

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

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

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown
<b>All</b>	<b>482,937</b>	<b>2,964</b>	<b>75,761</b>	<b>187,003</b>	<b>216,932</b>	<b>277</b>	<b>3,140,788</b>	<b>25,976</b>	<b>811,281</b>	<b>1,091,080</b>	<b>1,210,099</b>	<b>2,352</b>
<b>Age</b>												
5 and younger	90,178	1	5,535	9	84,633	0	505,164	12	55,395	29	449,728	0
6-14	101,816	0	13,629	31	88,156	0	651,699	0	151,335	122	500,242	0
15-20	82,344	0	9,271	29,592	43,476	5	558,801	0	101,903	199,234	257,616	48
21-44	167,045	6	22,515	143,866	611	47	1,068,166	32	243,085	822,220	2,409	420
45-64	37,647	37	23,908	13,479	0	223	321,034	131	249,646	69,387	0	1,870
65-74	1,520	808	699	11	0	2	15,007	7,162	7,774	57	0	14
75-84	1,259	1,120	125	13	1	0	11,793	10,439	1,326	27	1	0
85 and older	1,074	992	79	1	2	0	9,026	8,200	817	2	7	0
Unknown	54	0	0	1	53	0	98	0	0	2	96	0
<b>Gender</b>												
Female	300,749	2,064	37,449	151,570	109,389	277	1,966,188	18,185	406,931	926,934	611,786	2,352
Male	182,188	900	38,312	35,433	107,543	0	1,174,600	7,791	404,350	164,146	598,313	0
Unknown	0	0	0	0	0	0		0	0	0	0	0
<b>Race</b>												
White	264,533	1,840	6,915	134,183	121,505	90	1,625,435	15,482	63,798	834,919	710,463	773
African American	60,423	120	1,399	23,665	35,217	22	279,283	1,139	12,417	105,613	159,926	188
Other/unknown	157,981	1,004	67,447	29,155	60,210	165	1,236,070	9,355	735,066	150,548	339,710	1,391
<b>Use of Nursing Facilities<sup>c</sup></b>												
Entire year	908	297	610	1	0	0	9,311	3,056	6,243	12	0	0
Part year	1,141	92	1,025	22	1	1	11,145	791	10,148	191	3	12
None	480,888	2,575	74,126	186,980	216,931	276	3,120,332	22,129	794,890	1,090,877	1,210,096	2,340
<b>Maintenance Assistance Status</b>												
Cash	164,274	656	62,827	41,928	58,863	0	1,165,553	6,629	684,090	194,013	280,821	0
Medically needy	17,277	99	1,387	1,930	13,861	0	94,929	807	11,040	8,433	74,649	0
Poverty-related	76,100	11	1,301	7,851	66,660	277	399,583	108	12,700	36,709	347,714	2,352
Other/unknown	225,286	2,198	10,246	135,294	77,548	0	1,480,723	18,432	103,451	851,925	506,915	0
<b>Managed Care (MC) Status</b>												
Fee-for-service (FFS) all year	299,803	2,958	73,004	112,397	111,171	273	2,601,625	25,952	793,030	869,984	910,324	2,335
FFS part year, with Rx claims	63,378	3	2,097	34,417	26,858	3	235,075	12	14,601	117,329	103,117	16
FFS part year, no Rx claims	119,756	3	660	40,189	78,903	1	304,088	12	3,650	103,767	196,658	1

Source: Data for this table are from the MAX 2004 file for Wisconsin, released by CMS in 02/2008. This table was produced on 09/25/2008.

- a. Table ND.2 includes the beneficiaries represented by Cell K of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- b. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services. The total includes some beneficiaries with unknown basis of eligibility and some whose age categories are not consistent with basis of eligibility.
- c. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.

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

TABLE ND.3  
ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC<sup>a, b</sup>  
NONDUAL BENEFICIARIES, WISCONSIN, 2004

Beneficiary Characteristics	Percentage with at Least One Rx	Mean Number of Rx	Mean Rx \$	\$ per Rx	Mean \$, All Medicaid FFS \$ <sup>c</sup>	Rx \$ as a Percentage of All Medicaid FFS \$ <sup>d</sup>	Number of Beneficiaries
<b>All</b>	<b>45.2 %</b>	<b>6.6</b>	<b>\$458</b>	<b>\$70</b>	<b>\$3,219</b>	<b>14.2 %</b>	<b>482,937</b>
<b>Age</b>							
5 and younger	39.2	1.9	118	61	2,015	5.8	90,178
6-14	39.7	3.8	309	81	1,754	17.6	101,816
15-20	41.0	3.6	287	80	2,220	12.9	82,344
21-44	47.9	6.5	457	70	3,478	13.1	167,045
45-64	70.9	30.0	1,981	66	10,400	19.1	37,647
65-74	68.0	28.7	1,440	50	11,595	12.4	1,520
75-84	61.7	27.6	1,200	44	8,777	13.7	1,259
85 and older	47.2	25.5	949	37	9,721	9.8	1,074
Unknown	0.0	0.0	0	0	0	0.0	54
<b>Basis of Eligibility<sup>e</sup></b>							
Aged	55.4	24.5	1,029	42	8,473	12.1	2,964
Disabled	76.0	27.0	2,114	78	12,898	16.4	75,761
Adults	43.3	3.4	169	50	1,513	11.2	187,003
Children	36.0	2.0	121	62	1,231	9.8	216,932
Unknown	76.2	18.1	1,111	61	9,003	12.3	277
<b>Gender</b>							
Female	45.7	6.7	417	63	2,916	14.3	300,749
Male	44.4	6.5	526	81	3,720	14.1	182,188
Unknown	0.0	0.0	0	0	0	0.0	0
<b>Race</b>							
White	43.1	4.0	229	58	1,848	12.4	264,533
African American	34.7	2.2	121	54	1,880	6.4	60,423
Other/unknown	52.8	12.6	971	77	6,028	16.1	157,981
<b>Use of Nursing Facilities<sup>f</sup></b>							
Entire year	95.2	89.6	5,012	56	49,544	10.1	908
Part year	96.4	83.1	5,075	61	60,058	8.5	1,141
None	45.0	6.2	439	70	2,997	14.6	480,888
<b>Maintenance Assistance Status</b>							
Cash	54.4	12.2	919	75	5,938	15.5	164,274
Medically needy	40.4	4.1	271	66	2,316	11.7	17,277
Poverty related	36.1	2.2	131	59	1,230	10.6	76,100
Other/unknown	42.0	4.2	248	60	1,978	12.5	225,286

Source: Data for this table are from the MAX 2004 file for Wisconsin, released by CMS in 02/2008. This table was produced on 09/25/2008.

a. Table ND.3 includes beneficiaries represented by Cell K of Table 1.

b. The Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

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

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

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

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

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

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

Beneficiary Characteristics	Number of Rx, Percentage with:									Number		
	Mean Number of Rx	Mean Rx \$	Rx \$ as a Percentage of All Medicaid FFS \$ <sup>c</sup>	None	More than 0, but 1 or Less	More than 1, but 2 or Less	More than 2, but 5 or Less	More than 5, but 10 or Less	More than 10	Mean \$, All Medicaid FFS \$ <sup>d</sup>	Beneficiaries	Benefit Months
<b>All</b>	<b>1.0</b>	<b>\$71</b>	<b>14.2 %</b>	<b>54.8 %</b>	<b>31.0 %</b>	<b>5.5 %</b>	<b>5.8 %</b>	<b>2.3 %</b>	<b>0.7 %</b>	<b>\$495</b>	<b>482,937</b>	<b>3,140,788</b>
<b>Age</b>												
5 and younger	0.3	21	5.8	60.8	35.1	2.6	1.3	0.2	0.0	360	90,178	505,164
6-14	0.6	48	17.6	60.3	30.6	4.8	3.8	0.5	0.0	274	101,816	651,699
15-20	0.5	42	12.9	59.0	32.3	4.4	3.5	0.7	0.1	327	82,344	558,801
21-44	1.0	72	13.1	52.1	30.8	7.0	7.0	2.5	0.6	544	167,045	1,068,166
45-64	3.5	232	19.1	29.1	21.6	9.9	19.8	14.1	5.5	1,220	37,647	321,034
65-74	2.9	146	12.4	32.0	23.9	8.9	17.6	12.4	5.1	1,174	1,520	15,007
75-84	2.9	128	13.7	38.3	16.9	8.2	19.8	13.1	3.7	937	1,259	11,793
85 and older	3.0	113	9.8	52.8	7.4	5.4	16.1	14.1	4.2	1,157	1,074	9,026
Unknown	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	0.0	0	54	98
<b>Basis of Eligibility<sup>e</sup></b>												
Aged	2.8	117	12.1	44.6	15.4	7.4	17.2	11.6	3.8	967	2,964	25,976
Disabled	2.5	197	16.4	24.0	32.1	11.0	18.4	10.6	3.8	1,205	75,761	811,281
Adults	0.6	29	11.2	56.7	30.7	5.9	5.1	1.3	0.2	259	187,003	1,091,080
Children	0.4	22	9.8	64.0	31.0	3.1	1.7	0.2	0.0	221	216,932	1,210,099
Unknown	2.1	131	12.3	23.8	31.4	13.0	23.5	8.3	0.0	1,060	277	2,352
<b>Gender</b>												
Female	1.0	64	14.3	54.3	31.3	5.5	5.7	2.4	0.8	446	300,749	1,966,188
Male	1.0	82	14.1	55.6	30.4	5.5	5.9	2.1	0.5	577	182,188	1,174,600
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<b>Race</b>												
White	0.6	37	12.4	56.9	32.1	5.0	4.4	1.3	0.3	301	264,533	1,625,435
African American	0.5	26	6.4	65.3	26.4	4.5	3.0	0.7	0.2	407	60,423	279,283
Other/unknown	1.6	124	16.1	47.2	30.9	6.7	9.1	4.5	1.5	771	157,981	1,236,070
<b>Use of Nursing Facilities<sup>f</sup></b>												
Entire year	8.7	489	10.1	4.8	3.2	4.6	18.9	36.7	31.7	4,831	908	9,311
Part year	8.5	520	8.5	3.6	5.7	6.7	20.3	34.1	29.5	6,149	1,141	11,145
None	1.0	68	14.6	55.0	31.1	5.5	5.7	2.2	0.6	462	480,888	3,120,332
<b>Maintenance Assistance Status</b>												
Cash	1.7	130	15.5	45.6	31.5	7.4	9.3	4.6	1.5	837	164,274	1,165,553
Medically needy	0.7	49	11.7	59.6	31.6	3.3	3.3	1.8	0.5	422	17,277	94,929
Poverty related	0.4	25	10.6	63.9	30.5	3.1	1.9	0.4	0.1	234	76,100	399,583
Other/unknown	0.6	38	12.5	58.0	30.7	5.1	4.7	1.3	0.3	301	225,286	1,480,723

Source: Data for this table are from the MAX 2004 file for Wisconsin, released by CMS in 02/2008. This table was produced on 09/25/2008.

- a. Table ND.4 includes the beneficiaries represented by Cell K of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- b. The Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
- c. In seven states (DE, IA, NE, NY, TX, UT, and WV) the expenditures in this column include only Rx drug expenditures for those enrolled in capitated managed care plans, and not expenditures for other services covered by the plans or long-term-care services not covered by the plans. As a result, the amounts shown in this column for all Medicaid fee-for-service expenditures are lower than they would otherwise be.
- d. In seven states (DE, IA, NE, NY, TX, UT, and WV) the Rx share of expenditures for all Medicaid services shown in this column is higher than it would be if all expenditures for these other services, including services provided in capitated managed care plans and long-term-care services, were included.
- e. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.
- f. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.

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



TABLE ND.5

AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, WISCONSIN, 2004

Beneficiary	All Rx			Patented Brand-Name Drugs			Off-Patent Brand-Name Drugs			Generic Drugs		
Beneficiary Characteristics	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx
<b>All</b>	<b>1.0</b>	<b>\$71</b>	<b>\$70</b>	<b>0.4</b>	<b>\$55</b>	<b>\$136</b>	<b>0.1</b>	<b>\$5</b>	<b>\$85</b>	<b>0.5</b>	<b>\$10</b>	<b>\$19</b>
<b>Age</b>												
5 and younger	0.3	21	61	0.1	17	143	0.0	1	42	0.2	3	15
6-14	0.6	48	81	0.3	42	127	0.0	2	69	0.2	5	20
15-20	0.5	42	80	0.3	35	135	0.0	2	76	0.2	5	21
21-44	1.0	72	70	0.4	55	145	0.1	6	92	0.6	11	20
45-64	3.5	232	66	1.3	177	134	0.2	18	96	2.0	37	18
65-74	2.9	146	50	1.1	114	100	0.1	7	62	1.6	25	15
75-84	2.9	128	44	1.1	100	88	0.1	6	47	1.7	22	13
85 and older	3.0	113	37	1.0	84	81	0.2	6	34	1.8	23	13
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
<b>Basis of Eligibility<sup>d</sup></b>												
Aged	2.8	117	42	1.0	91	87	0.1	6	44	1.6	21	13
Disabled	2.5	197	78	1.0	157	153	0.1	14	95	1.3	26	20
Adults	0.6	29	50	0.2	21	101	0.0	2	72	0.3	6	18
Children	0.4	22	62	0.2	18	108	0.0	1	59	0.2	3	17
Unknown	2.1	131	61	0.7	98	141	0.1	10	80	1.3	23	17
<b>Gender</b>												
Female	1.0	64	63	0.4	49	125	0.1	5	80	0.6	10	18
Male	1.0	82	81	0.4	67	152	0.0	5	97	0.5	10	20
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
<b>Race</b>												
White	0.6	37	58	0.3	28	111	0.0	3	75	0.4	7	18
African American	0.5	26	54	0.2	20	110	0.0	1	67	0.3	5	16
Other/unknown	1.6	124	77	0.7	99	150	0.1	8	92	0.9	16	19
<b>Use of Nursing Facilities<sup>e</sup></b>												
Entire year	8.7	489	56	3.0	364	119	0.6	36	63	5.1	88	17
Part year	8.5	520	61	2.9	383	134	0.5	41	82	5.1	95	19
None	1.0	68	70	0.4	53	136	0.1	5	86	0.5	10	19
<b>Maintenance Assistance Status</b>												
Cash	1.7	130	75	0.7	102	150	0.1	9	96	0.9	18	19
Medically needy	0.7	49	66	0.3	38	141	0.0	4	87	0.4	8	19
Poverty related	0.4	25	59	0.2	19	114	0.0	1	68	0.2	4	18
Other/unknown	0.6	38	60	0.3	29	109	0.0	2	68	0.3	6	18

Source: Data for this table are from the MAX 2004 file for Wisconsin, released by CMS in 02/2008. This table was produced on 09/25/2008.

- 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 Wisconsin, 0.6 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.medispain.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).
- d. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.
- e. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.

CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE ND.6  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY<sup>a, b, c, d</sup>  
 NONDUAL BENEFICIARIES, WISCONSIN, 2004

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				\$ per Rx				Users <sup>e</sup>				
	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total Number of Rx	Total Rx \$	Number of Users	As a Percentage of All Benes	Number of Benefit Months
Anti-infective Agents	0.3	0.1	0.0	0.2	\$15	\$11	\$1	\$3	\$59	\$127	\$78	\$20	276,838	\$16,404,893	113,655	23.5 %	1,058,616
Biologicals	0.5	0.4	0.0	0.0	620	565	10	45	1340	1,354	1,403	1,181	2,769	3,711,542	643	0.1	5,991
Antineoplastic Agents	0.6	0.1	0.0	0.4	114	91	5	19	191	662	241	42	8,544	1,630,269	1,467	0.3	14,269
Endocrine/Metabolic Drugs	0.6	0.3	0.1	0.3	29	21	2	6	49	84	33	21	331,394	16,215,721	63,276	13.1	553,249
Cardiovascular Agents	1.2	0.4	0.0	0.8	39	29	1	9	32	72	41	11	395,966	12,840,500	33,539	6.9	327,673
Respiratory Agents	0.5	0.3	0.0	0.2	29	26	0	3	59	93	39	14	271,890	15,935,759	58,683	12.2	554,152
Gastrointestinal Agents	0.5	0.2	0.0	0.2	40	32	3	5	83	158	75	22	138,585	11,486,362	28,344	5.9	284,011
Genitourinary Agents	0.3	0.2	0.0	0.1	18	14	1	2	57	80	45	22	41,458	2,346,660	13,988	2.9	133,527
CNS Drugs	1.1	0.5	0.1	0.5	103	87	6	10	96	173	97	20	625,764	60,230,014	61,386	12.7	582,625
Stimulants/Anti-obesity/Anorexia	0.7	0.5	0.0	0.2	62	53	1	7	85	99	77	40	141,138	11,937,630	20,250	4.2	193,921
Miscellaneous Psychological/																	
Neurological Agents	0.3	0.2	0.0	0.1	87	72	2	13	283	384	109	126	11,540	3,264,841	3,695	0.8	37,635
Analgesics and Anesthetics	0.6	0.1	0.0	0.4	34	25	3	7	59	171	257	17	376,087	22,089,920	68,953	14.3	640,483
Neuromuscular Agents	0.8	0.3	0.1	0.4	72	51	14	7	87	147	137	19	272,923	23,640,626	32,625	6.8	327,567
Nutritional Products	0.4	0.0	0.0	0.4	8	1	1	7	19	36	36	17	71,527	1,379,828	19,423	4.0	166,613
Hematological Agents	0.7	0.2	0.0	0.4	131	124	2	6	190	596	47	13	49,018	9,307,888	7,136	1.5	70,875
Topical Products	0.2	0.1	0.0	0.2	10	6	1	3	41	81	54	20	142,787	5,866,170	59,617	12.3	572,696
Miscellaneous Products	0.7	0.2	0.1	0.4	141	99	18	24	205	447	266	59	13,542	2,774,358	1,919	0.4	19,644
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	9	0	0	0	30	0	0	0	8,379	252,755	2,717	0.6	29,549
<b>TOTAL NO. OF RX AND RX \$</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>3,180,149</b>	<b>221,315,736</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>

Source: Data for this table are from the MAX 2004 file for Wisconsin, released by CMS in 02/2008. This table was produced on 09/25/2008.

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 Wisconsin, 0.6 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, <http://www.medispans.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; CNS = Central Nervous System; MAX = Medicaid Analytic Extract; n.a. = not applicable; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE ND.7  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, WISCONSIN, 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	\$40,116,397	28,473	5.9 %	305,789	0.7	\$194	\$131
ANTICONVULSANT	21,790,782	26,068	5.4	272,118	0.7	109	80
ANTIDEPRESSANTS	16,613,002	57,922	12.0	557,985	0.5	58	30
ANALGESICS - Narcotic	12,935,326	75,903	15.7	732,561	0.3	52	18
STIMULANTS/ANTI-OBESITY/ANOREXIANTS	11,936,462	24,211	5.0	237,482	0.6	85	50
ANTIASTHMATIC	11,278,511	55,599	11.5	537,439	0.3	64	21
ULCER DRUGS	8,189,677	28,756	6.0	289,607	0.4	64	28
ANTIDIABETIC	6,501,501	15,898	3.3	157,257	0.7	59	41
MISC. HEMATOLOGICAL	6,188,154	1,997	0.4	20,483	0.6	515	302
ANTIVIRAL	6,101,343	5,305	1.1	50,896	0.4	335	120
Total	141,651,155	320,132		3,161,617	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2004 file for Wisconsin, released by CMS in 02/2008. This table was produced on 09/25/2008.

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.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); CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE ND.7A  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS COMBINED  
 AND FIRST AND SECOND GROUPS SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, WISCONSIN, 2004

Beneficiary Characteristics	All Top 10 Drug Groups		ANTIPSYCHOTICS					ANTICONVULSANT				
	Number of Rx	Rx \$	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	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	Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
<b>All</b>	<b>1,528,668</b>	<b>\$141,651,155</b>	<b>28,473</b>	<b>5.9 %</b>	<b>305,789</b>	<b>0.7</b>	<b>\$131</b>	<b>26,068</b>	<b>5.4 %</b>	<b>272,118</b>	<b>0.7</b>	<b>\$80</b>
<b>Female</b>	891,024	73,415,503	13,934	4.6	148,171	0.6	119	15,167	5.0	156,057	0.7	77
<b>Disabled</b>	599,754	54,581,559	9,764	26.1	110,633	0.7	137	10,395	27.8	117,415	0.8	85
	7,298	669,952	29	1.3	323	0.4	42	262	12.2	2,920	0.7	89
5 and younger	33,048	3,337,062	750	16.9	8,589	0.6	106	955	21.5	10,985	0.8	96
6-14	29,426	2,912,256	780	22.1	8,947	0.6	101	857	24.3	9,837	0.8	97
15-20	190,317	19,053,873	3,992	32.9	45,188	0.7	139	3,952	32.6	44,600	0.8	90
21-44	330,105	27,943,339	4,120	28.3	46,558	0.8	148	4,276	29.4	48,049	0.8	76
45-64	7,488	531,927	71	14.1	814	1.0	161	76	15.0	855	0.7	47
65-74	1,393	92,214	16	18.8	152	1.0	187	9	10.6	81	0.8	58
75-84	679	40,936	6	10.5	62	0.5	43	8	14.0	88	0.6	19
85 and older	291,270	18,833,944	4,170	1.6	37,538	0.4	66	4,772	1.8	38,642	0.5	53
<b>Other Eligibles</b>	8,894	499,782	58	0.1	615	0.4	59	91	0.2	782	0.5	51
5 and younger	40,858	3,286,379	891	2.0	9,170	0.5	95	456	1.0	4,351	0.5	61
6-14	33,707	2,247,463	874	1.6	8,264	0.4	63	541	1.0	5,113	0.5	54
15-20	162,817	9,871,474	1,914	1.7	15,740	0.3	47	3,037	2.6	23,105	0.5	52
21-44	29,357	2,000,217	264	3.3	1,987	0.4	43	481	6.1	3,521	0.5	50
45-64	4,589	294,817	45	8.6	470	0.8	155	52	9.9	570	0.9	58
65-74	5,979	362,053	64	8.4	698	0.7	119	77	10.1	799	0.7	39
75-84	5,069	271,759	60	7.8	594	0.8	87	37	4.8	401	0.8	41
85 and older												
<b>Male</b>	637,644	68,235,652	14,539	8.0	157,618	0.7	143	10,901	6.0	116,061	0.8	84
<b>Disabled</b>	443,322	52,219,388	10,835	28.3	122,647	0.8	156	8,427	22.0	95,245	0.8	90
	12,127	989,365	162	4.8	1,703	0.5	72	394	11.6	4,404	0.6	53
5 and younger	86,622	9,590,552	2,839	30.9	32,647	0.6	109	1,726	18.8	20,033	0.7	79
6-14	52,671	7,667,324	1,664	29.0	19,040	0.7	130	1,186	20.7	13,782	0.8	102
15-20	139,015	18,773,404	3,820	36.8	43,180	0.9	188	3,040	29.3	34,186	1.0	109
21-44	149,403	14,966,962	2,306	24.7	25,589	0.9	185	2,053	22.0	22,520	0.8	73
45-64	2,730	198,197	32	16.5	355	1.0	170	19	9.8	220	1.1	96
65-74	501	25,419	8	20.0	85	0.9	90	8	20.0	88	0.5	21
75-84	253	8,165	4	18.2	48	0.4	19	1	4.5	12	1.3	41
85 and older	194,322	16,016,264	3,704	2.6	34,971	0.6	97	2,474	1.7	20,816	0.6	57
<b>Other Eligibles</b>	16,321	1,357,957	148	0.3	1,493	0.5	73	146	0.3	1,350	0.4	39
5 and younger	79,330	7,227,647	2,036	4.6	20,138	0.6	102	719	1.6	7,060	0.6	62
6-14	31,734	2,957,003	924	4.6	8,814	0.6	101	452	2.3	4,179	0.6	67
15-20	43,470	2,894,862	426	1.5	2,966	0.4	65	834	2.9	5,692	0.5	51
21-44	16,000	1,117,987	80	1.4	622	0.5	89	258	4.4	1,829	0.6	54
45-64	2,450	173,202	27	9.1	289	0.8	117	30	10.1	317	0.7	35
65-74	3,098	181,287	34	9.1	353	0.9	117	24	6.4	286	0.7	23
75-84	1,919	106,319	29	12.8	296	0.9	129	11	4.9	103	1.3	26
85 and older												
<b>Unknown</b>	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2004 file for Wisconsin, released by CMS in 02/2008. This table was produced on 09/25/2008.

a. Table ND.7A includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2004. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2004. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispn.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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

TABLE ND.7B  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY,  
 BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, WISCONSIN, 2004

Beneficiary Characteristics	ANTIDEPRESSANTS					ANALGESICS - Narcotic					STIMULANTS/ANTI-OBESITY/ANOREXIANTS				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
<b>All</b>	<b>57,922</b>	<b>12.0 %</b>	<b>557,985</b>	<b>0.5</b>	<b>\$30</b>	<b>75,903</b>	<b>15.7 %</b>	<b>732,561</b>	<b>0.3</b>	<b>\$18</b>	<b>24,211</b>	<b>5.0 %</b>	<b>237,482</b>	<b>0.6</b>	<b>\$50</b>
<b>Female</b>	40,377	13.4	383,613	0.5	30	52,639	17.5	510,635	0.3	16	8,289	2.8	81,784	0.5	47
<b>Disabled</b>	18,146	48.5	204,933	0.6	34	22,117	59.1	249,618	0.4	25	2,885	7.7	32,956	0.6	50
20	20	0.9	197	0.5	11	184	8.6	2,115	0.1	8	58	2.7	633	0.4	55
5 and younger	671	15.1	7,752	0.5	22	518	11.7	5,983	0.2	4	1,100	24.8	12,528	0.6	47
6-14	1,031	29.2	11,805	0.5	27	905	25.7	10,335	0.2	3	455	12.9	5,295	0.6	50
15-20	6,843	56.4	77,330	0.5	33	8,397	69.2	95,084	0.4	23	686	5.7	7,838	0.5	49
21-44	9,364	64.3	105,421	0.6	37	11,788	81.0	132,438	0.5	29	577	4.0	6,554	0.5	59
45-64	169	33.5	1,909	0.6	30	251	49.7	2,827	0.4	16	9	1.8	108	0.2	24
65-74	30	35.3	323	0.7	38	54	63.5	616	0.3	12	0	0.0	0	0.0	0
75-84	18	31.6	196	0.8	33	20	35.1	220	0.3	24	0	0.0	0	0.0	0
85 and older	22,231	8.4	178,680	0.4	26	30,522	11.6	261,017	0.3	8	5,404	2.1	48,828	0.5	45
<b>Other Eligibles</b>	28	0.1	304	0.3	11	493	1.2	4,711	0.1	1	128	0.3	1,275	0.4	25
5 and younger	1,529	3.5	15,032	0.4	20	1,173	2.7	11,403	0.1	1	2,778	6.4	25,924	0.6	46
6-14	2,895	5.5	26,477	0.4	20	3,905	7.4	34,893	0.2	2	900	1.7	8,470	0.5	48
15-20	15,125	13.1	116,360	0.4	26	22,109	19.2	185,344	0.3	9	1,422	1.2	11,856	0.4	41
21-44	2,271	28.7	16,337	0.5	35	2,274	28.7	18,559	0.4	20	173	2.2	1,267	0.5	53
45-64	78	14.9	878	0.6	23	198	37.7	2,128	0.4	11	2	0.4	24	0.3	47
65-74	151	19.9	1,669	0.6	29	191	25.1	2,150	0.4	13	1	0.1	12	0.8	74
75-84	154	20.0	1,623	0.7	32	179	23.3	1,829	0.5	19	0	0.0	0	0.0	0
85 and older															
<b>Male</b>	17,545	9.6	174,372	0.5	29	23,264	12.8	221,926	0.3	21	15,922	8.7	155,698	0.6	52
<b>Disabled</b>	10,034	26.2	112,081	0.6	31	11,687	30.5	127,729	0.4	28	6,068	15.8	69,061	0.6	53
20	66	2.0	731	0.3	7	317	9.4	3,545	0.1	1	222	6.6	2,327	0.4	32
5 and younger	1,722	18.7	19,894	0.5	23	752	8.2	8,775	0.1	2	3,968	43.2	45,139	0.6	52
6-14	1,447	25.2	16,592	0.5	30	965	16.8	11,112	0.2	6	1,303	22.7	15,116	0.7	58
15-20	3,354	32.3	37,263	0.6	33	4,040	38.9	44,044	0.4	30	427	4.1	4,794	0.6	55
21-44	3,380	36.1	36,891	0.6	33	5,524	59.1	59,226	0.5	36	147	1.6	1,673	0.6	47
45-64	48	24.7	525	0.6	27	74	38.1	859	0.4	22	1	0.5	12	0.1	1
65-74	11	27.5	113	0.8	47	8	20.0	96	0.2	1	0	0.0	0	0.0	0
75-84	6	27.3	72	0.7	43	7	31.8	72	0.5	11	0	0.0	0	0.0	0
85 and older															
<b>Other Eligibles</b>	7,511	5.2	62,291	0.5	26	11,577	8.0	94,197	0.3	12	9,854	6.9	86,637	0.6	51
20	64	0.1	637	0.4	11	809	1.9	7,730	0.1	1	451	1.0	4,203	0.4	29
5 and younger	2,140	4.8	20,433	0.5	23	1,256	2.8	12,079	0.1	1	7,080	15.9	61,957	0.6	51
6-14	1,539	7.7	13,848	0.5	28	1,608	8.1	14,386	0.2	1	1,835	9.2	16,919	0.6	56
15-20	2,794	9.6	19,964	0.4	27	6,270	21.5	47,018	0.4	18	402	1.4	2,867	0.6	53
21-44	799	13.7	5,587	0.5	33	1,431	24.6	10,905	0.4	21	80	1.4	619	0.7	57
45-64	55	18.6	588	0.5	30	68	23.0	734	0.5	15	2	0.7	24	0.2	37
65-74	67	17.9	701	0.6	28	89	23.8	930	0.4	14	4	1.1	48	0.6	59
75-84	53	23.5	533	0.7	33	46	20.4	415	0.7	35	0	0.0	0	0.0	0
85 and older															
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2004 file for Wisconsin, released by CMS in 02/2008. This table was produced on 09/25/2008.

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

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



TABLE ND.7C  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY,  
 BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, WISCONSIN, 2004

Beneficiary Characteristics	ANTIASTHMATIC					ULCER DRUGS					ANTIDIABETIC				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
<b>All</b>	<b>55,599</b>	<b>11.5 %</b>	<b>537,439</b>	<b>0.3</b>	<b>\$21</b>	<b>28,756</b>	<b>6.0 %</b>	<b>289,607</b>	<b>0.4</b>	<b>\$28</b>	<b>15,898</b>	<b>3.3 %</b>	<b>157,257</b>	<b>0.7</b>	<b>\$41</b>
<b>Female</b>	32,636	10.9	315,751	0.3	21	19,041	6.3	193,189	0.4	28	10,438	3.5	104,927	0.7	41
<b>Disabled</b>	14,303	38.2	162,396	0.4	27	11,001	29.4	124,650	0.5	34	7,249	19.4	81,240	0.7	43
5 and younger	933	43.4	10,443	0.2	19	384	17.9	4,087	0.4	26	1	0.0	12	2.0	136
6-14	1,199	27.0	13,936	0.3	26	371	8.4	4,317	0.4	34	59	1.3	668	0.7	53
15-20	785	22.3	9,065	0.3	18	442	12.5	5,083	0.3	24	126	3.6	1,464	0.6	41
21-44	4,002	33.0	45,525	0.3	21	3,266	26.9	37,199	0.4	31	1,516	12.5	17,123	0.6	38
45-64	7,168	49.2	81,004	0.5	33	6,305	43.3	71,316	0.5	37	5,288	36.3	59,029	0.7	45
65-74	177	35.0	1,989	0.5	40	176	34.9	2,021	0.5	25	212	42.0	2,440	0.7	41
75-84	23	27.1	255	0.3	24	40	47.1	433	0.6	30	39	45.9	416	0.7	30
85 and older	16	28.1	179	0.6	50	17	29.8	194	0.7	43	8	14.0	88	0.8	28
<b>Other Eligibles</b>	18,333	7.0	153,355	0.3	15	8,040	3.1	68,539	0.3	19	3,189	1.2	23,687	0.6	35
5 and younger	3,343	8.1	28,867	0.2	11	465	1.1	3,551	0.3	13	11	0.0	76	0.8	56
6-14	3,795	8.7	32,823	0.3	15	418	1.0	4,003	0.2	14	130	0.3	1,002	0.7	56
15-20	2,416	4.5	21,028	0.2	10	863	1.6	8,155	0.2	9	153	0.3	1,335	0.6	44
21-44	7,331	6.4	58,662	0.3	16	4,972	4.3	41,413	0.3	19	1,777	1.5	12,376	0.6	34
45-64	1,129	14.3	8,464	0.4	25	925	11.7	7,024	0.4	31	741	9.4	4,781	0.7	38
65-74	99	18.9	1,055	0.5	38	121	23.0	1,343	0.4	29	156	29.7	1,652	0.7	30
75-84	124	16.3	1,394	0.5	32	161	21.2	1,812	0.5	27	144	18.9	1,602	0.7	27
85 and older	96	12.5	1,062	0.4	24	115	15.0	1,238	0.7	40	77	10.0	863	0.7	25
<b>Male</b>	22,963	12.6	221,688	0.3	21	9,715	5.3	96,418	0.5	28	5,460	3.0	52,330	0.7	41
<b>Disabled</b>	9,590	25.0	107,719	0.4	26	6,003	15.7	66,617	0.5	30	3,643	9.5	39,768	0.7	41
5 and younger	1,481	43.8	16,532	0.3	22	511	15.1	5,546	0.4	23	5	0.1	49	0.5	46
6-14	2,728	29.7	31,508	0.3	21	511	5.6	5,940	0.4	31	83	0.9	981	0.7	54
15-20	1,173	20.4	13,518	0.3	25	477	8.3	5,483	0.4	27	88	1.5	1,036	0.7	50
21-44	1,551	14.9	17,378	0.4	26	1,766	17.0	19,761	0.5	33	850	8.2	9,282	0.7	39
45-64	2,603	27.8	28,191	0.5	35	2,677	28.6	29,177	0.5	31	2,523	27.0	27,339	0.7	41
65-74	32	16.5	373	0.8	67	45	23.2	518	0.6	28	79	40.7	917	0.8	35
75-84	16	40.0	152	0.4	19	7	17.5	84	0.9	31	13	32.5	140	0.8	20
85 and older	6	27.3	67	0.2	10	9	40.9	108	0.9	14	2	9.1	24	0.9	14
<b>Other Eligibles</b>	13,373	9.3	113,969	0.3	16	3,712	2.6	29,801	0.4	23	1,817	1.3	12,562	0.7	43
5 and younger	5,014	11.6	44,223	0.2	14	665	1.5	5,270	0.3	17	29	0.1	239	0.9	63
6-14	4,738	10.6	40,691	0.3	17	391	0.9	3,690	0.2	16	103	0.2	665	0.9	64
15-20	1,513	7.6	12,882	0.3	16	337	1.7	3,017	0.3	12	78	0.4	575	0.9	87
21-44	1,493	5.1	11,169	0.3	17	1,599	5.5	11,887	0.4	27	790	2.7	5,192	0.7	41
45-64	426	7.3	3,089	0.4	26	539	9.3	4,041	0.5	35	647	11.1	4,066	0.7	39
65-74	49	16.6	465	0.4	29	76	25.7	786	0.4	20	83	28.0	885	0.7	42
75-84	98	26.2	1,052	0.7	39	62	16.6	665	0.6	33	60	16.0	677	0.7	22
85 and older	42	18.6	398	0.4	18	43	19.0	445	0.7	22	27	11.9	263	0.9	31
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2004 file for Wisconsin, released by CMS in 02/2008. This table was produced on 09/25/2008.

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

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

TABLE ND.7D  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR NINTH AND TENTH TOP DRUG GROUPS  
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, WISCONSIN, 2004

Beneficiary Characteristics	MISC. HEMATOLOGICAL					ANTIVIRAL					Number of Beneficiaries	Number of Benefit Months
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month		
<b>All</b>	<b>1,997</b>	<b>0.4 %</b>	<b>20,483</b>	<b>0.6</b>	<b>\$302</b>	<b>5,305</b>	<b>1.1 %</b>	<b>50,896</b>	<b>0.4</b>	<b>\$120</b>	<b>482,937</b>	<b>3,140,788</b>
<b>Female</b>	1,116	0.4	11,727	0.6	69	3,730	1.2	35,039	0.3	81	300,722	1,966,138
<b>Disabled</b>	897	2.4	9,815	0.6	70	1,276	3.4	14,350	0.4	129	37,449	406,931
5 and younger	1	0.0	12	0.3	4	35	1.6	414	0.5	84	2,151	21,624
6-14	5	0.1	60	0.5	40	60	1.4	650	0.4	77	4,437	49,285
15-20	3	0.1	35	0.7	495	79	2.2	902	0.3	80	3,528	39,083
21-44	79	0.7	835	0.5	106	556	4.6	6,265	0.4	134	12,131	133,683
45-64	755	5.2	8,270	0.6	65	540	3.7	6,047	0.4	142	14,555	156,120
65-74	34	6.7	389	0.6	68	4	0.8	48	0.2	6	505	5,651
75-84	12	14.1	135	0.6	58	1	1.2	12	0.1	1	85	911
85 and older	8	14.0	79	0.5	64	1	1.8	12	0.1	1	57	574
<b>Other Eligibles</b>	219	0.1	1,912	0.6	62	2,454	0.9	20,689	0.3	47	263,273	1,559,207
5 and younger	1	0.0	6	0.2	12	55	0.1	528	0.2	27	41,253	218,070
6-14	1	0.0	12	0.5	14	110	0.3	1,077	0.2	49	43,528	244,019
15-20	2	0.0	24	0.5	52	392	0.7	3,450	0.2	28	53,099	344,635
21-44	74	0.1	557	0.4	47	1,739	1.5	14,342	0.3	48	115,427	693,452
45-64	58	0.7	393	0.5	60	129	1.6	981	0.4	110	7,912	40,913
65-74	19	3.6	198	0.7	77	9	1.7	105	0.1	14	525	4,662
75-84	41	5.4	465	0.7	70	8	1.1	77	0.1	10	760	7,017
85 and older	23	3.0	257	0.7	78	12	1.6	129	0.2	13	769	6,439
<b>Male</b>	881	0.5	8,756	0.6	615	1,575	0.9	15,857	0.5	207	182,161	1,174,552
<b>Disabled</b>	665	1.7	6,929	0.6	656	1,154	3.0	12,158	0.5	243	38,312	404,350
5 and younger	7	0.2	83	0.4	281	33	1.0	379	0.5	99	3,384	33,771
6-14	14	0.2	155	0.5	4,373	86	0.9	931	0.3	84	9,192	102,050
15-20	9	0.2	96	0.5	18,297	66	1.1	724	0.3	82	5,743	62,820
21-44	69	0.7	683	0.5	2,030	516	5.0	5,317	0.5	239	10,384	109,402
45-64	544	5.8	5,678	0.6	121	449	4.8	4,763	0.6	318	9,353	93,526
65-74	19	9.8	204	0.6	61	2	1.0	24	0.1	10	194	2,123
75-84	2	5.0	24	0.8	90	1	2.5	8	0.1	5	40	415
85 and older	1	4.5	6	0.2	22	1	4.5	12	0.1	15	22	243
<b>Other Eligibles</b>	216	0.2	1,827	0.6	458	421	0.3	3,699	0.3	87	143,849	770,202
5 and younger	5	0.0	60	0.5	5,707	69	0.2	689	0.1	8	43,390	231,699
6-14	3	0.0	25	0.6	10,139	70	0.2	661	0.3	66	44,659	256,345
15-20	4	0.0	36	0.2	3,089	61	0.3	585	0.3	67	19,974	112,263
21-44	51	0.2	376	0.6	90	165	0.6	1,244	0.3	105	29,103	131,629
45-64	92	1.6	669	0.6	67	49	0.8	451	0.5	206	5,827	30,475
65-74	24	8.1	263	0.7	86	4	1.4	38	0.3	273	296	2,571
75-84	21	5.6	232	0.8	87	0	0.0	0	0.0	0	374	3,450
85 and older	16	7.1	166	0.6	51	3	1.3	31	0.1	5	226	1,770
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	54	98

Source: Data for this table are from the MAX 2004 file for Wisconsin, released by CMS in 02/2008. This table was produced on 09/25/2008.

a. Table ND.7D includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2004. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2004. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispn.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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

TABLE ND.8  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,  
 BY BENEFICIARY CHARACTERISTIC<sup>a, b</sup>  
 NONDUAL BENEFICIARIES, WISCONSIN, 2004

Beneficiary Characteristics	Rx \$ per Benefit Month	Number of Rx per Benefit Month	Number of All-Year Nursing Facility Residents	Benefit Months Among All-Year Nursing Facility Residents
<b>All</b>	<b>\$489</b>	<b>8.7</b>	<b>908</b>	<b>9,311</b>
<b>Age</b>				
0-64	585	9.5	580	5,908
65-74	437	8.7	62	640
75-84	379	7.8	92	983
85 and older	249	6.6	174	1,780
Unknown	0	0.0	0	0
<b>Gender</b>				
Female	498	9.1	553	5,742
Male	473	8.2	355	3,569
Unknown	0	0.0	0	0
<b>Race</b>				
White	380	7.8	461	4,484
African American	452	8.2	23	206
Other/unknown	596	9.7	424	4,621
<b>Basis of Eligibility<sup>c</sup></b>				
Aged	301	7.2	297	3,056
Disabled	580	9.5	610	6,243
Adults	753	12.3	1	12
Children	0	0.0	0	0
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 2004 file for Wisconsin, released by CMS in 02/2008. This table was produced on 09/25/2008.

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 1,141 beneficiaries who were in nursing facilities for part of their enrollment and their 11,145 benefit months were excluded from the analysis. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

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

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

TABLE ND.9  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,  
 BY BRAND STATUS AND THERAPEUTIC CATEGORY<sup>a, b, c, d, e</sup>  
 NONDUAL BENEFICIARIES, WISCONSIN, 2004

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				\$ per Rx				Total Number of Rx	Total 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			Number of Users	As a Percentage of All-Year Nursing Facility Residents	Number of Benefit Months
Anti-infective Agents	0.6	0.2	0.1	0.3	\$39	\$25	\$6	\$7	\$69	\$138	\$105	\$23	3,541	\$244,171	593	65.3 %	6,322
Biologicals	0.0	0.0	0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0.0	0
Antineoplastic Agents	0.7	0.1	0.0	0.6	64	38	0	26	94	354	0	46	208	19,649	30	3.3	309
Endocrine/Metabolic Drugs	1.4	0.6	0.2	0.6	55	43	4	8	39	76	21	12	6,198	243,463	423	46.6	4,444
Cardiovascular Agents	2.2	0.5	0.1	1.6	54	33	2	20	25	63	30	12	13,544	334,245	589	64.9	6,172
Respiratory Agents	1.0	0.5	0.0	0.4	50	43	0	7	52	84	31	15	3,122	162,330	311	34.3	3,231
Gastrointestinal Agents	1.1	0.3	0.1	0.7	54	35	6	12	48	111	55	18	5,486	265,992	463	51.0	4,951
Genitourinary Agents	0.9	0.5	0.1	0.3	50	37	3	10	59	80	48	31	1,953	114,700	211	23.2	2,291
CNS Drugs	2.3	1.1	0.1	1.1	201	167	9	25	88	158	73	23	15,852	1,400,842	667	73.5	6,967
Stimulants/Anti-obesity/Anorexia	0.8	0.6	0.0	0.2	93	89	0	4	118	156	0	19	119	14,072	14	1.5	151
Miscellaneous Psychological/																	
Neurological Agents	0.9	0.9	0.0	0.0	209	206	0	4	223	226	0	131	1,086	242,358	106	11.7	1,157
Analgesics and Anesthetics	1.5	0.6	0.0	0.8	80	67	2	10	53	105	92	13	7,667	409,535	501	55.2	5,126
Neuromuscular Agents	1.9	0.5	0.3	1.1	119	66	25	29	63	131	93	25	9,712	609,596	480	52.9	5,104
Nutritional Products	1.1	0.0	0.0	1.0	18	1	1	15	17	44	31	15	3,014	49,932	273	30.1	2,851
Hematological Agents	1.7	0.4	0.1	1.1	84	72	2	10	50	184	18	8	4,870	245,795	289	31.8	2,939
Topical Products	0.7	0.3	0.1	0.4	27	17	3	7	38	66	62	17	4,344	166,713	560	61.7	6,088
Miscellaneous Products	0.5	0.1	0.0	0.5	30	13	2	15	58	254	188	32	352	20,452	68	7.5	685
Unknown Therapeutic Category	0.4	0.0	0.0	0.0	9	0	0	0	25	0	0	0	287	7,102	74	8.1	802
<b>TOTAL NO. OF RX AND RX \$</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>81,355</b>	<b>4,550,947</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>

Source: Data for this table are from the MAX 2004 file for Wisconsin, released by CMS in 02/2008. This table was produced on 09/25/2008.

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 1,141 beneficiaries who were in nursing facilities for part of their enrollment and their 11,145 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.medispanspan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

In Wisconsin, 0.6 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.

Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; CNS = Central Nervous System; MAX = Medicaid Analytic Extract; n.a. = not applicable; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE ND.10  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS,  
 BY TOP-10 DRUG GROUP<sup>a, b, c, d</sup>  
 NONDUAL BENEFICIARIES, WISCONSIN, 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	\$990,770	456	50.2 %	4,949	1.2	\$173	\$200
ANTICONVULSANT	483,049	459	50.6	4,931	1.4	72	98
ANTIDEPRESSANTS	374,902	710	78.2	7,698	0.9	52	49
ANALGESICS - Narcotic	286,663	568	62.6	5,760	1.0	50	50
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	242,440	130	14.3	1,421	0.8	223	171
ULCER DRUGS	184,072	465	51.2	4,924	0.9	41	37
ANTIDIABETIC	168,141	392	43.2	4,172	1.0	40	40
DERMATOLOGICAL	136,870	1,056	116.3	11,824	0.3	35	12
ANTIASTHMATIC	126,663	355	39.1	3,642	0.6	56	35
ANTIHYPERLIPIDEMIC	106,097	173	19.1	1,878	0.8	68	56
Total	3,099,667	4,764		51,199	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2004 file for Wisconsin, released by CMS in 02/2008. This table was produced on 09/25/2008.

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 1,141 beneficiaries who were in nursing facilities for part of their enrollment and their 11,145 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.medispain.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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



TABLE ND.10A  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR TOP 10 DRUG GROUPS COMBINED AND FIRST  
 AND SECOND TOP DRUG GROUPS SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c, d</sup>  
 NONDUAL BENEFICIARIES, WISCONSIN, 2004

Beneficiary Characteristics	All Top 10 Drug Groups		ANTIPSYCHOTICS					ANTICONVULSANT				
	Number of Rx	Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
<b>All</b>	<b>42,708</b>	<b>\$3,099,667</b>	<b>456</b>	<b>50.2 %</b>	<b>4,949</b>	<b>1.2</b>	<b>\$200</b>	<b>459</b>	<b>50.6 %</b>	<b>4,931</b>	<b>1.4</b>	<b>\$98</b>
<b>Female</b>	26,745	1,942,290	265	47.9	2,902	1.1	189	277	50.1	2,936	1.3	91
<b>Disabled</b>	19,875	1,543,409	190	53.4	2,108	1.2	206	219	61.5	2,337	1.4	98
	18,851	1,469,866	174	51.9	1,939	1.2	205	211	63.0	2,248	1.4	98
64 or younger	787	59,360	11	68.8	121	1.3	246	7	43.8	82	1.1	104
65-74	237	14,183	5	100.0	48	1.1	155	1	20.0	7	0.1	7
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	6,870	398,881	75	38.1	794	1.0	145	58	29.4	599	1.0	63
<b>Other Eligibles</b>	60	2,741	0	0.0	0	0.0	0	1	33.3	12	1.2	54
64 or younger	1,040	51,862	10	52.6	110	1.2	130	9	47.4	105	1.5	117
65-74	2,330	165,206	31	58.5	337	0.9	175	30	56.6	289	0.9	50
75-84	3,440	179,072	34	27.9	347	1.0	121	18	14.8	193	1.0	55
85 and older												
<b>Male</b>	15,963	1,157,377	191	53.8	2,047	1.2	216	182	51.3	1,995	1.4	109
<b>Disabled</b>	12,388	950,575	149	58.7	1,606	1.2	232	167	65.7	1,825	1.4	115
	11,705	886,220	134	55.6	1,437	1.2	234	159	66.0	1,734	1.4	113
64 or younger	577	57,457	11	110.0	121	1.4	260	6	60.0	67	1.4	176
65-74	79	5,940	4	200.0	48	0.8	86	1	50.0	12	1.2	49
75-84	27	958	0	0.0	0	0.0	0	1	100.0	12	1.3	41
85 and older	3,575	206,802	42	41.6	441	1.1	158	15	14.9	170	1.3	47
<b>Other Eligibles</b>	23	1,000	0	0.0	0	0.0	0	0	0.0	0	0.0	0
64 or younger	760	47,399	9	52.9	94	1.3	207	3	17.6	34	1.2	98
65-74	1,275	77,899	20	62.5	205	1.1	151	6	18.8	72	1.4	42
75-84	1,517	80,504	13	25.5	142	1.0	135	6	11.8	64	1.2	24
85 and older												
<b>Unknown</b>	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2004 file for Wisconsin, released by CMS in 02/2008. This table was produced on 09/25/2008.

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 1,141 beneficiaries who were in nursing facilities for part of their enrollment and their 11,145 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.medispain.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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

TABLE ND.10B  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY  
 AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c, d</sup>  
 NONDUAL BENEFICIARIES, WISCONSIN, 2004

Beneficiary Characteristics	ANTIDEPRESSANTS					ANALGESICS - Narcotic					MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL				
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
<b>All</b>	<b>710</b>	<b>78.2 %</b>	<b>7,698</b>	<b>0.9</b>	<b>\$49</b>	<b>568</b>	<b>62.6 %</b>	<b>5,760</b>	<b>1.0</b>	<b>\$50</b>	<b>130</b>	<b>14.3 %</b>	<b>1,421</b>	<b>0.8</b>	<b>\$171</b>
<b>Female</b>	452	81.7	4,879	1.0	52	369	66.7	3,812	0.9	50	85	15.4	930	0.8	213
<b>Disabled</b>	314	88.2	3,373	1.0	56	262	73.6	2,707	1.0	60	35	9.8	391	0.8	389
64 or younger	297	88.7	3,177	1.0	56	249	74.3	2,563	1.0	62	32	9.6	357	0.7	420
65-74	12	75.0	143	0.8	51	8	50.0	96	0.5	33	2	12.5	24	1.0	62
75-84	5	100.0	53	0.8	41	5	100.0	48	0.5	22	1	20.0	10	0.5	69
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Other Eligibles</b>	138	70.1	1,506	0.9	42	107	54.3	1,105	0.9	25	50	25.4	539	0.8	86
64 or younger	1	33.3	3	1.0	50	1	33.3	3	2.0	109	0	0.0	0	0.0	0
65-74	13	68.4	144	0.7	27	11	57.9	122	1.6	35	3	15.8	22	1.0	128
75-84	43	81.1	481	0.9	49	32	60.4	335	0.9	34	20	37.7	224	0.7	84
85 and older	81	66.4	878	0.9	40	63	51.6	645	0.8	18	27	22.1	293	0.8	84
<b>Male</b>	258	72.7	2,819	0.9	44	199	56.1	1,948	1.1	49	45	12.7	491	0.8	90
<b>Disabled</b>	189	74.4	2,078	0.9	47	158	62.2	1,568	1.1	48	19	7.5	205	0.7	83
64 or younger	179	74.3	1,971	0.9	47	154	63.9	1,528	1.1	49	16	6.6	169	0.8	91
65-74	8	80.0	83	0.8	48	4	40.0	40	0.6	5	3	30.0	36	0.4	48
75-84	2	100.0	24	0.5	32	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Other Eligibles</b>	69	68.3	741	0.8	34	41	40.6	380	1.2	53	26	25.7	286	0.8	95
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	12	70.6	128	0.8	37	13	76.5	135	1.1	47	5	29.4	48	0.4	39
75-84	24	75.0	261	0.7	32	11	34.4	99	1.2	47	6	18.8	71	0.9	114
85 and older	33	64.7	352	0.8	35	17	33.3	146	1.2	62	15	29.4	167	0.9	104
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2004 file for Wisconsin, released by CMS in 02/2008. This table was produced on 09/25/2008.

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 1,141 beneficiaries who were in nursing facilities for part of their enrollment and their 11,145 benefit months were excluded from the analysis.

b. A user is a beneficiary who had at least one prescription filled in a given drug group during 2004. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

c. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

d. The top 10 drug groups were determined based on total 2004 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispn.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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

TABLE ND.10C  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY  
 AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c, d</sup>  
 NONDUAL BENEFICIARIES, WISCONSIN, 2004

Beneficiary Characteristics	ULCER DRUGS					ANTIDIABETIC					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 \$
<b>All</b>	<b>465</b>	<b>51.2 %</b>	<b>4,924</b>	<b>0.9</b>	<b>\$37</b>	<b>392</b>	<b>43.2 %</b>	<b>4,172</b>	<b>1.0</b>	<b>\$40</b>	<b>1,056</b>	<b>116.3 %</b>	<b>11,824</b>	<b>0.3</b>	<b>\$12</b>
<b>Female</b>	280	50.6	2,961	0.9	37	266	48.1	2,852	1.0	43	688	124.4	7,715	0.3	13
<b>Disabled</b>	202	56.7	2,124	0.9	40	206	57.9	2,171	1.1	47	495	139.0	5,549	0.3	13
64 or younger	189	56.4	1,988	0.9	41	194	57.9	2,039	1.1	48	477	142.4	5,337	0.3	14
65-74	9	56.3	97	0.6	32	7	43.8	84	1.1	25	15	93.8	180	0.3	6
75-84	4	80.0	39	0.8	15	5	100.0	48	0.8	10	3	60.0	32	0.3	11
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Other Eligibles</b>	78	39.6	837	0.9	31	60	30.5	681	1.0	33	193	98.0	2,166	0.3	12
64 or younger	2	66.7	15	1.5	101	0	0.0	0	0.0	0	4	133.3	30	0.4	3
65-74	6	31.6	69	0.8	17	13	68.4	156	1.1	37	27	142.1	324	0.5	14
75-84	22	41.5	236	0.9	24	17	32.1	204	1.2	42	46	86.8	518	0.3	20
85 and older	48	39.3	517	0.9	34	30	24.6	321	0.8	26	116	95.1	1,294	0.3	9
<b>Male</b>	185	52.1	1,963	0.9	37	126	35.5	1,320	0.9	34	368	103.7	4,109	0.3	9
<b>Disabled</b>	134	52.8	1,422	0.9	43	89	35.0	933	0.9	33	272	107.1	3,055	0.3	10
64 or younger	129	53.5	1,366	0.9	42	80	33.2	831	0.9	33	255	105.8	2,871	0.3	10
65-74	4	40.0	44	1.2	51	9	90.0	102	1.1	34	12	120.0	124	0.2	10
75-84	1	50.0	12	1.1	33	0	0.0	0	0.0	0	2	100.0	24	0.1	3
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	300.0	36	0.3	13
<b>Other Eligibles</b>	51	50.5	541	0.9	24	37	36.6	387	0.8	35	96	95.0	1,054	0.3	7
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	200.0	24	1.0	42
65-74	13	76.5	135	0.8	19	8	47.1	94	0.9	39	17	100.0	186	0.2	5
75-84	14	43.8	143	0.9	29	13	40.6	147	0.6	24	32	100.0	367	0.2	4
85 and older	24	47.1	263	0.9	23	16	31.4	146	1.0	42	45	88.2	477	0.4	8
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2004 file for Wisconsin, released by CMS in 02/2008. This table was produced on 09/25/2008.

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 1,141 beneficiaries who were in nursing facilities for part of their enrollment and their 11,145 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.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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

TABLE ND.10D  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR NINTH AND TENTH TOP DRUG GROUPS  
 SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c, d</sup>  
 NONDUAL BENEFICIARIES, WISCONSIN, 2004

Beneficiary Characteristics	ANTIASTHMATIC					ANTHYPERLIPIDEMIC					Benefit Months	
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	All-Year Nursing Facility Residents	Among All-Year Nursing Facility Residents
<b>All</b>	<b>355</b>	<b>39.1 %</b>	<b>3,642</b>	<b>0.6</b>	<b>\$35</b>	<b>173</b>	<b>19.1 %</b>	<b>1,878</b>	<b>0.8</b>	<b>\$57</b>	<b>908</b>	<b>9,311</b>
<b>Female</b>	209	37.8	2,261	0.6	34	114	20.6	1,285	0.8	59	553	5,742
<b>Disabled</b>	139	39.0	1,460	0.6	37	93	26.1	1,042	0.8	61	356	3,699
	132	39.4	1,378	0.6	37	89	26.6	994	0.8	62	335	3,477
64 or younger	4	25.0	48	2.3	27	3	18.8	36	1.0	38	16	169
65-74	3	60.0	34	0.6	34	1	20.0	12	1.1	23	5	53
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	70	35.5	801	0.5	28	21	10.7	243	1.0	52	197	2,043
<b>Other Eligibles</b>	1	33.3	12	0.2	2	0	0.0	0	0.0	0	3	19
64 or younger	2	10.5	24	0.8	32	3	15.8	36	1.0	57	19	182
65-74	24	45.3	259	0.6	30	9	17.0	108	1.0	56	53	570
75-84	43	35.2	506	0.4	27	9	7.4	99	0.9	46	122	1,272
85 and older												
<b>Male</b>	146	41.1	1,381	0.7	37	59	16.6	593	0.8	51	355	3,569
<b>Disabled</b>	97	38.2	876	0.6	38	44	17.3	456	0.9	54	254	2,544
	97	40.2	876	0.6	38	42	17.4	432	0.8	54	241	2,400
64 or younger	0	0.0	0	0.0	0	2	20.0	24	1.0	57	10	108
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	24
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12
85 and older	49	48.5	505	0.8	35	15	14.9	137	0.8	40	101	1,025
<b>Other Eligibles</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12
64 or younger	6	35.3	62	1.2	67	2	11.8	22	0.6	18	17	181
65-74	20	62.5	216	1.0	44	7	21.9	75	0.9	53	32	336
75-84	23	45.1	227	0.5	17	6	11.8	40	0.8	27	51	496
85 and older												
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0

Source: Data for this table are from the MAX 2004 file for Wisconsin, released by CMS in 02/2008. This table was produced on 09/25/2008.

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 1,141 beneficiaries who were in nursing facilities for part of their enrollment and their 11,145 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.11  
USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D  
AMONG NONDUALS, BY BENEFICIARY CHARACTERISTIC<sup>a,b</sup>  
WISCONSIN, 2004

Beneficiary Characteristics	Number of Beneficiaries with at Least One Part D Excluded Rx	Percentage of Beneficiaries with at Least One Part D Excluded Rx	Number of Part D Excluded Rx per Beneficiary	Total Number Part D Excluded Rx	Part D Excluded Rx \$ per Beneficiary	Total Part D Excluded Rx \$	\$ per Part D Excluded Rx	Part D Excluded Rx \$ as a Percentage of All Nondual Rx \$	Total Number of Beneficiaries
<b>All</b>	<b>65,899</b>	<b>13.6 %</b>	<b>0.7</b>	<b>343,470</b>	<b>\$14</b>	<b>\$6,557,777</b>	<b>\$19</b>	<b>3.0 %</b>	<b>482,937</b>
<b>Age</b>									
5 and younger	10,368	11.5	0.3	27,189	6	498,463	18	4.7	90,178
6-14	9,671	9.5	0.3	30,241	7	759,710	25	2.4	101,816
15-20	6,344	7.7	0.3	22,573	7	543,753	24	2.3	82,344
21-44	23,416	14.0	0.7	114,835	13	2,101,566	18	2.8	167,045
45-64	14,796	39.3	3.6	136,486	66	2,499,739	18	3.4	37,647
65-74	578	38.0	3.2	4,867	42	64,249	13	2.9	1,520
75-84	403	32.0	3.2	3,989	40	50,686	13	3.4	1,259
85 and older	323	30.1	3.1	3,290	37	39,611	12	3.9	1,074
Unknown	0	0.0	0.0	0	0	0	0	0.0	54
<b>Basis of Eligibility<sup>c</sup></b>									
Aged	890	30.0	2.8	8,235	33	99,261	12	3.3	2,964
Disabled	28,973	38.2	3.2	245,418	65	4,947,330	20	3.1	75,761
Adults	17,957	9.6	0.3	53,130	5	925,707	17	2.9	187,003
Children	17,978	8.3	0.2	36,201	3	579,050	16	2.2	216,932
Unknown	101	36.5	1.8	486	23	6,429	13	2.1	277
<b>Gender</b>									
Female	41,435	13.8	0.7	224,647	15	4,449,654	20	3.5	300,749
Male	24,464	13.4	0.7	118,823	12	2,108,123	18	2.2	182,188
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
<b>Race</b>									
White	26,608	10.1	0.4	96,657	7	1,821,308	19	3.0	264,533
African American	5,127	8.5	0.2	12,922	3	206,512	16	2.8	60,423
Other/unknown	34,164	21.6	1.5	233,891	29	4,529,957	19	3.0	157,981
<b>Use of Nursing Facilities<sup>d</sup></b>									
Entire year	684	75.3	11.9	10,837	170	154,083	14	3.4	908
Part year	919	80.5	11.5	13,070	212	242,249	19	4.2	1,141
None	64,296	13.4	0.7	319,563	13	6,161,445	19	2.9	480,888
<b>Maintenance Assistance Status</b>									
Cash	35,648	21.7	1.4	235,273	27	4,487,687	19	3.0	164,274
Medically needy	1,785	10.3	0.4	7,426	8	135,098	18	2.9	17,277
Poverty related	6,008	7.9	0.2	15,982	3	256,685	16	2.6	76,100
Other/unknown	22,458	10.0	0.4	84,789	7	1,678,307	20	3.0	225,286

Table ND11

Nondual Beneficiaries

Source: Data for this table are from the MAX 2004 file for Wisconsin, released by CMS in 02/2008. This table was produced on 09/25/2008.

- a. Table ND.11 includes the beneficiaries represented by Cell K of Table 1. Beneficiaries include all nondual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2004.
- b. The statute establishing the Medicare Part D prescription program that started in 2006 excludes several types of drugs from coverage. State Medicaid programs have been allowed to exclude these drugs since 1990, but many states have chosen to cover them, and if states cover them for any Medicaid beneficiaries they must also cover them for dual eligibles, who as of 2006 receive the remainder of their prescription drug coverage through Part D. Excluded drugs include benzodiazepines; barbiturates; nonprescription (OTC) medications; prescription vitamins and minerals (not including prenatal vitamins and fluoride preparations); and drugs used for anorexia, weight loss, or weight gain. Other excluded drugs include those that promote fertility; those used for cosmetic purposes or hair growth, for symptomatic relief of coughs and colds; or drugs for which the manufacturer requires that associated tests or monitoring services be purchased exclusively from the manufacturer.
- c. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.
- d. Please refer to footnote f on Table 1 for methodology used to determine use of nursing facilities.

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

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

Beneficiary Characteristics	Number Rx per Benefit Month	Rx \$ per Benefit Month	\$ per Rx	Barbiturate \$ per Benefit Month	Benzodiazepine \$ per Benefit Month	Number of Benefit Months
<b>All</b>	<b>0.1</b>	<b>\$2</b>	<b>\$19</b>	<b>\$0</b>	<b>\$1</b>	<b>3,140,788</b>
<b>Age</b>						
5 and younger	0.1	1	18	0	0	505,164
6-14	0.0	1	25	0	0	651,699
15-20	0.0	1	24	0	0	558,801
21-44	0.1	2	18	0	1	1,068,166
45-64	0.4	8	18	0	2	321,034
65-74	0.3	4	13	0	1	15,007
75-84	0.3	4	13	0	1	11,793
85 and older	0.4	4	12	0	0	9,026
Unknown	0.0	0	0	0	0	98
<b>Basis of Eligibility<sup>c</sup></b>						
Aged	0.3	4	12	0	1	25,976
Disabled	0.3	6	20	0	2	811,281
Adults	0.0	1	17	0	0	1,091,080
Children	0.0	0	16	0	0	1,210,099
Unknown	0.2	3	13	0	1	2,352
<b>Gender</b>						
Female	0.1	2	20	0	1	1,966,188
Male	0.1	2	18	0	0	1,174,600
Unknown	0.0	0	0	0	0	0
<b>Race</b>						
White	0.1	1	19	0	0	1,625,435
African American	0.0	1	16	0	0	279,283
Other/unknown	0.2	4	19	0	1	1,236,070
<b>Use of Nursing Facilities<sup>d</sup></b>						
Entire year	1.2	17	14	0	4	9,311
Part year	1.2	22	19	0	4	11,145
None	0.1	2	19	0	1	3,120,332
<b>Maintenance Assistance Status</b>						
Cash	0.2	4	19	0	1	1,165,553
Medically needy	0.1	1	18	0	0	94,929
Poverty related	0.0	1	16	0	0	399,583
Other/unknown	0.1	1	20	0	0	1,480,723

Source: Data for this table are from the MAX 2004 file for Wisconsin, released by CMS in 02/2008. This table was produced on 09/25/2008.

- a. Table ND.12 includes the beneficiaries represented by Cell K of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits. Beneficiaries include all nondual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2004.
- b. The statute establishing the Medicare Part D prescription program that started in 2006 excludes several types of drugs from coverage. State Medicaid programs have been allowed to exclude these drugs since 1990, but many states have chosen to cover them, and if states cover them for any Medicaid beneficiaries they must also cover them for dual eligibles, who as of 2006 receive the remainder of their prescription drug coverage through Part D. Excluded drugs include benzodiazepines; barbiturates; nonprescription (OTC) medications; prescription vitamins and minerals (not including prenatal vitamins and fluoride preparations); and drugs used for anorexia, weight loss, or weight gain. Other excluded drugs include those that promote fertility; those used for cosmetic purposes or hair growth, for symptomatic relief of coughs and colds; or drugs for which the manufacturer requires that associated tests or monitoring services be purchased exclusively from the manufacturer.
- c. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.
- d. Please refer to footnote f on Table 1 for methodology used to determine use of nursing facilities.

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



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

Drug Category	Number of Users	Rx \$ per User	Total Rx \$	Rx \$ as a Percentage of All Part D Excluded Rx \$	Total Number Rx.	\$ per Rx	Number Rx as a Percentage of All Part D Excluded Rx
<b>All</b>	<b>87,472</b>	<b>\$75</b>	<b>\$6,557,777</b>	<b>100.0 %</b>	<b>343,470</b>	<b>\$19</b>	<b>100.0 %</b>
Anorexia or weight loss/gain	686	249	170,807	2.6	2,311	74	0.7
Fertility drugs	0	0	0	0.0	0	0	0.0
Drugs for cosmetic purposes	241	13	3,138	0.0	345	9	0.1
Cough and cold medications	19,870	46	908,323	13.9	34,696	26	10.1
Vitamins and minerals	6,696	129	862,073	13.1	45,415	19	13.2
Non-prescription drugs	37,209	50	1,865,001	28.4	128,755	14	37.5
Barbiturates	854	77	65,934	1.0	7,670	9	2.2
Benzodiazepines	19,366	92	1,777,151	27.1	112,738	16	32.8
Other Part D Excl Rx Drugs	2,550	355	905,350	13.8	11,540	78	3.4

Source: Data for this table are from the MAX 2004 file for Wisconsin, released by CMS in 02/2008. This table was produced on 09/25/2008.

a. Table ND.13 includes the beneficiaries represented by Cell K of Table 1. Beneficiaries include all nondual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2004. A user is a beneficiary who had at least one prescription filled for a Part D excluded drug in 2004. A beneficiary who used drugs from two or more Part D excluded categories was counted as a user for each category. Therefore, the sum of users across drug categories may exceed the total number of individual users as noted on Table ND11.

b. Includes OTC drugs as well as prescription drugs.

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

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

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

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Disabled	Adults	Children	Unknown	All	Aged	Disabled	Adults	Children	Unknown
<b>All</b>	<b>771,691</b>	<b>2,964</b>	<b>75,810</b>	<b>276,431</b>	<b>416,209</b>	<b>277</b>	<b>7,339,229</b>	<b>25,984</b>	<b>824,799</b>	<b>2,494,959</b>	<b>3,991,107</b>	<b>2,380</b>
<b>Age</b>												
5 and younger	174,297	1	5,572	10	168,714	0	1,638,734	12	58,690	69	1,579,963	0
6-14	186,119	0	13,633	34	172,452	0	1,880,388	0	155,466	266	1,724,656	0
15-20	117,057	0	9,271	33,706	74,075	5	1,071,521	0	103,273	287,771	680,421	56
21-44	241,931	6	22,520	218,449	909	47	2,238,770	32	246,193	1,986,182	5,943	420
45-64	48,363	37	23,911	24,192	0	223	473,707	131	251,260	220,426	0	1,890
65-74	1,528	808	699	19	0	2	15,126	7,170	7,774	168	0	14
75-84	1,265	1,120	125	19	1	0	11,839	10,439	1,326	73	1	0
85 and older	1,074	992	79	1	2	0	9,037	8,200	817	2	18	0
Unknown	57	0	0	1	56	0	107	0	0	2	105	0
<b>Gender</b>												
Female	465,868	2,064	37,473	218,333	207,721	277	4,445,604	18,186	413,685	2,017,317	1,994,036	2,380
Male	305,823	900	38,337	58,098	208,488	0	2,893,625	7,798	411,114	477,642	1,997,071	0
Unknown	0	0	0	0	0	0		0	0	0	0	0
<b>Race</b>												
White	407,699	1,840	6,920	187,007	211,842	90	3,772,069	15,482	64,913	1,692,501	1,998,372	801
African American	143,281	120	1,401	46,686	95,052	22	1,442,105	1,139	12,865	447,762	980,151	188
Other/unknown	220,711	1,004	67,489	42,738	109,315	165	2,125,055	9,363	747,021	354,696	1,012,584	1,391
<b>Use of Nursing Facilities<sup>c</sup></b>												
Entire year	908	297	610	1	0	0	9,311	3,056	6,243	12	0	0
Part year	1,141	92	1,025	22	1	1	11,224	791	10,187	222	12	12
None	769,642	2,575	74,175	276,408	416,208	276	7,318,694	22,137	808,369	2,494,725	3,991,095	2,368
<b>Maintenance Assistance Status</b>												
Cash	264,085	656	62,874	72,948	127,607	0	2,624,299	6,637	696,551	685,096	1,236,015	0
Medically needy	29,340	99	1,387	2,178	25,676	0	257,105	807	11,126	13,380	231,792	0
Poverty related	137,938	11	1,301	9,209	127,140	277	1,324,931	108	12,839	67,209	1,242,395	2,380
Other/unknown	340,328	2,198	10,248	192,096	135,786	0	3,132,894	18,432	104,283	1,729,274	1,280,905	0
<b>Managed Care (MC) Status</b>												
Fee-for-service (FFS) all year	299,803	2,958	73,004	112,397	111,171	273	2,601,625	25,952	793,030	869,984	910,324	2,335
FFS part year, with Rx claims	63,378	3	2,097	34,417	26,858	3	641,519	17	24,181	344,337	272,950	34
FFS part year, no Rx claims	119,756	3	660	40,189	78,903	1	1,134,592	15	7,270	371,705	755,591	11
MC all year, with Rx claims	3,348	0	1	2,531	816	0	36,966	0	4	28,094	8,868	0
MC all year, no Rx claims	285,406	0	48	86,897	198,461	0	2,924,527	0	314	880,839	2,043,374	0

Source: Data for this table are from the MAX 2004 file for Wisconsin, released by CMS in 02/2008. This table was produced on 09/25/2008.

- a. Table A.1 includes the beneficiaries represented by Cell J of Table 1. Benefit months are months during which beneficiaries had pharmacy benefit coverage.
- b. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services. The total includes some beneficiaries with unknown basis of eligibility and some whose age categories are not consistent with basis of eligibility.
- c. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.

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

APPENDIX TABLE A.2  
 MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS<sup>a</sup>  
 NONDUAL BENEFICIARIES, WISCONSIN, 2004

	Beneficiaries and Benefit Months in Cell J of Table 1		Included in Cell K of Table 1		Excluded from Cell K of Table 1	
	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months
<b>All</b>	<b>771,691</b>	<b>7,339,229</b>	<b>482,937</b>	<b>3,140,788</b>	<b>0</b>	<b>4,198,441</b>
Fee-for-service (FFS) all year	299,803	2,601,625	299,803	2,601,625	0	0
FFS part year, with Rx claims	63,378	641,519	63,378	235,075	0	406,444
FFS part year, with no Rx claims	119,756	1,134,592	119,756	304,088	0	830,504
Managed care (MC) all year, with Rx claims	3,348	36,966	0	0	0	36,966
MC all year, with no Rx claims	285,406	2,924,527	0	0	0	2,924,527

Source: Data for this table are from the MAX 2004 file for Wisconsin, released by CMS in 02/2008. This table was produced on 09/25/2008.

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.