

STATISTICAL COMPENDIUM: MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2002 WISCONSIN

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TABLE D.2
 CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a,b}
 DUAL ELIGIBLE BENEFICIARIES, WISCONSIN, 2002

Beneficiary Characteristics	No. of Benes						No. of Bene Mos					
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown
All	123,062	54,084	65,726	3,227	22	3	1,284,325	533,710	721,343	29,083	171	18
Age												
5 and younger	10	3	6	0	1	0	85	20	53	0	12	0
6-14	16	0	16	0	0	0	180	0	180	0	0	0
15-20	217	0	210	4	3	0	2,366	0	2,328	21	17	0
21-44	23,878	10	22,111	1,749	8	0	263,164	105	247,324	15,648	87	0
45-64	26,552	55	25,247	1,245	2	3	288,811	440	276,970	11,369	14	18
65-74	21,013	12,139	8,663	205	6	0	222,386	123,862	96,657	1,849	18	0
75-84	25,681	19,816	5,843	22	0	0	261,211	199,565	61,474	172	0	0
85 and older	25,695	22,061	3,630	2	2	0	246,122	209,718	36,357	24	23	0
Unknown	0	0	0	0	0	0		0	0	0	0	0
Gender												
Female	77,802	39,366	36,833	1,592	8	3	815,880	395,174	406,366	14,242	80	18
Male	45,260	14,718	28,893	1,635	14	0	468,445	138,536	314,977	14,841	91	0
Unknown	0	0	0	0	0	0		0	0	0	0	0
Race												
White	67,265	37,423	27,550	2,280	11	1	677,344	361,263	294,829	21,149	91	12
African American	6,164	1,958	3,748	456	1	1	62,835	20,121	38,775	3,923	12	4
Other/unknown	49,633	14,703	34,428	491	10	1	544,146	152,326	387,739	4,011	68	2
Use of Nursing Facilities^c												
Entire year	24,705	23,032	1,670	0	3	0	244,880	226,910	17,945	0	25	0
Part year	9,656	7,530	2,122	4	0	0	87,136	64,658	22,446	32	0	0
None	88,701	23,522	61,934	3,223	19	3	952,309	242,142	680,952	29,051	146	18
Maintenance Assistance Status												
Cash	45,377	12,714	32,427	234	2	0	513,704	142,700	369,283	1,697	24	0
Medically needy	11,595	7,152	4,419	21	3	0	109,527	66,736	42,665	106	20	0
Poverty-related	4,445	489	3,929	24	0	3	46,928	5,258	41,489	163	0	18
Other/unknown	61,645	33,729	24,951	2,948	17	0	614,166	319,016	267,906	27,117	127	0
Dual Medicare Status^d												
Full dual, all year	120,020	52,554	64,230	3,211	22	3	1,251,358	516,982	705,289	28,898	171	18
Full dual, part year	3,042	1,530	1,496	16	0	0	32,967	16,728	16,054	185	0	0
Managed Care Status												
FFS all year	122,157	54,074	65,542	2,516	22	3	1,278,446	533,653	720,000	24,604	171	18
FFS part year, with Rx claims	763	4	172	587	0	0	5,221	30	1,296	3,895	0	0
FFS part year, no Rx claims	142	6	12	124	0	0	658	27	47	584	0	0

Source: Data for this table are from the MAX 2002 file for Wisconsin, released by CMS in 05/2006. This table was produced on 04/19/2007.

- a. Table D.2 includes the beneficiaries represented by Cell G of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- b. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services. The total includes some beneficiaries with unknown basis of eligibility and some whose age categories are not consistent with basis of eligibility.
- c. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.
- d. The "Full dual, all year" group contains beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefits during all months of Medicaid enrollment in 2002. The "Full dual, part year" group contains beneficiaries who had such benefits for some, but not all, months of their enrollment. Refer to footnote g of Table 1 for more information about how we determined dual eligibility status.

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

TABLE D.3
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC^{a,b}
 DUAL ELIGIBLE BENEFICIARIES, WISCONSIN, 2002

Beneficiary Characteristics	% with at Least One Rx	Mean No. of Rx	Mean Rx \$	\$ per Rx	Mean \$, All Services	Rx \$ as % of All Services	No. of Benes
All	87.7 %	48.9	\$2,550	\$52	\$17,094	14.8 %	123,062
Age							
5 and younger	100.0	42.3	2,681	63	9,631	27.8	10
6-14	93.8	59.8	5,974	100	37,717	15.8	16
15-20	73.7	23.0	2,092	91	10,750	19.5	217
21-44	83.1	35.4	2,756	78	13,305	20.7	23,878
45-64	87.8	53.3	3,337	63	16,370	20.4	26,552
65-74	84.5	49.2	2,307	47	14,263	16.2	21,013
75-84	89.2	53.8	2,243	42	18,369	12.2	25,681
85 and older	93.2	52.0	1,955	38	22,448	8.7	25,695
Unknown	0.0	0.0	0	0	0	0.0	0
Basis of Eligibility^c							
Aged	90.6	51.9	2,127	41	18,756	11.3	54,084
Disabled	85.5	47.2	2,876	61	16,344	17.6	65,726
Adults	84.8	32.5	2,223	69	4,517	49.2	3,227
Children	50.0	24.4	1,565	64	20,017	7.8	22
Unknown	66.7	11.7	576	49	8,074	7.1	3
Gender							
Female	90.4	53.5	2,598	49	17,437	14.9	77,802
Male	83.1	41.1	2,412	59	16,504	14.6	45,260
Unknown	0.0	0.0	0	0	0	0.0	0
Race							
White	90.4	54.4	2,664	49	21,651	12.3	67,265
African American	81.5	41.4	2,161	52	19,457	11.1	6,164
Other/unknown	84.8	42.4	2,393	56	10,625	22.5	49,633
Use of Nursing Facilities^d							
Entire year	95.8	66.4	2,783	42	29,718	9.4	24,705
Part year	96.3	59.2	2,531	43	19,603	12.9	9,656
None	84.5	42.9	2,459	57	13,305	18.5	88,701
Maintenance Assistance Status							
Cash	85.0	43.7	2,473	57	11,274	21.9	45,377
Medically needy	87.5	45.7	2,506	55	8,543	29.3	11,595
Poverty related	85.5	38.0	2,619	69	7,436	35.2	4,445
Other/unknown	89.9	54.2	2,569	47	23,683	10.8	61,645

Source: Data for this table are from the MAX 2002 file for Wisconsin, released by CMS in 05/2006. This table was produced on 04/19/2007.

- a. Table D.3 includes beneficiaries represented by Cell G of Table 1.
 - b. The Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
 - c. 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 of Table 1 for methodology used to determine nursing facility residence.
- Bene(s) = beneficiary (or beneficiaries); CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; OTC = over-the-counter; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.4
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a,b}
 DUAL ELIGIBLE BENEFICIARIES, WISCONSIN, 2002

Beneficiary Characteristics	Mean No. of Rx	Mean Rx \$	Rx \$ as % of All Services	No. of Rx, % with:					Mean \$, All Services	Benes	Bene Mos	
				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
All	4.7	\$242	14.8 %	12.3 %	14.7 %	9.7 %	27.7 %	26.6 %	9.1 %	\$1,638	123,062	1,284,325
Age												
5 and younger	5.0	315	27.8	0.0	10.0	0.0	40.0	50.0	0.0	1,133	10	85
6-14	5.3	531	15.8	6.3	6.3	12.5	43.8	18.8	12.5	3,353	16	180
15-20	2.1	192	19.5	26.3	35.5	10.6	16.6	8.8	2.3	986	217	2,366
21-44	3.2	250	20.7	16.9	26.1	12.4	24.5	15.5	4.6	1,207	23,878	263,164
45-64	4.9	307	20.4	12.2	14.7	9.7	27.1	26.1	10.2	1,505	26,552	288,811
65-74	4.6	218	16.2	15.5	14.2	9.3	26.3	25.4	9.3	1,348	21,013	222,386
75-84	5.3	221	12.2	10.8	10.3	8.5	28.2	30.9	11.3	1,806	25,681	261,211
85 and older	5.4	204	8.7	6.8	8.5	8.9	31.9	34.1	9.7	2,344	25,695	246,122
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Basis of Eligibility^c												
Aged	5.3	216	11.3	9.4	10.8	9.0	29.3	30.8	10.7	1,901	54,084	533,710
Disabled	4.3	262	17.6	14.5	17.4	10.2	26.4	23.5	8.0	1,489	65,726	721,343
Adults	3.6	247	49.2	15.2	23.4	12.9	26.0	18.2	4.2	501	3,227	29,083
Children	3.1	201	7.8	50.0	0.0	9.1	22.7	18.2	0.0	2,575	22	171
Unknown	1.9	96	7.1	33.3	33.3	0.0	33.3	0.0	0.0	1,346	3	18
Gender												
Female	5.1	248	14.9	9.6	12.5	9.5	28.8	29.4	10.3	1,663	77,802	815,880
Male	4.0	233	14.6	16.9	18.4	10.2	25.7	21.7	7.1	1,595	45,260	468,445
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	5.4	265	12.3	9.6	10.9	8.7	28.5	30.9	11.4	2,150	67,265	677,344
African American	4.1	212	11.1	18.5	16.1	10.0	27.1	21.9	6.4	1,909	6,164	62,835
Other/unknown	3.9	218	22.5	15.2	19.5	11.1	26.6	21.3	6.3	969	49,633	544,146
use of nursing Facilities^d												
Entire year	6.7	281	9.4	4.2	5.5	6.4	27.8	38.9	17.2	2,998	24,705	244,880
Part year	6.6	281	12.9	3.7	6.5	7.3	29.7	37.5	15.3	2,172	9,656	87,136
None	4.0	229	18.5	15.5	18.1	10.9	27.4	21.9	6.1	1,239	88,701	952,309
Maintenance Assistance Status												
Cash	3.9	219	21.9	15.0	19.6	11.1	27.0	21.3	6.0	996	45,377	513,704
Medically needy	4.8	265	29.3	12.5	12.8	9.8	29.7	26.7	8.6	904	11,595	109,527
Poverty related	3.6	248	35.2	14.5	23.7	12.4	25.9	18.4	5.1	704	4,445	46,928
Other/unknown	5.4	258	10.8	10.1	10.7	8.5	27.9	31.0	11.7	2,377	61,645	614,166

Source: Data for this table are from the MAX 2002 file for Wisconsin, released by CMS in 05/2006. This table was produced on 04/19/2007.

- a. Table D.4 includes the beneficiaries represented by Cell G of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- b. The Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
- c. 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 of Table 1 for methodology used to determine nursing facility residence.

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.5
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, WISCONSIN, 2002

Beneficiary Characteristics	All Rx		Patented Brand-Name Drugs		Off-Patent Brand-Name Drugs		Generic Drugs	
	No. of Rx	Rx \$	No. of Rx	\$ per Rx	No. of Rx	Rx \$	No. of Rx	Rx \$
All	4.7	\$242	2.0	\$189	0.4	\$17	2.3	\$36
Age								
5 and younger	5.0	315	2.6	252	0.6	45	1.8	19
6-14	5.3	531	2.4	452	0.3	44	2.6	35
15-20	2.1	192	0.9	134	0.2	19	1.0	39
21-44	3.2	250	1.5	201	0.3	19	1.5	30
45-64	4.9	307	2.2	243	0.4	21	2.4	43
65-74	4.6	218	2.0	170	0.3	14	2.3	34
75-84	5.3	221	2.2	170	0.4	14	2.7	37
85 and older	5.4	204	2.0	152	0.5	15	2.9	37
Unknown	0.0	0	0.0	0	0.0	0	0.0	0
Basis of Eligibility^d								
Aged	5.3	216	2.1	165	0.4	14	2.7	37
Disabled	4.3	262	1.9	207	0.3	19	2.1	36
Adults	3.6	247	1.6	202	0.2	14	1.7	31
Children	3.1	201	1.2	149	0.2	30	1.7	22
Unknown	1.9	96	1.1	88	0.0	0	0.9	8
Gender								
Female	5.1	248	2.1	193	0.4	17	2.5	38
Male	4.0	233	1.6	183	0.3	16	2.0	34
Unknown	0.0	0	0.0	0	0.0	0	0.0	0
Race								
White	5.4	265	2.2	205	0.4	18	2.7	41
African American	4.1	212	1.7	168	0.2	12	2.1	31
Other/unknown	3.9	218	1.7	172	0.3	16	1.9	31
Use of Nursing Facilities^e								
Entire year	6.7	281	2.6	212	0.6	19	3.5	49
Part year	6.6	281	2.6	215	0.5	18	3.4	47
None	4.0	229	1.7	181	0.3	16	2.0	32
Maintenance Assistance Status								
Cash	3.9	219	1.7	172	0.3	16	1.9	31
Medically needy	4.8	265	2.1	210	0.4	17	2.4	39
Poverty related	3.6	248	1.6	196	0.3	20	1.7	32
Other/unknown	5.4	258	2.2	199	0.4	17	2.8	41

Source: Data for this table are from the MAX 2002 file for Wisconsin, released by CMS in 05/2006. This table was produced on 04/19/2007.

- a. Table D.5 includes the beneficiaries represented by Cell G of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- b. The Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
- c. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In Wisconsin, 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.Medi-Span.com/products/product_mddb.asp (May 13 2003).
- 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 = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.6

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, WISCONSIN, 2002

Therapeutic Category	No. of Rx per Bene Mo among Users			\$ per Bene Mo among Users			\$ per Rx			Users				
	Total	Patented	Off-Patent	Total	Patented	Off-Patent	Total	Patented	Off-Patent	Total No. of Rx	Total Rx \$	No. Dual Benes	As % of Benes	No. of Bene Mos
		Brand-Name	Generic		Brand-Name	Generic		Brand-Name	Generic					
Anti-infective Agents	0.3	0.2	0.0	0.2	\$17	\$1	\$2	\$112	\$80	\$14	\$14,027,647	60,898	49.5 %	663,150
Biologics	0.5	0.0	0.1	0.3	13	212	781	272	1,959	2,330	195,075	17	0.0	194
Antineoplastic Agents	0.7	0.4	0.0	0.2	126	6	9	297	135	39	4,553,549	3,507	2.8	36,260
Endocrine/Metabolic Drugs	1.1	0.5	0.2	0.4	38	4	5	57	20	13	20,311,747	50,039	40.7	536,905
Cardiovascular Agents	1.9	0.6	0.1	1.2	53	4	14	59	29	12	40,275,673	71,699	58.3	757,269
Respiratory Agents	0.8	0.5	0.1	0.3	44	5	5	71	74	19	18,751,899	39,165	31.8	428,499
Gastrointestinal Agents	0.8	0.4	0.0	0.4	63	1	5	125	82	14	31,297,142	46,598	37.9	498,786
Genitourinary Agents	0.6	0.5	0.0	0.1	34	0	2	70	43	15	6,508,243	17,664	14.4	191,669
CNS Drugs	1.6	0.8	0.1	0.7	121	100	7	124	98	20	85,381,719	66,035	53.7	703,964
Stimulants/Anti-obesity/Anorexia	0.6	0.2	0.1	0.3	47	6	11	129	73	36	1,153,857	2,187	1.8	24,451
Miscellaneous Psychological/Neurological Agents	0.7	0.6	0.0	0.0	86	0	3	136	0	66	6,590,414	7,420	6.0	76,725
Analgesics and Anesthetics	0.9	0.3	0.1	0.5	48	4	8	117	66	16	30,483,513	59,278	48.2	632,847
Neuromuscular Agents	1.2	0.5	0.1	0.6	72	55	6	115	56	20	27,690,856	35,016	28.5	383,022
Nutritional Products	0.7	0.0	0.0	0.7	13	0	1	36	25	17	3,071,019	22,491	18.3	233,718
Hematological Agents	1.0	0.2	0.2	0.5	41	32	3	151	14	11	9,382,071	22,043	17.9	229,439
Topical Products	0.5	0.2	0.0	0.2	17	12	2	58	51	16	8,972,546	47,208	38.4	519,243
Miscellaneous Products	0.4	0.1	0.0	0.2	71	50	11	339	235	40	2,350,854	3,198	2.6	33,277
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	8	0	0	0	0	0	290,285	3,246	2.6	35,506
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.	311,288,109	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2002 file for Wisconsin, released by CMS in 05/2006. This table was produced on 04/19/2007.

- a. Table D.6 includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 2002. A beneficiary who used drugs from two or more categories was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
 - b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
 - c. For information about these therapeutic categories, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).
 - 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 Wisconsin, 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.Medi-Span.com/products/product_mddb.asp (May 13 2003).
- Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Center for Medicare and Medicaid Services; CNS = Central Nervous System; MAX = Medicaid Analytic Extract; n.a. = not applicable; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.7
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, WISCONSIN, 2002

Top 10 Drug Groups	Users				Among Users		
	Total Medicaid Rx \$	No.	As % of Dual Benes	No. of Bene Mos	No. of Rx per Bene Mo	\$ per Rx	Rx \$ per Bene Mo
ANTIPSYCHOTICS	\$51,333,288	37,091	30.1 %	404,803	0.9	\$144	\$127
ANTIDEPRESSANTS	28,133,944	60,993	49.6	654,240	0.7	58	43
ULCER DRUGS	26,689,951	44,899	36.5	483,883	0.7	85	55
ANTICONVULSANT	22,687,172	30,257	24.6	333,970	0.9	74	68
ANALGESICS - Narcotic	17,012,032	66,467	54.0	712,449	0.5	51	24
ANTHYPERLIPIDEMIC	13,576,414	22,686	18.4	252,110	0.7	75	54
ANTIDIABETIC	12,770,098	33,996	27.6	365,592	0.8	44	35
ANTIASTHMATIC	11,256,775	39,026	31.7	422,099	0.5	53	27
ANALGESICS - ANTI-INFLAMMATORY	10,622,440	32,853	26.7	366,490	0.4	65	29
ANTHYPERTENSIVE	9,621,431	42,655	34.7	456,960	0.7	29	21
Total	203,703,545	410,923		4,452,596	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2002 file for Wisconsin, released by CMS in 05/2006. This table was produced on 04/19/2007.

a. Table D.7 includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2002. 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 2002. For information about these drug groups, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).

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

TABLE D.7A
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR TOP 10 DRUG GROUPS COMBINED
 AND FIRST AND SECOND GROUPS SEPARATELY, BY SEX, BOE, AND AGE^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, WISCONSIN, 2002

Beneficiary Characteristics	All Top 10 Drug Groups				ANTIPSYCHOTICS				ANTIDEPRESSANTS			
	No. of Rx	Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
All	2,973,969	\$203,703,545	37,091	30.1 %	404,803	0.9	\$127	60,993	49.6 %	654,240	0.7	\$43
Female	1,974,363	128,652,149	21,648	27.8	235,285	0.8	110	42,498	54.6	457,869	0.7	43
Disabled	1,017,822	74,656,360	12,090	32.8	137,547	0.9	127	22,135	60.1	250,083	0.7	43
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	129	4,840	1	11.1	12	0.1	1	2	22.2	24	0.6	25
15-20	795	54,590	14	14.6	168	0.6	94	30	31.3	346	0.5	22
21-44	228,904	20,251,611	4,351	43.8	50,174	0.8	132	6,686	67.3	76,326	0.7	45
45-64	450,389	34,270,477	5,336	39.1	61,295	0.9	137	9,698	71.1	110,386	0.7	45
65-74	172,911	10,842,625	1,088	18.8	12,307	0.8	112	2,645	45.8	29,982	0.7	36
75-84	110,193	6,296,653	808	18.5	8,629	0.8	87	1,917	44.0	20,985	0.7	37
85 and older	54,501	2,935,564	492	16.3	4,962	0.7	78	1,157	38.4	12,034	0.7	37
Other Eligibles	956,541	53,995,789	9,558	23.3	97,738	0.7	86	20,363	49.7	207,786	0.8	43
5 and younger	34	1,404	1	33.3	4	1.8	175	1	33.3	12	0.8	10
6-14	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	19,017	1,462,019	302	28.5	3,084	0.5	83	813	76.6	8,026	0.6	42
45-64	12,856	987,075	112	22.0	1,164	0.5	88	410	80.4	4,123	0.6	48
65-74	188,018	11,339,438	1,418	18.7	15,213	0.8	111	3,167	41.7	34,066	0.7	39
75-84	358,772	20,064,065	3,292	23.4	34,225	0.7	88	6,875	48.9	71,319	0.8	42
85 and older	377,844	20,141,788	4,433	25.0	44,048	0.7	75	9,097	51.3	90,240	0.8	44
Male	999,606	75,051,396	15,443	34.1	169,518	1.0	150	18,495	40.9	196,371	0.7	43
Disabled	660,315	55,674,846	11,552	40.0	131,473	1.0	166	11,570	40.0	129,523	0.7	44
5 and younger	27	2,176	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	42	1,756	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	1,154	90,946	31	27.2	355	0.5	85	40	35.1	458	0.5	27
21-44	243,401	24,118,682	5,760	47.3	66,204	1.0	172	5,046	41.4	57,688	0.7	44
45-64	312,741	25,435,137	4,928	42.5	55,853	1.1	169	5,041	43.5	55,887	0.8	45
65-74	65,314	3,976,497	489	16.9	5,509	0.9	124	806	27.9	9,004	0.7	38
75-84	27,952	1,536,582	240	16.2	2,547	0.8	96	448	30.1	4,622	0.7	35
85 and older	9,684	513,070	104	16.9	1,005	0.8	85	189	30.6	1,864	0.7	38
Other Eligibles	339,291	19,376,550	3,891	23.8	38,045	0.8	95	6,925	42.3	66,848	0.8	43
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	47	5,450	3	50.0	26	0.6	164	2	33.3	13	0.4	20
21-44	12,093	1,088,977	149	21.1	1,583	0.6	127	392	55.5	4,033	0.5	36
45-64	15,468	1,097,244	119	15.0	1,232	0.5	77	357	44.9	3,579	0.6	34
65-74	96,905	5,820,125	989	20.8	10,376	0.9	120	1,411	29.7	14,506	0.8	42
75-84	129,162	6,985,874	1,479	25.6	14,182	0.8	90	2,602	45.1	24,959	0.8	44
85 and older	85,616	4,378,880	1,152	26.6	10,646	0.7	74	2,161	49.8	19,758	0.8	44
Unknown	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2002 file for Wisconsin, released by CMS in 05/2006. This table was produced on 04/19/2007.

a. Table D.7A includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2002. 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 2002. For information about these drug groups, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mdmb.asp (May 13 2003).

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

TABLE D.7B
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR THIRD TO FIFTH TOP DRUG GROUPS
 SEPARATELY, BY SEX, BOE, AND AGE^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, WISCONSIN, 2002

Beneficiary Characteristics	ULCER DRUGS					ANTICONVULSANT					ANALGESICS - Narcotic				
	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
All	44,899	36.5 %	483,883	0.7	\$55	30,257	24.6 %	333,970	0.9	\$68	66,467	54.0 %	712,449	0.5	\$24
Female	30,952	39.8	335,211	0.7	55	18,066	23.2	199,203	0.9	63	46,616	59.9	501,743	0.5	23
Disabled	14,769	40.1	167,204	0.6	57	11,865	32.2	135,099	0.9	72	24,051	65.3	272,584	0.4	23
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	4	44.4	46	0.5	25	3	33.3	34	0.4	30	3	33.3	36	0.1	1
15-20	17	17.7	186	0.7	47	21	21.9	240	0.8	72	34	35.4	405	0.2	2
21-44	3,052	30.7	35,195	0.5	50	4,305	43.3	49,413	0.9	83	6,321	63.6	72,213	0.4	24
45-64	6,097	44.7	69,503	0.6	61	5,446	39.9	62,171	0.9	73	10,095	74.0	115,128	0.4	26
65-74	2,612	45.2	29,740	0.6	58	1,110	19.2	12,565	0.9	51	3,737	64.7	42,521	0.4	19
75-84	1,851	42.5	20,362	0.7	56	680	15.6	7,529	0.8	40	2,499	57.4	27,738	0.4	17
85 and older	1,136	37.7	12,172	0.7	55	300	10.0	3,147	0.8	30	1,362	45.2	14,543	0.4	18
Other Eligibles	16,183	39.5	168,007	0.7	53	6,201	15.1	64,104	0.9	44	22,565	55.1	229,159	0.5	22
5 and younger	1	33.3	4	1.0	9	0	0.0	0	0.0	0	1	33.3	4	0.3	2
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	294	27.7	2,946	0.4	46	411	38.7	4,119	0.7	64	905	85.3	9,245	0.4	23
45-64	209	41.0	2,132	0.6	64	181	35.5	1,830	0.7	58	469	92.0	4,791	0.5	29
65-74	2,899	38.1	31,435	0.6	54	1,343	17.7	14,332	0.9	50	3,901	51.3	42,095	0.5	18
75-84	5,736	40.8	60,662	0.7	54	2,275	16.2	23,813	0.9	43	7,492	53.3	78,098	0.5	20
85 and older	7,044	39.7	70,828	0.8	53	1,991	11.2	20,010	0.9	36	9,797	55.3	94,926	0.6	25
Male	13,947	30.8	148,672	0.7	55	12,191	26.9	134,767	1.0	76	19,851	43.9	210,706	0.4	27
Disabled	8,123	28.1	91,054	0.6	56	9,229	31.9	105,036	1.0	83	12,399	42.9	138,258	0.4	30
5 and younger	3	60.0	36	0.6	52	0	0.0	0	0.0	0	3	60.0	27	0.1	1
6-14	5	71.4	60	0.4	18	0	0.0	0	0.0	0	3	42.9	36	0.1	1
15-20	26	22.8	293	0.5	40	28	24.6	318	0.7	79	48	42.1	548	0.2	9
21-44	2,636	21.6	30,275	0.6	54	4,289	35.2	49,302	1.0	92	4,732	38.9	53,810	0.4	33
45-64	3,736	32.2	41,657	0.7	59	4,163	35.9	47,148	1.0	79	5,547	47.8	61,303	0.5	33
65-74	1,031	35.7	11,612	0.6	53	511	17.7	5,828	0.9	51	1,267	43.9	14,271	0.4	17
75-84	469	31.6	4,940	0.7	57	187	12.6	1,908	0.8	38	589	39.6	6,140	0.4	14
85 and older	217	35.2	2,181	0.7	53	51	8.3	532	0.7	36	210	34.0	2,123	0.3	9
Other Eligibles	5,824	35.6	57,618	0.7	53	2,962	18.1	29,731	0.9	50	7,452	45.5	72,448	0.5	23
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	1	16.7	12	0.8	10	2	33.3	14	1.0	56	1	16.7	4	0.3	2
21-44	176	24.9	1,824	0.6	60	208	29.5	2,089	0.7	73	572	81.0	5,873	0.5	48
45-64	253	31.8	2,620	0.5	44	154	19.4	1,508	0.7	58	582	73.2	5,831	0.5	41
65-74	1,494	31.5	15,444	0.6	54	919	19.4	9,816	1.0	58	1,825	38.4	18,971	0.5	16
75-84	2,185	37.8	21,571	0.7	51	1,075	18.6	10,616	0.9	44	2,408	41.7	23,392	0.5	21
85 and older	1,715	39.5	16,147	0.7	54	604	13.9	5,688	0.9	39	2,064	47.6	18,377	0.5	17
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Table D7B

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2002 file for Wisconsin, released by CMS in 05/2006. This table was produced on 04/19/2007.

- a. Table D.7B includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2002. 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 2002. For information about these drug groups, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).
- Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.7C
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR SIXTH TO EIGHTH TOP DRUG GROUPS
 SEPARATELY, BY SEX, BOE, AND AGE^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, WISCONSIN, 2002

Beneficiary Characteristics	ANTHYPERLIPIDEMIC					ANTI-DIABETIC					ANTI-ASTHMATIC				
	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
All	22,686	18.4 %	252,110	0.7	\$54	33,996	27.6 %	365,592	0.8	\$35	39,026	31.7 %	422,099	0.5	\$27
Female	14,910	19.2	166,613	0.7	55	23,237	29.9	251,711	0.8	35	26,658	34.3	291,073	0.5	27
Disabled	7,850	21.3	89,227	0.7	54	10,801	29.3	121,479	0.8	38	14,235	38.6	161,284	0.5	27
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	1	11.1	10	0.1	7	0	0.0	0	0.0	0	2	22.2	24	0.7	47
15-20	1	1.0	12	0.5	29	5	5.2	60	0.3	10	19	19.8	225	0.2	9
21-44	773	7.8	8,873	0.6	47	1,274	12.8	14,499	0.7	39	3,104	31.2	35,674	0.4	22
45-64	3,528	25.9	40,176	0.7	53	4,539	33.3	51,254	0.8	42	6,124	44.9	69,707	0.5	28
65-74	2,100	36.4	24,106	0.7	58	2,777	48.1	31,752	0.8	38	2,752	47.7	31,163	0.5	31
75-84	1,140	26.2	12,686	0.8	58	1,572	36.1	17,368	0.8	32	1,597	36.7	17,615	0.5	27
85 and older	307	10.2	3,364	0.8	56	634	21.0	6,546	0.8	26	637	21.1	6,876	0.5	26
Other Eligibles	7,060	17.2	77,386	0.7	55	12,436	30.4	130,232	0.8	31	12,423	30.3	129,789	0.5	26
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	71	6.7	713	0.5	34	143	13.5	1,505	0.7	37	390	36.8	4,115	0.4	22
45-64	116	22.7	1,206	0.6	46	167	32.7	1,717	0.7	39	231	45.3	2,457	0.4	27
65-74	2,451	32.2	27,177	0.7	54	3,165	41.6	34,319	0.8	35	2,697	35.5	29,233	0.5	30
75-84	3,234	23.0	35,666	0.7	57	5,172	36.8	54,602	0.8	31	4,498	32.0	47,419	0.5	27
85 and older	1,188	6.7	12,624	0.8	54	3,789	21.4	38,089	0.8	27	4,607	26.0	46,565	0.5	23
Male	7,776	17.2	85,497	0.7	52	10,759	23.8	113,881	0.8	36	12,368	27.3	131,026	0.5	27
Disabled	5,007	17.3	56,658	0.7	52	5,837	20.2	64,651	0.8	39	6,651	23.0	74,001	0.5	27
5 and younger	1	20.0	2	0.5	16	0	0.0	0	0.0	0	2	40.0	4	0.5	63
6-14	1	14.3	12	0.1	6	2	28.6	24	0.1	7	1	14.3	12	0.1	9
15-20	1	0.9	12	0.9	83	2	1.8	15	0.3	12	20	17.5	233	0.3	5
21-44	1,161	9.5	13,480	0.7	46	1,170	9.6	13,339	0.8	40	1,890	15.5	21,651	0.4	22
45-64	2,695	23.2	30,200	0.7	54	3,053	26.3	33,588	0.8	41	2,914	25.1	32,022	0.5	28
65-74	796	27.6	9,197	0.7	57	1,048	36.3	11,815	0.8	38	1,053	36.5	11,836	0.5	30
75-84	297	20.0	3,164	0.7	53	433	29.1	4,566	0.8	30	566	38.1	6,089	0.5	31
85 and older	55	8.9	591	0.8	51	129	20.9	1,304	0.8	26	205	33.2	2,154	0.5	28
Other Eligibles	2,769	16.9	28,839	0.7	53	4,922	30.1	49,230	0.8	31	5,717	34.9	57,025	0.6	27
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	105	14.9	1,132	0.5	43	111	15.7	1,173	0.7	37	135	19.1	1,436	0.4	21
45-64	258	32.5	2,655	0.7	50	238	29.9	2,297	0.8	50	246	30.9	2,552	0.5	28
65-74	1,137	23.9	12,075	0.7	54	1,527	32.2	15,990	0.8	33	1,518	32.0	16,161	0.6	29
75-84	1,009	17.5	10,478	0.7	54	1,963	34.0	19,554	0.8	30	2,253	39.0	22,047	0.6	27
85 and older	260	6.0	2,499	0.7	48	1,083	25.0	10,216	0.8	27	1,565	36.1	14,829	0.6	24
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Table D7C

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2002 file for Wisconsin, released by CMS in 05/2006. This table was produced on 04/19/2007.

- a. Table D.7C includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2002. 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 2002. For information about these drug groups, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).
- Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.7D
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR NINTH AND TENTH TOP DRUG GROUPS
 SEPARATELY, BY SEX, BOE, AND AGE^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, WISCONSIN, 2002

Beneficiary Characteristics	ANALGESICS - ANTI-INFLAMMATORY					ANTIHYPERTENSIVE						
	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Benes	No. of Bene Mos
All	32,853	26.7 %	366,490	0.4	\$29	42,655	34.7 %	456,960	0.7	\$21	123,062	1,284,325
Female	23,402	30.1	261,913	0.5	32	29,134	37.4	313,736	0.7	22	77,802	815,880
Disabled	12,697	34.5	145,889	0.4	29	11,880	32.3	133,190	0.7	22	36,833	406,366
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12
6-14	0	0.0	0	0.0	0	9	100.0	106	0.5	8	9	99
15-20	15	15.6	175	0.2	6	4	4.2	46	0.2	5	96	1,063
21-44	3,164	31.8	36,717	0.3	18	1,118	11.3	12,674	0.6	17	9,935	111,729
45-64	5,394	39.5	62,004	0.4	31	4,389	32.2	49,577	0.7	22	13,647	151,486
65-74	2,124	36.8	24,673	0.5	36	2,899	50.2	33,061	0.7	23	5,775	64,777
75-84	1,311	30.1	14,837	0.5	35	2,210	50.7	24,461	0.7	23	4,357	46,638
85 and older	689	22.9	7,483	0.5	34	1,251	41.5	13,265	0.8	21	3,013	30,562
Other Eligibles	10,705	26.1	116,024	0.5	35	17,254	42.1	180,546	0.8	23	40,969	409,514
5 and younger	1	33.3	12	1.0	45	0	0.0	0	0.0	0	3	20
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	4
21-44	384	36.2	3,963	0.3	16	131	12.3	1,275	0.6	18	1,061	9,409
45-64	239	46.9	2,454	0.4	37	129	25.3	1,315	0.6	18	510	4,642
65-74	2,256	29.7	25,238	0.4	31	3,385	44.5	36,924	0.7	23	7,602	79,031
75-84	3,774	26.8	41,790	0.5	37	6,647	47.3	70,894	0.8	23	14,064	144,914
85 and older	4,051	22.9	42,567	0.6	39	6,962	39.3	70,138	0.8	22	17,728	171,494
Male	9,451	20.9	104,577	0.4	22	13,521	29.9	143,224	0.7	19	45,260	468,445
Disabled	6,122	21.2	69,751	0.3	18	7,295	25.2	80,819	0.7	19	28,893	314,977
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	5	41
6-14	0	0.0	0	0.0	0	4	57.1	48	0.3	6	7	81
15-20	15	13.2	174	0.2	4	21	18.4	243	0.4	15	114	1,265
21-44	2,271	18.7	26,095	0.3	11	1,563	12.8	17,704	0.7	17	12,176	135,595
45-64	2,761	23.8	31,273	0.4	22	3,545	30.6	39,114	0.7	20	11,600	125,484
65-74	735	25.5	8,474	0.4	23	1,259	43.6	14,283	0.7	19	2,888	31,880
75-84	241	16.2	2,705	0.5	28	658	44.3	6,929	0.7	18	1,486	14,836
85 and older	99	16.0	1,030	0.5	33	245	39.7	2,498	0.7	19	617	5,795
Other Eligibles	3,329	20.3	34,826	0.5	30	6,226	38.0	62,405	0.7	18	16,367	153,468
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
15-20	1	16.7	4	0.3	3	0	0.0	0	0.0	0	6	34
21-44	193	27.3	2,019	0.3	26	138	19.5	1,377	0.6	16	706	6,431
45-64	245	30.8	2,571	0.3	24	287	36.1	2,822	0.7	20	795	7,199
65-74	903	19.0	9,827	0.4	26	1,815	38.2	19,053	0.7	19	4,748	46,698
75-84	1,158	20.1	12,189	0.5	31	2,349	40.7	23,735	0.8	19	5,774	54,823
85 and older	829	19.1	8,216	0.6	34	1,637	37.7	15,418	0.8	17	4,337	38,271
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0

Table D7D

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2002 file for Wisconsin, released by CMS in 05/2006. This table was produced on 04/19/2007.

a. Table D.7D includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2002. 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 2002. For information about these drug groups, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).

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

TABLE D.8
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BENEFICIARY CHARACTERISTIC^{a, b}
 DUAL ELIGIBLE BENEFICIARIES, WISCONSIN, 2002

Beneficiary Characteristics	Rx \$ per Bene Mo	No. of Rx per Bene Mo	No. of All-Year NF Residents	Bene Mos among All-Year NF Residents
All	\$281	6.7	24,705	244,880
Age				
0-64	444	8.1	1,263	13,737
65-74	371	7.7	2,330	24,165
75-84	306	7.2	7,564	75,141
85 and older	233	6.1	13,548	131,837
Unknown	0	0.0	0	0
Gender				
Female	278	6.8	17,751	177,836
Male	289	6.6	6,954	67,044
Unknown	0	0.0	0	0
Race				
White	279	6.7	21,654	216,476
African American	329	6.9	477	5,038
Other/unknown	289	6.7	2,574	23,366
Basis of Eligibility^c				
Aged	270	6.6	23,032	226,910
Disabled	420	7.8	1,670	17,945
Adults	0	0.0	0	0
Children	234	5.6	3	25
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 2002 file for Wisconsin, released by CMS in 05/2006. This table was produced on 04/19/2007.

a. Table D.8 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their 2002 Medicaid enrollment. A total of 9,656 beneficiaries who were in nursing facilities for part of their enrollment and their 87,136 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 = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy; \$ = Medicaid reimbursement.

TABLE D.9
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d, e}
 DUAL ELIGIBLE BENEFICIARIES, WISCONSIN, 2002

Therapeutic Category	No. of Rx per Bene Mo among Users			\$ per Bene Mo among Users			\$ per Rx			Users						
	Total	Patented	Off-Patent	Brand-Name	Off-Patent	Brand-Name	Total	Patented	Off-Patent	Brand-Name	Generic	Total # of Rx	Total Rx \$	No. Residents	As % of Dual All-Year NF Residents	No. of Bene Mos
Anti-infective Agents	0.4	0.2	0.0	0.2	\$13	\$2	\$2	\$2	\$57	\$12	\$12	58,993	\$2,586,029	15,542	62.9 %	161,456
Biologics	0.1	0.0	0.0	0.1	5	0	5	58	0	58	1	1	58	1	0.0	12
Antineoplastic Agents	0.7	0.4	0.1	0.2	103	79	12	145	209	141	49	6,132	888,843	892	3.6	8,634
Endocrine/Metabolic Drugs	1.3	0.5	0.2	0.5	39	29	4	30	54	19	12	146,095	4,436,799	11,130	45.1	112,413
Cardiovascular Agents	2.2	0.5	0.2	1.6	45	23	5	20	50	25	11	392,763	8,044,522	17,807	72.1	177,939
Respiratory Agents	0.9	0.4	0.1	0.4	41	28	5	45	66	67	20	73,049	3,254,766	7,623	30.9	78,892
Gastrointestinal Agents	1.0	0.5	0.0	0.5	57	50	1	57	104	40	13	121,191	6,872,688	11,737	47.5	119,666
Genitourinary Agents	0.7	0.5	0.0	0.2	38	35	1	35	67	41	16	39,105	2,154,511	5,344	21.6	56,051
CNS Drugs	1.7	1.0	0.1	0.6	113	98	5	67	97	68	17	280,620	18,829,134	16,534	66.9	167,316
Stimulants/Anti-obesity/Anorexia	0.9	0.2	0.1	0.7	31	18	2	33	114	30	15	1,769	57,598	178	0.7	1,885
Miscellaneous Psychological/Neurological Agents	0.9	0.9	0.0	0.0	102	102	0	119	119	0	29	23,621	2,800,897	2,748	11.1	27,412
Analgesics and Anesthetics	1.1	0.5	0.1	0.6	51	41	3	45	83	36	12	143,984	6,487,769	12,775	51.7	126,737
Neuromuscular Agents	1.3	0.5	0.1	0.7	65	40	7	50	82	58	26	99,922	4,973,810	7,334	29.7	76,437
Nutritional Products	0.9	0.0	0.0	0.8	15	0	1	17	22	26	17	64,632	1,129,757	7,541	30.5	76,036
Hematological Agents	1.3	0.2	0.4	0.7	46	36	4	35	149	11	9	91,903	3,215,999	6,868	27.8	69,338
Topical Products	0.6	0.2	0.0	0.3	19	12	2	31	52	50	14	90,664	2,807,600	13,647	55.2	144,953
Miscellaneous Products	0.3	0.0	0.0	0.2	13	7	0	46	153	97	24	3,117	143,388	1,140	4.6	11,379
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	6	0	0	20	0	0	0	3,800	74,179	1,092	4.4	11,510
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.	1,641,361	68,758,347	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2002 file for Wisconsin, released by CMS in 05/2006. This table was produced on 04/19/2007.

- a. Table D.9 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2002. A total of 9,656 beneficiaries who were in nursing facilities for part of their enrollment and their 87,136 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 2002. A beneficiary who used drugs from two or more categories was counted as a user for each category. Therefore, the sum of users across categories may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- c. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
- d. For information about these therapeutic categories, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).
- e. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. For information about this classification method, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003). In Wisconsin, 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 = Center for Medicare and Medicaid Services; CNS = Central Nervous System; MAX = Medicaid Analytic Extract; n.a. = not applicable; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.10
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS,
 BY TOP-10 DRUG GROUP^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, WISCONSIN, 2002

Top 10 Drug Groups in Nursing Facilities	Users				Among Users		
	Total Medicaid Rx \$	No. of Users	As % of All-Year NF Residents	No. of Bene Mos	No. of Rx per Bene Mo	\$ per Rx	Rx \$ per Bene Mo
ANTIPSYCHOTICS	\$9,921,452	9,160	37.1 %	95,350	0.9	\$121	\$104
ANTIDEPRESSANTS	7,955,622	15,562	63.0	159,261	0.9	55	50
ULCER DRUGS	6,024,920	10,375	42.0	105,704	0.8	69	57
ANALGESICS - Narcotic	3,850,559	13,185	53.4	129,555	0.7	41	30
ANTICONVULSANT	3,231,449	5,712	23.1	60,183	1.1	51	54
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	2,800,897	2,752	11.1	27,463	0.9	119	102
ANTIDIABETIC	2,456,891	7,422	30.0	76,326	0.9	36	32
ANALGESICS - ANTI-INFLAMMATORY	2,417,796	5,484	22.2	58,373	0.6	64	41
ANTIASTHMATIC	2,166,678	8,085	32.7	82,168	0.6	44	26
ANTIHYPERTENSIVE	2,094,691	9,052	36.6	91,212	0.9	26	23
Total	42,920,955	86,789		885,595	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2002 file for Wisconsin, released by CMS in 05/2006. This table was produced on 04/19/2007.

a. Table D.10 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2002. A total of 9,656 beneficiaries who were in nursing facilities for part of their enrollment and their 87,136 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 2002. 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 2002 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).

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

TABLE D.10A

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR TOP 10 DRUG GROUPS COMBINED AND FIRST AND SECOND TOP DRUG GROUPS SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BOE, AND AGE^{a, b, c, d}
DUAL ELIGIBLE BENEFICIARIES, WISCONSIN, 2002

Beneficiary Characteristics	All Top 10 Drug Groups					ANTIPSYCHOTICS					ANTIDEPRESSANTS				
	No. of Rx	Rx \$	Users as %			Mean Rx \$	No. of Bene Mos among Users	Mean No. of Rx	Users as % of All-Year Residents	No. of Bene Mos among Users	Mean No. of Rx	Users as % of All-Year Residents	No. of Bene Mos among Users	Mean No. of Rx	
			No. of Users	Residents	NF										No. of Users
All	729,226	\$42,920,955	9,160	37.1 %	95,350	0.9	\$104	15,562	63.0 %	159,261	0.9	\$50			
Female	524,927	30,749,994	6,438	36.3	67,697	0.8	99	11,425	64.4	118,351	0.9	50			
Disabled	36,826	2,543,577	521	61.0	5,779	1.1	158	599	70.1	6,559	1.0	54			
64 or younger	26,699	1,849,952	353	62.5	3,940	1.1	159	433	76.6	4,833	1.0	54			
65-74	3,741	267,320	58	71.6	631	1.0	169	59	72.8	613	1.0	50			
75-84	3,832	273,534	69	59.5	747	1.2	164	63	54.3	637	1.0	58			
85 and older	2,554	152,771	41	44.6	461	1.0	126	44	47.8	476	1.0	53			
Other Eligibles	488,101	28,206,417	5,917	35.0	61,918	0.8	94	10,826	64.1	111,792	0.9	49			
64 or younger	323	18,811	2	40.0	24	1.8	234	8	160.0	66	1.1	64			
65-74	49,998	3,172,145	637	54.3	6,904	1.0	137	885	75.4	9,531	0.9	52			
75-84	172,074	10,096,763	2,110	43.0	22,454	0.8	100	3,599	73.3	37,549	0.9	51			
85 and older	265,706	14,918,698	3,168	29.3	32,536	0.7	80	6,334	58.6	64,646	0.9	48			
Male	204,299	12,170,961	2,722	39.1	27,653	0.9	116	4,137	59.5	40,910	0.9	51			
Disabled	32,628	2,417,636	507	62.1	5,582	1.2	176	501	61.4	5,415	1.0	57			
64 or younger	28,167	2,083,970	423	61.5	4,680	1.2	177	436	63.4	4,722	1.0	57			
65-74	2,168	162,188	30	57.7	330	1.2	211	32	61.5	366	0.9	60			
75-84	1,264	91,237	23	59.0	235	1.3	170	18	46.2	167	0.9	60			
85 and older	1,029	80,241	31	83.8	337	1.0	137	15	40.5	160	0.9	50			
Other Eligibles	171,671	9,753,325	2,215	36.1	22,071	0.9	101	3,636	59.2	35,495	0.9	50			
64 or younger	103	5,438	3	60.0	21	0.8	24	3	60.0	22	0.7	23			
65-74	36,512	2,237,573	477	46.6	5,087	1.1	140	583	56.9	6,121	1.0	52			
75-84	72,358	4,104,414	940	37.6	9,241	0.9	98	1,541	61.6	15,048	0.9	51			
85 and older	62,698	3,405,900	795	30.5	7,722	0.8	80	1,509	57.8	14,304	0.9	48			
Unknown	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0			

Source: Data for this table are from the MAX 2002 file for Wisconsin, released by CMS in 05/2006. This table was produced on 04/19/2007.

a. Table D.10A includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2002. A total of 9,656 beneficiaries who were in nursing facilities for part of their enrollment and their 87,136 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 2002. 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 2002 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).

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

TABLE D.10B
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY
 AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BOE, AND AGE^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, WISCONSIN, 2002

Beneficiary Characteristics	ULCER DRUGS						ANALGESICS - Narcotic						ANTICONVULSANT					
	Users as %			Users as %			Users as %			Users as %			Users as %			Users as %		
	No. of Users	No. of Bene among Users	Mean No. of Rx	No. of Users	No. of Bene among Users	Mean No. of Rx	No. of Users	No. of Bene among Users	Mean No. of Rx	No. of Users	No. of Bene among Users	Mean No. of Rx	No. of Users	No. of Bene among Users	Mean No. of Rx	No. of Users	No. of Bene among Users	Mean No. of Rx
All	10,375	42.0 %	\$57	13,185	53.4 %	0.7	129,555	0.7	\$30	5,712	23.1 %	\$54	60,183	1.1	554			
Female	7,521	42.4	56	10,016	56.4	0.7	99,527	0.7	31	3,712	20.9	51	39,337	1.0	51			
Disabled	388	45.4	64	454	53.2	0.8	4,770	0.8	28	514	60.2	72	5,807	1.3	72			
64 or younger	254	45.0	64	322	57.0	0.8	3,462	0.8	29	411	72.7	73	4,673	1.3	73			
65-74	47	58.0	74	45	55.6	1.1	422	1.1	42	48	59.3	70	515	1.4	70			
75-84	43	37.1	58	47	40.5	0.8	480	0.8	21	40	34.5	68	466	1.0	68			
85 and older	44	47.8	56	40	43.5	0.7	406	0.7	15	15	16.3	35	153	1.1	35			
Other Eligibles	7,133	42.2	56	9,562	56.6	0.7	94,757	0.7	31	3,198	18.9	48	33,530	1.0	48			
64 or younger	3	60.0	107	5	100.0	1.8	45	1.8	45	4	80.0	56	25	1.2	56			
65-74	511	43.6	61	694	59.2	0.8	7,216	0.8	35	519	44.2	63	5,556	1.1	63			
75-84	2,211	45.0	57	2,892	58.9	0.8	29,310	0.8	33	1,311	26.7	50	13,892	1.0	50			
85 and older	4,408	40.8	55	5,971	55.2	0.7	58,186	0.7	30	1,364	12.6	39	14,057	0.9	39			
Male	2,854	41.0	59	3,169	45.6	0.7	30,028	0.7	25	2,000	28.8	59	20,846	1.1	59			
Disabled	345	42.3	64	334	40.9	0.7	3,466	0.7	35	503	61.6	78	5,587	1.3	78			
64 or younger	298	43.3	64	280	40.7	0.8	2,944	0.8	36	451	65.6	79	5,031	1.3	79			
65-74	22	42.3	69	26	50.0	0.6	272	0.6	23	28	53.8	59	332	1.2	59			
75-84	14	35.9	45	18	46.2	1.1	152	1.1	56	16	41.0	84	143	1.1	84			
85 and older	11	29.7	63	10	27.0	0.5	98	0.5	12	8	21.6	93	81	0.9	93			
Other Eligibles	2,509	40.9	58	2,835	46.2	0.7	26,562	0.7	24	1,497	24.4	52	15,259	1.0	52			
64 or younger	1	20.0	122	5	100.0	0.5	31	0.5	5	5	100.0	67	45	1.0	67			
65-74	423	41.3	58	455	44.4	0.8	4,652	0.8	29	433	42.3	68	4,596	1.2	68			
75-84	1,004	40.2	59	1,099	44.0	0.7	10,450	0.7	26	639	25.6	47	6,396	1.0	47			
85 and older	1,081	41.4	57	1,276	48.9	0.6	11,429	0.6	20	420	16.1	41	4,222	0.9	41			
Unknown	0	0.0	0	0	0.0	0.0	0	0.0	0	0	0.0	0	0	0.0	0			

Source: Data for this table are from the MAX 2002 file for Wisconsin, released by CMS in 05/2006. This table was produced on 04/19/2007.

a. Table D.10B includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2002. A total of 9,656 beneficiaries who were in nursing facilities for part of their enrollment and their 87,136 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 2002. 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 2002 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).

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

TABLE D.10C
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY
 AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BOE, AND AGE^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, WISCONSIN, 2002

Beneficiary Characteristics	MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL						ANTIDIABETIC						ANALGESICS - ANTI-INFLAMMATORY						
	Users as %			Users as %			Users as %			Users as %			Users as %			Users as %			
	No. of Users	No. of Bene NF Residents	Mean No. of Rx	No. of Users	No. of Bene NF Residents	Mean No. of Rx	No. of Users	No. of Bene NF Residents	Mean No. of Rx	No. of Users	No. of Bene NF Residents	Mean No. of Rx	No. of Users	No. of Bene NF Residents	Mean No. of Rx	No. of Users	No. of Bene NF Residents	Mean No. of Rx	
All	2,752	11.1 %	\$102	7,422	30.0 %	0.9	5,484	22.2 %	0.9	5,484	22.2 %	0.9	5,484	22.2 %	0.9	5,484	22.2 %	0.6	\$41
Female	1,996	11.2	103	5,150	29.0	0.9	4,150	23.4	0.9	4,150	23.4	0.9	4,150	23.4	0.9	4,150	23.4	0.7	43
Disabled	42	4.9	229	264	30.9	1.0	2,872	22.8	1.0	2,872	22.8	1.0	2,872	22.8	1.0	2,872	22.8	0.6	37
64 or younger	29	5.1	272	173	30.6	1.0	1,930	25.8	1.0	1,930	25.8	1.0	1,930	25.8	1.0	1,930	25.8	0.6	33
65-74	2	2.5	20	36	44.4	0.9	408	18.5	0.9	408	18.5	0.9	408	18.5	0.9	408	18.5	0.8	40
75-84	8	6.9	72	32	27.6	1.0	284	19.0	1.0	284	19.0	1.0	284	19.0	1.0	284	19.0	0.8	57
85 and older	3	3.3	83	23	25.0	0.8	250	13.0	0.8	250	13.0	0.8	250	13.0	0.8	250	13.0	0.6	43
Other Eligibles	1,954	11.6	100	4,886	28.9	0.9	50,579	23.4	0.9	50,579	23.4	0.9	50,579	23.4	0.9	50,579	23.4	0.7	43
64 or younger	0	0.0	0	0	0.0	0.0	0	0.0	0.0	0	0.0	0	0	0.0	0.0	0	0.0	0.7	56
65-74	115	9.8	98	615	52.4	0.9	6,642	25.1	0.9	6,642	25.1	0.9	6,642	25.1	0.9	6,642	25.1	0.6	40
75-84	718	14.6	101	1,970	40.1	0.9	20,495	25.4	0.9	20,495	25.4	0.9	20,495	25.4	0.9	20,495	25.4	0.7	45
85 and older	1,121	10.4	99	2,301	21.3	0.8	23,442	22.3	0.8	23,442	22.3	0.8	23,442	22.3	0.8	23,442	22.3	0.7	43
Male	756	10.9	100	2,272	32.7	0.8	22,875	19.2	0.9	22,875	19.2	0.9	22,875	19.2	0.9	22,875	19.2	0.6	36
Disabled	35	4.3	135	265	32.5	1.0	2,881	15.3	1.0	2,881	15.3	1.0	2,881	15.3	1.0	2,881	15.3	0.6	28
64 or younger	30	4.4	146	212	30.8	1.0	2,294	15.0	1.0	2,294	15.0	1.0	2,294	15.0	1.0	2,294	15.0	0.5	25
65-74	3	5.8	57	22	42.3	1.0	244	21.2	1.0	244	21.2	1.0	244	21.2	1.0	244	21.2	0.6	48
75-84	1	2.6	1	12	30.8	1.0	115	15.4	1.0	115	15.4	1.0	115	15.4	1.0	115	15.4	0.9	37
85 and older	1	2.7	37	19	51.4	1.0	228	13.5	1.0	228	13.5	1.0	228	13.5	1.0	228	13.5	0.4	23
Other Eligibles	721	11.7	98	2,007	32.7	0.9	19,994	19.7	0.9	19,994	19.7	0.9	19,994	19.7	0.9	19,994	19.7	0.6	37
64 or younger	0	0.0	0	2	40.0	0.0	10	0.0	0.7	64	0.0	0.0	0	0.0	0.0	0	0.0	0.0	0
65-74	70	6.8	96	360	35.2	0.8	3,806	16.1	0.9	3,806	16.1	0.9	3,806	16.1	0.9	3,806	16.1	0.6	38
75-84	345	13.8	102	964	38.6	0.9	9,575	19.9	0.9	9,575	19.9	0.9	9,575	19.9	0.9	9,575	19.9	0.6	38
85 and older	306	11.7	95	681	26.1	0.8	6,603	20.9	0.9	6,603	20.9	0.9	6,603	20.9	0.9	6,603	20.9	0.6	36
Unknown	0	0.0	0	0	0.0	0.0	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 2002 file for Wisconsin, released by CMS in 05/2006. This table was produced on 04/19/2007.

a. Table D.10C includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2002. A total of 9,656 beneficiaries who were in nursing facilities for part of their enrollment and their 87,136 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 2002. 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 2002 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).

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

TABLE D.10D
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR NINTH AND TENTH TOP DRUG GROUPS
 SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BOE, AND AGE^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, WISCONSIN, 2002

Beneficiary Characteristics	ANTI-ASTHMATIC					ANTI-HYPERTENSIVE					Bene Mos among All-Year NF Residents			
	Users as %		Mean		No. of Bene Mos among Users	Users as %		Mean		No. of Bene Mos among Users				
	No. of Users	Residents	Rx	Rx-\$		Residents	Rx	Rx-\$	Residents					
All	8,085	32.7 %	0.6	\$26	82,168	0.6	\$26	9,052	36.6 %	91,212	0.9	\$23	24,705	244,880
Female	5,421	30.5	0.6	25	55,678	0.6	25	6,498	36.6	65,998	0.9	24	17,751	177,836
Disabled	255	29.9	0.7	28	2,723	0.7	28	241	28.2	2,638	0.9	26	854	9,300
64 or younger	181	32.0	0.8	33	1,986	0.8	33	130	23.0	1,441	0.9	28	565	6,289
65-74	27	33.3	0.4	15	239	0.4	15	37	45.7	394	0.7	21	81	804
75-84	21	18.1	0.5	19	204	0.5	19	41	35.3	436	1.0	20	116	1,194
85 and older	26	28.3	0.3	11	294	0.3	11	33	35.9	367	1.0	34	92	1,013
Other Eligibles	5,166	30.6	0.6	25	52,955	0.6	25	6,257	37.0	63,360	0.9	24	16,897	168,536
64 or younger	4	80.0	1.0	44	27	1.0	44	3	60.0	29	1.0	14	5	45
65-74	487	41.5	0.7	33	5,081	0.7	33	479	40.8	5,056	0.9	27	1,173	12,312
75-84	1,757	35.8	0.6	26	17,903	0.6	26	1,975	40.2	20,252	0.9	24	4,909	49,748
85 and older	2,918	27.0	0.5	23	29,944	0.5	23	3,800	35.2	38,023	0.9	24	10,810	106,431
Male	2,664	38.3	0.7	29	26,490	0.7	29	2,554	36.7	25,214	0.9	20	6,954	67,044
Disabled	207	25.4	0.7	32	2,161	0.7	32	278	34.1	2,993	0.9	24	816	8,645
64 or younger	169	24.6	0.7	31	1,795	0.7	31	233	33.9	2,531	0.9	24	688	7,369
65-74	18	34.6	1.0	40	186	1.0	40	17	32.7	194	0.8	20	52	530
75-84	17	43.6	0.7	37	155	0.7	37	14	35.9	130	0.7	18	39	372
85 and older	3	8.1	0.1	5	25	0.1	5	14	37.8	138	0.8	19	37	374
Other Eligibles	2,457	40.0	0.7	28	24,329	0.7	28	2,276	37.1	22,221	0.9	20	6,138	58,399
64 or younger	0	0.0	0.0	0	0	0.0	0	0	0.0	0	0.0	0	5	34
65-74	417	40.7	0.8	35	4,466	0.8	35	368	35.9	3,675	0.9	23	1,024	10,519
75-84	1,018	40.7	0.6	28	9,842	0.6	28	967	38.7	9,454	0.9	20	2,500	23,827
85 and older	1,022	39.2	0.6	26	10,021	0.6	26	941	36.1	9,092	0.8	18	2,609	24,019
Unknown	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 2002 file for Wisconsin, released by CMS in 05/2006. This table was produced on 04/19/2007.

a. Table D.10D includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2002. A total of 9,656 beneficiaries who were in nursing facilities for part of their enrollment and their 87,136 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 2002. 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 2002 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).

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

TABLE D.11
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
 AMONG DUALS, BY BENEFICIARY CHARACTERISTIC^{a,b}
 WISCONSIN, 2002

Beneficiary Characteristics	No. of Benes with at Least One Part D Excl Rx	% Benes with at Least One Part D Excl Rx		No. of Part D Excl Rx per Bene		Total No. Part D Excl Rx	Part D Excl Rx \$	\$ per Part D Excl Rx	Total Part D Excl Rx \$	Part D Excl Rx as % of All Dual Rx	Total No. of Benes
		44,143	35.9 %	2.4	299,363						
Age											
5 and younger	4	40.0	1.4	14	80	799	57	3.0	10		
6-14	7	43.8	1.3	20	18	294	15	0.3	16		
15-20	47	21.7	0.7	146	106	23,015	158	5.1	217		
21-44	7,728	32.4	2.1	50,181	80	1,907,720	38	2.9	23,878		
45-64	10,410	39.2	3.0	79,854	104	2,755,448	35	3.1	26,552		
65-74	7,098	33.8	2.4	50,164	62	1,299,089	26	2.7	21,013		
75-84	9,065	35.3	2.4	61,039	58	1,497,858	25	2.6	25,681		
85 and older	9,784	38.1	2.3	57,945	52	1,330,503	23	2.6	25,695		
Unknown	0	0.0	0.0	0	0	0	0	0.0	0		
Basis of Eligibility^c											
Aged	19,748	36.5	2.4	128,229	58	3,126,149	24	2.7	54,084		
Disabled	23,244	35.4	2.5	164,581	81	5,328,607	32	2.8	65,726		
Adults	1,144	35.5	2.0	6,524	110	354,699	54	4.9	3,227		
Children	5	22.7	1.0	23	230	5,066	220	14.7	22		
Unknown	2	66.7	2.0	6	68	205	34	11.9	3		
Gender											
Female	30,249	38.9	2.6	201,259	74	5,774,957	29	2.9	77,802		
Male	13,894	30.7	2.2	98,104	67	3,039,769	31	2.8	45,260		
Unknown	0	0.0	0.0	0	0	0	0	0.0	0		
Race											
White	25,989	38.6	2.8	185,879	82	5,499,690	30	3.1	67,265		
African American	1,956	31.7	1.7	10,723	51	315,174	29	2.4	6,164		
Other/unknown	16,198	32.6	2.1	102,761	60	2,999,862	29	2.5	49,633		
Use of Nursing Facilities^d											
Entire year	11,100	44.9	3.4	84,795	84	2,075,741	24	3.0	24,705		
Part year	4,602	47.7	3.0	29,159	98	942,839	32	3.9	9,656		
None	28,441	32.1	2.1	185,409	65	5,796,146	31	2.7	88,701		
Maintenance Assistance Status											
Cash	14,757	32.5	2.1	94,542	61	2,783,393	29	2.5	45,377		
Medically needy	3,890	33.5	2.1	24,785	69	804,046	32	2.8	11,595		
Poverty related	1,343	30.2	1.8	8,113	64	286,421	35	2.5	4,445		
Other/unknown	24,153	39.2	2.8	171,923	80	4,940,866	29	3.1	61,645		

Table D11

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2002 file for Wisconsin, released by CMS in 05/2006. This table was produced on 04/19/2007.

- a. Table D.11 includes the beneficiaries represented by Cell G of Table 1. Beneficiaries include all dual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2002.
- 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 = Center for Medicare and Medicaid Services; Excl = excluded; MAX = Medicaid Analytic Extract; OTC = over-the-counter; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.12
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
 AMONG DUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a,b}
 WISCONSIN, 2002

Beneficiary Characteristics	No. Rx per Bene Mo.	Rx \$ per Bene Mo.	\$ per Rx	Barbiturate \$ per Bene Mo.	Benzodiazapine \$ per Bene Mo.	No. of Bene Mos
All	0.2	\$7	\$29	\$0	\$1	1,284,325
Age						
5 and younger	0.2	9	57	0	0	85
6-14	0.1	2	15	0	0	180
15-20	0.1	10	158	0	0	2,366
21-44	0.2	7	38	0	2	263,164
45-64	0.3	10	35	0	2	288,811
65-74	0.2	6	26	0	1	222,386
75-84	0.2	6	25	0	1	261,211
85 and older	0.2	5	23	0	1	246,122
Unknown	0.0	0	0	0	0	0
Basis of Eligibility^c						
Aged	0.2	6	24	0	1	533,710
Disabled	0.2	7	32	0	2	721,343
Adults	0.2	12	54	0	2	29,083
Children	0.1	30	220	0	1	171
Unknown	0.3	11	34	0	1	18
Gender						
Female	0.2	7	29	0	2	815,880
Male	0.2	6	31	0	1	468,445
Unknown	0.0	0	0	0	0	0
Race						
White	0.3	8	30	0	2	677,344
African American	0.2	5	29	0	1	62,835
Other/unknown	0.2	6	29	0	1	544,146
Use of Nursing Facilities^d						
Entire year	0.3	8	24	0	1	244,880
Part year	0.3	11	32	0	1	87,136
None	0.2	6	31	0	1	952,309
Maintenance Assistance Status						
Cash	0.2	5	29	0	1	513,704
Medically needy	0.2	7	32	0	2	109,527
Poverty related	0.2	6	35	0	2	46,928
Other/unknown	0.3	8	29	0	1	614,166

Source: Data for this table are from the MAX 2002 file for Wisconsin, released by CMS in 05/2006. This table was produced on 04/19/2007.

- a. Table D.12 includes the beneficiaries represented by Cell G of Table 1. Beneficiaries include all dual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2002.
 - 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 = Center for Medicare and Medicaid Services; Excl = excluded; MAX = Medicaid Analytic Extract, OTC = over-the-counter; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.13

USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
FOR SELECTED DRUG CATEGORIES AMONG DUALS^{a,b,c}
WISCONSIN, 2002

Drug Category	No. Users	Rx \$ per User	Total Rx \$	Rx \$ as % of All Part D Excl Rx \$	Total No. Rx.	\$ per Rx	No. Rx as % of All Part D Excl Rx
All	54,468	\$162	\$8,814,726	100.0 %	299,363	\$29	100.0 %
Anorexia or weight loss/gain	3,486	302	1,052,867	11.9	8,075	130	2.7
Fertility drugs	9	19,101	171,907	2.0	81	2,122	0.0
Drugs for cosmetic purposes	1,195	1,003	1,199,061	13.6	7,793	154	2.6
Cough and cold medications	493	440	217,008	2.5	1,481	147	0.5
Vitamins and minerals	172	391	67,302	0.8	346	195	0.1
Non-prescription drugs	25,061	136	3,395,862	38.5	111,041	31	37.1
Barbiturates	289	19	5,520	0.1	392	14	0.1
Benzodiazepines	23,619	80	1,880,495	21.3	169,323	11	56.6
Other Part D Excl Rx Drugs	144	5,727	824,704	9.4	831	992	0.3

Source: Data for this table are from the MAX 2002 file for Wisconsin, released by CMS in 05/2006. This table was produced on 04/19/2007.

a. Table D.13 includes the beneficiaries represented by Cell G of Table 1. Beneficiaries include all dual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2002. A user is a beneficiary who had at least one prescription filled for a Part D excluded drug in 2002. A beneficiary who used drugs from two or more Part D excluded categories was counted as a user for each category. Therefore, the sum of users across drug categories may exceed the total number of individual users as noted on Table D11.

b. Includes OTC drugs as well as prescription drugs.

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

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

SUPPLEMENTAL TABLE 1E
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 85 AND OLDER^{a, b}
 WISCONSIN, 2002

Total Number of Dual Eligible Beneficiaries, Age 85+ 25,695
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 85+ \$50,223,146
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 85+ \$1,955

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 85+ 6.8 %	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	1,753		0	0.0 %
1-500	5,162	20.1	1,185,303	2.4
501-1,000	3,678	14.3	2,714,942	5.4
1,001-1,500	2,944	11.5	3,652,784	7.3
1,501-2,000	2,436	9.5	4,252,088	8.5
2,001-2,500	2,056	8.0	4,608,928	9.2
2,501-3,000	1,706	6.6	4,681,484	9.3
3,001-3,500	1,346	5.2	4,360,872	8.7
3,501-4,000	1,017	4.0	3,797,505	7.6
4,001-4,500	889	3.5	3,775,154	7.5
4,501-5,000	668	2.6	3,172,448	6.3
5,001-5,500	489	1.9	2,561,584	5.1
5,501-6,000	381	1.5	2,184,595	4.3
6,001-6,500	295	1.1	1,841,062	3.7
6,501-7,000	228	0.9	1,538,138	3.1
7,001-7,500	155	0.6	1,123,190	2.2
7,501-8,000	117	0.5	904,678	1.8
8,001-8,500	88	0.3	722,898	1.4
8,501-9,000	64	0.2	558,654	1.1
9,001-9,500	60	0.2	554,930	1.1
9,501-10,000	32	0.1	310,287	0.6
10,001+	131	0.5	1,721,622	3.4

Source: Data for this table are from the MAX 2002 file for Wisconsin, released by CMS in 05/2006. This table was produced on 04/19/2007.

a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 2002.

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

APPENDIX TABLE A.3

CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY^{a, b}
DUAL ELIGIBLE BENEFICIARIES, WISCONSIN, 2002

Beneficiary Characteristics	No. of Benes					No. of Bene Mos					
	All	Aged	Disabled	Adults	Children	All	Aged	Disabled	Adults	Children	Unknown
All	123,198	54,084	65,728	3,361	22	3	1,289,388	533,754	33,380	171	18
Age											
5 and younger	10	3	6	0	1	0	85	20	0	12	0
6-14	16	0	16	0	0	0	182	0	0	0	0
15-20	218	0	210	5	3	0	2,390	0	41	17	0
21-44	23,953	10	22,112	1,823	8	0	266,119	105	18,118	87	0
45-64	26,605	55	25,248	1,297	2	3	290,621	440	12,954	14	18
65-74	21,020	12,139	8,663	212	6	0	222,654	123,906	2,067	18	0
75-84	25,681	19,816	5,843	22	0	0	261,215	199,565	176	0	0
85 and older	25,695	22,061	3,630	2	2	0	246,122	209,718	24	23	0
Unknown	0	0	0	0	0	0	0	0	0	0	0
Gender											
Female	77,882	39,366	36,834	1,671	8	3	818,972	395,202	16,764	80	18
Male	45,316	14,718	28,894	1,690	14	0	470,416	138,552	16,616	91	0
Unknown	0	0	0	0	0	0	0	0	0	0	0
Race											
White	67,347	37,423	27,551	2,361	11	1	680,284	361,279	23,827	91	12
African American	6,179	1,958	3,748	471	1	1	63,582	20,122	4,626	12	4
Other/unknown	49,672	14,703	34,429	529	10	1	545,522	152,353	388,172	68	2
Use of Nursing Facilities^c											
Entire year	24,705	23,032	1,670	0	3	0	244,880	226,910	17,945	25	0
Part year	9,656	7,530	2,122	4	0	0	87,136	64,658	32	0	0
None	88,837	23,522	61,936	3,357	19	3	957,372	242,186	33,348	146	18
Maintenance Assistance Status											
Cash	45,430	12,714	32,429	285	2	0	515,237	142,724	369,770	24	0
Medically needy	11,596	7,152	4,419	22	3	0	109,572	66,736	42,693	20	0
Poverty related	4,446	489	3,929	25	0	3	46,969	5,261	175	0	18
Other/unknown	61,726	33,729	24,951	3,029	17	0	617,610	319,033	268,087	127	0
Dual Status^d											
Full dual, all year	120,156	52,554	64,232	3,345	22	3	1,256,409	517,023	33,194	171	18
Full dual, part year	3,042	1,530	1,496	16	0	0	32,979	16,731	186	0	0
Managed Care Status											
FFS all year	122,157	54,074	65,542	2,516	22	3	1,278,446	533,653	24,604	171	18
FFS part year, with Rx claims	763	4	172	587	0	0	8,357	47	6,362	0	0
FFS part year, no Rx claims	142	6	12	124	0	0	1,233	54	1,081	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	136	0	2	134	0	0	1,352	0	1,333	0	0

Source: Data for this table are from the MAX 2002 file for Wisconsin, released by CMS in 05/2006. This table was produced on 04/19/2007.

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

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

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

d. The "Full dual, all year" group contains beneficiaries who had Medicare as well as Medicaid pharmacy benefits during all months of Medicaid enrollment in 2002. The "Full dual, part year" group contains beneficiaries who had such benefits for some, but not all, months of their enrollment. Refer to footnote g of Table 1 for more information about how we determined dual eligibility status.

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

APPENDIX TABLE A.4
 MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS^a
 DUAL ELIGIBLE BENEFICIARIES, WISCONSIN, 2002

Beneficiary Characteristics	Bene Mos in Cell F of Table 1		Included in Cell G of Table 1		Excluded from Cell G of Table 1	
	No. of Benes	No. of Bene Mos	No. of Benes	No. of Bene Mos	No. of Benes	No. of Bene Mos
All	123,198	1,289,388	123,062	1,284,325	0	5,063
FFS all year	122,157	1,278,446	122,157	1,278,446	0	0
FFS part year, with Rx claims	763	8,357	763	5,221	0	3,136
FFS part year, with no Rx claims	142	1,233	142	658	0	575
MC all year, with Rx claims	0	0	0	0	0	0
MC all year, with no Rx claims	136	1,352	0	0	0	1,352

Source: Data for this table are from the MAX 2002 file for Wisconsin, released by CMS in 05/2006. This table was produced on 04/19/2007.

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

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