger	32,702	6,750,273	175	3.3	2,060	0.4	66	3,761	71.9	43,617	0.2	21
6-14	115,099	10,943,199	2,464	18.2	29,187	0.5	88	5,269	38.9	62,573	0.3	22
15-20	56,722	6,258,578	1,676	18.3	19,522	0.5	116	1,885	20.5	22,163	0.3	20
21-44	163,319	18,705,811	5,020	27.0	57,904	0.6	158	2,592	13.9	29,524	0.3	18
45-64	214,078	19,229,069	3,817	20.8	43,716	0.6	146	5,580	30.5	62,339	0.4	26
65-74	208	25,103	8	47.1	78	1.0	224	6	35.3	39	0.4	20
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
Other Eligibles	923,751	67,871,243	5,536	1.5	63,068	0.4	75	91,493	24.5	1,023,326	0.2	16
5 and younger	294,079	22,320,071	279	0.2	3,238	0.3	49	44,420	28.9	479,311	0.2	15
6-14	467,192	34,130,103	3,335	2.2	38,776	0.4	73	37,653	25.0	438,295	0.2	17
15-20	126,010	9,074,865	1,508	2.4	16,932	0.4	79	8,587	13.5	97,314	0.2	15
21-44	18,497	1,035,725	157	3.5	1,533	0.3	49	393	8.8	3,801	0.2	14
45-64	5,599	374,379	33	3.4	306	0.4	88	156	16.3	1,516	0.3	22
65-74	6,221	517,912	109	24.3	1,184	0.8	167	153	34.1	1,715	0.5	28
75-84	3,513	234,341	65	23.1	658	0.7	89	77	27.4	806	0.4	23
85 and older	2,640	183,847	50	24.6	441	0.6	79	54	26.6	568	0.6	31
Unknown	273	17,762	5	4.1	33	0.4	100	30	24.6	262	0.2	11

Source: Data for this table are from the MAX 2004 file for Louisiana, 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^{a, b, c}
 NONDUAL BENEFICIARIES, LOUISIANA, 2004

Beneficiary Characteristics	STIMULANTS/ANTI-OBESITY/ANOREXIANTS					ANTICONVULSANT					DERMATOLOGICAL				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean	Mean Rx \$ per Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean	Mean Rx \$ per Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean	Mean Rx \$ per Month
				Number of Rx per Benefit Month					Number of Rx per Benefit Month					Number of Rx per Benefit Month	
All	63,170	6.4 %	728,882	0.4	\$39	36,730	3.7 %	414,711	0.6	\$60	302,437	30.6 %	3,362,588	0.1	\$7
Female	19,413	3.5	223,306	0.4	36	21,641	3.9	243,404	0.5	56	170,387	31.0	1,893,712	0.1	7
Disabled	3,911	6.0	46,008	0.4	39	14,779	22.6	170,126	0.6	65	24,664	37.8	288,867	0.2	10
5 and younger	108	3.0	1,216	0.3	44	220	6.2	2,532	0.6	76	2,239	63.2	26,070	0.1	7
6-14	1,627	24.6	19,223	0.5	42	979	14.8	11,553	0.7	96	2,923	44.2	34,739	0.1	8
15-20	456	8.2	5,362	0.4	41	971	17.4	11,295	0.7	94	2,030	36.3	24,075	0.1	9
21-44	772	3.7	9,069	0.2	31	5,276	25.3	60,755	0.6	69	6,665	31.9	78,200	0.2	9
45-64	948	3.3	11,138	0.3	38	7,323	25.6	83,918	0.6	53	10,791	37.7	125,631	0.2	11
65-74	0	0.0	0	0.0	0	10	27.8	73	0.6	55	16	44.4	152	0.4	13
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
Other Eligibles	15,502	3.2	177,298	0.4	36	6,862	1.4	73,278	0.4	36	145,723	30.0	1,604,845	0.1	7
5 and younger	851	0.6	9,399	0.3	27	235	0.2	2,629	0.4	44	63,151	42.6	668,726	0.1	7
6-14	11,067	7.3	128,274	0.4	38	1,235	0.8	14,311	0.4	49	47,787	31.7	559,290	0.1	7
15-20	2,103	2.5	23,738	0.4	35	1,311	1.6	14,444	0.4	40	19,151	23.1	216,514	0.1	7
21-44	1,371	1.4	14,715	0.2	23	3,449	3.6	35,172	0.3	27	13,971	14.4	142,273	0.1	7
45-64	89	2.1	930	0.2	32	357	8.5	3,672	0.4	37	874	20.9	9,274	0.2	8
65-74	16	1.6	183	0.2	30	184	18.1	2,082	0.7	48	398	39.1	4,569	0.2	15
75-84	2	0.4	23	0.3	18	62	12.8	644	0.7	40	232	48.0	2,495	0.2	11
85 and older	3	1.0	36	0.8	63	29	9.7	324	0.8	37	159	53.2	1,704	0.2	12
Male	43,755	10.0	505,552	0.4	40	15,089	3.4	171,307	0.6	65	132,011	30.1	1,468,477	0.1	7
Disabled	8,623	13.3	101,715	0.5	43	11,020	17.0	125,691	0.7	73	18,776	28.9	218,272	0.2	9
5 and younger	503	9.6	5,866	0.3	31	323	6.2	3,769	0.6	89	3,181	60.8	37,194	0.1	7
6-14	6,252	46.2	74,024	0.5	44	1,933	14.3	22,741	0.6	71	4,919	36.3	58,464	0.1	7
15-20	1,450	15.8	17,028	0.4	44	1,304	14.2	15,147	0.7	94	2,215	24.1	26,236	0.1	9
21-44	257	1.4	2,960	0.4	40	3,913	21.0	44,249	0.7	82	3,976	21.4	45,721	0.2	11
45-64	161	0.9	1,837	0.3	41	3,541	19.3	39,746	0.6	54	4,477	24.4	50,591	0.2	13
65-74	0	0.0	0	0.0	0	6	35.3	39	0.7	54	8	47.1	66	0.3	6
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
Other Eligibles	35,132	9.4	403,837	0.4	39	4,069	1.1	45,616	0.4	42	113,235	30.3	1,250,205	0.1	7
5 and younger	2,138	1.4	24,402	0.3	27	394	0.3	4,496	0.4	44	60,472	39.4	636,980	0.1	7
6-14	28,577	19.0	329,606	0.4	40	2,047	1.4	23,768	0.4	43	40,915	27.2	479,108	0.1	6
15-20	4,351	6.8	49,220	0.4	39	1,033	1.6	11,491	0.4	44	10,842	17.1	123,966	0.1	9
21-44	56	1.3	499	0.3	32	331	7.5	3,206	0.3	30	456	10.3	4,368	0.2	9
45-64	4	0.4	44	0.4	48	93	9.7	891	0.5	32	147	15.3	1,458	0.2	16
65-74	0	0.0	0	0.0	0	90	20.0	992	0.7	42	177	39.4	1,993	0.2	11
75-84	5	1.8	54	0.6	50	53	18.9	538	0.7	29	127	45.2	1,339	0.2	8
85 and older	1	0.5	12	1.0	130	28	13.8	234	0.8	39	99	48.8	993	0.3	14
Unknown	2	1.6	24	1.3	93	0	0.0	0	0.0	0	39	32.0	399	0.1	7

Source: Data for this table are from the MAX 2004 file for Louisiana, 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^{a, b, c}
 NONDUAL BENEFICIARIES, LOUISIANA, 2004

Beneficiary Characteristics	ULCER DRUGS					PASSIVE IMMUNIZING AGENTS					ANTIHISTAMINES				
	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
All	76,590	7.7 %	826,114	0.3	\$29	3,591	0.4 %	34,880	0.5	\$668	286,740	29.0 %	3,224,542	0.2	\$7
Female	51,231	9.3	556,498	0.3	30	1,818	0.3	17,564	0.5	623	161,707	29.4	1,806,657	0.2	7
Disabled	21,408	32.8	246,935	0.4	47	616	0.9	6,596	0.5	709	26,497	40.6	309,405	0.3	11
5 and younger	501	14.1	5,427	0.3	18	587	16.6	6,250	0.5	660	1,753	49.4	20,483	0.2	4
6-14	549	8.3	6,437	0.3	32	15	0.2	180	0.9	1,381	2,538	38.4	30,200	0.2	9
15-20	686	12.3	8,089	0.2	23	6	0.1	70	1.0	1,982	1,889	33.8	22,372	0.2	9
21-44	6,048	29.0	70,215	0.3	38	6	0.0	72	0.6	1,702	8,025	38.4	93,750	0.2	10
45-64	13,604	47.5	156,634	0.5	53	2	0.0	24	0.2	1,766	12,275	42.9	142,459	0.3	14
65-74	20	55.6	133	0.7	68	0	0.0	0	0.0	0	17	47.2	141	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
Other Eligibles	29,823	6.1	309,563	0.2	17	1,202	0.2	10,968	0.5	571	135,210	27.9	1,497,252	0.2	6
5 and younger	5,496	3.7	46,785	0.2	9	995	0.7	9,051	0.5	663	44,890	30.3	490,340	0.1	4
6-14	6,386	4.2	74,648	0.1	12	5	0.0	60	0.8	1,267	46,542	30.8	543,470	0.2	7
15-20	6,459	7.8	71,868	0.2	14	62	0.1	590	0.1	14	22,326	26.9	248,451	0.1	7
21-44	9,680	10.0	96,924	0.2	21	139	0.1	1,257	0.1	60	19,610	20.3	195,337	0.2	6
45-64	1,056	25.2	11,000	0.3	38	0	0.0	0	0.0	0	1,186	28.4	12,225	0.2	10
65-74	455	44.7	5,178	0.5	56	0	0.0	0	0.0	0	402	39.5	4,651	0.3	16
75-84	199	41.2	2,202	0.5	51	0	0.0	0	0.0	0	160	33.1	1,778	0.3	16
85 and older	92	30.8	958	0.7	68	1	0.3	10	1.1	10,604	94	31.4	1,000	0.3	14
Male	25,350	5.8	269,534	0.3	27	1,772	0.4	17,307	0.5	713	124,998	28.5	1,417,517	0.2	7
Disabled	10,285	15.9	115,652	0.4	44	659	1.0	7,008	0.5	707	17,566	27.1	204,988	0.2	10
5 and younger	582	11.1	6,444	0.3	18	639	12.2	6,768	0.5	678	2,640	50.5	31,001	0.2	5
6-14	865	6.4	10,224	0.3	30	15	0.1	180	0.8	1,333	5,246	38.7	62,373	0.2	9
15-20	646	7.0	7,582	0.3	32	3	0.0	36	1.2	2,455	2,152	23.5	25,487	0.2	10
21-44	2,934	15.8	33,047	0.4	42	2	0.0	24	1.0	1,566	3,473	18.7	39,990	0.3	12
45-64	5,253	28.7	58,311	0.5	52	0	0.0	0	0.0	0	4,053	22.1	46,121	0.3	14
65-74	5	29.4	44	0.4	43	0	0.0	0	0.0	0	2	11.8	16	0.8	43
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
Other Eligibles	15,065	4.0	153,882	0.2	14	1,113	0.3	10,299	0.5	717	107,432	28.7	1,212,529	0.2	7
5 and younger	6,065	4.0	51,909	0.2	9	1,102	0.7	10,167	0.5	710	48,495	31.6	529,665	0.1	4
6-14	5,186	3.4	60,583	0.2	13	8	0.0	96	0.7	1,306	46,492	30.9	542,320	0.2	8
15-20	2,705	4.3	30,504	0.2	17	3	0.0	36	0.3	1,341	11,572	18.2	131,720	0.2	8
21-44	558	12.6	5,289	0.3	34	0	0.0	0	0.0	0	491	11.1	4,728	0.2	8
45-64	189	19.7	1,868	0.4	44	0	0.0	0	0.0	0	141	14.7	1,434	0.2	10
65-74	173	38.5	1,877	0.5	59	0	0.0	0	0.0	0	120	26.7	1,357	0.3	15
75-84	102	36.3	1,021	0.6	57	0	0.0	0	0.0	0	69	24.6	772	0.4	18
85 and older	87	42.9	831	0.7	66	0	0.0	0	0.0	0	52	25.6	533	0.5	24
Unknown	9	7.4	82	0.2	11	1	0.8	9	0.2	162	35	28.7	368	0.1	5

Source: Data for this table are from the MAX 2004 file for Louisiana, 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^{a, b, c}
 NONDUAL BENEFICIARIES, LOUISIANA, 2004

Beneficiary Characteristics	ANTIDEPRESSANTS					ANALGESICS - Narcotic					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		
All	82,389	8.3 %	909,252	0.4	\$24	245,146	24.8 %	2,658,614	0.2	\$7	989,334	9,693,288
Female	58,614	10.7	640,536	0.4	24	173,237	31.5	1,849,006	0.2	6	550,255	5,321,135
Disabled	28,517	43.7	327,846	0.5	29	46,250	70.8	534,357	0.3	14	65,310	709,624
27	27	0.8	324	0.3	8	451	12.7	5,317	0.1	3	3,545	38,311
5 and younger	816	12.3	9,642	0.4	25	1,066	16.1	12,634	0.1	2	6,608	76,787
6-14	1,315	23.5	15,420	0.4	27	2,143	38.3	25,303	0.2	4	5,590	63,277
15-20	9,948	47.6	114,355	0.4	27	16,941	81.1	196,502	0.3	14	20,891	227,516
21-44	16,389	57.2	187,919	0.5	30	25,630	89.5	294,477	0.4	16	28,640	303,481
45-64	22	61.1	186	0.7	43	19	52.8	124	0.4	19	36	252
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	30,097	6.2	312,690	0.3	19	126,987	26.2	1,314,649	0.2	3	484,945	4,611,511
Other Eligibles	163	0.1	1,865	0.2	6	9,275	6.3	104,561	0.1	1	148,352	1,265,756
5 and younger	4,111	2.7	47,768	0.3	19	18,113	12.0	210,941	0.1	2	150,938	1,671,019
6-14	7,490	9.0	81,755	0.3	19	31,734	38.3	340,636	0.1	2	82,873	832,263
15-20	16,271	16.8	159,738	0.3	18	64,060	66.2	618,492	0.2	4	96,798	785,869
21-44	1,477	35.3	15,111	0.4	23	2,856	68.3	29,362	0.3	11	4,183	37,446
45-64	350	34.3	4,017	0.6	33	619	60.7	7,114	0.4	13	1,019	11,411
65-74	148	30.6	1,546	0.6	35	224	46.4	2,440	0.3	9	483	4,970
75-84	87	29.1	890	0.8	45	106	35.5	1,103	0.4	11	299	2,777
85 and older	23,769	5.4	268,674	0.4	25	71,890	16.4	809,413	0.2	7	438,957	4,371,155
Male	12,896	19.9	146,737	0.5	28	24,841	38.3	279,900	0.3	17	64,871	691,051
Disabled	81	1.5	960	0.3	20	775	14.8	9,174	0.1	1	5,228	57,054
5 and younger	2,172	16.0	25,743	0.4	24	1,973	14.6	23,444	0.1	2	13,542	157,372
6-14	1,585	17.3	18,458	0.4	27	2,268	24.7	26,663	0.2	3	9,175	102,348
15-20	4,120	22.2	46,300	0.5	31	8,136	43.8	91,095	0.3	16	18,596	192,971
21-44	4,932	26.9	55,216	0.5	29	11,683	63.8	129,485	0.4	24	18,313	181,180
45-64	6	35.3	60	0.5	21	6	35.3	39	0.3	12	17	126
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	10,873	2.9	121,937	0.3	21	47,049	12.6	529,513	0.1	2	374,086	3,680,104
Other Eligibles	308	0.2	3,611	0.2	8	11,604	7.6	130,792	0.1	1	153,522	1,305,591
5 and younger	5,788	3.8	67,293	0.3	20	18,276	12.1	213,153	0.1	1	150,696	1,666,961
6-14	3,365	5.3	37,450	0.3	24	13,406	21.1	149,462	0.1	2	63,533	656,679
15-20	872	19.6	8,249	0.3	18	2,706	60.9	25,658	0.4	15	4,442	33,791
21-44	243	25.3	2,368	0.4	25	637	66.4	5,910	0.4	18	960	7,577
45-64	125	27.8	1,350	0.7	37	196	43.7	2,218	0.4	12	449	4,830
65-74	104	37.0	1,022	0.7	42	138	49.1	1,464	0.4	10	281	2,799
75-84	68	33.5	594	0.8	49	86	42.4	856	0.4	12	203	1,876
85 and older	6	4.9	42	0.4	39	19	15.6	195	0.2	4	122	998
Unknown	6	4.9	42	0.4	39	19	15.6	195	0.2	4	122	998

Source: Data for this table are from the MAX 2004 file for Louisiana, 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^{a, b}
 NONDUAL BENEFICIARIES, LOUISIANA, 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
All	\$634	8.7	2,613	26,900
Age				
0-64	683	9.0	1,972	20,457
65-74	536	7.8	229	2,471
75-84	413	7.6	210	2,025
85 and older	481	7.1	202	1,947
Unknown	0	0.0	0	0
Gender				
Female	673	9.2	1,336	13,995
Male	593	8.0	1,272	12,882
Unknown	513	6.7	5	23
Race				
White	634	9.1	1,210	12,312
African American	635	8.2	1,168	12,303
Other/unknown	630	8.8	235	2,285
Basis of Eligibility^c				
Aged	482	7.5	632	6,369
Disabled	681	9.0	1,979	20,507
Adults	0	0.0	0	0
Children	1,178	10.3	2	24
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 2004 file for Louisiana, 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 1,386 beneficiaries who were in nursing facilities for part of their enrollment and their 13,035 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, LOUISIANA, 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	0.2	\$67	\$54	\$4	\$9	\$133	\$233	\$131	\$39	9,258	\$1,234,168	1,728	66.1 %	18,319
Biologicals	0.6	0.2	0.4	0.0	###	486	3,364	0	6545	2,067	9,531	0	20	130,898	3	0.1	34
Antineoplastic Agents	0.5	0.0	0.0	0.5	79	19	1	59	150	1,288	131	117	1,207	180,855	233	8.9	2,293
Endocrine/Metabolic Drugs	1.2	0.6	0.1	0.5	74	55	4	15	60	99	25	29	15,790	951,288	1,204	46.1	12,842
Cardiovascular Agents	2.2	0.6	0.1	1.5	85	44	8	33	39	78	55	22	42,189	1,648,508	1,855	71.0	19,365
Respiratory Agents	1.0	0.5	0.0	0.5	48	35	2	12	48	76	41	23	14,637	709,127	1,386	53.0	14,678
Gastrointestinal Agents	1.2	0.5	0.1	0.6	87	66	4	17	73	130	50	29	20,299	1,484,847	1,629	62.3	17,050
Genitourinary Agents	0.7	0.4	0.0	0.3	55	39	4	12	73	89	85	46	5,061	370,543	622	23.8	6,764
CNS Drugs	2.0	1.0	0.0	0.9	226	190	3	32	114	189	82	35	43,503	4,966,308	2,082	79.7	22,019
Stimulants/Anti-obesity/Anorexia	0.6	0.4	0.0	0.2	65	59	0	6	101	143	32	28	323	32,661	45	1.7	501
Miscellaneous Psychological/Neurological Agents	0.9	0.8	0.0	0.0	149	146	1	2	175	177	113	105	2,767	483,674	312	11.9	3,253
Analgesics and Anesthetics	1.1	0.4	0.0	0.7	63	50	1	12	58	121	64	18	17,584	1,015,047	1,525	58.4	16,093
Neuromuscular Agents	1.5	0.4	0.2	0.9	101	47	23	31	69	131	96	36	22,125	1,533,576	1,379	52.8	15,169
Nutritional Products	1.0	0.1	0.0	0.9	23	1	1	21	23	18	23	23	13,603	312,274	1,299	49.7	13,806
Hematological Agents	1.1	0.4	0.2	0.5	123	110	5	9	116	257	31	18	9,929	1,152,519	906	34.7	9,365
Topical Products	0.7	0.3	0.1	0.3	39	24	6	9	56	82	62	29	12,181	680,303	1,629	62.3	17,538
Miscellaneous Products	0.4	0.0	0.0	0.3	79	1	0	77	210	50	131	223	637	133,584	167	6.4	1,700
Unknown Therapeutic Category	0.5	0.0	0.0	0.0	14	0	0	0	28	0	0	0	1,662	46,331	304	11.6	3,402
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.	232,775	17,066,511	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2004 file for Louisiana, 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 1,386 beneficiaries who were in nursing facilities for part of their enrollment and their 13,035 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.medispain.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

In Louisiana, 0.5 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^{a, b, c, d}
 NONDUAL BENEFICIARIES, LOUISIANA, 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	\$3,720,929	1,884	72.1 %	20,794	0.9	\$207	\$179
ANTICONVULSANT	1,235,038	1,442	55.2	16,019	1.0	80	77
ULCER DRUGS	1,167,511	1,474	56.4	15,477	0.8	100	75
ANTIDEPRESSANTS	911,014	1,687	64.6	17,967	0.8	62	51
ANTIDIABETIC	748,118	1,412	54.0	15,371	0.8	59	49
HEMATOPOIETIC AGENTS	607,859	815	31.2	8,691	0.7	107	70
ANTIVIRAL	562,635	181	6.9	1,870	0.7	424	301
DERMATOLOGICAL	519,126	2,700	103.3	29,743	0.3	58	17
ANTIHYPERTENSIVE	506,427	1,459	55.8	15,621	0.8	41	32
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	483,674	361	13.8	3,799	0.7	175	127
Total	10,462,331	13,415		145,352	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2004 file for Louisiana, 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 1,386 beneficiaries who were in nursing facilities for part of their enrollment and their 13,035 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^{a, b, c, d}
 NONDUAL BENEFICIARIES, LOUISIANA, 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 \$
All	103,579	\$10,462,331	1,884	72.1 %	20,794	0.9	\$179	1,442	55.2 %	16,019	1.0	\$77
Female	57,509	5,823,494	1,058	79.2	11,686	0.9	182	769	57.6	8,609	1.0	78
Disabled	45,372	4,826,341	830	84.3	9,150	0.9	197	649	66.0	7,292	1.0	82
64 or younger	45,229	4,816,318	826	84.5	9,126	0.9	197	647	66.2	7,275	1.0	82
65-74	143	10,023	4	57.1	24	1.0	195	2	28.6	17	0.5	21
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
Other Eligibles	12,137	997,153	228	64.8	2,536	0.8	128	120	34.1	1,317	0.9	57
64 or younger	67	3,966	0	0.0	0	0.0	0	2	200.0	24	0.8	14
65-74	5,337	479,572	113	91.1	1,305	0.9	145	69	55.6	774	1.0	64
75-84	3,529	268,563	61	52.6	647	0.9	123	31	26.7	311	0.9	52
85 and older	3,204	245,052	54	48.6	584	0.7	93	18	16.2	208	0.9	45
Male	46,012	4,632,577	823	64.7	9,084	0.9	175	673	52.9	7,410	1.0	76
Disabled	37,649	3,966,823	681	68.4	7,650	0.9	183	591	59.4	6,634	1.0	79
64 or younger	37,599	3,957,712	678	68.3	7,626	0.9	182	590	59.4	6,628	1.0	79
65-74	50	9,111	3	150.0	24	1.6	347	1	50.0	6	1.0	119
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
Other Eligibles	8,363	665,754	142	51.3	1,434	0.8	137	82	29.6	776	0.9	48
64 or younger	21	1,437	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	3,451	291,679	70	73.7	758	0.9	163	36	37.9	387	0.9	54
75-84	2,773	202,363	42	45.7	440	0.8	107	25	27.2	236	0.9	39
85 and older	2,118	170,275	30	33.7	236	0.7	109	21	23.6	153	0.9	44
Unknown	58	6,260	3	60.0	24	0.4	89	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2004 file for Louisiana, 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 1,386 beneficiaries who were in nursing facilities for part of their enrollment and their 13,035 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^{a, b, c, d}
 NONDUAL BENEFICIARIES, LOUISIANA, 2004

Beneficiary Characteristics	ULCER DRUGS					ANTIDEPRESSANTS					ANTIDIABETIC				
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
All	1,474	56.4 %	15,477	0.8	\$75	1,687	64.6 %	17,967	0.8	\$51	1,412	54.0 %	15,371	0.8	\$49
Female	787	58.9	8,342	0.8	76	956	71.6	10,244	0.8	52	833	62.4	9,071	0.8	49
Disabled	607	61.7	6,436	0.8	77	741	75.3	7,909	0.8	53	661	67.2	7,175	0.8	50
64 or younger	603	61.7	6,410	0.8	77	738	75.5	7,885	0.8	53	656	67.1	7,141	0.8	50
65-74	4	57.1	26	0.7	37	3	42.9	24	1.0	45	5	71.4	34	0.5	18
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
Other Eligibles	180	51.1	1,906	0.7	72	215	61.1	2,335	0.8	49	172	48.9	1,896	0.8	44
64 or younger	3	300.0	36	1.2	99	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	71	57.3	782	0.7	63	78	62.9	909	0.8	51	79	63.7	891	0.8	41
75-84	57	49.1	559	0.7	70	80	69.0	829	0.8	45	50	43.1	524	0.8	36
85 and older	49	44.1	529	0.8	84	57	51.4	597	0.9	51	43	38.7	481	0.8	57
Male	687	54.0	7,135	0.7	75	728	57.2	7,709	0.8	49	579	45.5	6,300	0.8	49
Disabled	543	54.6	5,749	0.7	75	557	56.0	6,105	0.8	47	454	45.6	5,035	0.8	51
64 or younger	543	54.7	5,749	0.7	75	557	56.1	6,105	0.8	47	454	45.7	5,035	0.8	51
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
Other Eligibles	144	52.0	1,386	0.7	75	171	61.7	1,604	0.9	54	125	45.1	1,265	0.8	43
64 or younger	3	300.0	36	0.6	40	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	51	53.7	508	0.7	74	64	67.4	676	0.8	49	52	54.7	563	0.7	39
75-84	46	50.0	426	0.9	79	56	60.9	492	0.9	60	47	51.1	436	1.0	49
85 and older	44	49.4	416	0.7	76	51	57.3	436	0.9	56	26	29.2	266	0.8	40
Unknown	0	0.0	0	0.0	0	3	60.0	14	0.6	30	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2004 file for Louisiana, 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 1,386 beneficiaries who were in nursing facilities for part of their enrollment and their 13,035 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^{a, b, c, d}
 NONDUAL BENEFICIARIES, LOUISIANA, 2004

Beneficiary Characteristics	HEMATOPOIETIC AGENTS					ANTIVIRAL					DERMATOLOGICAL				
	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	815	31.2 %	8,691	0.7	\$70	181	6.9 %	1,870	0.7	\$301	2,700	103.3 %	29,743	0.3	\$18
Female	445	33.3	4,817	0.6	82	66	4.9	706	0.7	255	1,469	110.0	16,388	0.3	15
Disabled	343	34.9	3,691	0.6	92	62	6.3	664	0.7	270	1,125	114.3	12,624	0.3	15
64 or younger	339	34.7	3,666	0.6	92	62	6.3	664	0.7	270	1,115	114.1	12,526	0.3	15
65-74	4	57.1	25	0.8	6	0	0.0	0	0.0	0	10	142.9	98	0.2	11
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	102	29.0	1,126	0.6	51	4	1.1	42	0.1	9	344	97.7	3,764	0.3	15
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	200.0	24	0.3	4
65-74	34	27.4	387	0.6	108	1	0.8	12	0.1	1	118	95.2	1,351	0.3	18
75-84	40	34.5	425	0.6	27	1	0.9	11	0.1	21	114	98.3	1,176	0.3	16
85 and older	28	25.2	314	0.7	15	2	1.8	19	0.2	8	110	99.1	1,213	0.2	11
Male	370	29.1	3,874	0.7	55	115	9.0	1,164	0.7	329	1,227	96.5	13,327	0.3	20
Disabled	282	28.3	2,958	0.7	61	108	10.9	1,090	0.8	351	1,020	102.5	11,178	0.3	22
64 or younger	282	28.4	2,958	0.7	61	108	10.9	1,090	0.8	351	1,016	102.3	11,142	0.3	22
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	4	200.0	36	0.1	2
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
Other Eligibles	88	31.8	916	0.6	36	7	2.5	74	0.1	8	207	74.7	2,149	0.3	11
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	34	35.8	391	0.6	11	2	2.1	24	0.1	9	84	88.4	933	0.3	11
75-84	30	32.6	289	0.6	24	3	3.3	26	0.1	8	78	84.8	785	0.2	8
85 and older	24	27.0	236	0.7	91	2	2.2	24	0.1	8	45	50.6	431	0.3	17
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	4	80.0	28	0.2	10

Source: Data for this table are from the MAX 2004 file for Louisiana, 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 1,386 beneficiaries who were in nursing facilities for part of their enrollment and their 13,035 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^{a, b, c, d}
 NONDUAL BENEFICIARIES, LOUISIANA, 2004

Beneficiary Characteristics	ANTIHYPERTENSIVE					MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL					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
All	1,459	55.8 %	15,621	0.8	\$32	361	13.8 %	3,799	0.7	\$127	2,613	26,900
Female	779	58.3	8,536	0.8	32	207	15.5	2,192	0.7	145	1,336	13,995
Disabled	608	61.8	6,656	0.8	33	111	11.3	1,228	0.7	181	984	10,323
64 or younger	607	62.1	6,653	0.8	33	109	11.2	1,208	0.7	183	977	10,267
65-74	1	14.3	3	1.0	65	2	28.6	20	0.5	48	7	56
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
Other Eligibles	171	48.6	1,880	0.8	29	96	27.3	964	0.8	99	352	3,672
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12
65-74	73	58.9	832	0.7	26	18	14.5	213	0.8	96	124	1,379
75-84	49	42.2	511	0.8	32	35	30.2	317	0.8	97	116	1,140
85 and older	49	44.1	537	0.8	30	43	38.7	434	0.8	103	111	1,141
Male	677	53.2	7,055	0.8	33	151	11.9	1,577	0.7	104	1,272	12,882
Disabled	516	51.9	5,434	0.8	32	78	7.8	878	0.7	104	995	10,184
64 or younger	516	52.0	5,434	0.8	32	78	7.9	878	0.7	104	993	10,166
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	18
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
Other Eligibles	161	58.1	1,621	0.8	37	73	26.4	699	0.8	103	277	2,698
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12
65-74	59	62.1	629	0.8	33	18	18.9	168	0.9	116	95	1,017
75-84	59	64.1	560	0.8	43	27	29.3	278	0.7	90	92	871
85 and older	43	48.3	432	0.8	34	28	31.5	253	0.8	108	89	798
Unknown	3	60.0	30	0.5	31	3	60.0	30	0.6	84	5	23

Source: Data for this table are from the MAX 2004 file for Louisiana, 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 1,386 beneficiaries who were in nursing facilities for part of their enrollment and their 13,035 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^{a,b}
 LOUISIANA, 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
All	267,002	27.0 %	0.8	790,930	\$17	\$17,234,757	\$22	3.3 %	989,334
Age									
5 and younger	109,896	35.4	0.8	239,615	14	4,411,671	18	5.3	310,718
6-14	66,373	20.6	0.4	133,204	10	3,138,914	24	2.8	321,814
15-20	29,736	18.4	0.4	63,072	10	1,582,046	25	2.7	161,176
21-44	36,663	26.1	1.2	163,620	27	3,773,297	23	3.2	140,732
45-64	23,003	44.2	3.4	179,680	76	3,977,741	22	2.7	52,098
65-74	729	47.8	4.3	6,478	94	143,118	22	3.0	1,524
75-84	376	49.1	4.1	3,132	66	50,388	16	2.7	766
85 and older	226	44.8	4.2	2,129	313	157,582	74	11.5	504
Unknown	0	0.0	0.0	0	0	0	0	0.0	2
Basis of Eligibility^c									
Aged	1,302	47.6	4.2	11,518	127	346,742	30	4.5	2,735
Disabled	48,189	37.0	2.4	314,803	61	7,931,426	25	2.8	130,184
Adults	27,870	22.7	0.7	85,746	14	1,710,296	20	3.7	122,912
Children	189,425	25.8	0.5	378,014	10	7,233,652	19	3.9	732,810
Unknown	216	31.2	1.2	849	18	12,641	15	0.6	693
Gender									
Female	153,930	28.0	0.9	484,179	19	10,661,067	22	3.6	550,255
Male	113,032	25.8	0.7	306,670	15	6,572,456	21	2.9	438,959
Unknown	40	33.3	0.7	81	10	1,234	15	3.6	120
Race									
White	111,098	31.8	1.0	359,228	23	7,918,660	22	3.3	349,213
African American	135,899	23.8	0.6	362,609	13	7,575,197	21	3.2	570,240
Other/unknown	20,005	28.6	1.0	69,093	25	1,740,900	25	3.4	69,881
Use of Nursing Facilities^d									
Entire year	1,873	71.7	10.6	27,732	268	699,698	25	4.1	2,613
Part year	1,031	74.4	6.9	9,514	182	252,044	26	3.7	1,386
None	264,098	26.8	0.8	753,684	17	16,283,015	22	3.2	985,335
Maintenance Assistance Status									
Cash	95,968	31.7	1.4	437,121	34	10,159,791	23	3.0	302,767
Medically needy	759	34.0	1.1	2,546	48	107,687	42	6.1	2,233
Poverty related	144,184	24.5	0.5	279,676	9	5,478,489	20	3.5	589,333
Other/unknown	26,091	27.5	0.8	71,587	16	1,488,790	21	4.1	95,001

Source: Data for this table are from the MAX 2004 file for Louisiana, 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^{a,b}
 LOUISIANA, 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
All	0.1	\$2	\$22	\$0	\$0	9,693,288
Age						
5 and younger	0.1	2	18	0	0	2,667,283
6-14	0.0	1	24	0	0	3,572,429
15-20	0.0	1	25	0	0	1,654,604
21-44	0.1	3	23	0	1	1,240,204
45-64	0.3	8	22	0	3	529,696
65-74	0.4	9	22	0	3	16,624
75-84	0.4	6	16	0	2	7,783
85 and older	0.5	34	74	0	2	4,661
Unknown	0.0	0	0	0	0	4
Basis of Eligibility^c						
Aged	0.4	12	30	0	2	28,644
Disabled	0.2	6	25	0	2	1,400,689
Adults	0.1	2	20	0	1	1,000,578
Children	0.1	1	19	0	0	7,258,191
Unknown	0.2	2	15	0	1	5,186
Gender						
Female	0.1	2	22	0	0	5,321,135
Male	0.1	2	21	0	0	4,371,159
Unknown	0.1	1	15	0	0	994
Race						
White	0.1	2	22	0	1	3,289,863
African American	0.1	1	21	0	0	5,757,874
Other/unknown	0.1	3	25	0	1	645,551
Use of Nursing Facilities^d						
Entire year	1.0	26	25	1	7	26,900
Part year	0.7	19	26	0	5	13,035
None	0.1	2	22	0	0	9,653,353
Maintenance Assistance Status						
Cash	0.1	3	23	0	1	3,120,954
Medically needy	0.1	5	42	0	1	22,645
Poverty related	0.0	1	20	0	0	5,946,675
Other/unknown	0.1	2	21	0	0	603,014

Source: Data for this table are from the MAX 2004 file for Louisiana, 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^{a,b,c}
 LOUISIANA, 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
All	329,039	\$52	\$17,234,757	100.0 %	790,930	\$22	100.0 %
Anorexia or weight loss/gain	0	0	0	0.0	0	0	0.0
Fertility drugs	7	242	1,693	0.0	8	212	0.0
Drugs for cosmetic purposes	0	0	0	0.0	0	0	0.0
Cough and cold medications	181,743	37	6,680,189	38.8	317,999	21	40.2
Vitamins and minerals	53,338	50	2,651,026	15.4	146,848	18	18.6
Non-prescription drugs	40,280	20	823,379	4.8	74,699	11	9.4
Barbiturates	3,465	80	277,106	1.6	27,462	10	3.5
Benzodiazepines	30,131	124	3,732,191	21.7	175,692	21	22.2
Other Part D Excl Rx Drugs	20,075	153	3,069,173	17.8	48,222	64	6.1

Source: Data for this table are from the MAX 2004 file for Louisiana, 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^{a, b}
 NONDUAL BENEFICIARIES, LOUISIANA, 2004

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Disabled	Adults	Children	Unknown	All	Aged	Disabled	Adults	Children	Unknown
All	989,334	2,735	130,184	122,912	732,810	693	9,693,288	28,644	1,400,689	1,000,578	7,258,191	5,186
Age												
5 and younger	310,718	0	8,773	1	301,944	0	2,667,283	0	95,365	8	2,571,910	0
6-14	321,814	0	20,150	24	301,640	0	3,572,429	0	234,159	111	3,338,159	0
15-20	161,176	0	14,766	17,248	129,156	6	1,654,604	0	165,627	141,468	1,347,469	40
21-44	140,732	0	39,487	100,963	65	217	1,240,204	0	420,487	817,590	613	1,514
45-64	52,098	0	46,955	4,673	3	467	529,696	0	484,673	41,374	36	3,613
65-74	1,524	1,466	53	2	0	3	16,624	16,208	378	19	0	19
75-84	766	766	0	0	0	0	7,783	7,783	0	0	0	0
85 and older	504	503	0	1	0	0	4,661	4,653	0	8	0	0
Unknown	2	0	0	0	2	0		0	0	0	4	0
Gender												
Female	550,255	1,795	65,310	116,896	365,561	693	5,321,135	19,112	709,624	954,232	3,632,981	5,186
Male	438,959	933	64,871	6,011	367,144	0	4,371,159	9,505	691,051	46,289	3,624,314	0
Unknown	120	7	3	5	105	0	994	27	14	57	896	0
Race												
White	349,213	957	38,648	46,045	263,241	322	3,289,863	9,717	400,306	343,912	2,533,528	2,400
African American	570,240	1,231	75,644	70,173	422,863	329	5,757,874	13,264	827,169	609,554	4,305,423	2,464
Other/unknown	69,881	547	15,892	6,694	46,706	42	645,551	5,663	173,214	47,112	419,240	322
Use of Nursing Facilities^c												
Entire year	2,613	632	1,979	0	2	0	26,900	6,369	20,507	0	24	0
Part year	1,386	188	1,173	17	8	0	13,035	1,672	11,123	158	82	0
None	985,335	1,915	127,032	122,895	732,800	693	9,653,353	20,603	1,369,059	1,000,420	7,258,085	5,186
Maintenance Assistance Status												
Cash	302,767	1,957	125,174	65,955	109,681	0	3,120,954	21,659	1,351,702	621,153	1,126,440	0
Medically needy	2,233	2	219	1,466	546	0	22,645	12	1,621	15,026	5,986	0
Poverty related	589,333	10	19	47,578	541,033	693	5,946,675	92	217	287,727	5,653,453	5,186
Other/unknown	95,001	766	4,772	7,913	81,550	0	603,014	6,881	47,149	76,672	472,312	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	989,334	2,735	130,184	122,912	732,810	693	9,693,288	28,644	1,400,689	1,000,578	7,258,191	5,186
FFS part year, with Rx claims	0	0	0	0	0	0		0	0	0	0	0
FFS part year, no Rx claims	0	0	0	0	0	0		0	0	0	0	0
MC all year, with Rx claims	0	0	0	0	0	0		0	0	0	0	0
MC all year, no Rx claims	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 Louisiana, 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^a
 NONDUAL BENEFICIARIES, LOUISIANA, 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
All	989,334	9,693,288	989,334	9,693,288	0	0
Fee-for-service (FFS) all year	989,334	9,693,288	989,334	9,693,288	0	0
FFS part year, with Rx claims	0	0	0	0	0	0
FFS part year, with no Rx claims	0	0	0	0	0	0
Managed care (MC) all year, with Rx claims	0	0	0	0	0	0
MC all year, with no Rx claims	0	0	0	0	0	0

Source: Data for this table are from the MAX 2004 file for Louisiana, 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.