STATISTICAL COMPENDIUM:
MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2005
WISCONSIN

LIST OF TABLES

CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY[a, b]
NONDUAL BENEFICIARIES, WISCONSIN, 2005

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown
All	**513,461**	**1,995**	**77,160**	**205,949**	**227,988**	**369**	**3,346,645**	**18,859**	**820,147**	**1,234,307**	**1,270,046**	**3,286**
Age												
5 and younger	95,305	0	5,677	2	89,626	0	530,063	0	56,540	4	473,519	0
6-14	105,350	1	13,952	26	91,371	0	673,002	1	155,036	90	517,875	0
15-20	89,255	2	9,906	33,024	46,316	7	615,611	4	108,796	230,631	276,107	73
21-44	181,050	7	22,212	158,121	603	107	1,170,390	40	238,408	928,599	2,389	954
45-64	39,813	27	24,771	14,757	4	254	331,713	84	254,439	74,907	34	2,249
65-74	1,303	722	569	10	1	1	12,907	6,713	6,149	32	3	10
75-84	780	718	55	7	0	0	7,837	7,204	601	32	0	0
85 and older	538	518	18	2	0	0	5,003	4,813	178	12	0	0
Unknown	67	0	0	0	67	0	119	0	0	0	119	0
Gender												
Female	324,010	1,273	37,639	169,595	115,134	369	2,136,438	12,163	405,993	1,068,424	646,572	3,286
Male	189,451	722	39,521	36,354	112,854	0	1,210,207	6,696	414,154	165,883	623,474	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	280,058	799	7,191	146,632	125,283	153	1,741,211	7,257	63,937	933,972	734,677	1,368
African American	64,068	199	1,597	25,587	36,660	25	298,528	1,990	13,245	116,692	166,387	214
Other/unknown	169,335	997	68,372	33,730	66,045	191	1,306,906	9,612	742,965	183,643	368,982	1,704
Use of Nursing Facilities[c]												
Entire year	811	209	601	1	0	0	8,134	2,004	6,128	2	0	0
Part year	1,107	89	990	25	3	0	10,501	751	9,528	206	16	0
None	511,543	1,697	75,569	205,923	227,985	369	3,328,010	16,104	804,491	1,234,099	1,270,030	3,286
Maintenance Assistance Status												
Cash	168,359	641	63,852	43,947	59,919	0	1,192,413	6,621	693,061	204,725	288,006	0
Medically needy	18,373	71	1,377	1,962	14,963	0	97,677	552	10,270	8,537	78,318	0
Poverty-related	81,917	3	1,516	8,392	71,637	369	429,461	26	14,316	39,615	372,218	3,286
Other/unknown	244,812	1,280	10,415	151,648	81,469	0	1,627,094	11,660	102,500	981,430	531,504	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	318,597	1,977	74,382	126,724	115,147	367	2,768,816	18,739	802,283	995,422	949,100	3,272
FFS part year, with Rx claims	70,148	17	2,103	38,385	29,641	2	263,108	114	14,287	133,394	115,299	14
FFS part year, no Rx claims	124,716	1	675	40,840	83,200	0	314,721	6	3,577	105,491	205,647	0

Source: Data for this table are from the MAX 2005 file for Wisconsin, released by CMS in 10/2008. This table was produced on 04/23/2009.
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.

ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC[a, b]
NONDUAL BENEFICIARIES, WISCONSIN, 2005

Beneficiary Characteristics	Percentage with at Least One Rx	Mean Number of Rx	Mean Rx $	$ per Rx	Mean $, All Medicaid FFS $[c]	Rx $ as a Percentage of All Medicaid FFS $[d]	Number of Beneficiaries
All	**47.0**	**6.2**	**$433**	**$70**	**$3,267**	**13.3**	**513,461**
Age							
5 and younger	39.5	1.9	119	62	2,224	5.3	95,305
6-14	40.9	3.9	323	84	1,877	17.2	105,350
15-20	46.3	3.7	299	81	2,339	12.8	89,255
21-44	49.4	6.0	407	68	3,386	12.0	181,050
45-64	70.1	27.7	1,833	66	10,364	17.7	39,813
65-74	72.5	26.2	1,346	51	12,239	11.0	1,303
75-84	78.1	31.7	1,483	47	11,389	13.0	780
85 and older	84.0	40.0	1,533	38	15,749	9.7	538
Unknown	0.0	0.0	0	0	0	0.0	67
Basis of Eligibility[e]							
Aged	75.9	30.3	1,357	45	12,564	10.8	1,995
Disabled	75.9	25.4	2,030	80	13,095	15.5	77,160
Adults	46.4	3.4	165	48	1,583	10.4	205,949
Children	37.5	2.0	126	63	1,370	9.2	227,988
Unknown	74.8	18.6	1,258	68	9,556	13.2	369
Gender							
Female	48.2	6.2	389	63	2,896	13.4	324,010
Male	45.0	6.2	509	82	3,902	13.1	189,451
Unknown	0.0	0.0	0	0	0	0.0	0
Race							
White	46.0	4.0	228	57	1,922	11.9	280,058
African American	36.0	2.3	132	57	2,049	6.4	64,068
Other/unknown	52.8	11.4	887	78	5,953	14.9	169,335
Use of Nursing Facilities[f]							
Entire year	96.5	96.3	5,734	60	53,448	10.7	811
Part year	96.6	79.5	4,682	59	60,524	7.7	1,107
None	46.8	5.9	416	70	3,064	13.6	511,543
Maintenance Assistance Status							
Cash	54.6	11.5	875	76	6,088	14.4	168,359
Medically needy	39.9	3.6	253	71	2,413	10.5	18,373
Poverty related	37.1	2.4	144	61	1,339	10.8	81,917
Other/unknown	45.7	4.0	240	59	2,036	11.8	244,812

Source: Data for this table are from the MAX 2005 file for Wisconsin, released by CMS in 10/2008. This table was produced on 04/23/2009.
a. Table ND.3 includes beneficiaries represented by Cell K of Table 1.
b. The Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
c. In eight states (DE, IA, IL, NE, NY, 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 eight states (DE, IA, IL, 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 fost 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.

Beneficiary Characteristics	Mean Number of Rx	Mean Rx $	Rx $ as a Percentage of All Medicaid FFS $[c]	Number of Rx, Percentage with:						Mean $, All Medicaid FFS $[d]	Number	
				None	More than 0, but 1 or Less	More than 1, but 2 or Less	More than 2, but 5 or Less	More than 5, but 10 or Less	More than 10		Beneficiaries	Benefit Months
All	**1.0**	**$67**	**13.3**	**53.0**	**33.0**	**5.5**	**5.7**	**2.1**	**0.6**	**$501**	**513,461**	**3,346,645**
Age												
5 and younger	0.3	21	5.3	60.5	35.6	2.5	1.2	0.1	0.0	400	95,305	530,063
6-14	0.6	51	17.2	59.1	31.4	5.0	4.0	0.5	0.0	294	105,350	673,002
15-20	0.5	43	12.8	53.7	37.6	4.4	3.5	0.7	0.1	339	89,255	615,611
21-44	0.9	63	12.0	50.6	32.9	6.9	6.9	2.3	0.5	524	181,050	1,170,390
45-64	3.3	220	17.7	29.9	22.3	10.3	19.3	13.1	5.1	1,244	39,813	331,713
65-74	2.6	136	11.0	27.5	30.2	9.7	16.9	11.6	4.1	1,236	1,303	12,907
75-84	3.2	148	13.0	21.9	20.5	11.9	25.6	15.9	4.1	1,134	780	7,837
85 and older	4.3	165	9.7	16.0	16.4	8.7	27.3	24.5	7.1	1,694	538	5,003
Unknown	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	0.0	0	67	119
Basis of Eligibility[e]												
Aged	3.2	144	10.8	24.1	22.9	9.9	22.6	15.9	4.6	1,329	1,995	18,859
Disabled	2.4	191	15.5	24.1	33.5	11.1	17.9	9.8	3.5	1,232	77,160	820,147
Adults	0.6	28	10.4	53.6	33.7	5.9	5.2	1.3	0.2	264	205,949	1,234,307
Children	0.4	23	9.2	62.5	32.3	3.3	1.8	0.2	0.0	246	227,988	1,270,046
Unknown	2.1	141	13.2	25.2	29.8	14.6	22.8	7.6	0.0	1,073	369	3,286
Gender												
Female	0.9	59	13.4	51.8	34.2	5.5	5.6	2.2	0.7	439	324,010	2,136,438
Male	1.0	80	13.1	55.0	31.0	5.7	5.9	1.9	0.5	611	189,451	1,210,207
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	0.6	37	11.9	54.0	34.7	5.1	4.5	1.4	0.3	309	280,058	1,741,211
African American	0.5	28	6.4	64.0	27.2	4.6	3.2	0.8	0.2	440	64,068	298,528
Other/unknown	1.5	115	14.9	47.2	32.4	6.6	8.6	3.9	1.3	771	169,335	1,306,906
Use of Nursing Facilities[f]												
Entire year	9.6	572	10.7	3.5	4.3	2.1	17.9	36.3	36.0	5,329	811	8,134
Part year	8.4	494	7.7	3.4	6.8	4.7	24.1	31.9	29.1	6,380	1,107	10,501
None	0.9	64	13.6	53.2	33.1	5.5	5.6	2.0	0.5	471	511,543	3,328,010
Maintenance Assistance Status												
Cash	1.6	124	14.4	45.4	32.3	7.4	9.2	4.2	1.4	860	168,359	1,192,413
Medically needy	0.7	48	10.5	60.1	31.8	3.1	3.0	1.6	0.4	454	18,373	97,677
Poverty related	0.5	28	10.8	62.9	31.2	3.3	2.0	0.6	0.1	255	81,917	429,461
Other/unknown	0.6	36	11.8	54.3	34.2	5.2	4.7	1.3	0.3	306	244,812	1,627,094

Source: Data for this table are from the MAX 2005 file for Wisconsin, released by CMS in 10/2008. This table was produced on 04/23/2009.
a. Table ND.4 includes the beneficiaries represented by Cell K of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
b. The Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
c. In eight states (DE, IA, IL, NE, NY, 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 eight states (DE, IA, IL, 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.

AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC[a, b, c]

NONDUAL BENEFICIARIES, WISCONSIN, 2005

Beneficiary Characteristics	All Rx			Patented Brand-Name Drugs			Off-Patent Brand-Name Drugs			Generic Drugs		
	Number of Rx	Rx $	$ per Rx	Number of Rx	Rx $	$ per Rx	Number of Rx	Rx $	$ per Rx	Number of Rx	Rx $	$ per Rx
All	**1.0**	**$67**	**$70**	**0.4**	**$53**	**$145**	**0.0**	**$3**	**$96**	**0.6**	**$11**	**$20**
Age												
5 and younger	0.3	21	62	0.1	18	155	0.0	0	52	0.2	4	15
6-14	0.6	51	84	0.3	44	137	0.0	2	92	0.3	5	20
15-20	0.5	43	81	0.3	36	140	0.0	2	71	0.3	5	21
21-44	0.9	63	68	0.3	48	151	0.0	3	92	0.6	12	21
45-64	3.3	220	66	1.1	168	146	0.1	11	123	2.1	41	20
65-74	2.6	136	51	1.0	107	110	0.1	5	91	1.6	24	15
75-84	3.2	148	47	1.2	118	101	0.1	4	56	1.9	25	13
85 and older	4.3	165	38	1.4	120	85	0.1	8	52	2.7	38	14
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Basis of Eligibility[d]												
Aged	3.2	144	45	1.2	112	96	0.1	5	58	2.0	27	14
Disabled	2.4	191	80	0.9	154	166	0.1	8	114	1.4	29	21
Adults	0.6	28	48	0.2	19	103	0.0	2	74	0.4	7	18
Children	0.4	23	63	0.2	19	116	0.0	1	74	0.2	3	18
Unknown	2.1	141	68	0.7	119	170	0.0	2	50	1.3	20	15
Gender												
Female	0.9	59	63	0.3	45	133	0.0	3	88	0.6	11	19
Male	1.0	80	82	0.4	65	162	0.0	3	113	0.5	11	21
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Race												
White	0.6	37	57	0.2	28	118	0.0	2	80	0.4	7	19
African American	0.5	28	57	0.2	22	124	0.0	1	75	0.3	5	18
Other/unknown	1.5	115	78	0.6	93	160	0.0	5	109	0.8	17	20
Use of Nursing Facilities[e]												
Entire year	9.6	572	60	3.2	439	136	0.3	19	68	6.1	114	19
Part year	8.4	494	59	2.5	358	143	0.2	22	92	5.6	112	20
None	0.9	64	70	0.3	51	145	0.0	3	97	0.5	10	20
Maintenance Assistance Status												
Cash	1.6	124	76	0.6	98	162	0.1	6	113	1.0	20	21
Medically needy	0.7	48	71	0.2	38	173	0.0	2	103	0.4	8	19
Poverty related	0.5	28	61	0.2	22	128	0.0	1	74	0.3	5	18
Other/unknown	0.6	36	59	0.2	28	114	0.0	2	72	0.3	6	18

Source: Data for this table are from the MAX 2005 file for Wisconsin, released by CMS in 10/2008. This table was produced on 04/23/2009.
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, 0.4 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, http://www.medispan.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.

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY[a, b, c, d]
NONDUAL BENEFICIARIES, WISCONSIN, 2005

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 Benes	Number of Benefit Months
Anti-infective Agents	0.3	0.1	0.0	0.2	$14	$10	$2	$3	$55	$166	$61	$17	291,296	$15,925,748	122,111	23.8	1,123,554
Biologicals	0.5	0.4	0.0	0.0	634	586	30	18	1329	1,347	2,239	630	3,239	4,305,720	731	0.1	6,789
Antineoplastic Agents	0.6	0.2	0.0	0.4	126	105	3	18	216	690	643	42	8,914	1,922,213	1,577	0.3	15,295
Endocrine/Metabolic Drugs	0.5	0.2	0.0	0.3	27	19	2	6	50	80	63	22	361,250	18,125,770	79,336	15.5	678,757
Cardiovascular Agents	1.2	0.4	0.0	0.8	41	32	0	9	35	81	46	11	386,192	13,692,675	34,852	6.8	334,202
Respiratory Agents	0.5	0.2	0.0	0.2	29	25	1	3	62	103	66	14	274,961	16,968,394	62,132	12.1	580,518
Gastrointestinal Agents	0.5	0.2	0.0	0.3	41	36	1	5	85	178	73	17	128,222	10,868,312	26,772	5.2	265,393
Genitourinary Agents	0.3	0.1	0.0	0.1	16	12	2	3	54	87	51	21	42,123	2,284,548	15,109	2.9	138,914
CNS Drugs	1.0	0.5	0.0	0.5	101	91	1	9	97	184	93	17	609,348	59,377,599	62,489	12.2	587,715
Stimulants/Anti-obesity/Anorexia	0.7	0.5	0.0	0.2	66	59	1	6	90	108	94	34	150,295	13,451,569	21,495	4.2	204,523
Miscellaneous Psychological/ Neurological Agents	0.3	0.2	0.0	0.1	87	73	0	14	294	395	94	127	12,171	3,576,407	4,082	0.8	40,923
Analgesics and Anesthetics	0.6	0.1	0.0	0.5	30	13	6	12	53	183	248	25	369,716	19,648,278	71,490	13.9	653,701
Neuromuscular Agents	0.8	0.3	0.0	0.4	68	54	2	12	87	162	118	27	271,690	23,622,393	34,946	6.8	345,451
Nutritional Products	0.4	0.0	0.0	0.4	7	1	0	6	17	35	35	15	67,945	1,172,246	19,472	3.8	166,085
Hematological Agents	0.7	0.2	0.0	0.4	121	115	1	5	178	513	51	12	47,902	8,544,912	7,199	1.4	70,484
Topical Products	0.2	0.1	0.0	0.2	10	6	0	3	41	90	52	20	144,632	5,986,257	62,320	12.1	597,002
Miscellaneous Products	0.7	0.2	0.0	0.5	132	99	6	26	183	425	230	58	15,297	2,798,219	2,104	0.4	21,255
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	10	0	0	0	42	0	0	0	3,997	167,305	1,557	0.3	16,559
TOTAL NO. OF RX AND RX $	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	3,189,190	222,438,565	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for Wisconsin, released by CMS in 10/2008. This table was produced on 04/23/2009.
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.medispan.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, 0.4 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, http://www.medispan.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 2005.
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.

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP[a, b, c]
NONDUAL BENEFICIARIES, WISCONSIN, 2005

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	$42,043,057	29,071	5.7	309,223	0.7	$206	$136
ANTICONVULSANT	21,923,103	26,830	5.2	277,140	0.7	110	79
ANTIDEPRESSANTS	13,618,867	57,124	11.1	544,729	0.5	49	25
STIMULANTS/ANTI-OBESITY/ANOREXIANTS	13,451,001	24,940	4.9	242,422	0.6	90	55
ANTIASTHMATIC	12,118,503	60,355	11.8	580,946	0.3	66	21
ANALGESICS - Narcotic	11,460,335	78,850	15.4	749,403	0.3	45	15
ULCER DRUGS	7,259,965	28,211	5.5	279,914	0.4	58	26
ANTIDIABETIC	6,586,334	16,488	3.2	160,823	0.7	62	41
ANTIVIRAL	6,030,065	6,658	1.3	63,703	0.3	309	95
ANTIHYPERLIPIDEMIC	5,916,198	13,216	2.6	132,531	0.6	77	45
Total	140,407,428	341,743		3,340,834	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for Wisconsin, released by CMS in 10/2008. This table was produced on 04/23/2009.
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 2005. 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 2005. 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); CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; $ = Medicaid reimbursement.

Beneficiary Characteristics	All Top 10 Drug Groups		ANTIPSYCHOTICS					ANTICONVULSANT				
	Number of Rx	Rx $	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx $ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx $ per Benefit Month
All	**1,593,408**	**$140,407,428**	**29,071**	**5.7**	**309,223**	**0.7**	**$136**	**26,830**	**5.2**	**277,140**	**0.7**	**$79**
Female												
All Females	928,563	74,523,929	14,191	4.4	149,284	0.6	122	15,806	4.9	160,875	0.7	74
Female, Disabled												
All Ages	608,960	54,301,579	9,686	25.7	109,630	0.7	139	10,541	28.0	118,957	0.8	82
5 and younger	7,885	679,207	22	1.0	245	0.4	74	303	13.4	3,476	0.7	75
6-14	34,335	3,721,632	805	18.2	9,267	0.6	118	1,024	23.1	11,960	0.7	103
15-20	33,185	3,440,676	888	23.8	10,240	0.6	118	916	24.5	10,592	0.8	103
21-44	180,220	17,883,171	3,763	31.7	42,346	0.6	138	3,841	32.3	43,219	0.8	90
45-64	346,585	28,092,732	4,133	27.8	46,706	0.7	149	4,388	29.5	48,921	0.7	66
65-74	5,633	407,828	61	15.4	671	0.8	183	59	14.9	670	0.7	51
75-84	924	66,086	8	20.0	89	0.8	269	9	22.5	107	1.1	48
85 and older	193	10,247	6	46.2	66	0.7	67	1	7.7	12	1.1	61
Female, Other Eligibles												
All Ages	319,603	20,222,350	4,505	1.6	39,654	0.4	74	5,265	1.8	41,918	0.5	52
5 and younger	9,699	594,506	53	0.1	563	0.5	71	106	0.2	934	0.5	64
6-14	42,284	3,566,258	909	2.0	8,859	0.6	107	449	1.0	4,206	0.6	77
15-20	36,937	2,656,465	979	1.7	9,310	0.5	78	660	1.1	6,117	0.5	65
21-44	180,494	10,306,598	2,140	1.7	17,358	0.3	52	3,373	2.6	25,374	0.5	46
45-64	35,765	2,245,245	287	3.3	2,194	0.4	66	546	6.3	3,881	0.6	50
65-74	4,981	316,123	41	8.8	420	0.8	145	49	10.5	538	0.9	49
75-84	4,806	306,896	39	9.1	398	0.8	165	48	11.2	503	0.6	26
85 and older	4,637	230,259	57	15.3	552	0.6	87	34	9.1	365	0.8	33
Male												
All Males	664,845	65,883,499	14,880	7.9	159,939	0.7	149	11,024	5.8	116,265	0.8	86
Male, Disabled												
All Ages	455,351	49,148,738	10,951	27.7	123,525	0.7	161	8,479	21.5	95,015	0.8	92
5 and younger	12,086	1,033,122	115	3.4	1,254	0.5	94	423	12.4	4,764	0.6	69
6-14	90,261	10,021,808	2,982	31.3	34,062	0.6	124	1,790	18.8	20,636	0.7	88
15-20	56,265	6,838,457	1,831	29.7	21,059	0.7	145	1,222	19.8	14,111	0.8	106
21-44	133,074	16,304,878	3,640	35.2	40,741	0.8	194	2,927	28.3	32,731	0.9	110
45-64	161,293	14,782,382	2,360	23.9	26,181	0.8	173	2,089	21.1	22,483	0.8	64
65-74	2,081	149,688	19	11.0	196	0.8	192	22	12.8	225	0.9	68
75-84	192	12,172	2	13.3	18	0.9	148	4	26.7	41	0.8	30
85 and older	99	6,231	2	40.0	14	1.2	175	2	40.0	24	0.5	21

Nondual Beneficiaries

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS COMBINED
AND FIRST AND SECOND GROUPS SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE[a, b, c]
NONDUAL BENEFICIARIES, WISCONSIN, 2005

Beneficiary Characteristics	All Top 10 Drug Groups		ANTIPSYCHOTICS					ANTICONVULSANT				
	Number of Rx	Rx $	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx $ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx $ per Benefit Month
Male, Other Eligibles												
All Ages	209,494	16,734,761	3,929	2.6	36,414	0.6	109	2,545	1.7	21,250	0.6	61
5 and younger	16,205	1,044,520	118	0.3	1,150	0.5	74	175	0.4	1,617	0.4	55
6-14	83,047	7,669,144	2,180	4.7	21,115	0.6	113	740	1.6	7,373	0.6	65
15-20	35,169	3,367,322	1,005	4.8	9,516	0.6	117	443	2.1	4,152	0.6	89
21-44	46,362	2,753,556	450	1.5	3,222	0.4	76	838	2.8	5,435	0.5	43
45-64	20,717	1,436,319	101	1.6	683	0.5	68	298	4.7	2,117	0.6	48
65-74	2,456	170,318	19	7.1	200	0.8	167	24	8.9	258	0.7	33
75-84	3,449	193,779	39	13.1	389	0.8	99	18	6.0	203	0.8	24
85 and older	2,089	99,803	17	11.6	139	1.0	145	9	6.1	95	1.1	21
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 2005 file for Wisconsin, released by CMS in 10/2008. This table was produced on 04/23/2009.
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 2005. 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 2005. 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.

Beneficiary Characteristics	ANTIDEPRESSANTS					STIMULANTS/ANTI-OBESITY/ANOREXIANTS					ANTIASTHMATIC				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx $ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx $ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx $ per Benefit Month
All	**57,124**	**11.1**	**544,729**	**0.5**	**$25**	**24,940**	**4.9**	**242,422**	**0.6**	**$56**	**60,355**	**11.8**	**580,946**	**0.3**	**$21**
Female															
All Females	40,217	12.4	378,479	0.5	26	8,752	2.7	84,938	0.6	52	34,954	10.8	337,388	0.3	21
Female, Disabled															
All Ages	17,562	46.7	197,463	0.6	29	2,820	7.5	32,242	0.6	56	14,809	39.3	167,535	0.4	27
5 and younger	19	0.8	206	0.4	3	46	2.0	453	0.4	34	946	41.8	10,688	0.3	21
6-14	636	14.4	7,347	0.5	17	1,075	24.3	12,258	0.6	51	1,235	27.9	14,304	0.3	25
15-20	1,090	29.2	12,465	0.5	23	498	13.3	5,779	0.6	56	942	25.2	10,880	0.3	21
21-44	6,325	53.2	71,331	0.5	29	668	5.6	7,711	0.5	55	3,959	33.3	45,183	0.3	22
45-64	9,358	62.9	104,555	0.6	31	529	3.6	6,001	0.5	71	7,585	51.0	84,831	0.4	32
65-74	117	29.5	1,363	0.6	21	4	1.0	40	0.2	21	118	29.7	1,366	0.4	24
75-84	16	40.0	184	0.7	26	0	0.0	0	0.0	0	21	52.5	247	0.4	21
85 and older	1	7.7	12	1.1	5	0	0.0	0	0.0	0	3	23.1	36	0.8	34
Female, Other Eligibles															
All Ages	22,655	7.9	181,016	0.4	22	5,932	2.1	52,696	0.6	49	20,145	7.0	169,853	0.3	15
5 and younger	32	0.1	340	0.3	7	116	0.3	1,182	0.5	37	3,463	7.9	30,392	0.2	12
6-14	1,323	2.9	12,843	0.5	17	2,877	6.4	25,859	0.6	52	4,117	9.2	36,715	0.3	15
15-20	2,763	4.7	25,008	0.4	17	1,064	1.8	10,077	0.5	50	2,598	4.5	22,890	0.2	12
21-44	15,802	12.2	122,254	0.4	22	1,688	1.3	14,157	0.4	42	8,343	6.5	66,713	0.3	15
45-64	2,410	27.8	17,271	0.5	32	184	2.1	1,385	0.6	62	1,325	15.3	10,030	0.4	26
65-74	84	18.1	863	0.6	18	1	0.2	12	0.7	104	107	23.0	1,056	0.5	43
75-84	109	25.5	1,145	0.6	23	2	0.5	24	0.3	21	97	22.7	1,049	0.3	32
85 and older	132	35.4	1,292	0.8	29	0	0.0	0	0.0	0	95	25.5	1,008	0.4	22
Male															
All Males	16,907	8.9	166,250	0.5	24	16,188	8.5	157,484	0.6	58	25,401	13.4	243,558	0.3	21
Male, Disabled															
All Ages	9,663	24.5	106,633	0.6	25	6,269	15.9	71,234	0.7	57	10,211	25.8	114,372	0.4	26
5 and younger	39	1.1	460	0.4	6	194	5.7	2,072	0.4	31	1,540	45.1	17,231	0.3	22
6-14	1,604	16.8	18,352	0.5	17	4,024	42.2	45,720	0.6	56	2,951	31.0	33,925	0.3	22
15-20	1,361	22.1	15,601	0.6	26	1,469	23.8	16,941	0.7	65	1,341	21.7	15,698	0.3	25
21-44	3,183	30.8	34,791	0.6	27	434	4.2	4,888	0.7	60	1,445	14.0	16,189	0.4	24
45-64	3,437	34.8	37,030	0.6	27	147	1.5	1,601	0.6	54	2,880	29.1	30,737	0.5	35
65-74	32	18.6	318	0.6	27	1	0.6	12	1.2	43	46	26.7	498	0.4	34
75-84	5	33.3	57	0.5	28	0	0.0	0	0.0	0	8	53.3	94	0.2	14
85 and older	2	40.0	24	1.0	82	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Nondual Beneficiaries

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY,
BY SEX, BASIS OF ELIGIBILITY, AND AGE[a, b, c]
NONDUAL BENEFICIARIES, WISCONSIN, 2005

Beneficiary Characteristics	ANTIDEPRESSANTS					STIMULANTS/ANTI-OBESITY/ANOREXIANTS					ANTIASTHMATIC				
	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	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
Male, Other Eligibles															
All Ages	7,244	4.8	59,617	0.5	21	9,919	6.6	86,250	0.6	58	15,190	10.1	129,186	0.3	16
5 and younger	52	0.1	510	0.3	5	350	0.8	3,317	0.4	35	5,392	11.8	47,168	0.2	13
6-14	1,953	4.2	18,560	0.5	19	7,015	15.1	60,780	0.7	57	5,549	11.9	47,941	0.3	17
15-20	1,453	6.9	13,073	0.5	22	2,047	9.7	18,718	0.6	64	1,810	8.6	15,658	0.3	15
21-44	2,806	9.5	19,989	0.4	23	418	1.4	2,809	0.6	61	1,716	5.8	12,360	0.3	17
45-64	830	13.0	5,938	0.5	24	88	1.4	614	0.7	72	510	8.0	3,859	0.4	28
65-74	40	14.9	435	0.6	23	0	0.0	0	0.0	0	35	13.0	370	0.6	49
75-84	58	19.5	606	0.7	24	1	0.3	12	1.1	104	118	39.6	1,197	0.6	34
85 and older	52	35.4	506	0.7	30	0	0.0	0	0.0	0	60	40.8	633	0.4	18
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 2005 file for Wisconsin, released by CMS in 10/2008. This table was produced on 04/23/2009.
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 2005. 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 2005. 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.

Beneficiary Characteristics	ANALGESICS - Narcotic					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
All	**78,850**	**15.4**	**749,403**	**0.3**	**$15**	**28,211**	**5.5**	**279,914**	**0.4**	**$26**	**16,488**	**3.2**	**160,823**	**0.7**	**$41**
Female															
All Females	54,479	16.8	519,678	0.3	14	18,671	5.8	185,879	0.4	26	10,809	3.3	106,927	0.7	41
Female, Disabled															
All Ages	21,376	56.8	240,656	0.4	22	10,456	27.8	117,850	0.5	31	7,263	19.3	80,943	0.7	42
5 and younger	167	7.4	1,885	0.1	1	386	17.0	4,117	0.5	24	3	0.1	17	0.5	46
6-14	482	10.9	5,622	0.2	5	389	8.8	4,532	0.5	38	65	1.5	756	0.7	59
15-20	1,028	27.5	11,926	0.2	3	433	11.6	5,030	0.4	22	137	3.7	1,571	0.7	48
21-44	7,824	65.9	88,988	0.4	20	3,000	25.3	34,049	0.4	29	1,447	12.2	16,373	0.6	39
45-64	11,661	78.4	129,818	0.5	26	6,097	41.0	68,423	0.5	32	5,429	36.5	60,192	0.7	43
65-74	187	47.1	2,101	0.4	17	126	31.7	1,410	0.5	24	155	39.0	1,736	0.6	35
75-84	23	57.5	268	0.5	21	21	52.5	247	0.5	25	23	57.5	250	0.6	23
85 and older	4	30.8	48	0.2	13	4	30.8	42	0.7	13	4	30.8	48	0.7	33
Female, Other Eligibles															
All Ages	33,103	11.6	279,022	0.3	8	8,215	2.9	68,029	0.3	17	3,546	1.2	25,984	0.6	36
5 and younger	583	1.3	5,477	0.1	1	557	1.3	4,309	0.3	13	17	0.0	103	0.6	51
6-14	1,153	2.6	11,396	0.1	1	439	1.0	4,146	0.2	13	130	0.3	989	0.7	58
15-20	4,038	6.9	36,057	0.2	1	911	1.6	8,417	0.2	9	170	0.3	1,367	0.6	50
21-44	24,213	18.7	200,554	0.3	8	4,922	3.8	39,974	0.3	17	2,001	1.5	14,290	0.5	34
45-64	2,618	30.2	20,408	0.4	15	1,046	12.1	7,644	0.5	28	844	9.7	5,332	0.7	38
65-74	182	39.1	1,939	0.4	12	121	26.0	1,248	0.5	24	151	32.5	1,511	0.6	32
75-84	159	37.2	1,717	0.3	8	120	28.1	1,289	0.5	30	142	33.3	1,503	0.7	29
85 and older	157	42.1	1,474	0.5	22	99	26.5	1,002	0.7	28	91	24.4	889	0.7	26
Male															
All Males	24,371	12.9	229,725	0.3	18	9,540	5.0	94,035	0.5	26	5,679	3.0	53,896	0.7	42
Male, Disabled															
All Ages	11,967	30.3	129,883	0.4	24	5,978	15.1	65,615	0.5	28	3,748	9.5	40,478	0.7	41
5 and younger	310	9.1	3,480	0.1	1	513	15.0	5,433	0.4	22	6	0.2	56	0.3	18
6-14	793	8.3	9,123	0.1	2	530	5.6	6,094	0.5	31	95	1.0	1,126	0.7	65
15-20	1,086	17.6	12,486	0.2	3	483	7.8	5,536	0.5	30	87	1.4	1,003	0.6	45
21-44	3,935	38.1	42,690	0.4	24	1,733	16.8	19,315	0.5	30	804	7.8	8,762	0.6	36
45-64	5,776	58.4	61,372	0.5	33	2,671	27.0	28,703	0.5	26	2,671	27.0	28,564	0.7	41
65-74	64	37.2	696	0.3	4	40	23.3	450	0.5	24	74	43.0	845	0.6	36
75-84	3	20.0	36	0.1	1	4	26.7	46	0.4	30	11	73.3	122	0.4	11
85 and older	0	0.0	0	0.0	0	4	80.0	38	1.1	22	0	0.0	0	0.0	0

Nondual Beneficiaries

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY,

BY SEX, BASIS OF ELIGIBILITY, AND AGE[a, b, c]

NONDUAL BENEFICIARIES, WISCONSIN, 2005

Beneficiary Characteristics	ANALGESICS - Narcotic					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
Male, Other Eligibles															
All Ages	12,404	8.3	99,842	0.3	10	3,562	2.4	28,420	0.4	23	1,931	1.3	13,418	0.7	44
5 and younger	755	1.7	7,036	0.1	1	708	1.5	5,397	0.3	16	30	0.1	304	0.7	53
6-14	1,334	2.9	12,986	0.1	1	413	0.9	3,975	0.3	18	127	0.3	996	0.7	54
15-20	1,749	8.3	15,752	0.2	1	342	1.6	3,134	0.3	13	92	0.4	687	0.8	85
21-44	6,677	22.6	48,922	0.4	14	1,399	4.7	10,270	0.4	27	773	2.6	4,976	0.6	42
45-64	1,638	25.7	12,573	0.4	20	544	8.6	4,103	0.5	33	719	11.3	4,418	0.7	42
65-74	93	34.6	1,005	0.4	10	48	17.8	499	0.5	18	89	33.1	956	0.6	38
75-84	90	30.2	952	0.3	11	63	21.1	627	0.6	26	72	24.2	788	0.7	29
85 and older	68	46.3	616	0.8	29	45	30.6	415	0.8	32	29	19.7	293	0.8	27
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 2005 file for Wisconsin, released by CMS in 10/2008. This table was produced on 04/23/2009.
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 2005. 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 2005. 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.

Beneficiary Characteristics	ANTIVIRAL					ANTIHYPERLIPIDEMIC						
	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 Beneficiaries	Number of Benefit Months
All	**6,658**	**1.3**	**63,703**	**0.3**	**$95**	**13,216**	**2.6**	**132,531**	**0.6**	**$45**	**513,461**	**3,346,645**
Female												
All Females	4,807	1.5	45,133	0.3	70	7,881	2.4	81,089	0.6	45	323,970	2,136,364
Female, Disabled												
All Ages	1,499	4.0	16,889	0.3	121	5,667	15.1	63,684	0.6	46	37,639	405,993
5 and younger	50	2.2	519	0.5	103	8	0.4	92	0.1	1	2,264	22,305
6-14	102	2.3	1,193	0.2	46	6	0.1	72	0.2	7	4,427	49,444
15-20	113	3.0	1,286	0.2	57	23	0.6	249	0.4	26	3,735	41,325
21-44	579	4.9	6,463	0.3	137	879	7.4	10,004	0.5	39	11,881	130,472
45-64	646	4.3	7,320	0.3	132	4,633	31.1	51,905	0.6	48	14,882	157,486
65-74	8	2.0	96	0.1	11	103	25.9	1,182	0.6	48	397	4,366
75-84	1	2.5	12	0.2	21	13	32.5	156	0.6	59	40	456
85 and older	0	0.0	0	0.0	0	2	15.4	24	0.8	44	13	139
Female, Other Eligibles												
All Ages	3,308	1.2	28,244	0.3	39	2,214	0.8	17,405	0.5	39	286,331	1,730,371
5 and younger	123	0.3	1,103	0.1	14	17	0.0	134	0.2	1	43,926	232,115
6-14	193	0.4	1,867	0.2	27	7	0.0	66	0.4	18	44,907	252,731
15-20	486	0.8	4,301	0.2	34	15	0.0	152	0.3	25	58,233	387,916
21-44	2,298	1.8	19,115	0.3	43	1,054	0.8	8,179	0.5	33	129,320	800,661
45-64	154	1.8	1,304	0.3	55	811	9.3	5,551	0.6	43	8,680	44,790
65-74	8	1.7	87	0.1	11	123	26.5	1,284	0.6	50	465	4,311
75-84	12	2.8	124	0.1	8	140	32.8	1,509	0.7	47	427	4,342
85 and older	34	9.1	343	0.2	6	47	12.6	530	0.7	46	373	3,505
Male												
All Males	1,851	1.0	18,570	0.4	156	5,335	2.8	51,442	0.6	45	189,424	1,210,162
Male, Disabled												
All Ages	1,187	3.0	12,628	0.4	199	3,437	8.7	37,921	0.6	47	39,521	414,154
5 and younger	47	1.4	532	0.3	54	12	0.4	107	0.2	3	3,413	34,235
6-14	132	1.4	1,456	0.3	80	8	0.1	83	0.2	7	9,525	105,592
15-20	111	1.8	1,264	0.3	93	31	0.5	340	0.4	22	6,171	67,471
21-44	443	4.3	4,552	0.4	197	794	7.7	8,927	0.6	41	10,331	107,936
45-64	450	4.6	4,788	0.5	284	2,538	25.7	27,852	0.6	49	9,889	96,953
65-74	3	1.7	24	0.3	13	49	28.5	562	0.6	47	172	1,783
75-84	0	0.0	0	0.0	0	4	26.7	48	0.6	54	15	145
85 and older	1	20.0	12	0.2	21	1	20.0	2	1.0	122	5	39

Nondual Beneficiaries

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR NINTH AND TENTH TOP DRUG GROUPS
SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE[a, b, c]
NONDUAL BENEFICIARIES, WISCONSIN, 2005

Beneficiary Characteristics	ANTIVIRAL					ANTIHYPERLIPIDEMIC						
	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 Beneficiaries	Number of Benefit Months
Male, Other Eligibles												
All Ages	664	0.4	5,942	0.2	63	1,898	1.3	13,521	0.6	40	149,903	796,008
5 and younger	122	0.3	1,162	0.1	11	23	0.1	178	0.2	1	45,702	241,408
6-14	163	0.4	1,610	0.2	28	2	0.0	24	0.3	36	46,491	265,235
15-20	94	0.4	922	0.2	43	16	0.1	145	0.6	38	21,116	118,899
21-44	181	0.6	1,322	0.3	73	831	2.8	5,571	0.5	35	29,518	131,321
45-64	80	1.3	661	0.5	250	846	13.3	5,729	0.6	45	6,362	32,484
65-74	8	3.0	94	0.2	147	74	27.5	769	0.6	41	269	2,447
75-84	5	1.7	52	0.1	4	84	28.2	896	0.6	49	298	2,894
85 and older	11	7.5	119	0.1	4	22	15.0	209	0.8	54	147	1,320
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	67	119

Source: Data for this table are from the MAX 2005 file for Wisconsin, released by CMS in 10/2008. This table was produced on 04/23/2009.
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 2005. 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 2005. 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; $ = Medicaid reimbursement.

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,

BY BENEFICIARY CHARACTERISTIC[a, b]

NONDUAL BENEFICIARIES, WISCONSIN, 2005

Beneficiary Characteristics	Rx $ per Benefit Month	Number of Rx per Benefit Month	Number of All-Year Nursing Facility Residents	Benefit Months Among All-Year Nursing Facility Residents
All	**$572**	**9.6**	**811**	**8,134**
Age				
0-64	647	10.3	568	5,774
65-74	648	10.5	48	492
75-84	409	7.7	58	564
85 and older	280	6.8	137	1,304
Unknown	0	0.0	0	0
Gender				
Female	603	10.0	468	4,786
Male	527	9.0	343	3,348
Unknown	0	0.0	0	0
Race				
White	431	8.7	364	3,353
African American	485	9.2	35	331
Other/unknown	684	10.3	412	4,450
Basis of Eligibility[c]				
Aged	334	7.4	209	2,004
Disabled	649	10.3	601	6,128
Adults	378	8.0	1	2
Children	0	0.0	0	0
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 2005 file for Wisconsin, released by CMS in 10/2008. This table was produced on 04/23/2009.
a. Table ND.8 includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their 2005 Medicaid enrollment. A total of 1,107 beneficiaries who were in nursing facilities for part of their enrollment and their 10,501 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.

Nondual Beneficiaries

| Therapeutic Category | Number of Rx per Benefit Month Among Users | | | | $ per Benefit Month Among Users | | | | $ per Rx | | | | Total Number of Rx | Total Rx $ | Users | | Number of Benefit Months |
	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic			Number of Users	As a Percentage of All-Year Nursing Facility Residents	
Anti-infective Agents	0.6	0.2	0.0	0.4	$52	$38	$4	$10	$86	$216	$78	$27	3,396	$291,503	543	67.0	5,658
Biologicals	0.0	0.0	0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0.0	0
Antineoplastic Agents	0.7	0.2	0.0	0.5	117	96	0	21	170	539	0	41	294	49,932	39	4.8	425
Endocrine/Metabolic Drugs	1.4	0.6	0.1	0.7	68	51	8	10	47	85	53	14	5,952	280,799	399	49.2	4,134
Cardiovascular Agents	2.3	0.6	0.0	1.6	63	42	0	21	28	69	27	13	11,975	335,686	526	64.9	5,310
Respiratory Agents	1.0	0.4	0.0	0.6	52	43	0	8	50	99	50	14	2,996	149,908	280	34.5	2,883
Gastrointestinal Agents	1.3	0.4	0.0	0.9	70	58	1	12	54	150	33	13	4,991	269,322	375	46.2	3,842
Genitourinary Agents	0.8	0.5	0.0	0.3	50	41	0	9	59	76	36	30	1,802	106,554	200	24.7	2,130
CNS Drugs	2.5	1.2	0.0	1.3	232	205	2	25	92	176	63	19	15,446	1,427,062	603	74.4	6,157
Stimulants/Anti-obesity/Anorexia	1.2	0.3	0.0	0.8	68	58	0	10	57	168	0	12	236	13,542	20	2.5	200
Miscellaneous Psychological/ Neurological Agents	1.1	1.1	0.0	0.0	266	263	0	3	241	243	0	148	1,104	265,911	102	12.6	1,000
Analgesics and Anesthetics	1.6	0.2	0.1	1.2	68	19	13	36	43	95	100	29	7,065	307,173	458	56.5	4,503
Neuromuscular Agents	1.8	0.5	0.0	1.3	113	75	3	34	62	147	84	27	8,981	552,661	465	57.3	4,893
Nutritional Products	1.5	0.2	0.0	1.2	21	3	1	18	14	11	25	15	3,621	52,264	248	30.6	2,460
Hematological Agents	1.7	0.5	0.0	1.2	116	105	0	10	69	215	14	9	4,862	334,585	289	35.6	2,880
Topical Products	0.8	0.3	0.0	0.4	34	24	2	8	42	72	57	18	4,292	178,519	493	60.8	5,291
Miscellaneous Products	0.9	0.1	0.0	0.7	32	21	0	11	36	151	118	14	844	30,360	95	11.7	950
Unknown Therapeutic Category	0.4	0.0	0.0	0.0	7	0	0	0	18	0	0	0	225	4,070	54	6.7	570
TOTAL NO. OF RX AND RX $	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	78,082	4,649,851	n.a.	n.a.	n.a.

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 2005. A total of 1,107 beneficiaries who were in nursing facilities for part of their enrollment and their 10,501 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 2005. 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.medispan.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.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615 (October 26, 2007).
In Wisconsin, 0.4 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.
Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; CNS = Central Nervous System; MAX = Medicaid Analytic Extract; n.a. = not applicable; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; $ = Medicaid reimbursement.

Nondual Beneficiaries

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS,
BY TOP-10 DRUG GROUP[a, b, c, d]
NONDUAL BENEFICIARIES, WISCONSIN, 2005

		Users					Among Users
Top 10 Drug Groups in Nursing Facilities	Total Medicaid Rx $	Number of Users	As a Percentage of All-Year Nursing Facility Residents	Number of Benefit Months	Number of Rx per Benefit Month	$ per Rx	Rx $ per Benefit Month
ANTIPSYCHOTICS	$1,074,934	458	56.5	5,013	1.2	$185	$214
ANTICONVULSANT	450,493	434	53.5	4,596	1.4	72	98
ANTIDEPRESSANTS	318,193	647	79.8	6,744	1.0	48	47
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	265,911	125	15.4	1,238	0.9	241	215
ANALGESICS - Narcotic	216,816	518	63.9	5,151	1.1	40	42
ANTIDIABETIC	189,430	353	43.5	3,643	1.1	45	52
ULCER DRUGS	165,810	442	54.5	4,494	1.0	39	37
HEMATOPOIETIC AGENTS	155,878	123	15.2	1,277	1.0	123	122
DERMATOLOGICAL	145,920	1,037	127.9	11,563	0.3	40	13
ANTIHYPERLIPIDEMIC	125,733	201	24.8	2,096	0.9	69	60
Total	3,109,118	4,338		45,815	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for Wisconsin, released by CMS in 10/2008. This table was produced on 04/23/2009.
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 2005. A total of 1,107 beneficiaries who were in nursing facilities for part of their enrollment and their 10,501 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 2005. 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 2005 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); CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; $ = Medicaid reimbursement.

Nondual Beneficiaries

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR TOP 10 DRUG GROUPS COMBINED AND FIRST
AND SECOND TOP DRUG GROUPS SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE[a, b, c, d]
NONDUAL BENEFICIARIES, WISCONSIN, 2005

Beneficiary Characteristics	All Top 10 Drug Groups		ANTIPSYCHOTICS					ANTICONVULSANT				
	Number of Rx	Rx $	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx $	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx $
All	**40,554**	**$3,109,118**	**458**	**56.5**	**5,013**	**1.2**	**$214**	**434**	**53.5**	**4,596**	**1.4**	**$98**
Female												
All Females	24,856	1,922,360	258	55.1	2,830	1.2	211	253	54.1	2,719	1.3	86
Female, Disabled												
All Ages	20,432	1,639,717	209	61.8	2,317	1.2	222	217	64.2	2,329	1.3	92
64 or younger	18,939	1,500,828	188	59.9	2,065	1.2	218	200	63.7	2,143	1.3	88
65-74	1,184	118,293	16	100.0	192	1.0	274	13	81.3	138	1.3	155
75-84	237	16,692	4	80.0	48	1.0	179	3	60.0	36	0.8	70
85 and older	72	3,904	1	33.3	12	1.9	229	1	33.3	12	1.1	61
Female, Other Eligibles												
All Ages	4,424	282,643	49	37.7	513	1.0	163	36	27.7	390	1.2	50
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	1,110	65,389	11	73.3	108	1.1	170	11	73.3	130	1.5	72
75-84	864	72,469	16	61.5	159	1.2	251	9	34.6	94	1.0	37
85 and older	2,450	144,785	22	25.0	246	0.8	103	16	18.2	166	1.0	41
Male												
All Males	15,698	1,186,758	200	58.3	2,183	1.1	219	181	52.8	1,877	1.5	116
Male, Disabled												
All Ages	13,175	1,034,910	176	66.9	1,935	1.1	224	171	65.0	1,772	1.5	121
64 or younger	12,665	984,405	167	66.3	1,844	1.1	223	165	65.5	1,710	1.5	120
65-74	392	41,673	6	75.0	61	1.2	302	3	37.5	29	2.1	318
75-84	34	3,891	2	200.0	18	0.9	148	1	100.0	9	1.0	79
85 and older	84	4,941	1	50.0	12	1.3	190	2	100.0	24	0.5	21
Male, Other Eligibles												
All Ages	2,523	151,848	24	30.0	248	1.2	175	10	12.5	105	1.2	26
64 or younger	3	182	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	343	17,664	4	44.4	38	1.1	223	2	22.2	14	1.1	89
75-84	969	65,397	14	53.8	145	1.2	157	4	15.4	43	1.0	14
85 and older	1,208	68,605	6	13.6	65	1.2	187	4	9.1	48	1.5	19
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 2005 file for Wisconsin, released by CMS in 10/2008. This table was produced on 04/23/2009.
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 2005. A total of 1,107 beneficiaries who were in nursing facilities for part of their enrollment and their 10,501 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 2005. 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 2005 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.

Beneficiary Characteristics	ANTIDEPRESSANTS					MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL					ANALGESICS - Narcotic				
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx $	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx $	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx $
All	**647**	**79.8**	**6,744**	**1.0**	**$47**	**125**	**15.4**	**1,238**	**0.9**	**$215**	**518**	**63.9**	**5,151**	**1.1**	**$42**
Female															
All Females	399	85.3	4,223	1.0	49	72	15.4	767	0.9	280	309	66.0	3,175	1.1	48
Female, Disabled															
All Ages	313	92.6	3,349	1.0	52	39	11.5	418	0.8	409	235	69.5	2,485	1.2	54
64 or younger	291	92.7	3,089	1.0	52	37	11.8	394	0.8	431	218	69.4	2,285	1.2	56
65-74	15	93.8	176	1.1	69	2	12.5	24	0.4	39	13	81.3	152	0.9	42
75-84	6	120.0	72	0.9	30	0	0.0	0	0.0	0	2	40.0	24	0.9	7
85 and older	1	33.3	12	1.1	5	0	0.0	0	0.0	0	2	66.7	24	0.2	1
Female, Other Eligibles															
All Ages	86	66.2	874	0.9	37	33	25.4	349	1.0	126	74	56.9	690	0.8	27
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	11	73.3	118	0.8	29	6	40.0	64	0.9	138	10	66.7	101	1.5	33
75-84	17	65.4	166	0.9	47	5	19.2	48	1.0	129	15	57.7	123	0.5	10
85 and older	58	65.9	590	0.9	35	22	25.0	237	0.9	122	49	55.7	466	0.7	30
Male															
All Males	248	72.3	2,521	1.0	44	53	15.5	471	0.9	108	209	60.9	1,976	1.0	32
Male, Disabled															
All Ages	198	75.3	2,024	1.0	46	30	11.4	258	0.8	86	164	62.4	1,578	1.0	27
64 or younger	190	75.4	1,957	1.0	45	26	10.3	218	0.8	81	160	63.5	1,542	1.0	28
65-74	6	75.0	46	0.9	54	4	50.0	40	1.0	114	4	50.0	36	0.3	5
75-84	1	100.0	9	1.0	57	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	1	50.0	12	1.1	84	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male, Other Eligibles															
All Ages	50	62.5	497	1.0	38	23	28.8	213	1.1	135	45	56.3	398	1.3	51
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	200.0	4	0.5	44
65-74	7	77.8	81	1.0	18	1	11.1	9	0.9	61	11	122.2	118	0.9	19
75-84	16	61.5	147	1.1	54	9	34.6	91	0.9	125	11	42.3	97	1.3	45
85 and older	27	61.4	269	0.9	36	13	29.5	113	1.2	149	21	47.7	179	1.4	76
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 2005 file for Wisconsin, released by CMS in 10/2008. This table was produced on 04/23/2009.
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 2005. A total of 1,107 beneficiaries who were in nursing facilities for part of their enrollment and their 10,501 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 2005. 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 2005 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.

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY
AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE[a, b, c, d]
NONDUAL BENEFICIARIES, WISCONSIN, 2005

Beneficiary Characteristics	ANTIDIABETIC					ULCER DRUGS					HEMATOPOIETIC AGENTS				
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx $	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx $	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx $
All	**353**	**43.5**	**3,643**	**1.1**	**$52**	**442**	**54.5**	**4,494**	**1.0**	**$37**	**123**	**15.2**	**1,277**	**1.0**	**$122**
Female															
All Females	236	50.4	2,460	1.2	55	264	56.4	2,736	0.9	40	75	16.0	803	1.0	115
Female, Disabled															
All Ages	186	55.0	1,952	1.2	59	207	61.2	2,137	0.9	42	65	19.2	703	1.0	117
64 or younger	173	55.1	1,796	1.2	61	193	61.5	1,986	0.9	44	57	18.2	609	1.0	124
65-74	11	68.8	132	1.2	46	10	62.5	103	0.9	28	7	43.8	82	1.1	89
75-84	1	20.0	12	0.1	3	3	60.0	36	0.9	20	1	20.0	12	1.0	7
85 and older	1	33.3	12	0.4	3	1	33.3	12	1.0	21	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	50	38.5	508	1.0	41	57	43.8	599	0.8	30	10	7.7	100	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	10	66.7	107	1.2	57	14	93.3	152	0.9	50	3	20.0	26	0.9	6
75-84	10	38.5	109	1.2	63	7	26.9	67	0.9	25	0	0.0	0	0.0	0
85 and older	30	34.1	292	0.9	28	36	40.9	380	0.8	23	7	8.0	74	0.7	127
Male															
All Males	117	34.1	1,183	1.1	45	178	51.9	1,758	1.0	33	48	14.0	474	1.0	135
Male, Disabled															
All Ages	92	35.0	944	1.1	46	145	55.1	1,456	1.0	33	45	17.1	438	1.0	145
64 or younger	84	33.3	871	1.1	45	141	56.0	1,408	1.0	34	40	15.9	393	1.1	161
65-74	8	100.0	73	1.0	48	3	37.5	36	0.8	16	3	37.5	21	0.5	3
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	1	50.0	12	1.1	24	2	100.0	24	0.5	4
Male, Other Eligibles															
All Ages	25	31.3	239	1.0	42	33	41.3	302	1.0	30	3	3.8	36	0.8	6
64 or younger	0	0.0	0	0.0	0	1	100.0	2	0.5	3	0	0.0	0	0.0	0
65-74	2	22.2	24	2.1	78	2	22.2	21	0.8	21	0	0.0	0	0.0	0
75-84	13	50.0	123	0.7	23	12	46.2	119	0.8	27	0	0.0	0	0.0	0
85 and older	10	22.7	92	1.2	60	18	40.9	160	1.1	34	3	6.8	36	0.8	6
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 2005 file for Wisconsin, released by CMS in 10/2008. This table was produced on 04/23/2009.
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 2005. A total of 1,107 beneficiaries who were in nursing facilities for part of their enrollment and their 10,501 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 2005. 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 2005 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 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.

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR NINTH AND TENTH TOP DRUG GROUPS
SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE[a, b, c, d]
NONDUAL BENEFICIARIES, WISCONSIN, 2005

	DERMATOLOGICAL					ANTIHYPERLIPIDEMIC						
Beneficiary Characteristics	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx $	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx $	All-Year Nursing Facility Residents	Benefit Months Among All-Year Nursing Facility Residents
All	**1,037**	**127.9**	**11,563**	**0.3**	**$13**	**201**	**24.8**	**2,096**	**0.9**	**$60**	**811**	**8,134**
Female												
All Females	681	145.5	7,640	0.3	13	127	27.1	1,326	0.9	62	468	4,786
Female, Disabled												
All Ages	537	158.9	6,042	0.3	12	105	31.1	1,100	0.9	64	338	3,529
64 or younger	506	161.1	5,692	0.3	12	96	30.6	992	0.9	64	314	3,269
65-74	26	162.5	290	0.3	13	7	43.8	84	0.7	56	16	175
75-84	3	60.0	36	0.1	6	2	40.0	24	1.0	94	5	60
85 and older	2	66.7	24	0.1	2	0	0.0	0	0.0	0	3	25
Female, Other Eligibles												
All Ages	144	110.8	1,598	0.3	15	22	16.9	226	0.9	57	130	1,257
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	3
65-74	23	153.3	272	0.4	16	6	40.0	71	1.1	57	15	153
75-84	26	100.0	271	0.3	8	6	23.1	52	0.9	61	26	255
85 and older	95	108.0	1,055	0.3	16	10	11.4	103	0.8	54	88	846
Male												
All Males	356	103.8	3,923	0.3	12	74	21.6	770	0.9	56	343	3,348
Male, Disabled												
All Ages	280	106.5	3,098	0.3	12	60	22.8	659	0.9	54	263	2,599
64 or younger	271	107.5	3,002	0.3	12	55	21.8	606	0.9	56	252	2,500
65-74	5	62.5	48	0.3	19	5	62.5	53	0.7	33	8	66
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	9
85 and older	4	200.0	48	0.4	17	0	0.0	0	0.0	0	2	24
Male, Other Eligibles												
All Ages	76	95.0	825	0.3	14	14	17.5	111	0.9	64	80	749
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	2
65-74	4	44.4	34	0.2	1	1	11.1	12	1.0	113	9	98
75-84	35	134.6	398	0.3	18	10	38.5	81	0.8	61	26	240
85 and older	37	84.1	393	0.3	10	3	6.8	18	1.0	47	44	409
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 2005 file for Wisconsin, released by CMS in 10/2008. This table was produced on 04/23/2009.
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 2005. A total of 1,107 beneficiaries who were in nursing facilities for part of their enrollment and their 10,501 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 2005. 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 2005 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.

USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
AMONG NONDUALS, BY BENEFICIARY CHARACTERISTIC[a,b]
WISCONSIN, 2005

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 $	Part D Excluded Rx $ per Part D Excluded Rx	Part D Excluded Rx $ as a Percentage of All Nondual Rx $	Total Number of Beneficiaries
All	**71,004**	**13.8**	**0.7**	**349,828**	**$12**	**$6,161,210**	**$18**	**2.8**	**513,461**
Age									
5 and younger	11,369	11.9	0.3	28,468	5	503,274	18	4.4	95,305
6-14	10,636	10.1	0.3	32,040	6	655,212	20	1.9	105,350
15-20	7,179	8.0	0.3	23,730	6	562,568	24	2.1	89,255
21-44	24,900	13.8	0.6	115,843	11	1,932,087	17	2.6	181,050
45-64	15,807	39.7	3.5	140,251	60	2,385,892	17	3.3	39,813
65-74	507	38.9	3.0	3,895	40	52,016	13	3.0	1,303
75-84	316	40.5	3.5	2,722	44	33,944	12	2.9	780
85 and older	290	53.9	5.4	2,879	67	36,217	13	4.4	538
Unknown	0	0.0	0.0	0	0	0	0	0.0	67
Basis of Eligibility[c]									
Aged	830	41.6	3.6	7,202	45	89,810	12	3.3	1,995
Disabled	29,828	38.7	3.2	244,249	59	4,529,367	19	2.9	77,160
Adults	20,124	9.8	0.3	58,382	5	942,311	16	2.8	205,949
Children	20,102	8.8	0.2	39,379	3	591,847	15	2.1	227,988
Unknown	120	32.5	1.7	616	21	7,875	13	1.7	369
Gender									
Female	44,486	13.7	0.7	227,457	13	4,098,987	18	3.3	324,010
Male	26,518	14.0	0.6	122,371	11	2,062,223	17	2.1	189,451
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Race									
White	29,191	10.4	0.4	102,646	6	1,697,782	17	2.7	280,058
African American	5,744	9.0	0.2	14,470	4	228,743	16	2.7	64,068
Other/unknown	36,069	21.3	1.4	232,712	25	4,234,685	18	2.8	169,335
Use of Nursing Facilities[d]									
Entire year	623	76.8	13.7	11,127	196	159,125	14	3.4	811
Part year	906	81.8	11.4	12,599	175	193,977	15	3.7	1,107
None	69,475	13.6	0.6	326,102	11	5,808,108	18	2.7	511,543
Maintenance Assistance Status									
Cash	37,405	22.2	1.4	235,510	25	4,204,447	18	2.9	168,359
Medically needy	1,959	10.7	0.4	7,059	7	124,814	18	2.7	18,373
Poverty related	6,999	8.5	0.2	17,789	3	255,304	14	2.2	81,917
Other/unknown	24,641	10.1	0.4	89,470	6	1,576,645	18	2.7	244,812

Source: Data for this table are from the MAX 2005 file for Wisconsin, released by CMS in 10/2008. This table was produced on 04/23/2009.
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 2005.
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.

USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
AMONG NONDUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC[a,b]
WISCONSIN, 2005

Beneficiary Characteristics	Number Rx per Benefit Month	Rx $ per Benefit Month	$ per Rx	Barbiturate $ per Benefit Month	Benzodiazepine $ per Benefit Month	Number of Benefit Months
All	**0.1**	**$2**	**$18**	**$0**	**$0**	**3,346,645**
Age						
5 and younger	0.1	1	18	0	0	530,063
6-14	0.0	1	20	0	0	673,002
15-20	0.0	1	24	0	0	615,611
21-44	0.1	2	17	0	0	1,170,390
45-64	0.4	7	17	0	2	331,713
65-74	0.3	4	13	0	1	12,907
75-84	0.3	4	12	0	1	7,837
85 and older	0.6	7	13	0	1	5,003
Unknown	0.0	0	0	0	0	119
Basis of Eligibility[c]						
Aged	0.4	5	12	0	1	18,859
Disabled	0.3	6	19	0	2	820,147
Adults	0.0	1	16	0	0	1,234,307
Children	0.0	0	15	0	0	1,270,046
Unknown	0.2	2	13	0	1	3,286
Gender						
Female	0.1	2	18	0	0	2,136,438
Male	0.1	2	17	0	0	1,210,207
Unknown	0.0	0	0	0	0	0
Race						
White	0.1	1	17	0	0	1,741,211
African American	0.0	1	16	0	0	298,528
Other/unknown	0.2	3	18	0	1	1,306,906
Use of Nursing Facilities[d]						
Entire year	1.4	20	14	0	3	8,134
Part year	1.2	18	15	0	4	10,501
None	0.1	2	18	0	0	3,328,010
Maintenance Assistance Status						
Cash	0.2	4	18	0	1	1,192,413
Medically needy	0.1	1	18	0	0	97,677
Poverty related	0.0	1	14	0	0	429,461
Other/unknown	0.1	1	18	0	0	1,627,094

Source: Data for this table are from the MAX 2005 file for Wisconsin, released by CMS in 10/2008. This table was produced on 04/23/2009.
a. Table ND.12 includes the beneficaries 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 2005.
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 beneficaries 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.

USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D FOR SELECTED DRUG CATEGORIES AMONG NONDUALS[a,b,c]
WISCONSIN, 2005

Drug Category	Number of Users	Rx $ per User	Total Rx $	Rx $ as a Percentage of All Part D Excluded Rx $	Total Number Rx.	$ per Rx	Number Rx as a Percentage of All Part D Excluded Rx
All	**93,356**	**$66**	**$6,161,210**	**100.0**	**349,828**	**$18**	**100.0**
Anorexia or weight loss/gain	632	182	114,940	1.9	1,917	60	0.5
Fertility drugs	3	289	866	0.0	7	124	0.0
Drugs for cosmetic purposes	273	18	4,892	0.1	398	12	0.1
Cough and cold medications	21,237	42	886,948	14.4	35,253	25	10.1
Vitamins and minerals	6,689	99	659,223	10.7	40,595	16	11.6
Non-prescription drugs	41,180	51	2,094,106	34.0	143,353	15	41.0
Barbiturates	808	74	59,675	1.0	6,679	9	1.9
Benzodiazepines	20,399	78	1,595,166	25.9	111,449	14	31.9
Other Part D Excl Rx Drugs	2,135	349	745,394	12.1	10,177	73	2.9

Source: Data for this table are from the MAX 2005 file for Wisconsin, released by CMS in 10/2008. This table was produced on 04/23/2009.
a. Table ND.13 includes the beneficaries represented by Cell K of Table 1. Beneficiaries include all nondual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2005. A user is a beneficiary who had at least one prescription filled for a Part D excluded drug in 2005. 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.

CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY[a, b]

NONDUAL BENEFICIARIES, WISCONSIN, 2005

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Blind/ Disabled	Adults	Children	Other/ Unknown	All	Aged	Blind/ Disabled	Adults	Children	Other/ Unknown
All	802,504	2,011	77,366	292,113	430,645	369	7,596,603	19,119	835,735	2,624,419	4,114,034	3,296
Age												
5 and younger	182,412	0	5,713	2	176,697	0	1,690,492	0	60,020	9	1,630,463	0
6-14	189,158	1	13,960	31	175,166	0	1,919,191	1	159,246	225	1,759,719	0
15-20	124,572	2	9,907	36,863	77,793	7	1,143,812	4	110,227	315,716	717,792	73
21-44	252,752	7	22,260	229,462	916	107	2,323,303	40	241,919	2,074,488	5,892	964
45-64	50,891	27	24,884	25,722	4	254	493,480	84	257,383	233,730	34	2,249
65-74	1,323	731	569	21	1	1	13,222	6,877	6,161	162	12	10
75-84	784	719	55	10	0	0	7,909	7,233	601	75	0	0
85 and older	544	524	18	2	0	0	5,072	4,880	178	14	0	0
Unknown	68	0	0	0	68	0	122	0	0	0	122	0
Gender												
Female	489,345	1,284	37,769	234,750	215,173	369	4,645,167	12,322	413,750	2,155,889	2,059,910	3,296
Male	313,159	727	39,597	57,363	215,472	0	2,951,436	6,797	421,985	468,530	2,054,124	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	421,712	806	7,300	197,463	215,990	153	3,909,047	7,335	66,341	1,786,621	2,047,372	1,378
African American	145,790	199	1,627	47,842	96,097	25	1,448,184	1,990	14,109	450,361	981,510	214
Other/unknown	235,002	1,006	68,439	46,808	118,558	191	2,239,372	9,794	755,285	387,437	1,085,152	1,704
Use of Nursing Facilities[c]												
Entire year	811	209	601	1	0	0	8,134	2,004	6,128	2	0	0
Part year	1,108	89	991	25	3	0	10,703	753	9,678	254	18	0
None	800,585	1,713	75,774	292,087	430,642	369	7,577,766	16,362	819,929	2,624,163	4,114,016	3,296
Maintenance Assistance Status												
Cash	265,447	653	64,021	74,123	126,650	0	2,611,713	6,837	707,091	684,812	1,212,973	0
Medically needy	30,686	71	1,377	2,209	27,029	0	266,946	556	10,366	13,422	242,602	0
Poverty related	147,755	3	1,522	9,809	136,052	369	1,415,763	26	14,489	72,116	1,325,836	3,296
Other/unknown	358,616	1,284	10,446	205,972	140,914	0	3,302,181	11,700	103,789	1,854,069	1,332,623	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	318,597	1,977	74,382	126,724	115,147	367	2,768,816	18,739	802,283	995,422	949,100	3,272
FFS part year, with Rx claims	70,148	17	2,103	38,385	29,641	2	715,341	191	23,989	386,433	304,704	24
FFS part year, no Rx claims	124,716	1	675	40,840	83,200	0	1,190,201	12	7,391	378,815	803,983	0
MC all year, with Rx claims	4,987	0	10	3,740	1,237	0	54,357	0	66	41,217	13,074	0
MC all year, no Rx claims	284,056	16	196	82,424	201,420	0	2,867,888	177	2,006	822,532	2,043,173	0

Source: Data for this table are from the MAX 2005 file for Wisconsin, released by CMS in 10/2008. This table was produced on 04/23/2009.

a. Table A.1 includes the beneficiaries represented by Cell J of Table 1. Benefit months are months during which beneficiaries had pharmacy benefit coverage.
b. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services. The total includes some beneficiaries with unknown basis of eligibility and some whose age categories are not consistent with basis of eligibility.
c. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.
Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; FFS = fee-for-service pharmacy benefit; MAX = Medicaid Analytic Extract; MC = managed care; Rx = pharmacy benefit.

APPENDIX TABLE A.2

MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS[a]

NONDUAL BENEFICIARIES, WISCONSIN, 2005

	Beneficiaries and Benefit Months in Cell J of Table 1		Included in Cell K of Table 1		Excluded from Cell K of Table 1	
	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months
All	**802,504**	**7,596,603**	**513,461**	**3,346,645**	**0**	**4,249,958**
Fee-for-service (FFS) all year	318,597	2,768,816	318,597	2,768,816	0	0
FFS part year, with Rx claims	70,148	715,341	70,148	263,108	0	452,233
FFS part year, with no Rx claims	124,716	1,190,201	124,716	314,721	0	875,480
Managed care (MC) all year, with Rx claims	4,987	54,357	0	0	0	54,357
MC all year, with no Rx claims	284,056	2,867,888	0	0	0	2,867,888

Source: Data for this table are from the MAX 2005 file for Wisconsin, released by CMS in 10/2008. This table was produced on 04/23/2009.

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

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

Nondual Beneficiaries