

STATISTICAL COMPENDIUM: MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2003 WYOMING

LIST OF TABLES

OVERVIEW OF STUDY POPULATION

TABLE 1. OVERVIEW OF BENEFICIARY SELECTION CRITERIA FOR STUDY POPULATION

FOR ALL MEDICAID BENEFICIARIES

- TABLE 2. CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY
- TABLE 3. ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC
- TABLE 4. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC
- TABLE 5. AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC
- TABLE 6. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY
- TABLE 7. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP

FOR ALL NONDUAL BENEFICIARIES

- TABLE ND.2. CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY
- TABLE ND.3. ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC
- TABLE ND.4. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC
- TABLE ND.5. AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC
- TABLE ND.6. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY
- TABLE ND.7-7D. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP
- TABLE ND.8. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS, BY BENEFICIARY CHARACTERISTIC
- TABLE ND.9. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS, BY BRAND STATUS AND THERAPEUTIC CATEGORY
- TABLE ND.10-10D. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY TOP 10 DRUG GROUP
- TABLE ND.11. USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D AMONG NONDUALS, BY BENEFICIARY CHARACTERISTIC
- TABLE ND.12. USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D AMONG NONDUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC
- TABLE ND.13. USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D FOR SELECTED DRUG CATEGORIES AMONG NONDUALS

FOR DUAL ELIGIBLE BENEFICIARIES

TABLE D.2. CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY

TABLE D.3. ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC

TABLE D.4. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT *PER BENEFIT MONTH*, BY BENEFICIARY CHARACTERISTIC

TABLE D.5. AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC

TABLE D.6. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY

TABLE D.7-7D. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP

TABLE D.8. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS, BY BENEFICIARY CHARACTERISTIC

TABLE D.9. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS, BY BRAND STATUS AND THERAPEUTIC CATEGORY

TABLE D.10-10D. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY TOP 10 DRUG GROUP

TABLE D.11. USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D AMONG DUALS, BY BENEFICIARY CHARACTERISTIC

TABLE D.12. USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D AMONG DUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC

TABLE D.13. USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D FOR SELECTED DRUG CATEGORIES AMONG DUALS

SUPPLEMENTAL TABLES

SUPPLEMENTAL TABLE 1. MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES

SUPPLEMENTAL TABLE 1A. MEDICAID PHARMACY REIMBURSEMENT FOR DISABLED DUAL ELIGIBLE BENEFICIARIES UNDER AGE 65

SUPPLEMENTAL TABLE 1B. MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 AND OLDER

SUPPLEMENTAL TABLE 1C. MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 TO 74

SUPPLEMENTAL TABLE 1D. MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 75 TO 84

SUPPLEMENTAL TABLE 1E. MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 85 AND OLDER

APPENDIX TABLES

APPENDIX TABLE A.1. CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY, NONDUAL BENEFICIARIES

APPENDIX TABLE A.2. MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS, NONDUAL BENEFICIARIES

APPENDIX TABLE A.3. CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY, DUAL ELIGIBLE BENEFICIARIES

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

TABLE D.2
 CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a,b}
 DUAL ELIGIBLE BENEFICIARIES, WYOMING, 2003

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown
All	6,652	3,650	2,922	78	2	0	68,712	36,046	31,981	661	24	0
Age												
5 and younger	2	0	2	0	0	0	13	0	13	0	0	0
6-14	4	0	2	0	2	0	48	0	24	0	24	0
15-20	17	0	16	1	0	0	164	0	163	1	0	0
21-44	1,454	1	1,392	61	0	0	15,817	12	15,273	532	0	0
45-64	1,489	0	1,476	13	0	0	16,311	0	16,219	92	0	0
65-74	1,175	1,144	28	3	0	0	12,390	12,097	257	36	0	0
75-84	1,264	1,260	4	0	0	0	12,621	12,593	28	0	0	0
85 and older	1,247	1,245	2	0	0	0	11,348	11,344	4	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	4,221	2,631	1,546	44	0	0	43,755	26,410	16,980	365	0	0
Male	2,431	1,019	1,376	34	2	0	24,957	9,636	15,001	296	24	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	5,809	3,186	2,558	63	2	0	59,665	31,077	28,040	524	24	0
African American	64	27	36	1	0	0	705	280	416	9	0	0
Other/unknown	779	437	328	14	0	0	8,342	4,689	3,525	128	0	0
Use of Nursing Facilities^c												
Entire year	1,545	1,424	121	0	0	0	15,066	13,749	1,317	0	0	0
Part year	744	660	84	0	0	0	6,447	5,585	862	0	0	0
None	4,363	1,566	2,717	78	2	0	47,199	16,712	29,802	661	24	0
Maintenance Assistance Status												
Cash	2,428	911	1,471	46	0	0	26,061	10,085	15,583	393	0	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0
Poverty-related	71	32	29	9	1	0	713	327	307	67	12	0
Other/unknown	4,153	2,707	1,422	23	1	0	41,938	25,634	16,091	201	12	0
Dual Medicare Status^d												
Full dual, all year	6,456	3,527	2,852	75	2	0	66,651	34,771	31,228	628	24	0
Full dual, part year	196	123	70	3	0	0	2,061	1,275	753	33	0	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	6,652	3,650	2,922	78	2	0	68,712	36,046	31,981	661	24	0
FFS part year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
FFS part year, no Rx claims	0	0	0	0	0	0	0	0	0	0	0	0

Source: Data for this table are from the MAX 2003 file for Wyoming, released by CMS in 05/2007. This table was produced on 11/01/2007.

- a. Table D.2 includes the beneficiaries represented by Cell G of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- b. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services. The total includes some beneficiaries with unknown basis of eligibility and some whose age categories are not consistent with basis of eligibility.
- c. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.
- d. The "Full dual, all year" group contains beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefits during all months of Medicaid enrollment in 2003. The "Full dual, part year" group contains beneficiaries who had such benefits for some, but not all, months of their enrollment. Refer to footnote g of Table 1 for more information about how we determined dual eligibility status.

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

TABLE D.3
ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC^{a, b}
DUAL ELIGIBLE BENEFICIARIES, WYOMING, 2003

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	87.7 %	48.5	\$2,971	\$61	\$21,373	13.9 %	6,652
Age							
5 and younger	100.0	61.5	3,598	59	127,690	2.8	2
6-14	100.0	49.5	5,227	106	25,714	20.3	4
15-20	76.5	24.5	1,894	77	11,447	16.5	17
21-44	81.6	32.8	2,937	90	23,209	12.7	1,454
45-64	88.2	54.1	3,968	73	23,771	16.7	1,489
65-74	84.8	51.2	2,837	55	14,895	19.0	1,175
75-84	91.2	56.0	2,743	49	20,382	13.5	1,264
85 and older	93.7	50.2	2,183	44	23,430	9.3	1,247
Unknown	0.0	0.0	0	0	0	0.0	0
Basis of Eligibility^e							
Aged	90.1	52.6	2,588	49	19,763	13.1	3,650
Disabled	84.9	44.1	3,478	79	23,853	14.6	2,922
Adults	84.6	20.7	1,827	88	4,202	43.5	78
Children	100.0	64.0	5,728	90	7,225	79.3	2
Unknown	0.0	0.0	0	0	0	0.0	0
Gender							
Female	91.4	54.0	3,141	58	20,706	15.2	4,221
Male	81.4	38.9	2,676	69	22,531	11.9	2,431
Unknown	0.0	0.0	0	0	0	0.0	0
Race							
White	89.7	51.1	3,123	61	22,751	13.7	5,809
African American	87.5	38.5	2,197	57	14,276	15.4	64
Other/unknown	73.4	29.7	1,902	64	11,685	16.3	779
Use of Nursing Facilities^f							
Entire year	97.0	68.5	3,316	48	32,824	10.1	1,545
Part year	93.1	51.6	2,585	50	18,962	13.6	744
None	83.5	40.9	2,914	71	17,729	16.4	4,363
Maintenance Assistance Status							
Cash	80.1	32.5	2,205	68	5,401	40.8	2,428
Medically needy	0.0	0.0	0	0	0	0.0	0
Poverty related	80.3	22.9	1,814	79	5,173	35.1	71
Other/unknown	92.3	58.3	3,438	59	30,988	11.1	4,153

Source: Data for this table are from the MAX 2003 file for Wyoming, released by CMS in 05/2007. This table was produced on 11/01/2007.

a. Table D.3 includes beneficiaries represented by Cell G of Table 1.

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

c. 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 D.4
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a, b}
 DUAL ELIGIBLE BENEFICIARIES, WYOMING, 2003

Beneficiary Characteristics	Number of Rx, Percentage with:										Beneficiaries	Number					
	Mean Number of Rx	Mean Rx \$	Rx \$ as a Percentage of All Medicaid FFS ^c	13.9 %	12.3 %	None	More than 0, but 1 or Less	15.2 %	More than 1, but 2 or Less	9.5 %			More than 2, but 5 or Less	27.5 %	More than 5, but 10 or Less	26.7 %	More than 10
All	4.7	\$288	13.9 %	12.3 %	0.0	15.2 %	0.0	0.0	0.0	0.0	27.5 %	26.7 %	8.7 %	\$2,069	6,652	68,712	
Age																	
5 and younger	9.5	554	2.8	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	100.0	0.0	19,645	2	13	
6-14	4.1	436	20.3	0.0	25.0	0.0	50.0	0.0	0.0	25.0	0.0	25.0	0.0	2,143	4	48	
15-20	2.5	196	16.5	23.5	17.6	11.8	47.1	0.0	0.0	0.0	0.0	0.0	0.0	1,187	17	164	
21-44	3.0	270	12.7	18.4	26.3	11.8	26.5	14.2	11.8	14.2	26.5	14.2	2.9	2,134	1,454	15,817	
45-64	4.9	362	16.7	11.8	14.9	9.9	26.5	25.7	9.9	25.7	24.1	27.0	11.2	2,170	1,489	16,311	
65-74	4.9	269	19.0	15.2	14.2	8.8	24.1	32.7	8.1	28.6	31.8	36.6	11.8	1,413	1,175	12,390	
75-84	5.6	275	13.5	8.8	10.0	8.1	28.6	0.0	0.0	0.0	0.0	0.0	0.0	2,041	1,264	12,621	
85 and older	5.5	240	9.3	6.3	8.8	8.5	31.8	0.0	0.0	0.0	0.0	0.0	7.9	2,575	1,247	11,348	
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0	
Basis of Eligibility^e																	
Aged	5.3	262	13.1	9.9	10.8	8.5	28.3	32.3	8.5	28.3	10.1	32.3	10.1	2,001	3,650	36,046	
Disabled	4.0	318	14.6	15.1	20.2	10.7	26.5	20.3	10.7	26.5	7.3	20.3	7.3	2,179	2,922	31,981	
Adults	2.4	216	43.5	15.4	32.1	12.8	30.8	9.0	12.8	30.8	0.0	9.0	0.0	496	78	661	
Children	5.3	477	79.3	0.0	0.0	0.0	50.0	50.0	0.0	50.0	0.0	50.0	0.0	602	2	24	
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0	
Gender																	
Female	5.2	303	15.2	8.6	13.2	9.1	28.8	29.8	9.1	28.8	10.4	29.8	10.4	1,998	4,221	43,755	
Male	3.8	261	11.9	18.6	18.6	10.2	25.3	21.5	10.2	25.3	5.9	21.5	5.9	2,195	2,431	24,957	
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0	
Race																	
White	5.0	304	13.7	10.3	14.3	9.1	28.5	28.2	9.1	28.5	9.6	28.2	9.6	2,215	5,809	59,665	
African American	3.5	200	15.4	12.5	17.2	12.5	23.4	32.8	12.5	23.4	1.6	32.8	1.6	1,296	64	705	
Other/unknown	2.8	178	16.3	26.6	22.1	12.2	20.9	15.3	12.2	20.9	3.0	15.3	3.0	1,091	779	8,342	
use of nursing Facilities^f																	
Entire year	7.0	340	10.1	3.0	4.1	6.3	28.2	41.9	6.3	28.2	16.4	41.9	16.4	3,366	1,545	15,066	
Part year	6.0	298	13.6	6.9	9.1	7.5	30.6	33.6	7.5	30.6	12.2	33.6	12.2	2,188	744	6,447	
None	3.8	269	16.4	16.5	20.1	11.0	26.8	20.2	11.0	26.8	5.4	20.2	5.4	1,639	4,363	47,199	
Maintenance Assistance Status																	
Cash	3.0	206	40.8	19.9	24.1	12.1	25.8	14.8	12.1	25.8	3.3	14.8	3.3	503	2,428	26,061	
Medically needy	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0	
Poverty related	2.3	181	35.1	19.7	36.6	8.5	23.9	11.3	8.5	23.9	0.0	11.3	0.0	515	71	713	
Other/unknown	5.8	341	11.1	7.7	9.6	8.0	28.6	34.0	8.0	28.6	12.1	34.0	12.1	3,069	4,153	41,938	

Table D4

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2003 file for Wyoming, released by CMS in 05/2007. This table was produced on 11/01/2007.

- a. Table D.4 includes the beneficiaries represented by Cell G of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
 - b. The Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
 - c. 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 D.5
 AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, WYOMING, 2003

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	4.7	\$288	\$61	2.0	\$220	\$109	0.3	\$12	\$41	2.4	\$55	\$23
Age												
5 and younger	9.5	554	59	2.4	251	105	0.2	2	11	6.9	301	43
6-14	4.1	436	106	1.9	400	211	0.6	10	17	1.6	25	16
15-20	2.5	196	77	1.3	130	101	0.2	9	55	1.1	57	53
21-44	3.0	270	90	1.5	221	152	0.2	12	63	1.4	37	27
45-64	4.9	362	73	2.2	283	126	0.3	18	65	2.4	61	25
65-74	4.9	269	55	2.1	199	97	0.3	11	41	2.5	58	23
75-84	5.6	275	49	2.3	199	88	0.4	10	27	3.0	66	22
85 and older	5.5	240	44	2.1	173	81	0.4	8	20	3.0	57	19
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Basis of Eligibility^d												
Aged	5.3	262	49	2.2	191	89	0.3	10	28	2.8	61	22
Disabled	4.0	318	79	1.9	252	135	0.2	15	64	1.9	50	26
Adults	2.4	216	88	1.0	189	186	0.1	2	19	1.3	25	19
Children	5.3	477	90	3.0	451	152	1.0	17	17	1.4	10	7
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Gender												
Female	5.2	303	58	2.2	230	104	0.3	12	36	2.7	60	23
Male	3.8	261	69	1.6	201	122	0.2	13	54	1.9	47	25
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Race												
White	5.0	304	61	2.1	232	109	0.3	13	40	2.5	59	23
African American	3.5	200	57	1.5	148	100	0.1	13	85	1.8	38	21
Other/unknown	2.8	178	64	1.2	136	112	0.1	8	54	1.4	34	24
Use of Nursing Facilities^e												
Entire year	7.0	340	48	2.7	245	90	0.5	12	24	3.8	82	22
Part year	6.0	298	50	2.4	225	94	0.4	9	23	3.2	65	20
None	3.8	269	71	1.7	211	122	0.2	13	58	1.8	45	25
Maintenance Assistance Status												
Cash	3.0	206	68	1.4	161	118	0.2	9	59	1.5	35	23
Medically needy	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Poverty related	2.3	181	79	1.2	149	126	0.1	8	71	1.0	23	24
Other/unknown	5.8	341	59	2.4	257	106	0.4	14	37	2.9	68	23

Source: Data for this table are from the MAX 2003 file for Wyoming, released by CMS in 05/2007. This table was produced on 11/01/2007.

- a. Table D.5 includes the beneficiaries represented by Cell G of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- b. The Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
- c. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In Wyoming, 1.3 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.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.

TABLE D.6

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, WYOMING, 2003

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				Users ^e								
	Patented		Generic		Patented		Generic		Patented		Generic		Total Number of Rx	Total Rx \$	Number	Percentage of Dual Benes	Number of Benefit Months
	Total	Off-Patent	Brand-Name	Brand-Name	Total	Off-Patent	Brand-Name	Brand-Name	Total	Off-Patent	Brand-Name	Brand-Name					
Anti-infective Agents	0.4	0.2	0.0	0.2	\$21	\$16	\$0	\$5	\$58	\$93	\$69	\$27	15,126	\$881,828	3,789	57.0 %	41,247
Biologics	0.1	0.1	0.0	0.0	25	3	12	9	193	31	1,807	688	221	42,681	157	2.4	1,737
Antineoplastic Agents	0.5	0.3	0.0	0.3	189	171	2	16	356	652	210	62	1,204	428,515	210	3.2	2,271
Endocrine/Metabolic Drugs	1.0	0.5	0.2	0.4	45	34	3	8	43	69	22	19	34,989	1,501,902	3,143	47.2	33,567
Cardiovascular Agents	1.7	0.5	0.1	1.0	56	35	2	19	34	68	21	18	66,102	2,223,040	3,759	56.5	39,469
Respiratory Agents	0.8	0.5	0.0	0.3	44	36	1	7	58	80	65	23	23,218	1,345,993	2,774	41.7	30,269
Gastrointestinal Agents	0.8	0.3	0.0	0.4	57	40	1	16	75	129	141	36	23,079	1,721,420	2,815	42.3	30,039
Genitourinary Agents	0.6	0.5	0.0	0.1	44	41	0	3	69	80	31	25	8,570	595,411	1,251	18.8	13,477
CNS Drugs	1.3	0.8	0.0	0.5	119	101	4	13	91	134	131	25	53,761	4,880,294	3,882	58.4	41,078
Stimulants/Anti-obesity/Anorexia	0.5	0.3	0.1	0.2	53	43	3	7	99	136	62	40	903	89,383	151	2.3	1,676
Miscellaneous Psychological/Neurological Agents	0.7	0.7	0.0	0.0	151	151	0	0	211	213	0	22	2,273	478,548	322	4.8	3,162
Analgesics and Anesthetics	0.9	0.3	0.0	0.6	55	42	2	11	59	141	58	19	34,637	2,036,089	3,468	52.1	36,981
Neuromuscular Agents	1.0	0.5	0.1	0.5	86	64	6	17	84	136	59	36	23,994	2,009,629	2,130	32.0	23,275
Nutritional Products	0.7	0.0	0.0	0.6	15	0	1	14	22	25	21	22	10,665	235,965	1,510	22.7	15,516
Hematological Agents	0.9	0.2	0.3	0.4	46	35	5	7	53	170	18	17	11,830	628,625	1,300	19.5	13,522
Topical Products	0.4	0.2	0.0	0.2	16	10	1	5	41	62	39	23	10,097	410,425	2,346	35.3	25,980
Miscellaneous Products	0.4	0.1	0.0	0.2	67	52	9	6	175	356	336	28	1,177	205,407	292	4.4	3,078
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	19	0	0	0	71	0	0	0	658	46,979	234	3.5	2,531
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.	322,504	19,762,134	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2003 file for Wyoming, released by CMS in 05/2007. This table was produced on 11/01/2007.

a. Table D.6 includes the beneficiaries represented by Cell G of Table 1. A beneficiary who used drugs from two or more categories was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

c. For information about these therapeutic categories, see Wolters Kluwer Health, <http://www.medisp.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 Wyoming, 1.3 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.medisp.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 2003.

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 D.7

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, WYOMING, 2003

Top 10 Drug Groups	Users			Among Users		
	Total Medicaid Rx \$	Number of Users	Percentage of Dual Beneficiaries	Number of Benefit Months	Number of Rx per Benefit Month	Rx \$ per Benefit Month
ANTIPSYCHOTICS	\$2,843,416	1,918	28.8 %	20,596	0.7	\$188
ANTIDEPRESSANTS	1,791,826	3,693	55.5	39,703	0.7	65
ANTICONVULSANT	1,568,553	1,787	26.9	19,736	0.8	97
ULCER DRUGS	1,355,058	3,062	46.0	33,361	0.5	80
ANALGESICS - Narcotic	1,164,308	4,252	63.9	45,687	0.5	51
ANTIDIABETIC	885,118	1,782	26.8	19,379	0.7	63
ANTIASTHMATIC	832,887	2,476	37.2	26,773	0.5	68
ANALGESICS - ANTI-INFLAMMATORY	740,045	1,799	27.0	20,040	0.4	83
ANTIHYPERTENSIVE	669,606	2,374	35.7	25,285	0.7	39
ANTIHYPERLIPIDEMIC	616,225	952	14.3	10,486	0.6	93
Total	12,467,042	24,095		261,046	n.a.	n.a.

Source: Data for this table are from the MAX 2003 file for Wyoming, released by CMS in 05/2007. This table was produced on 11/01/2007.

a. Table D.7 includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2003. 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 2003. 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; n.a. = not applicable.

TABLE D.7A
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS COMBINED
 AND FIRST AND SECOND GROUPS SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, WYOMING, 2003

Beneficiary Characteristics	All Top 10 Drug Groups					ANTIPSYCHOTICS					ANTIDEPRESSANTS				
	Number of Rx	Rx \$	Number of Users	Users as % of Dual Benes	Mean Number of Rx per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Users	Users as % of Dual Benes	Mean Number of Rx per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Users	Users as % of Dual Benes	Mean Number of Rx per Benefit Month
All	157,715	\$12,467,042	1,918	28.8 %	0.7	20,596	3,693	55.5 %	0.7	39,703	0.7	\$45			
Female	107,859	8,151,965	1,151	27.3	0.7	12,467	2,613	61.9	0.7	28,215	0.7	46			
Disabled	41,898	3,879,706	517	33.4	0.7	5,885	1,150	74.4	0.7	12,919	0.7	49			
5 and younger	4	132	0	0.0	0.0	0	1	100.0	1.0	1	0.0	42			
6-14	9	202	0	0.0	0.0	0	0	0.0	0.0	0	0.0	0			
15-20	40	2,142	0	0.0	0.0	0	3	33.3	0.2	31	0.2	14			
21-44	13,032	1,339,327	240	39.5	0.6	2,709	434	71.5	0.6	4,915	0.6	49			
45-64	28,271	2,502,604	273	30.2	0.7	3,156	700	77.3	0.7	7,857	0.7	50			
65-74	497	32,652	3	16.7	1.3	18	12	66.7	0.9	115	0.9	44			
75-84	41	2,496	0	0.0	0.0	0	0	0.0	0.0	0	0.0	0			
85 and older	4	151	1	100.0	0.5	2	0	0.0	0.0	0	0.0	0			
Other Eligibles	65,961	4,272,259	634	23.7	0.7	6,582	1,463	54.7	0.7	15,296	0.7	42			
5 and younger	0	0	0	0.0	0.0	0	0	0.0	0.0	0	0.0	0			
6-14	0	0	0	0.0	0.0	0	0	0.0	0.0	0	0.0	0			
15-20	0	0	0	0.0	0.0	0	0	0.0	0.0	0	0.0	0			
21-44	356	33,785	9	24.3	0.4	103	20	54.1	0.5	218	0.5	29			
45-64	35	2,053	1	20.0	1.0	4	5	100.0	0.3	35	0.3	24			
65-74	20,177	1,422,991	117	15.9	0.7	1,302	418	56.9	0.7	4,628	0.7	41			
75-84	24,216	1,541,346	243	27.3	0.8	2,527	515	57.9	0.7	5,307	0.7	42			
85 and older	21,177	1,272,084	264	26.2	0.7	2,646	505	50.1	0.8	5,108	0.8	45			
Male	49,856	4,315,077	767	31.6	0.8	8,129	1,080	44.4	0.7	11,488	0.7	44			
Disabled	27,576	2,852,744	499	36.3	0.8	5,645	629	45.7	0.7	7,055	0.7	47			
5 and younger	6	135	0	0.0	0.0	0	0	0.0	0.0	0	0.0	0			
6-14	2	54	0	0.0	0.0	0	0	0.0	0.0	0	0.0	0			
15-20	97	14,182	2	28.6	1.0	24	3	42.9	0.7	36	0.7	155			
21-44	13,041	1,500,721	302	38.5	0.8	3,374	343	43.7	0.6	3,863	0.6	44			
45-64	14,314	1,329,764	194	34.0	0.9	2,235	280	49.0	0.7	3,123	0.7	49			
65-74	116	7,888	1	10.0	0.3	12	3	30.0	0.3	33	0.3	22			
75-84	0	0	0	0.0	0.0	0	0	0.0	0.0	0	0.0	0			
85 and older	0	0	0	0.0	0.0	0	0	0.0	0.0	0	0.0	0			
Other Eligibles	22,280	1,462,333	268	25.4	0.8	2,484	451	42.7	0.7	4,433	0.7	40			
5 and younger	0	0	0	0.0	0.0	0	0	0.0	0.0	0	0.0	0			
6-14	11	1,007	0	0.0	0.0	0	0	0.0	0.0	0	0.0	0			
15-20	0	0	0	0.0	0.0	0	0	0.0	0.0	0	0.0	0			
21-44	332	21,674	3	12.0	0.7	26	18	72.0	0.3	177	0.3	18			
45-64	85	4,903	2	25.0	1.0	24	0	0.0	0.0	0	0.0	0			
65-74	9,708	666,211	76	18.4	0.8	787	156	37.9	0.8	1,641	0.8	44			
75-84	7,796	514,446	111	29.9	0.7	1,010	171	46.1	0.7	1,660	0.7	37			
85 and older	4,348	254,092	76	32.1	0.7	637	106	44.7	0.8	955	0.8	44			
Unknown	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 2003 file for Wyoming, released by CMS in 05/2007. This table was produced on 11/01/2007.

a. Table D.7A includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2003. 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 2003. 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(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 D.7B
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR THIRD TO FIFTH TOP DRUG GROUPS
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, WYOMING, 2003

Beneficiary Characteristics	ANTICONVULSANT				ULCER DRUGS				ANALGESICS - Narcotic						
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean of Rx per Benefit Month	Mean of Rx per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean of Rx per Benefit Month	Mean of Rx per Benefit Month	Number of Benefit Months Among Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean of Rx per Benefit Month	
All	1,787	26.9 %	19,736	0.8	\$80	3,062	46.0 %	33,361	0.5	\$41	4,252	63.9 %	45,687	0.5	\$26
Female	1,101	26.1	12,155	0.8	74	2,169	51.4	23,725	0.5	41	3,100	73.4	33,468	0.5	26
Disabled	664	42.9	7,495	0.8	88	809	52.3	9,180	0.4	42	1,264	81.8	14,337	0.5	27
5 and younger	0	0.0	0	0.0	0	1	100.0	1	1.0	13	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	1	100.0	12	0.2	10	0	0.0	0	0.0	0
15-20	1	11.1	12	0.1	16	3	33.3	36	0.3	16	4	44.4	45	0.2	1
21-44	281	46.3	3,174	0.8	99	221	36.4	2,522	0.4	38	430	70.8	4,890	0.4	23
45-64	379	41.9	4,297	0.8	80	562	62.1	6,397	0.5	45	817	90.3	9,286	0.5	29
65-74	2	11.1	10	1.0	22	15	83.3	150	0.4	24	13	72.2	116	0.4	28
75-84	0	0.0	0	0.0	0	5	125.0	60	0.3	15	0	0.0	0	0.0	0
85 and older	1	100.0	2	0.5	9	1	100.0	2	0.5	13	0	0.0	0	0.0	0
Other Eligibles	437	16.3	4,660	0.8	51	1,360	50.8	14,545	0.5	40	1,836	68.6	19,131	0.6	25
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	10	27.0	117	0.5	118	7	18.9	76	0.5	50	30	81.1	299	0.3	8
45-64	2	40.0	22	0.2	8	1	20.0	10	0.2	7	2	40.0	20	0.6	9
65-74	169	23.0	1,873	0.8	60	397	54.0	4,448	0.5	42	555	75.5	6,141	0.5	23
75-84	163	18.3	1,710	0.8	48	469	52.8	5,056	0.5	39	610	68.6	6,368	0.6	24
85 and older	93	9.2	938	0.7	33	486	48.2	4,955	0.6	40	639	63.4	6,303	0.6	28
Male	686	28.2	7,581	0.9	89	893	36.7	9,636	0.5	40	1,152	47.4	12,219	0.4	26
Disabled	486	35.3	5,583	0.9	100	438	31.8	4,963	0.5	40	627	45.6	7,026	0.4	26
5 and younger	0	0.0	0	0.0	0	1	100.0	12	0.1	2	2	200.0	24	0.2	4
6-14	0	0.0	0	0.0	0	1	100.0	12	0.1	3	1	100.0	12	0.1	1
15-20	3	42.9	36	0.9	104	1	14.3	12	1.0	29	2	28.6	24	0.1	2
21-44	272	34.6	3,125	0.9	109	200	25.5	2,274	0.4	36	304	38.7	3,405	0.4	23
45-64	210	36.8	2,413	0.9	89	230	40.3	2,601	0.6	45	313	54.8	3,513	0.4	29
65-74	1	10.0	9	0.7	52	5	50.0	52	0.3	23	5	50.0	48	0.4	8
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	200	19.0	1,998	0.8	56	455	43.1	4,673	0.6	39	525	49.8	5,193	0.5	25
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	3	12.0	27	0.6	45	10	40.0	106	0.2	15	28	112.0	287	0.6	47
45-64	0	0.0	0	0.0	0	3	37.5	27	0.7	104	10	125.0	82	0.2	9
65-74	83	20.1	905	1.0	67	174	42.2	1,853	0.6	41	204	49.5	2,190	0.5	25
75-84	63	17.0	588	0.8	55	166	44.7	1,708	0.6	39	172	46.4	1,665	0.5	22
85 and older	51	21.5	478	0.8	37	102	43.0	979	0.6	39	111	46.8	969	0.5	27
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Table D7B

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2003 file for Wyoming, released by CMS in 05/2007. This table was produced on 11/01/2007.

a. Table D.7B includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2003. 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 2003. 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) = 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 D.7C
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR SIXTH TO EIGHTH TOP DRUG GROUPS
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, WYOMING, 2003

Beneficiary Characteristics	ANTI-DIABETIC				ANTI-ASTHMATIC				ANALGESICS - ANTI-INFLAMMATORY				
	Number of Users	Users as % of Dual Benefes	Number of Benefit Months Among Users	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Rx \$ per Benefit Month	
All	1,782	26.8 %	19,379	0.7	2,476	37.2 %	26,773	0.5	1,799	27.0 %	20,040	0.4	\$37
Female	1,248	29.6	13,719	0.7	1,713	40.6	18,764	0.4	1,319	31.2	14,699	0.4	40
Disabled	384	24.8	4,336	0.7	681	44.0	7,755	0.4	578	37.4	6,643	0.4	44
5 and younger	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	5	55.6	58	0.2	14	22.2	24	0.1	2
21-44	70	11.5	793	0.6	224	36.9	2,554	0.3	191	31.5	2,209	0.3	20
45-64	307	33.9	3,459	0.7	440	48.6	5,041	0.4	373	41.2	4,304	0.4	57
65-74	7	38.9	84	1.0	12	66.7	102	0.2	9	50.0	80	0.3	22
75-84	0	0.0	0	0.0	0	0.0	0	0.0	2	50.0	24	0.5	50
85 and older	0	0.0	0	0.0	0	0.0	0	0.0	1	100.0	2	0.5	11
Other Eligibles	864	32.3	9,383	0.7	1,032	38.6	11,009	0.5	741	27.7	8,056	0.5	36
5 and younger	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0
21-44	0	0.0	0	0.0	6	16.2	58	0.3	13	35.1	133	0.1	3
45-64	0	0.0	0	0.0	1	20.0	10	0.1	2	0.0	0	0.0	0
65-74	316	43.0	3,538	0.8	353	48.0	3,883	0.5	244	33.2	2,745	0.5	40
75-84	339	38.1	3,688	0.7	384	43.2	4,079	0.5	240	27.0	2,645	0.5	38
85 and older	209	20.7	2,157	0.8	288	28.6	2,979	0.4	244	24.2	2,533	0.5	32
Male	534	22.0	5,660	0.7	763	31.4	8,009	0.5	480	19.7	5,341	0.4	29
Disabled	240	17.4	2,722	0.7	319	23.2	3,514	0.5	245	17.8	2,811	0.4	23
5 and younger	0	0.0	0	0.0	1	100.0	12	0.1	2	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	1	14.3	12	0.1	0	0.0	0	0.0	0
21-44	81	10.3	914	0.8	135	17.2	1,470	0.4	126	16.1	1,465	0.3	13
45-64	158	27.7	1,797	0.7	175	30.6	1,949	0.6	118	20.7	1,334	0.5	33
65-74	1	10.0	11	0.6	7	70.0	71	0.4	1	10.0	12	0.5	76
75-84	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0
Other Eligibles	294	27.9	2,938	0.8	444	42.1	4,495	0.5	235	22.3	2,530	0.5	36
5 and younger	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	2	100.0	24	0.3	1	50.0	12	0.3	78
15-20	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0
21-44	1	4.0	3	0.7	3	12.0	33	0.3	3	12.0	36	0.3	4
45-64	0	0.0	0	0.0	3	37.5	33	0.5	1	12.5	12	0.3	3
65-74	150	36.4	1,514	0.8	169	41.0	1,844	0.6	104	25.2	1,158	0.5	35
75-84	90	24.3	928	0.8	178	48.0	1,819	0.5	84	22.6	888	0.6	34
85 and older	53	22.4	493	0.7	89	37.6	742	0.5	42	17.7	424	0.6	42
Unknown	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0

Table D7C

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2003 file for Wyoming, released by CMS in 05/2007. This table was produced on 11/01/2007.

a. Table D.7C includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2003. 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 2003. 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) = 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 D.7D
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR NINTH AND TENTH TOP DRUG GROUPS
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, WYOMING, 2003

Beneficiary Characteristics	ANTIHYPERTENSIVE				ANTIHYPERLIPIDEMIC							
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean of Rx per Benefit Month	Mean of Rx per Benefit Month	Number of Benefit Months Among Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean of Rx per Benefit Month			
All	2,374	35.7 %	25,285	0.7	\$27	952	14.3 %	10,486	0.6	\$59	6,652	68,712
Female	1,633	38.7	17,502	0.7	27	642	15.2	7,077	0.6	57	4,221	43,755
Disabled	371	24.0	4,178	0.6	25	229	14.8	2,590	0.6	54	1,546	16,980
5 and younger	2	200.0	2	1.0	39	0	0.0	0	0.0	0	1	1
6-14	1	100.0	12	0.6	7	0	0.0	0	0.0	0	1	12
15-20	1	11.1	9	0.2	3	0	0.0	0	0.0	0	9	79
21-44	63	10.4	706	0.6	26	42	6.9	455	0.5	48	607	6,710
45-64	296	32.7	3,367	0.6	25	181	20.0	2,063	0.6	54	905	9,977
65-74	7	38.9	70	0.9	40	6	33.3	72	0.9	75	18	171
75-84	1	25.0	12	0.9	34	0	0.0	0	0.0	0	4	28
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	2
Other Eligibles	1,262	47.2	13,324	0.7	28	413	15.4	4,487	0.6	58	2,675	26,775
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	1
21-44	3	8.1	17	0.6	16	0	0.0	0	0.0	0	37	320
45-64	0	0.0	0	0.0	0	0	0.0	0	0.0	0	5	32
65-74	336	45.7	3,768	0.7	29	190	25.9	2,070	0.6	54	735	7,904
75-84	490	55.1	5,241	0.7	27	163	18.3	1,806	0.7	64	889	9,083
85 and older	433	43.0	4,298	0.8	29	60	6.0	611	0.7	59	1,008	9,435
Male	741	30.5	7,783	0.7	25	310	12.8	3,409	0.7	63	2,431	24,957
Disabled	287	20.9	3,265	0.7	25	172	12.5	1,951	0.6	60	1,376	15,001
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	7	84
21-44	106	13.5	1,196	0.6	24	59	7.5	681	0.6	57	785	8,563
45-64	178	31.2	2,034	0.7	26	112	19.6	1,259	0.6	61	571	6,242
65-74	3	30.0	35	0.4	8	1	10.0	11	0.5	54	10	86
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	2
Other Eligibles	454	43.0	4,518	0.7	24	138	13.1	1,458	0.7	68	1,055	9,956
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	24
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
21-44	5	20.0	58	0.3	12	1	4.0	12	0.3	27	25	224
45-64	0	0.0	0	0.0	0	1	12.5	6	0.3	42	8	60
65-74	180	43.7	1,887	0.7	25	84	20.4	938	0.7	73	412	4,229
75-84	176	47.4	1,719	0.7	24	41	11.1	419	0.8	62	371	3,510
85 and older	93	39.2	854	0.7	23	11	4.6	83	0.7	43	237	1,909
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0

Table D7D

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2003 file for Wyoming, released by CMS in 05/2007. This table was produced on 11/01/2007.

- a. Table D.7D includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2003. 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 2003. 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(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 D.8
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BENEFICIARY CHARACTERISTIC^{a, b}
 DUAL ELIGIBLE BENEFICIARIES, WYOMING, 2003

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	
				7.0	15,066
All	\$340		1,545		15,066
Age					
0-64	549	8.6	118		1,289
65-74	403	7.8	210		2,119
75-84	360	7.5	488		4,776
85 and older	268	6.2	729		6,882
Unknown	0	0.0	0		0
Gender					
Female	332	7.1	1,100		10,922
Male	361	6.8	445		4,144
Unknown	0	0.0	0		0
Race					
White	342	7.1	1,457		14,170
African American	214	5.5	10		114
Other/unknown	319	6.3	78		782
Basis of Eligibility^c					
Aged	321	6.9	1,424		13,749
Disabled	542	8.6	121		1,317
Adults	0	0.0	0		0
Children	0	0.0	0		0
Unknown	0	0.0	0		0

Source: Data for this table are from the MAX 2003 file for Wyoming, released by CMS in 05/2007. This table was produced on 11/01/2007.

a. Table D.8 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their 2003 Medicaid enrollment. A total of 744 beneficiaries who were in nursing facilities for part of their enrollment and their 6,447 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 D.9
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d, e}
 DUAL ELIGIBLE BENEFICIARIES, WYOMING, 2003

Therapeutic Category	Number of Rx per Benefit Month Among Users			\$ per Benefit Month Among Users			\$ per Rx			Users						
	Total	Patented Brand-Name	Off-Patent Brand-Name	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	Percentage of Dual All-Year Nursing Facility Residents	Number of Benefit Months
Anti-infective Agents	0.4	0.2	0.0	0.2	\$19	\$14	\$1	\$5	\$49	\$61	\$23	4,289	\$210,013	1,039	67.2 %	10,885
Biologicals	0.1	0.1	0.0	0.0	1	1	0	0	15	14	0	75	1,088	73	4.7	750
Antineoplastic Agents	0.6	0.2	0.0	0.4	128	105	0	23	217	511	147	382	82,879	60	3.9	645
Endocrine/Metabolic Drugs	1.3	0.6	0.2	0.6	47	35	3	10	36	62	18	11,048	402,945	842	54.5	8,511
Cardiovascular Agents	2.1	0.5	0.2	1.4	54	27	2	25	26	57	14	23,521	618,037	1,150	74.4	11,467
Respiratory Agents	0.8	0.4	0.0	0.3	41	30	2	9	52	73	63	5,112	266,442	624	40.4	6,567
Gastrointestinal Agents	1.0	0.3	0.0	0.6	50	30	0	19	51	91	37	8,404	426,692	833	53.9	8,611
Genitourinary Agents	0.8	0.6	0.0	0.1	55	51	0	4	69	79	34	3,792	262,982	446	28.9	4,782
CNS Drugs	1.5	0.9	0.0	0.5	114	100	2	12	77	109	68	16,778	1,297,912	1,119	72.4	11,365
Stimulants/Anti-obesity/Anorexia	0.6	0.3	0.0	0.3	56	48	0	7	94	153	21	112	10,486	16	1.0	187
Miscellaneous Psychological/Neurological Agents	0.8	0.8	0.0	0.0	124	124	0	0	151	151	0	1,181	177,863	149	9.6	1,430
Analgesics and Anesthetics	1.1	0.4	0.1	0.7	56	42	2	11	49	116	40	10,122	494,743	881	57.0	8,886
Neuromuscular Agents	1.3	0.5	0.1	0.6	79	45	6	28	61	89	41	6,209	381,610	460	29.8	4,833
Nutritional Products	0.8	0.0	0.0	0.8	18	0	1	17	22	21	20	4,811	104,555	585	37.9	5,879
Hematological Agents	1.3	0.2	0.5	0.6	49	35	6	7	38	154	13	5,606	212,299	436	28.2	4,336
Topical Products	0.5	0.2	0.0	0.3	19	12	1	7	38	53	38	3,823	146,340	696	45.0	7,555
Miscellaneous Products	0.3	0.1	0.0	0.2	12	7	0	4	44	134	0	298	13,154	110	7.1	1,143
Unknown Therapeutic Category	0.4	0.0	0.0	0.0	19	0	0	0	50	0	0	261	12,927	67	4.3	689
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.	105,824	5,122,967	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2003 file for Wyoming, released by CMS in 05/2007. This table was produced on 11/01/2007.

a. Table D.9 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2003. A total of 744 beneficiaries who were in nursing facilities for part of their enrollment and their 6,447 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 2003. 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.medspan.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 Wyoming, 1.3 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 D.10
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS,
 BY TOP-10 DRUG GROUP^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, WYOMING, 2003

Top 10 Drug Groups in Nursing Facilities	Users				Among Users		
	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	\$734,942	606	39.2 %	6,235	0.8	\$144	\$118
ANTIDEPRESSANTS	502,004	992	64.2	10,288	0.8	58	49
ULCER DRUGS	350,172	841	54.4	8,953	0.6	61	39
ANALGESICS - Narcotic	330,480	977	63.2	9,893	0.7	47	33
ANTICONVULSANT	227,071	354	22.9	3,778	1.0	59	60
ANTIHYPERTENSIVE	205,292	692	44.8	6,927	0.9	35	30
ANTI-DIABETIC	195,380	420	27.2	4,377	0.8	53	45
ANTI-ASTHMATIC	180,199	585	37.9	6,084	0.5	59	30
URINARY ANTISPASMODICS	180,102	247	16.0	2,690	0.8	83	67
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	177,863	148	9.6	1,427	0.8	151	125
Total	3,083,505	5,862		60,652	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2003 file for Wyoming, released by CMS in 05/2007. This table was produced on 11/01/2007.

a. Table D.10 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2003. A total of 744 beneficiaries who were in nursing facilities for part of their enrollment and their 6,447 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 2003. 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 2003 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); CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.10A

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR TOP 10 DRUG GROUPS COMBINED AND FIRST AND SECOND TOP DRUG GROUPS SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c, d}
DUAL ELIGIBLE BENEFICIARIES, WYOMING, 2003

Beneficiary Characteristics	All Top 10 Drug Groups				ANTIPSYCHOTICS				ANTIDEPRESSANTS					
	Number of Rx	Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	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	46,368	\$3,083,505	606	39.2 %	6,235	0.8	\$118	0.8	\$118	992	64.2 %	10,288	0.8	\$49
Female	33,315	2,177,551	418	38.0	4,453	0.8	112	0.8	112	727	66.1	7,619	0.8	49
Disabled	3,190	246,197	36	52.9	403	0.8	139	0.8	139	65	95.6	688	0.9	51
64 or younger	3,139	243,542	35	53.8	399	0.8	140	0.8	140	64	98.5	684	0.9	52
65-74	51	2,655	1	33.3	4	0.3	38	0.3	38	1	33.3	4	1.0	7
75-84	0	0	0	0.0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	30,125	1,931,354	382	37.0	4,050	0.8	109	0.8	109	662	64.1	6,931	0.8	49
64 or younger	0	0	0	0.0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	3,936	261,665	42	40.0	465	0.9	130	0.9	130	79	75.2	859	0.9	47
75-84	11,692	765,083	156	48.0	1,690	0.8	114	0.8	114	239	73.5	2,494	0.9	51
85 and older	14,497	904,606	184	30.6	1,895	0.7	100	0.7	100	344	57.1	3,578	0.8	48
Male	13,053	905,954	188	42.2	1,782	0.9	132	0.9	132	265	59.6	2,669	0.8	48
Disabled	2,348	198,083	28	52.8	306	1.1	182	1.1	182	37	69.8	408	0.9	49
64 or younger	2,348	198,083	28	52.8	306	1.1	182	1.1	182	37	69.8	408	0.9	49
65-74	0	0	0	0.0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0	0	0.0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	10,705	707,871	160	40.8	1,476	0.8	122	0.8	122	228	58.2	2,261	0.8	48
64 or younger	0	0	0	0.0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	3,581	238,994	36	35.3	372	1.0	180	1.0	180	63	61.8	670	1.0	51
75-84	4,215	281,740	73	44.8	664	0.8	118	0.8	118	102	62.6	1,000	0.7	43
85 and older	2,909	187,137	51	40.2	440	0.7	79	0.7	79	63	49.6	591	0.8	52
Unknown	0	0	0	0.0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2003 file for Wyoming, released by CMS in 05/2007. This table was produced on 11/01/2007.

a. Table D.10A includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2003. A total of 744 beneficiaries who were in nursing facilities for part of their enrollment and their 6,447 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 2003. 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 2003 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Walters 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 D.10B
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY
 AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, WYOMING, 2003

Beneficiary Characteristics	ULCER DRUGS					ANALGESICS - Narcotic					ANTICONVULSANT				
	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	841	54.4 %	8,953	0.6	\$39	977	63.2 %	9,893	0.7	\$33	354	22.9 %	3,778	1.0	\$60
Female	608	55.3	6,459	0.6	39	760	69.1	7,770	0.7	34	226	20.5	2,433	1.0	58
Disabled	48	70.6	505	0.6	37	64	94.1	685	1.0	54	45	66.2	521	1.2	94
64 or younger	47	72.3	501	0.6	37	61	93.8	665	1.0	55	45	69.2	521	1.2	94
65-74	1	33.3	4	0.8	125	3	100.0	20	0.4	8	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	560	54.3	5,954	0.6	39	696	67.4	7,085	0.7	32	181	17.5	1,912	0.9	48
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	73	69.5	800	0.6	33	80	76.2	825	0.7	43	42	40.0	451	1.1	52
75-84	173	53.2	1,858	0.6	37	237	72.9	2,413	0.8	36	80	24.6	837	1.0	56
85 and older	314	52.2	3,296	0.7	41	379	63.0	3,847	0.7	27	59	9.8	624	0.8	34
Male	233	52.4	2,494	0.7	41	217	48.8	2,123	0.6	32	128	28.8	1,345	1.1	64
Disabled	31	58.5	343	0.8	50	23	43.4	261	0.6	11	36	67.9	419	1.2	90
64 or younger	31	58.5	343	0.8	50	23	43.4	261	0.6	11	36	67.9	419	1.2	90
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	202	51.5	2,151	0.6	39	194	49.5	1,862	0.6	35	92	23.5	926	1.0	53
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	55	53.9	620	0.7	40	58	56.9	614	0.7	41	34	33.3	384	1.2	64
75-84	91	55.8	972	0.6	37	77	47.2	730	0.6	28	31	19.0	281	0.9	48
85 and older	56	44.1	559	0.7	40	59	46.5	518	0.6	37	27	21.3	261	0.8	42
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 2003 file for Wyoming, released by CMS in 05/2007. This table was produced on 11/01/2007.

a. Table D.10B includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2003. A total of 744 beneficiaries who were in nursing facilities for part of their enrollment and their 6,447 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 2003. 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 2003 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 D.10C
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY
 AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, WYOMING, 2003

Beneficiary Characteristics	ANTIHYPERTENSIVE					ANTIIDIABETIC					ANTIASTHMATIC				
	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	692	44.8 %	6,927	0.9	\$30	420	27.2 %	4,377	0.8	\$45	585	37.9 %	6,084	0.5	\$30
Female	486	44.2	4,941	0.9	30	290	26.4	3,073	0.8	46	376	34.2	3,937	0.5	28
Disabled	24	35.3	236	0.7	26	25	36.8	261	0.8	48	20	29.4	214	0.3	19
64 or younger	23	35.4	224	0.7	27	22	33.8	225	0.8	48	20	30.8	214	0.3	19
65-74	1	33.3	12	0.1	0	3	100.0	36	0.6	43	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	462	44.8	4,705	0.9	31	265	25.7	2,812	0.8	46	356	34.5	3,723	0.5	29
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	41	39.0	432	0.9	34	33	31.4	361	0.9	62	38	36.2	361	0.5	24
75-84	168	51.7	1,762	0.9	30	113	34.8	1,199	0.8	41	153	47.1	1,579	0.5	35
85 and older	253	42.0	2,511	0.8	31	119	19.8	1,252	0.8	45	165	27.4	1,783	0.4	24
Male	206	46.3	1,986	0.8	28	130	29.2	1,304	0.8	41	209	47.0	2,147	0.6	32
Disabled	24	45.3	273	0.8	36	17	32.1	186	0.5	39	31	58.5	351	0.6	28
64 or younger	24	45.3	273	0.8	36	17	32.1	186	0.5	39	31	58.5	351	0.6	28
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	182	46.4	1,713	0.8	27	113	28.8	1,118	0.9	42	178	45.4	1,796	0.6	33
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	49	48.0	480	0.9	29	34	33.3	353	1.0	42	51	50.0	558	0.6	33
75-84	82	50.3	763	0.9	27	44	27.0	451	0.8	41	84	51.5	857	0.5	28
85 and older	51	40.2	470	0.8	25	35	27.6	314	0.9	43	43	33.9	381	0.7	43
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 2003 file for Wyoming, released by CMS in 05/2007. This table was produced on 11/01/2007.

- a. Table D.10C includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2003. A total of 744 beneficiaries who were in nursing facilities for part of their enrollment and their 6,447 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 2003. 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 2003 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 D.10D

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR NINTH AND TENTH TOP DRUG GROUPS SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c, d}
DUAL ELIGIBLE BENEFICIARIES, WYOMING, 2003

Beneficiary Characteristics	URINARY ANTISPASMODICS				MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL				Benefit Months Among All-Year Nursing Facility Residents	
	Number of Users	Users as % of All-Year Nursing Facility Residents	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Mean Number of Rx	Mean Rx \$		
All	247	16.0 %	0.8	\$67	148	9.6 %	0.8	\$125	1,545	15,066
Female	189	17.2	0.8	65	107	9.7	0.8	111	1,100	10,922
Disabled	20	29.4	0.9	58	5	7.4	0.8	310	68	726
64 or younger	19	29.2	0.9	60	5	7.7	0.8	310	65	698
65-74	1	33.3	1.1	23	0	0.0	0.0	0	3	28
75-84	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
Other Eligibles	169	16.4	0.8	66	102	9.9	0.8	101	1,032	10,196
64 or younger	0	0.0	0.0	0	0	0.0	0.0	0	0	0
65-74	19	18.1	0.9	71	13	12.4	1.0	120	105	1,067
75-84	67	20.6	0.8	68	40	12.3	0.8	93	325	3,261
85 and older	83	13.8	0.8	64	49	8.1	0.8	103	602	5,868
Male	58	13.0	0.8	72	41	9.2	0.8	161	445	4,144
Disabled	14	26.4	0.9	75	5	9.4	0.8	425	53	591
64 or younger	14	26.4	0.9	75	5	9.4	0.8	425	53	591
65-74	0	0.0	0.0	0	0	0.0	0.0	0	0	0
75-84	0	0.0	0.0	0	0	0.0	0.0	0	0	0
85 and older	0	0.0	0.0	0	0	0.0	0.0	0	0	0
Other Eligibles	44	11.2	0.8	71	36	9.2	0.8	112	392	3,553
64 or younger	0	0.0	0.0	0	0	0.0	0.0	0	0	0
65-74	12	11.8	0.7	63	5	4.9	1.0	125	102	1,024
75-84	15	9.2	0.8	68	17	10.4	0.8	105	163	1,515
85 and older	17	13.4	0.9	81	14	11.0	0.8	116	127	1,014
Unknown	0	0.0	0.0	0	0	0.0	0.0	0	0	0

Source: Data for this table are from the MAX 2003 file for Wyoming, released by CMS in 05/2007. This table was produced on 11/01/2007.

a. Table D.10D includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2003. A total of 744 beneficiaries who were in nursing facilities for part of their enrollment and their 6,447 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 2003. 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 2003 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 D.11
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
 AMONG DUALS, BY BENEFICIARY CHARACTERISTIC^{a,b}
 WYOMING, 2003

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 Excluded Rx	Part D		Total Part D Excluded Rx \$	\$ per Part D Excluded Rx	Part D Excluded Rx as a Percentage of All Dual Rx \$ of Beneficiaries	
					Excluded Rx per Beneficiary	Excluded Rx \$			Percentage of All Dual Rx \$ of Beneficiaries	Total Number of Beneficiaries
All	3,746	56.3 %	5.7	38,014	\$147	\$976,739	\$26	4.9 %	6,652	
Age										
5 and younger	2	100.0	16.0	32	882	1,763	55	24.5	2	
6-14	4	100.0	23.3	93	748	2,993	32	14.3	4	
15-20	10	58.8	6.2	106	257	4,366	41	13.6	17	
21-44	714	49.1	4.7	6,831	130	189,632	28	4.4	1,454	
45-64	890	59.8	7.2	10,674	205	305,901	29	5.2	1,489	
65-74	659	56.1	5.6	6,586	166	195,259	30	5.9	1,175	
75-84	733	58.0	5.9	7,395	124	156,314	21	4.5	1,264	
85 and older	734	58.9	5.0	6,297	97	120,511	19	4.4	1,247	
Unknown	0	0.0	0.0	0	0	0	0	0.0	0	
Basis of Eligibility^c										
Aged	2,109	57.8	5.5	20,095	128	465,685	23	4.9	3,650	
Disabled	1,603	54.9	6.1	17,737	173	506,532	29	5.0	2,922	
Adults	32	41.0	1.6	121	43	3,374	28	2.4	78	
Children	2	100.0	30.5	61	574	1,148	19	10.0	2	
Unknown	0	0.0	0.0	0	0	0	0	0.0	0	
Gender										
Female	2,604	61.7	6.3	26,759	158	668,927	25	5.0	4,221	
Male	1,142	47.0	4.6	11,255	127	307,812	27	4.7	2,431	
Unknown	0	0.0	0.0	0	0	0	0	0.0	0	
Race										
White	3,387	58.3	6.1	35,169	156	909,089	26	5.0	5,809	
African American	32	50.0	3.3	209	52	3,320	16	2.4	64	
Other/unknown	327	42.0	3.4	2,636	83	64,330	24	4.3	779	
Use of Nursing Facilities^d										
Entire year	932	60.3	6.1	9,382	115	177,041	19	3.5	1,545	
Part year	483	64.9	5.6	4,191	105	78,423	19	4.1	744	
None	2,331	53.4	5.6	24,441	165	721,275	30	5.7	4,363	
Maintenance Assistance Status										
Cash	1,096	45.1	3.1	7,490	72	175,074	23	3.3	2,428	
Medically needy	0	0.0	0.0	0	0	0	0	0.0	0	
Poverty related	33	46.5	3.4	240	74	5,277	22	4.1	71	
Other/unknown	2,617	63.0	7.3	30,284	192	796,388	26	5.6	4,153	

Source: Data for this table are from the MAX 2003 file for Wyoming, released by CMS in 05/2007. This table was produced on 11/01/2007.

- a. Table D.11 includes the beneficiaries represented by Cell G of Table 1. Beneficiaries include all dual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2003.
- 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 D.12
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
 AMONG DUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a,b}
 WYOMING, 2003

Beneficiary Characteristics	Number Rx per Benefit Month	Rx \$ per Benefit Month	\$ per Rx	Barbiturate \$ per Benefit Month	Benzodiazapine \$ per Benefit Month	Number of Benefit Months
All	0.6	\$14	\$26	\$0	\$2	68,712
Age						
5 and younger	2.5	136	55	0	0	13
6-14	1.9	62	32	0	0	48
15-20	0.6	27	41	1	0	164
21-44	0.4	12	28	0	2	15,817
45-64	0.7	19	29	0	3	16,311
65-74	0.5	16	30	0	2	12,390
75-84	0.6	12	21	0	2	12,621
85 and older	0.6	11	19	0	1	11,348
Unknown	0.0	0	0	0	0	0
Basis of Eligibility^c						
Aged	0.6	13	23	0	2	36,046
Disabled	0.6	16	29	0	3	31,981
Adults	0.2	5	28	0	2	661
Children	2.5	48	19	0	0	24
Unknown	0.0	0	0	0	0	0
Gender						
Female	0.6	15	25	0	3	43,755
Male	0.5	12	27	0	2	24,957
Unknown	0.0	0	0	0	0	0
Race						
White	0.6	15	26	0	3	59,665
African American	0.3	5	16	0	0	705
Other/unknown	0.3	8	24	0	1	8,342
Use of Nursing Facilities^d						
Entire year	0.6	12	19	0	3	15,066
Part year	0.7	12	19	0	3	6,447
None	0.5	15	30	0	2	47,199
Maintenance Assistance Status						
Cash	0.3	7	23	0	2	26,061
Medically needy	0.0	0	0	0	0	0
Poverty related	0.3	7	22	0	1	713
Other/unknown	0.7	19	26	0	3	41,938

Source: Data for this table are from the MAX 2003 file for Wyoming, released by CMS in 05/2007. This table was produced on 11/01/2007.

- a. Table D.12 includes the beneficiaries represented by Cell G of Table 1. Beneficiaries include all dual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2003.
- 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 D.13
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
 FOR SELECTED DRUG CATEGORIES AMONG DUALS^{a,b,c}
 WYOMING, 2003

Drug Category	Number of Users	Rx \$ per User	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
			Total Rx \$	Excluded Rx \$			
All	5,911	\$165	\$976,739	100.0 %	38,014	\$26	100.0 %
Anorexia or weight loss/gain	2	54	107	0.0	2	54	0.0
Fertility drugs	0	0	0	0.0	0	0	0.0
Drugs for cosmetic purposes	4	37	148	0.0	15	10	0.0
Cough and cold medications	1,204	91	110,109	11.3	3,878	28	10.2
Vitamins and minerals	1,458	159	231,558	23.7	10,268	23	27.0
Non-prescription drugs	1,668	253	421,256	43.1	13,847	30	36.4
Barbiturates	56	69	3,878	0.4	556	7	1.5
Benzodiazepines	1,425	115	163,301	16.7	9,110	18	24.0
Other Part D Excl Rx Drugs	94	493	46,382	4.7	338	137	0.9

Source: Data for this table are from the MAX 2003 file for Wyoming, released by CMS in 05/2007. This table was produced on 11/01/2007.

a. Table D.13 includes the beneficiaries represented by Cell G of Table 1. Beneficiaries include all dual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2003. A user is a beneficiary who had at least one prescription filled for a Part D excluded drug in 2003. A beneficiary who used drugs from two or more Part D excluded categories was counted as a user for each category. Therefore, the sum of users across drug categories may exceed the total number of individual users as noted on Table D11.

b. Includes OTC drugs as well as prescription drugs.

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

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

SUPPLEMENTAL TABLE 1
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES^{a, b}
 WYOMING, 2003

Total Number of Dual Eligible Beneficiaries 6,652
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries \$19,762,134
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary \$2,971

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	816	12.3 %	\$0	0.0 %
1-500	1,021	15.3	208,125	1.1
501-1,000	666	10.0	495,428	2.5
1,001-1,500	572	8.6	710,043	3.6
1,501-2,000	469	7.1	823,018	4.2
2,001-2,500	401	6.0	898,459	4.5
2,501-3,000	364	5.5	999,747	5.1
3,001-3,500	318	4.8	1,034,103	5.2
3,501-4,000	291	4.4	1,089,880	5.5
4,001-4,500	265	4.0	1,123,679	5.7
4,501-5,000	198	3.0	935,353	4.7
5,001-5,500	161	2.4	844,939	4.3
5,501-6,000	165	2.5	948,282	4.8
6,001-6,500	131	2.0	817,658	4.1
6,501-7,000	94	1.4	632,115	3.2
7,001-7,500	91	1.4	660,456	3.3
7,501-8,000	69	1.0	535,041	2.7
8,001-8,500	77	1.2	633,728	3.2
8,501-9,000	69	1.0	604,458	3.1
9,001-9,500	52	0.8	480,209	2.4
9,501-10,000	38	0.6	369,989	1.9
10,001+	324	4.9	4,917,424	24.9

Source: Data for this table are from the MAX 2003 file for Wyoming, released by CMS in 05/2007. This table was produced on 11/01/2007.

a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 2003.

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

SUPPLEMENTAL TABLE 1D
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 75 TO 84^{a, b}
 WYOMING, 2003

Total Number of Dual Eligible Beneficiaries, Age 75-84 1,264
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 75-84 \$3,467,324
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 75-84 \$2,743

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 75-84	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	111	8.8 %	0	0.0 %
1-500	153	12.1	35,471	1.0
501-1,000	149	11.8	109,198	3.1
1,001-1,500	124	9.8	152,633	4.4
1,501-2,000	95	7.5	168,025	4.8
2,001-2,500	92	7.3	202,955	5.9
2,501-3,000	83	6.6	227,699	6.6
3,001-3,500	60	4.7	193,824	5.6
3,501-4,000	76	6.0	284,713	8.2
4,001-4,500	61	4.8	259,661	7.5
4,501-5,000	45	3.6	214,196	6.2
5,001-5,500	39	3.1	205,525	5.9
5,501-6,000	28	2.2	162,162	4.7
6,001-6,500	38	3.0	236,835	6.8
6,501-7,000	15	1.2	100,621	2.9
7,001-7,500	16	1.3	115,797	3.3
7,501-8,000	15	1.2	116,033	3.3
8,001-8,500	11	0.9	90,196	2.6
8,501-9,000	14	1.1	122,578	3.5
9,001-9,500	6	0.5	55,829	1.6
9,501-10,000	3	0.2	29,479	0.9
10,001+	30	2.4	383,894	11.1

Source: Data for this table are from the MAX 2003 file for Wyoming, released by CMS in 05/2007. This table was produced on 11/01/2007.

- a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 2003.
- b. Medicaid reimbursement amounts in this table do not reflect federally required rebates from drug manufacturers to states.

APPENDIX TABLE A.3

CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY^{a, b}
DUAL ELIGIBLE BENEFICIARIES, WYOMING, 2003

Beneficiary Characteristics	Number of Beneficiaries				Number of Benefit Months					
	All	Aged	Disabled	Unknown	All	Aged	Disabled	Unknown		
All	6,652	3,650	2,922	0	68,690	36,046	31,959	661	24	0
Age										
5 and younger	2	0	2	0	13	0	13	0	0	0
6-14	4	0	2	0	48	0	24	0	24	0
15-20	17	0	16	0	164	0	163	1	0	0
21-44	1,454	1	1,392	0	15,813	12	15,269	532	0	0
45-64	1,489	0	1,476	0	16,293	0	16,201	92	0	0
65-74	1,175	1,144	28	0	12,390	12,097	257	36	0	0
75-84	1,264	1,260	4	0	12,621	12,593	28	0	0	0
85 and older	1,247	1,245	2	0	11,348	11,344	4	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0
Gender										
Female	4,221	2,631	1,546	0	43,733	26,410	16,958	365	0	0
Male	2,431	1,019	1,376	0	24,957	9,636	15,001	296	24	0
Unknown	0	0	0	0	0	0	0	0	0	0
Race										
White	5,809	3,186	2,558	0	59,643	31,077	28,018	524	24	0
African American	64	27	36	0	705	280	416	9	0	0
Other/unknown	779	437	328	0	8,342	4,689	3,525	128	0	0
Use of Nursing Facilities^c										
Entire year	1,545	1,424	121	0	15,066	13,749	1,317	0	0	0
Part year	744	660	84	0	6,447	5,585	862	0	0	0
None	4,363	1,566	2,717	0	47,177	16,712	29,780	661	24	0
Maintenance Assistance Status										
Cash	2,428	911	1,471	0	26,045	10,085	15,567	393	0	0
Medically needy	0	0	0	0	0	0	0	0	0	0
Poverty related	71	32	29	1	711	327	305	67	12	0
Other/unknown	4,153	2,707	1,422	0	41,934	25,634	16,087	201	12	0
Dual Status^d										
Full dual, all year	6,456	3,527	2,852	0	66,631	34,771	31,208	628	24	0
Full dual, part year	196	123	70	0	2,059	1,275	751	33	0	0
Managed Care (MC) Status										
Fee-for-service (FFS) all year	6,652	3,650	2,922	0	68,690	36,046	31,959	661	24	0
FFS part year, with Rx claims	0	0	0	0	0	0	0	0	0	0
FFS part year, no Rx claims	0	0	0	0	0	0	0	0	0	0
MC all year, with Rx claims	0	0	0	0	0	0	0	0	0	0
MC all year, no Rx claims	0	0	0	0	0	0	0	0	0	0

Source: Data for this table are from the MAX 2003 file for Wyoming, released by CMS in 05/2007. This table was produced on 11/01/2007.

- a. Table A.3 includes the beneficiaries represented by Cell F of Table 1. Benefit months are months during which beneficiaries had pharmacy benefit coverage.
- b. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services. The total includes some beneficiaries with unknown basis of eligibility and some whose age categories are not consistent with basis of eligibility.
- c. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.
- d. The "Full dual, all year" group contains beneficiaries who had Medicare as well as Medicaid pharmacy benefits during all months of Medicaid enrollment in 2003. The "Full dual, part year" group contains beneficiaries who had such benefits for some, but not all, months of their enrollment. Refer to footnote g of Table 1 for more information about how we determined dual eligibility status.

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

APPENDIX TABLE A.4
 MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS^a
 DUAL ELIGIBLE BENEFICIARIES, WYOMING, 2003

Beneficiary Characteristics	Beneficiaries and			Excluded from Cell G of Table 1	
	Benefit Months in Cell F of Table 1 Number of Beneficiaries	Benefit Months in Cell G of Table 1 Number of Beneficiaries	Benefit Months in Cell H of Table 1 Number of Beneficiaries	Benefit Months in Cell I of Table 1 Number of Beneficiaries	Benefit Months in Cell J of Table 1 Number of Beneficiaries
All	6,652	68,690	6,652	68,712	0
Fee-for-service (FFS) all year	6,652	68,690	6,652	68,712	0
FFS part year, with Rx claims	0	0	0	0	0
FFS part year, with no Rx claims	0	0	0	0	0
Managed care (MC) all year, with Rx claims	0	0	0	0	0
MC all year, with no Rx claims	0	0	0	0	0

Source: Data for this table are from the MAX 2003 file for Wyoming, released by CMS in 05/2007. This table was produced on 11/01/2007.

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

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