

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

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown
All	6,729	3,674	2,971	75	3	6	69,638	36,596	32,397	548	36	61
Age												
5 and younger	1	0	0	0	1	0	12	0	0	0	12	0
6-14	4	0	2	0	2	0	48	0	24	0	24	0
15-20	15	0	15	0	0	0	156	0	156	0	0	0
21-44	1,459	0	1,401	56	0	2	15,880	0	15,435	422	0	23
45-64	1,540	1	1,523	15	0	1	16,638	1	16,538	89	0	10
65-74	1,164	1,133	24	4	0	3	12,306	12,034	207	37	0	28
75-84	1,322	1,318	4	0	0	0	13,186	13,155	31	0	0	0
85 and older	1,224	1,222	2	0	0	0	11,412	11,406	6	0	0	0
Unknown	0	0	0	0	0	0		0	0	0	0	0
Gender												
Female	4,305	2,662	1,589	48	0	6	44,553	26,789	17,332	371	0	61
Male	2,424	1,012	1,382	27	3	0	25,085	9,807	15,065	177	36	0
Unknown	0	0	0	0	0	0		0	0	0	0	0
Race												
White	5,866	3,188	2,609	60	3	6	60,479	31,354	28,565	463	36	61
African American	79	32	47	0	0	0	820	339	481	0	0	0
Other/unknown	784	454	315	15	0	0	8,339	4,903	3,351	85	0	0
Use of Nursing Facilities^c												
Entire year	1,529	1,411	118	0	0	0	15,241	13,981	1,260	0	0	0
Part year	729	654	75	0	0	0	6,421	5,665	756	0	0	0
None	4,471	1,609	2,778	75	3	6	47,976	16,950	30,381	548	36	61
Maintenance Assistance Status												
Cash	2,455	862	1,542	51	0	0	26,422	9,565	16,494	363	0	0
Medically needy	0	0	0	0	0	0		0	0	0	0	0
Poverty-related	78	23	36	11	2	6	768	243	367	73	24	61
Other/unknown	4,196	2,789	1,393	13	1	0	42,448	26,788	15,536	112	12	0
Dual Medicare Status^d												
Full dual, all year	6,522	3,543	2,897	73	3	6	67,439	35,183	31,633	526	36	61
Full dual, part year	207	131	74	2	0	0	2,199	1,413	764	22	0	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	6,729	3,674	2,971	75	3	6	69,638	36,596	32,397	548	36	61
FFS part year, with Rx claims	0	0	0	0	0	0		0	0	0	0	0
FFS part year, no Rx claims	0	0	0	0	0	0		0	0	0	0	0

Source: Data for this table are from the MAX 2004 file for Wyoming, released by CMS in 02/2008. This table was produced on 03/25/2008.

- 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 2004. 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, 2004

Beneficiary Characteristics	Percentage with at Least One Rx	Mean Number of Rx	Mean Rx \$	\$ per Rx	Mean \$, All Medicaid FFS \$ ^c	Rx \$ as a Percentage of All Medicaid FFS \$ ^d	Number of Beneficiaries
All	87.6 %	50.3	\$3,327	\$66	\$22,349	14.9 %	6,729
Age							
5 and younger	100.0	49.0	3,373	69	13,218	25.5	1
6-14	100.0	85.3	11,104	130	12,205	91.0	4
15-20	86.7	28.5	2,916	102	19,083	15.3	15
21-44	82.3	33.7	3,322	99	23,627	14.1	1,459
45-64	87.1	54.7	4,400	81	24,693	17.8	1,540
65-74	84.1	51.9	3,082	59	16,242	19.0	1,164
75-84	90.5	58.5	3,028	52	21,304	14.2	1,322
85 and older	94.4	54.3	2,517	46	24,892	10.1	1,224
Unknown	0.0	0.0	0	0	0	0.0	0
Basis of Eligibility^e							
Aged	90.0	55.3	2,889	52	21,040	13.7	3,674
Disabled	84.8	44.9	3,906	87	24,414	16.0	2,971
Adults	77.3	23.0	1,538	67	4,798	32.0	75
Children	100.0	79.0	8,367	106	11,780	71.0	3
Unknown	100.0	26.7	4,365	164	25,437	17.2	6
Gender							
Female	91.2	55.8	3,499	63	21,655	16.2	4,305
Male	81.1	40.5	3,020	75	23,581	12.8	2,424
Unknown	0.0	0.0	0	0	0	0.0	0
Race							
White	89.5	53.1	3,503	66	23,782	14.7	5,866
African American	81.0	39.2	2,516	64	14,366	17.5	79
Other/unknown	73.9	30.6	2,089	68	12,432	16.8	784
Use of Nursing Facilities^f							
Entire year	97.7	74.2	3,848	52	35,136	11.0	1,529
Part year	94.2	55.0	3,000	55	21,036	14.3	729
None	83.0	41.4	3,201	77	18,190	17.6	4,471
Maintenance Assistance Status							
Cash	80.1	35.0	2,667	76	6,152	43.4	2,455
Medically needy	0.0	0.0	0	0	0	0.0	0
Poverty related	76.9	19.9	1,801	91	6,250	28.8	78
Other/unknown	92.1	59.8	3,741	63	32,124	11.6	4,196

Source: Data for this table are from the MAX 2004 file for Wyoming, released by CMS in 02/2008. This table was produced on 03/25/2008.

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, 2004

Beneficiary Characteristics	Mean Number of Rx	Mean Rx \$	Rx \$ as a Percentage of All Medicaid FFS \$ ^c	Number of Rx, Percentage with:						Mean \$, All Medicaid FFS \$ ^d	Number	
				None	More than 0, but 1 or Less	More than 1, but 2 or Less	More than 2, but 5 or Less	More than 5, but 10 or Less	More than 10		Beneficiaries	Benefit Months
All	4.9	\$321	14.9 %	12.4 %	14.7 %	9.1 %	26.8 %	27.1 %	9.9 %	\$2,160	6,729	69,638
Age												
5 and younger	4.1	281	25.5	0.0	0.0	0.0	100.0	0.0	0.0	1,102	1	12
6-14	7.1	925	91.0	0.0	0.0	0.0	25.0	75.0	0.0	1,017	4	48
15-20	2.7	280	15.3	13.3	26.7	13.3	26.7	20.0	0.0	1,835	15	156
21-44	3.1	305	14.1	17.7	25.6	11.6	26.3	15.4	3.6	2,171	1,459	15,880
45-64	5.1	407	17.8	12.9	14.5	8.4	25.3	28.4	10.5	2,286	1,540	16,638
65-74	4.9	292	19.0	15.9	14.6	8.5	22.9	26.9	11.2	1,536	1,164	12,306
75-84	5.9	304	14.2	9.5	9.2	7.5	28.0	31.5	14.3	2,136	1,322	13,186
85 and older	5.8	270	10.1	5.6	7.7	9.4	31.5	34.9	10.9	2,670	1,224	11,412
Unknown	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	5.5	290	13.7	10.0	10.4	8.4	27.6	31.2	12.3	2,112	3,674	36,596
Disabled	4.1	358	16.0	15.2	19.9	9.8	25.8	22.2	7.2	2,239	2,971	32,397
Adults	3.1	211	32.0	22.7	20.0	14.7	21.3	20.0	1.3	657	75	548
Children	6.6	697	71.0	0.0	0.0	0.0	33.3	66.7	0.0	982	3	36
Unknown	2.6	429	17.2	0.0	16.7	33.3	50.0	0.0	0.0	2,502	6	61
Gender												
Female	5.4	338	16.2	8.8	12.5	8.9	28.2	29.8	11.8	2,092	4,305	44,553
Male	3.9	292	12.8	18.9	18.5	9.5	24.2	22.3	6.6	2,279	2,424	25,085
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	5.1	340	14.7	10.5	13.8	8.8	27.2	28.8	10.8	2,307	5,866	60,479
African American	3.8	242	17.5	19.0	13.9	12.7	31.6	17.7	5.1	1,384	79	820
Other/unknown	2.9	196	16.8	26.1	21.0	10.7	23.1	15.6	3.4	1,169	784	8,339
use of nursing Facilities^f												
Entire year	7.4	386	11.0	2.3	4.4	5.7	26.4	40.9	20.3	3,525	1,529	15,241
Part year	6.2	341	14.3	5.8	8.1	8.5	31.0	32.1	14.5	2,388	729	6,421
None	3.9	298	17.6	17.0	19.2	10.4	26.2	21.6	5.6	1,695	4,471	47,976
Maintenance Assistance Status												
Cash	3.3	248	43.4	19.9	23.4	10.5	25.4	16.2	4.6	572	2,455	26,422
Medically needy	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Poverty related	2.0	183	28.8	23.1	28.2	23.1	15.4	9.0	1.3	635	78	768
Other/unknown	5.9	370	11.6	7.9	9.3	8.0	27.8	33.8	13.2	3,176	4,196	42,448

Source: Data for this table are from the MAX 2004 file for Wyoming, released by CMS in 02/2008. This table was produced on 03/25/2008.

- 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, 2004

Beneficiary	All Rx			Patented Brand-Name Drugs			Off-Patent Brand-Name Drugs			Generic Drugs		
Characteristics	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx
All	4.9	\$321	\$66	1.8	\$232	\$128	0.4	\$25	\$69	2.6	\$64	\$24
Age												
5 and younger	4.1	281	69	1.1	177	163	0.1	4	45	2.9	101	35
6-14	7.1	925	130	3.7	863	231	0.9	15	16	2.4	45	19
15-20	2.7	280	102	1.0	207	213	0.2	6	33	1.5	50	34
21-44	3.1	305	99	1.3	237	178	0.3	24	97	1.5	44	29
45-64	5.1	407	81	2.0	297	149	0.4	38	96	2.6	72	27
65-74	4.9	292	59	1.8	205	112	0.3	21	67	2.7	65	24
75-84	5.9	304	52	2.0	208	103	0.4	21	50	3.4	74	22
85 and older	5.8	270	46	2.0	187	95	0.4	16	36	3.3	66	20
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Basis of Eligibility^d												
Aged	5.5	290	52	1.9	201	103	0.4	19	50	3.2	69	22
Disabled	4.1	358	87	1.7	268	160	0.3	31	95	2.1	58	28
Adults	3.1	211	67	0.9	141	150	0.2	20	104	2.0	49	25
Children	6.6	697	106	3.4	637	186	0.9	14	15	2.1	46	22
Unknown	2.6	429	164	0.8	361	479	0.1	7	45	1.7	61	36
Gender												
Female	5.4	338	63	2.0	243	123	0.4	25	63	3.0	69	23
Male	3.9	292	75	1.5	213	141	0.3	25	86	2.1	54	26
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Race												
White	5.1	340	66	1.9	245	128	0.4	26	68	2.8	67	24
African American	3.8	242	64	1.3	177	133	0.2	17	89	2.2	48	21
Other/unknown	2.9	196	68	1.1	142	128	0.2	16	79	1.5	38	25
Use of Nursing Facilities^e												
Entire year	7.4	386	52	2.5	266	107	0.5	25	48	4.3	93	22
Part year	6.2	341	55	2.2	238	110	0.4	22	50	3.6	80	22
None	3.9	298	77	1.5	221	142	0.3	25	85	2.0	52	26
Maintenance Assistance Status												
Cash	3.3	248	76	1.3	182	141	0.2	21	91	1.7	45	26
Medically needy	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Poverty related	2.0	183	91	0.7	136	186	0.1	15	110	1.1	31	28
Other/unknown	5.9	370	63	2.2	265	123	0.4	28	62	3.3	76	23

Source: Data for this table are from the MAX 2004 file for Wyoming, released by CMS in 02/2008. This table was produced on 03/25/2008.

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

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

TABLE D.6
MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d}
DUAL ELIGIBLE BENEFICIARIES, WYOMING, 2004

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				\$ per Rx				Users ^e				
	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total Number of Rx	Total Rx \$	Number	As a Percentage of Dual Benes	Number of Benefit Months
Anti-infective Agents	0.4	0.1	0.0	0.2	\$25	\$17	\$2	\$6	\$68	\$130	\$75	\$28	14,976	\$1,013,349	3,722	55.3 %	40,482
Biologicals	0.1	0.1	0.0	0.1	71	2	22	47	519	30	864	832	103	53,417	71	1.1	754
Antineoplastic Agents	0.6	0.1	0.0	0.5	109	77	2	30	175	526	185	65	1,190	208,042	190	2.8	1,916
Endocrine/Metabolic Drugs	1.0	0.4	0.1	0.5	49	36	4	10	47	84	29	20	35,152	1,668,347	3,154	46.9	33,754
Cardiovascular Agents	1.7	0.5	0.1	1.2	60	38	3	20	35	77	29	17	70,628	2,470,391	3,865	57.4	40,848
Respiratory Agents	0.8	0.5	0.0	0.3	52	47	0	5	66	88	39	22	22,807	1,510,312	2,671	39.7	28,798
Gastrointestinal Agents	0.7	0.2	0.1	0.5	49	29	3	16	65	172	48	32	21,384	1,393,181	2,660	39.5	28,549
Genitourinary Agents	0.7	0.5	0.0	0.2	50	43	2	5	73	89	61	29	9,563	701,577	1,296	19.3	14,086
CNS Drugs	1.4	0.7	0.1	0.6	136	107	10	18	100	160	106	31	56,783	5,689,580	3,932	58.4	41,800
Stimulants/Anti-obesity/Anorexia	0.7	0.5	0.0	0.2	85	75	3	8	126	161	91	43	1,336	167,927	177	2.6	1,973
Miscellaneous Psychological/																	
Neurological Agents	0.8	0.8	0.0	0.0	209	209	0	0	254	256	0	9	4,139	1,052,704	492	7.3	5,041
Analgesics and Anesthetics	0.9	0.3	0.0	0.6	62	46	3	13	66	165	131	20	36,211	2,378,071	3,583	53.2	38,247
Neuromuscular Agents	1.1	0.3	0.2	0.5	99	55	25	19	91	159	115	37	25,612	2,340,869	2,138	31.8	23,528
Nutritional Products	0.7	0.0	0.0	0.7	15	0	1	14	21	14	25	21	11,312	242,456	1,526	22.7	15,890
Hematological Agents	0.9	0.2	0.1	0.6	53	40	5	9	57	203	37	15	13,364	765,870	1,366	20.3	14,390
Topical Products	0.4	0.1	0.0	0.2	17	10	2	6	45	71	50	26	10,086	453,018	2,335	34.7	25,898
Miscellaneous Products	0.4	0.2	0.0	0.2	73	62	6	6	191	375	285	28	1,133	216,589	274	4.1	2,958
Unknown Therapeutic Category	0.5	0.0	0.0	0.0	10	0	0	0	22	0	0	0	2,706	58,714	517	7.7	5,628
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.	338,485	22,384,414	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2004 file for Wyoming, released by CMS in 02/2008. This table was produced on 03/25/2008.

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.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 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.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 2004.

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

TABLE D.7
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, WYOMING, 2004

Top 10 Drug Groups	Total Medicaid Rx \$	Users		Among Users			
		Number of Users	As a Percentage of Dual Beneficiaries	Number of Benefit Months	Number of Rx per Benefit Month	\$ per Rx	Rx \$ per Benefit Month
ANTI PSYCHOTICS	\$3,473,984	2,045	30.4 %	22,269	0.7	\$212	\$156
ANTIDEPRESSANTS	1,969,795	3,838	57.0	41,392	0.7	67	48
ANTICONVULSANT	1,865,850	1,846	27.4	20,480	0.8	109	91
ANALGESICS - Narcotic	1,398,409	4,404	65.4	47,105	0.5	57	30
ULCER DRUGS	1,053,809	2,840	42.2	30,787	0.6	57	34
NEUROLOGICAL	1,052,704	571	8.5	5,817	0.7	254	181
ANTIDIABETIC	979,140	1,914	28.4	20,660	0.7	67	47
ANTI ASTHMATIC	966,476	2,427	36.1	26,001	0.5	78	37
ANALGESICS - ANTI-INFLAMMATORY	811,157	1,793	26.6	19,966	0.4	92	41
ANTI HYPERLIPIDEMIC	787,588	1,175	17.5	13,081	0.6	99	60
Total	14,358,912	22,853		247,558	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2004 file for Wyoming, released by CMS in 02/2008. This table was produced on 03/25/2008.

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

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

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

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement; 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, 2004

Beneficiary Characteristics	All Top 10 Drug Groups		ANTIPSYCHOTICS					ANTIDEPRESSANTS				
	Number of Rx	Rx \$	Number of Users	Users as % of Dual 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 Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	153,755	\$14,358,912	2,045	30.4 %	22,269	0.7	\$156	3,838	57.0 %	41,392	0.7	\$48
Female	105,794	9,403,549	1,227	28.5	13,287	0.7	142	2,746	63.8	29,599	0.7	47
Disabled	42,944	4,764,244	559	35.2	6,398	0.7	165	1,223	77.0	13,749	0.7	51
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	4	255	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	76	11,034	1	12.5	12	1.9	506	3	37.5	36	0.8	99
21-44	13,774	1,734,464	257	40.7	2,946	0.6	161	455	72.0	5,126	0.6	51
45-64	28,705	2,991,911	301	32.5	3,440	0.7	166	755	81.4	8,479	0.7	52
65-74	359	25,087	0	0.0	0	0.0	0	10	58.8	108	0.7	33
75-84	26	1,493	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	62,850	4,639,305	668	24.6	6,889	0.7	121	1,523	56.1	15,850	0.8	44
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	0.0	0
21-44	593	50,340	13	30.2	107	0.6	118	31	72.1	268	0.4	30
45-64	39	2,587	2	33.3	12	0.3	29	3	50.0	14	0.6	22
65-74	18,336	1,518,028	133	17.9	1,470	0.7	139	435	58.5	4,819	0.7	42
75-84	23,397	1,665,214	239	25.7	2,506	0.8	123	536	57.6	5,566	0.8	42
85 and older	20,485	1,403,136	281	28.3	2,794	0.7	109	518	52.2	5,183	0.8	50
Male	47,961	4,955,363	818	33.7	8,982	0.8	177	1,092	45.0	11,793	0.7	48
Disabled	26,497	3,291,914	515	37.3	5,941	0.8	205	627	45.4	7,093	0.7	50
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	4	314	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	78	9,951	1	14.3	12	0.1	20	6	85.7	42	0.3	30
21-44	12,317	1,686,052	300	39.0	3,444	0.8	204	336	43.7	3,868	0.6	45
45-64	14,039	1,592,671	214	35.9	2,485	0.8	207	284	47.7	3,171	0.7	56
65-74	59	2,926	0	0.0	0	0.0	0	1	14.3	12	0.6	24
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	21,464	1,663,449	303	29.1	3,041	0.7	122	465	44.6	4,700	0.8	45
5 and younger	3	67	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	32	6,864	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	230	13,206	2	13.3	24	0.3	43	5	33.3	58	0.5	24
45-64	85	6,828	1	9.1	3	1.0	43	4	36.4	19	0.4	30
65-74	8,905	708,082	96	24.2	1,072	0.7	129	163	41.2	1,768	0.8	45
75-84	7,996	617,665	132	34.0	1,253	0.7	128	188	48.5	1,886	0.7	44
85 and older	4,213	310,737	72	31.4	689	0.7	103	105	45.9	969	0.8	49
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 2004 file for Wyoming, released by CMS in 02/2008. This table was produced on 03/25/2008.

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

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

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

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

TABLE 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, 2004

Beneficiary Characteristics	ANTICONVULSANT					ANALGESICS - Narcotic					ULCER DRUGS				
	Number of Users	Users as % of Dual 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 Dual 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 Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	1,846	27.4 %	20,480	0.8	\$91	4,404	65.4 %	47,105	0.5	\$30	2,840	42.2 %	30,787	0.6	\$34
Female	1,177	27.3	13,018	0.8	83	3,242	75.3	34,883	0.5	29	2,017	46.9	21,925	0.6	34
Disabled	708	44.6	7,982	0.8	101	1,373	86.4	15,538	0.5	29	732	46.1	8,299	0.5	36
	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	100.0	12	0.3	21
6-14	0	0.0	0	0.0	0	5	62.5	60	0.1	1	0	0.0	0	0.0	0
15-20	313	49.5	3,538	0.8	111	465	73.6	5,222	0.4	27	213	33.7	2,444	0.5	33
21-44	394	42.5	4,435	0.8	93	891	96.1	10,124	0.5	30	502	54.2	5,673	0.5	37
45-64	1	5.9	9	0.2	21	11	64.7	120	0.5	14	12	70.6	122	0.4	31
65-74	0	0.0	0	0.0	0	1	50.0	12	0.1	1	4	200.0	48	0.3	12
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	469	17.3	5,036	0.8	54	1,869	68.8	19,345	0.6	29	1,285	47.3	13,626	0.6	33
Other Eligibles	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
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	17	39.5	167	0.5	49	47	109.3	408	0.6	18	12	27.9	115	0.2	12
21-44	1	16.7	2	4.5	23	6	100.0	62	0.3	30	1	16.7	10	0.1	1
45-64	176	23.7	1,966	0.8	65	495	66.5	5,584	0.5	25	380	51.1	4,270	0.5	33
65-74	175	18.8	1,860	0.8	54	667	71.7	6,916	0.6	28	439	47.2	4,662	0.6	32
75-84	100	10.1	1,041	0.7	35	654	65.9	6,375	0.6	33	453	45.6	4,569	0.8	34
85 and older															
Male	669	27.6	7,462	0.9	105	1,162	47.9	12,222	0.5	32	823	34.0	8,862	0.6	36
Disabled	487	35.2	5,614	0.9	115	638	46.2	7,144	0.5	37	399	28.9	4,508	0.6	39
	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
5 and younger	0	0.0	0	0.0	0	1	100.0	12	0.1	1	1	100.0	12	0.3	26
6-14	5	71.4	60	0.7	127	1	14.3	4	0.8	6	1	14.3	3	0.3	52
15-20	258	33.6	2,987	0.9	125	328	42.7	3,730	0.4	26	182	23.7	2,111	0.5	32
21-44	224	37.6	2,567	1.0	103	305	51.2	3,362	0.5	50	211	35.4	2,346	0.7	46
45-64	0	0.0	0	0.0	0	3	42.9	36	0.5	5	4	57.1	36	0.2	8
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	182	17.5	1,848	0.9	77	524	50.3	5,078	0.5	25	424	40.7	4,354	0.7	32
Other Eligibles	0	0.0	0	0.0	0	2	200.0	24	0.1	1	1	100.0	12	0.1	3
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	4	26.7	43	0.8	42	19	126.7	184	0.7	29	2	13.3	19	0.3	38
21-44	1	9.1	3	0.7	75	9	81.8	81	0.6	51	2	18.2	12	0.2	12
45-64	76	19.2	828	1.1	97	200	50.5	2,096	0.5	24	151	38.1	1,627	0.6	34
65-74	64	16.5	625	0.8	65	182	46.9	1,782	0.5	24	172	44.3	1,751	0.7	29
75-84	37	16.2	349	0.8	54	112	48.9	911	0.5	26	96	41.9	933	0.8	33
85 and older															
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 2004 file for Wyoming, released by CMS in 02/2008. This table was produced on 03/25/2008.

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

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

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

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

TABLE 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, 2004

Beneficiary Characteristics	MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL					ANTIDIABETIC					ANTIASTHMATIC				
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean of Rx per Benefit Month	Mean 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 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 Rx \$ per Benefit Month
All	571	8.5 %	5,817	0.7	\$181	1,914	28.4 %	20,660	0.7	\$47	2,427	36.1 %	26,001	0.5	\$37
Female	404	9.4	4,116	0.7	184	1,364	31.7	14,778	0.7	46	1,731	40.2	18,784	0.5	36
Disabled	75	4.7	828	0.7	523	444	27.9	4,923	0.7	51	693	43.6	7,930	0.4	32
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	20	3.2	214	0.7	631	101	16.0	1,113	0.6	46	214	33.9	2,488	0.3	23
21-44	55	5.9	614	0.7	485	332	35.8	3,720	0.7	52	467	50.4	5,317	0.4	37
45-64	0	0.0	0	0.0	0	11	64.7	90	0.8	88	10	58.8	101	0.4	24
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	329	12.1	3,288	0.7	99	920	33.9	9,855	0.7	44	1,038	38.2	10,854	0.5	38
Other Eligibles	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	1	2.3	4	0.8	879	4	9.3	36	0.1	8	13	30.2	128	0.3	23
21-44	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
45-64	53	7.1	568	0.7	146	332	44.6	3,696	0.7	48	336	45.2	3,736	0.5	44
65-74	131	14.1	1,279	0.7	84	352	37.8	3,811	0.7	42	403	43.3	4,156	0.5	39
75-84	144	14.5	1,437	0.8	92	232	23.4	2,312	0.8	41	286	28.8	2,834	0.4	31
85 and older	167	6.9	1,701	0.7	173	550	22.7	5,882	0.7	50	696	28.7	7,217	0.6	41
Male	36	2.6	397	0.7	440	249	18.0	2,756	0.7	51	275	19.9	3,025	0.4	36
Disabled	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
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	3	42.9	12	0.8	50	1	14.3	4	0.3	2
15-20	13	1.7	155	0.7	652	82	10.7	927	0.6	46	141	18.3	1,558	0.4	35
21-44	23	3.9	242	0.7	304	163	27.3	1,811	0.7	54	132	22.1	1,451	0.5	37
45-64	0	0.0	0	0.0	0	1	14.3	6	0.7	47	1	14.3	12	0.1	1
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	131	12.6	1,304	0.7	91	301	28.9	3,126	0.8	50	421	40.4	4,192	0.6	45
Other Eligibles	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	100.0	24	0.5	6
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	2	13.3	24	0.3	41	1	6.7	8	0.3	5	6	40.0	60	0.2	10
21-44	0	0.0	0	0.0	0	1	9.1	4	1.0	14	4	36.4	21	0.6	33
45-64	35	8.8	361	0.6	85	141	35.6	1,530	0.7	46	177	44.7	1,869	0.7	48
65-74	54	13.9	502	0.8	94	104	26.8	1,043	0.8	56	153	39.4	1,537	0.6	44
75-84	40	17.5	417	0.7	96	54	23.6	541	0.8	47	79	34.5	681	0.6	43
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
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 2004 file for Wyoming, released by CMS in 02/2008. This table was produced on 03/25/2008.

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

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

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

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

TABLE 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, 2004

Beneficiary Characteristics	ANALGESICS - ANTI-INFLAMMATORY					ANTIHYPERTENSIVE					Number of Beneficiaries	Number of Benefit Months
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean of Rx per Benefit Month	Mean 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 Rx \$ per Benefit Month		
All	1,793	26.6 %	19,966	0.4	\$41	1,175	17.5 %	13,081	0.6	\$60	6,729	69,638
Female	1,308	30.4	14,583	0.4	45	786	18.3	8,730	0.6	60	4,305	44,553
Disabled	557	35.1	6,422	0.4	52	287	18.1	3,250	0.6	56	1,589	17,332
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	1	12
15-20	2	25.0	24	0.1	5	0	0.0	0	0.0	0	8	96
21-44	169	26.7	1,937	0.3	56	56	8.9	655	0.5	48	632	6,971
45-64	379	40.9	4,377	0.4	51	225	24.3	2,539	0.6	57	927	10,082
65-74	5	29.4	60	0.4	33	5	29.4	44	0.7	81	17	141
75-84	2	100.0	24	0.4	36	1	50.0	12	0.1	6	2	24
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	6
Other Eligibles	751	27.7	8,161	0.5	39	499	18.4	5,480	0.6	62	2,716	27,221
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	0	0
21-44	16	37.2	161	0.3	40	1	2.3	10	0.1	3	43	336
45-64	0	0.0	0	0.0	0	0	0.0	0	0.0	0	6	44
65-74	240	32.3	2,714	0.4	46	225	30.2	2,510	0.6	61	744	7,981
75-84	273	29.4	2,994	0.5	35	211	22.7	2,312	0.6	63	930	9,411
85 and older	222	22.4	2,292	0.6	37	62	6.2	648	0.7	66	993	9,449
Male	485	20.0	5,383	0.4	29	389	16.0	4,351	0.6	61	2,424	25,085
Disabled	261	18.9	3,005	0.4	24	207	15.0	2,377	0.6	58	1,382	15,065
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	1	12
15-20	1	14.3	4	1.0	8	0	0.0	0	0.0	0	7	60
21-44	126	16.4	1,452	0.3	20	77	10.0	889	0.5	50	769	8,464
45-64	131	22.0	1,513	0.4	28	129	21.6	1,476	0.6	63	596	6,456
65-74	3	42.9	36	0.4	37	1	14.3	12	0.6	48	7	66
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	7
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
Other Eligibles	224	21.5	2,378	0.5	35	182	17.5	1,974	0.7	65	1,042	10,020
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12
6-14	1	50.0	12	1.1	544	1	50.0	12	0.7	15	2	24
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
21-44	3	20.0	34	0.3	18	1	6.7	12	0.6	61	15	109
45-64	2	18.2	7	0.7	110	1	9.1	4	0.3	26	11	56
65-74	77	19.4	847	0.5	37	103	26.0	1,154	0.7	72	396	4,118
75-84	96	24.7	1,023	0.5	28	60	15.5	627	0.6	59	388	3,744
85 and older	45	19.7	455	0.5	35	16	7.0	165	0.6	54	229	1,957
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 2004 file for Wyoming, released by CMS in 02/2008. This table was produced on 03/25/2008.

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

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

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

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

TABLE D.8
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BENEFICIARY CHARACTERISTIC^{a, b}
 DUAL ELIGIBLE BENEFICIARIES, WYOMING, 2004

Beneficiary Characteristics	Rx \$ per Benefit Month	Number of Rx per Benefit Month	Number of All-Year Nursing Facility Residents	Benefit Months Among All-Year Nursing Facility Residents
All	\$386	7.4	1,529	15,241
Age				
0-64	603	8.3	118	1,260
65-74	486	8.5	188	1,982
75-84	407	8.1	503	4,993
85 and older	304	6.5	720	7,006
Unknown	0	0.0	0	0
Gender				
Female	380	7.6	1,085	10,924
Male	401	7.1	444	4,317
Unknown	0	0.0	0	0
Race				
White	390	7.5	1,441	14,288
African American	452	6.4	11	120
Other/unknown	308	6.2	77	833
Basis of Eligibility^c				
Aged	367	7.4	1,411	13,981
Disabled	603	8.3	118	1,260
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 2004 file for Wyoming, released by CMS in 02/2008. This table was produced on 03/25/2008.

a. Table D.8 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their 2004 Medicaid enrollment. A total of 729 beneficiaries who were in nursing facilities for part of their enrollment and their 6,421 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, 2004

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				\$ per Rx				Total Number of Rx	Total Rx \$	Users		
	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic			Number of Users	As a Percentage of Dual All-Year Nursing Facility Residents	Number of Benefit Months
Anti-infective Agents	0.4	0.2	0.0	0.2	\$21	\$14	\$2	\$5	\$53	\$92	\$62	\$24	4,201	\$220,808	1,001	65.5 %	10,487
Biologicals	0.1	0.1	0.0	0.0	2	1	0	1	20	14	31	26	61	1,242	55	3.6	578
Antineoplastic Agents	0.8	0.2	0.0	0.6	138	95	2	41	167	525	125	65	522	87,170	67	4.4	630
Endocrine/Metabolic Drugs	1.3	0.5	0.1	0.7	53	39	3	12	41	77	22	17	10,991	448,037	824	53.9	8,465
Cardiovascular Agents	2.2	0.4	0.1	1.6	57	28	3	26	26	63	21	16	25,439	668,638	1,159	75.8	11,815
Respiratory Agents	0.9	0.5	0.0	0.3	52	44	1	7	60	84	32	22	5,253	315,123	593	38.8	6,084
Gastrointestinal Agents	1.0	0.1	0.1	0.7	43	18	4	20	43	134	31	28	8,707	374,928	846	55.3	8,793
Genitourinary Agents	0.8	0.6	0.0	0.2	57	49	3	6	71	85	62	30	4,088	289,649	472	30.9	5,051
CNS Drugs	1.6	0.8	0.1	0.7	136	108	9	19	86	133	80	29	18,087	1,556,079	1,109	72.5	11,436
Stimulants/Anti-obesity/Anorexia	0.8	0.5	0.0	0.3	84	79	0	5	110	165	0	16	163	18,006	20	1.3	215
Miscellaneous Psychological/Neurological Agents	0.9	0.9	0.0	0.0	142	142	0	0	157	157	0	0	2,126	333,876	233	15.2	2,351
Analgesics and Anesthetics	1.2	0.4	0.0	0.7	65	52	2	12	56	133	62	16	10,307	580,673	874	57.2	8,885
Neuromuscular Agents	1.4	0.3	0.3	0.8	89	36	23	31	65	105	82	41	6,594	429,848	451	29.5	4,812
Nutritional Products	0.9	0.0	0.0	0.9	18	0	1	17	20	11	35	20	5,085	99,990	540	35.3	5,501
Hematological Agents	1.4	0.2	0.2	1.0	58	42	6	11	42	186	33	11	6,311	267,182	444	29.0	4,570
Topical Products	0.5	0.2	0.0	0.3	22	12	2	8	44	63	45	30	3,723	162,130	685	44.8	7,469
Miscellaneous Products	0.3	0.1	0.0	0.2	6	1	0	5	20	14	0	21	293	5,775	88	5.8	933
Unknown Therapeutic Category	0.7	0.0	0.0	0.0	12	0	0	0	17	0	0	0	1,463	24,490	201	13.1	2,121
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.	113,414	5,883,644	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2004 file for Wyoming, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004. A total of 729 beneficiaries who were in nursing facilities for part of their enrollment and their 6,421 benefit months were excluded from the analysis.

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

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

d. For information about these therapeutic categories, see Wolters Kluwer Health, <http://www.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, 2004

Top 10 Drug Groups in Nursing Facilities	Total Medicaid Rx \$	Users			Among Users		
		Number of Users	As a Percentage of All-Year Nursing Facility Residents	Number of Benefit Months	Number of Rx per Benefit Month	\$ per Rx	Rx \$ per Benefit Month
ANTIPSYCHOTICS	\$951,851	644	42.1 %	6,850	0.8	\$167	\$139
ANTIDEPRESSANTS	544,009	988	64.6	10,359	0.9	58	53
ANALGESICS - Narcotic	418,092	972	63.6	9,796	0.7	58	43
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	333,876	271	17.7	2,718	0.8	157	123
ULCER DRUGS	301,712	788	51.5	8,273	0.8	44	36
ANTICONVULSANT	272,388	370	24.2	4,007	1.0	67	68
ANTIDIABETIC	231,719	459	30.0	4,826	0.9	55	48
ANTIASTHMATIC	224,209	545	35.6	5,550	0.6	67	40
ANTIHYPERTENSIVE	206,112	715	46.8	7,371	0.9	32	28
URINARY ANTISPASMODICS	200,036	274	17.9	2,908	0.8	83	69
Total	3,684,004	6,026		62,658	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2004 file for Wyoming, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004. A total of 729 beneficiaries who were in nursing facilities for part of their enrollment and their 6,421 benefit months were excluded from the analysis.

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

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

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

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

TABLE 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, 2004

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 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	51,801	\$3,684,004	644	42.1 %	6,850	0.8	\$139	988	64.6 %	10,359	0.9	\$53
Female	37,108	2,595,299	449	41.4	4,841	0.8	131	724	66.7	7,603	0.9	52
Disabled	3,173	322,071	31	49.2	350	0.8	188	61	96.8	664	0.9	61
64 or younger	3,173	322,071	31	49.2	350	0.8	188	61	96.8	664	0.9	61
65-74	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	33,935	2,273,228	418	40.9	4,491	0.8	127	663	64.9	6,939	0.9	51
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	4,050	307,739	45	47.4	496	0.8	146	74	77.9	791	0.9	47
75-84	13,297	899,532	164	48.7	1,784	0.9	135	254	75.4	2,689	0.9	49
85 and older	16,588	1,065,957	209	35.4	2,211	0.8	116	335	56.8	3,459	0.9	54
Male	14,693	1,088,705	195	43.9	2,009	0.9	158	264	59.5	2,756	0.9	53
Disabled	2,260	217,692	20	36.4	240	1.1	286	33	60.0	363	0.9	57
64 or younger	2,260	217,692	20	36.4	240	1.1	286	33	60.0	363	0.9	57
65-74	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	12,433	871,013	175	45.0	1,769	0.8	140	231	59.4	2,393	0.9	53
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	4,083	292,312	47	50.5	506	0.9	171	64	68.8	703	1.0	57
75-84	4,901	344,684	84	50.6	802	0.8	136	91	54.8	966	0.9	52
85 and older	3,449	234,017	44	33.8	461	0.8	113	76	58.5	724	0.8	51
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 2004 file for Wyoming, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004. A total of 729 beneficiaries who were in nursing facilities for part of their enrollment and their 6,421 benefit months were excluded from the analysis.

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

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

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

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

TABLE 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, 2004

Beneficiary Characteristics	ANALGESICS - Narcotic					MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL					ULCER DRUGS				
	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	972	63.6 %	9,796	0.7	\$43	271	17.7 %	2,718	0.8	\$123	788	51.5 %	8,273	0.8	\$37
Female	749	69.0	7,649	0.8	47	185	17.1	1,864	0.8	126	568	52.4	5,972	0.8	36
Disabled	47	74.6	540	1.1	100	11	17.5	105	0.8	530	38	60.3	421	0.8	50
64 or younger	47	74.6	540	1.1	100	11	17.5	105	0.8	530	38	60.3	421	0.8	50
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	702	68.7	7,109	0.7	43	174	17.0	1,759	0.8	102	530	51.9	5,551	0.8	35
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	64	67.4	709	0.7	56	21	22.1	223	0.8	147	75	78.9	823	0.8	40
75-84	242	71.8	2,414	0.8	45	64	19.0	629	0.7	92	171	50.7	1,766	0.9	37
85 and older	396	67.1	3,986	0.7	40	89	15.1	907	0.8	98	284	48.1	2,962	0.8	33
Male	223	50.2	2,147	0.6	27	86	19.4	854	0.8	116	220	49.5	2,301	0.8	38
Disabled	30	54.5	314	0.6	14	5	9.1	41	0.8	444	34	61.8	378	0.9	65
64 or younger	30	54.5	314	0.6	14	5	9.1	41	0.8	444	34	61.8	378	0.9	65
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	193	49.6	1,833	0.6	29	81	20.8	813	0.8	100	186	47.8	1,923	0.8	32
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	54	58.1	528	0.7	41	15	16.1	133	0.8	99	55	59.1	570	0.8	37
75-84	81	48.8	768	0.5	25	37	22.3	375	0.8	99	76	45.8	778	0.8	28
85 and older	58	44.6	537	0.5	22	29	22.3	305	0.8	101	55	42.3	575	0.8	33
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 2004 file for Wyoming, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004. A total of 729 beneficiaries who were in nursing facilities for part of their enrollment and their 6,421 benefit months were excluded from the analysis.

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

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

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

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

TABLE 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, 2004

Beneficiary Characteristics	ANTICONVULSANT					ANTIDIABETIC					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	370	24.2 %	4,007	1.0	\$68	459	30.0 %	4,826	0.9	\$48	545	35.6 %	5,550	0.6	\$40
Female	236	21.8	2,567	1.0	61	345	31.8	3,581	0.9	46	374	34.5	3,841	0.5	35
Disabled	46	73.0	523	1.1	93	23	36.5	246	0.9	47	23	36.5	269	0.3	24
64 or younger	46	73.0	523	1.1	93	23	36.5	246	0.9	47	23	36.5	269	0.3	24
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	190	18.6	2,044	0.9	52	322	31.5	3,335	0.9	46	351	34.3	3,572	0.5	36
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	35	36.8	387	1.2	64	37	38.9	407	0.8	63	38	40.0	417	0.6	37
75-84	92	27.3	983	1.0	56	146	43.3	1,569	0.8	44	152	45.1	1,529	0.6	43
85 and older	63	10.7	674	0.8	40	139	23.6	1,359	0.9	43	161	27.3	1,626	0.5	30
Male	134	30.2	1,440	1.1	81	114	25.7	1,245	0.9	54	171	38.5	1,709	0.8	52
Disabled	44	80.0	499	1.1	98	16	29.1	172	0.8	55	7	12.7	72	0.7	48
64 or younger	44	80.0	499	1.1	98	16	29.1	172	0.8	55	7	12.7	72	0.7	48
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	90	23.1	941	1.1	72	98	25.2	1,073	0.9	54	164	42.2	1,637	0.8	52
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	36	38.7	393	1.3	92	27	29.0	307	1.0	42	54	58.1	570	1.0	65
75-84	32	19.3	301	0.9	54	36	21.7	388	1.0	65	66	39.8	657	0.6	44
85 and older	22	16.9	247	0.9	64	35	26.9	378	0.8	52	44	33.8	410	0.8	46
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 2004 file for Wyoming, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004. A total of 729 beneficiaries who were in nursing facilities for part of their enrollment and their 6,421 benefit months were excluded from the analysis.

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

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

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

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

TABLE 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, 2004

Beneficiary Characteristics	ANTIHYPERTENSIVE					URINARY ANTISPASMODICS					Benefit Months Among All-Year	
	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	Nursing Facility Residents
All	715	46.8 %	7,371	0.9	\$28	274	17.9 %	2,908	0.8	\$69	1,529	15,241
Female	513	47.3	5,239	0.9	28	205	18.9	2,183	0.8	69	1,085	10,924
Disabled	17	27.0	188	1.0	34	16	25.4	177	0.9	69	63	669
64 or younger	17	27.0	188	1.0	34	16	25.4	177	0.9	69	63	669
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
Other Eligibles	496	48.5	5,051	0.9	28	189	18.5	2,006	0.8	69	1,022	10,255
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	41	43.2	427	0.9	29	22	23.2	242	0.8	65	95	1,009
75-84	187	55.5	1,917	0.9	28	71	21.1	774	0.8	68	337	3,414
85 and older	268	45.4	2,707	0.9	27	96	16.3	990	0.8	70	590	5,832
Male	202	45.5	2,132	0.9	28	69	15.5	725	0.8	69	444	4,317
Disabled	28	50.9	298	0.9	35	10	18.2	108	0.9	82	55	591
64 or younger	28	50.9	298	0.9	35	10	18.2	108	0.9	82	55	591
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
Other Eligibles	174	44.7	1,834	0.9	27	59	15.2	617	0.8	67	389	3,726
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	42	45.2	449	0.9	30	16	17.2	181	0.7	60	93	973
75-84	72	43.4	778	0.9	28	23	13.9	235	0.9	66	166	1,579
85 and older	60	46.2	607	0.8	23	20	15.4	201	0.8	75	130	1,174
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 2004 file for Wyoming, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004. A total of 729 beneficiaries who were in nursing facilities for part of their enrollment and their 6,421 benefit months were excluded from the analysis.

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

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

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

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

TABLE D.11
USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
AMONG DUALS, BY BENEFICIARY CHARACTERISTIC^{a,b}
WYOMING, 2004

Beneficiary Characteristics	Number of Beneficiaries with at Least One Part D Excluded Rx	Percentage of Beneficiaries with at Least One Part D Excluded Rx	Number of Part D Excluded Rx per Beneficiary	Total Number Part D Excluded Rx	Part D Excluded Rx \$ per Beneficiary	Total Part D Excluded Rx \$	\$ per Part D Excluded Rx	Part D Excluded Rx \$ as a Percentage of All Dual Rx \$	Total Number of Beneficiaries
All	3,945	58.6 %	7.0	46,786	\$177	\$1,191,283	\$25	5.3 %	6,729
Age									
5 and younger	1	100.0	11.0	11	360	360	33	10.7	1
6-14	4	100.0	18.0	72	343	1,371	19	3.1	4
15-20	9	60.0	16.6	249	914	13,710	55	31.4	15
21-44	758	52.0	5.3	7,796	143	207,911	27	4.3	1,459
45-64	973	63.2	8.7	13,329	261	401,768	30	5.9	1,540
65-74	676	58.1	6.8	7,915	190	221,241	28	6.2	1,164
75-84	783	59.2	7.4	9,779	146	192,531	20	4.8	1,322
85 and older	741	60.5	6.2	7,635	125	152,391	20	4.9	1,224
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Basis of Eligibility^c									
Aged	2,180	59.3	6.8	25,095	151	554,554	22	5.2	3,674
Disabled	1,725	58.1	7.2	21,466	213	631,800	29	5.4	2,971
Adults	32	42.7	2.0	153	45	3,372	22	2.9	75
Children	3	100.0	18.7	56	368	1,105	20	4.4	3
Unknown	5	83.3	2.7	16	75	452	28	1.7	6
Gender									
Female	2,736	63.6	7.7	33,007	190	816,967	25	5.4	4,305
Male	1,209	49.9	5.7	13,779	154	374,316	27	5.1	2,424
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Race									
White	3,572	60.9	7.4	43,502	190	1,116,416	26	5.4	5,866
African American	35	44.3	4.1	323	69	5,468	17	2.8	79
Other/unknown	338	43.1	3.8	2,961	89	69,399	23	4.2	784
Use of Nursing Facilities^d									
Entire year	955	62.5	7.6	11,551	138	211,177	18	3.6	1,529
Part year	506	69.4	7.6	5,551	177	128,841	23	5.9	729
None	2,484	55.6	6.6	29,684	190	851,265	29	5.9	4,471
Maintenance Assistance Status									
Cash	1,171	47.7	4.1	10,114	117	288,090	28	4.4	2,455
Medically needy	0	0.0	0.0	0	0	0	0	0.0	0
Poverty related	37	47.4	2.9	223	62	4,857	22	3.5	78
Other/unknown	2,737	65.2	8.7	36,449	214	898,336	25	5.7	4,196

Table D11

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2004 file for Wyoming, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004.

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

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

d. Please refer to footnote f on Table 1 for methodology used to determine use of nursing facilities.

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

TABLE 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, 2004

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	0.7	\$17	\$25	\$0	\$2	69,638
Age						
5 and younger	0.9	30	33	0	0	12
6-14	1.5	29	19	0	0	48
15-20	1.6	88	55	0	26	156
21-44	0.5	13	27	0	3	15,880
45-64	0.8	24	30	0	3	16,638
65-74	0.6	18	28	0	2	12,306
75-84	0.7	15	20	0	2	13,186
85 and older	0.7	13	20	0	2	11,412
Unknown	0.0	0	0	0	0	0
Basis of Eligibility^c						
Aged	0.7	15	22	0	2	36,596
Disabled	0.7	20	29	0	3	32,397
Adults	0.3	6	22	0	3	548
Children	1.6	31	20	0	0	36
Unknown	0.3	7	28	0	1	61
Gender						
Female	0.7	18	25	0	3	44,553
Male	0.5	15	27	0	2	25,085
Unknown	0.0	0	0	0	0	0
Race						
White	0.7	18	26	0	3	60,479
African American	0.4	7	17	0	1	820
Other/unknown	0.4	8	23	0	1	8,339
Use of Nursing Facilities^d						
Entire year	0.8	14	18	0	3	15,241
Part year	0.9	20	23	0	3	6,421
None	0.6	18	29	0	2	47,976
Maintenance Assistance Status						
Cash	0.4	11	28	0	2	26,422
Medically needy	0.0	0	0	0	0	0
Poverty related	0.3	6	22	0	2	768
Other/unknown	0.9	21	25	0	3	42,448

Source: Data for this table are from the MAX 2004 file for Wyoming, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004.

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

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

d. Please refer to footnote f on Table 1 for methodology used to determine use of nursing facilities.

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

TABLE D.13
USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
FOR SELECTED DRUG CATEGORIES AMONG DUALS^{a,b,c}
WYOMING, 2004

Drug Category	Number of Users	Rx \$ per User	Total Rx \$	Rx \$ as a Percentage of All Part D Excluded Rx \$	Total Number Rx.	\$ per Rx	Number Rx as a Percentage of All Part D Excluded Rx
All	6,402	\$186	\$1,191,283	100.0 %	46,786	\$25	100.0 %
Anorexia or weight loss/gain	0	0	0	0.0	0	0	0.0
Fertility drugs	0	0	0	0.0	0	0	0.0
Drugs for cosmetic purposes	3	10	29	0.0	3	10	0.0
Cough and cold medications	889	95	84,222	7.1	2,752	31	5.9
Vitamins and minerals	1,477	161	237,890	20.0	10,806	22	23.1
Non-prescription drugs	2,375	264	627,531	52.7	22,493	28	48.1
Barbiturates	64	66	4,200	0.4	564	7	1.2
Benzodiazepines	1,468	118	172,645	14.5	9,508	18	20.3
Other Part D Excl Rx Drugs	126	514	64,766	5.4	660	98	1.4

Source: Data for this table are from the MAX 2004 file for Wyoming, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004. A user is a beneficiary who had at least one prescription filled for a Part D excluded drug in 2004. A beneficiary who used drugs from two or more Part D excluded categories was counted as a user for each category. Therefore, the sum of users across drug categories may exceed the total number of individual users as noted on Table 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, 2004

Total Number of Dual Eligible Beneficiaries	6,729
Total Pharmacy Reimbursement for Dual Eligible Beneficiaries	\$22,384,414
Mean Pharmacy Reimbursement per Dual Eligible Beneficiary	\$3,327

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	837	12.4 %	\$0	0.0 %
1-500	1,011	15.0	214,696	1.0
501-1,000	613	9.1	455,368	2.0
1,001-1,500	511	7.6	631,587	2.8
1,501-2,000	450	6.7	784,611	3.5
2,001-2,500	384	5.7	861,866	3.9
2,501-3,000	346	5.1	954,258	4.3
3,001-3,500	296	4.4	961,806	4.3
3,501-4,000	281	4.2	1,052,561	4.7
4,001-4,500	239	3.6	1,012,638	4.5
4,501-5,000	240	3.6	1,136,298	5.1
5,001-5,500	204	3.0	1,068,778	4.8
5,501-6,000	145	2.2	830,663	3.7
6,001-6,500	147	2.2	922,731	4.1
6,501-7,000	124	1.8	836,711	3.7
7,001-7,500	106	1.6	768,462	3.4
7,501-8,000	81	1.2	626,239	2.8
8,001-8,500	84	1.2	694,535	3.1
8,501-9,000	74	1.1	648,797	2.9
9,001-9,500	69	1.0	638,437	2.9
9,501-10,000	34	0.5	330,686	1.5
10,001+	453	6.7	6,952,686	31.1

Source: Data for this table are from the MAX 2004 file for Wyoming, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004.

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

SUPPLEMENTAL TABLE 1A
 MEDICAID PHARMACY REIMBURSEMENT FOR DISABLED DUAL ELIGIBLE BENEFICIARIES UNDER AGE 65^{a, b, c}
 WYOMING, 2004

Total Number of Disabled Dual Eligible Beneficiaries, Age < 65	2,941
Total Pharmacy Reimbursement for Disabled Dual Eligible Beneficiaries, Age < 65	\$11,551,967
Mean Pharmacy Reimbursement per Disabled Dual Eligible Beneficiary, Age < 65	\$3,928

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Disabled Dual Beneficiaries, Age < 65	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	441	15.0 %	0	0.0 %
1-500	479	16.3	93,576	0.8
501-1,000	254	8.6	189,495	1.6
1,001-1,500	179	6.1	222,093	1.9
1,501-2,000	155	5.3	272,596	2.4
2,001-2,500	128	4.4	287,039	2.5
2,501-3,000	111	3.8	303,989	2.6
3,001-3,500	97	3.3	314,221	2.7
3,501-4,000	101	3.4	377,760	3.3
4,001-4,500	87	3.0	369,464	3.2
4,501-5,000	78	2.7	369,793	3.2
5,001-5,500	84	2.9	440,729	3.8
5,501-6,000	61	2.1	349,537	3.0
6,001-6,500	69	2.3	434,118	3.8
6,501-7,000	61	2.1	410,932	3.6
7,001-7,500	47	1.6	339,964	2.9
7,501-8,000	37	1.3	286,079	2.5
8,001-8,500	45	1.5	372,683	3.2
8,501-9,000	40	1.4	350,894	3.0
9,001-9,500	40	1.4	370,484	3.2
9,501-10,000	16	0.5	156,227	1.4
10,001+	331	11.3	5,240,294	45.4

Source: Data for this table are from the MAX 2004 file for Wyoming, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004.

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

c. This table is limited to dual eligible beneficiaries who were under age 65 and also indicated as disabled in the MAX files. Therefore, dual eligible beneficiaries under age 65 in "adults" or "children" basis-of-eligibility categories in Table D.2 are excluded because they were not classified as disabled in the MAX files. Disabled dual eligible beneficiaries age 65 and older are included in Supplemental Tables 1B through 1E, depending on their age.

SUPPLEMENTAL TABLE 1B
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 AND OLDER^{a, b}
 WYOMING, 2004

Total Number of Dual Eligible Beneficiaries, Age 65+	3,710
Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65+	\$10,671,535
Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65+	\$2,876

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 65+	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	379	10.2 %	0	0.0 %
1-500	517	13.9	119,159	1.1
501-1,000	346	9.3	256,705	2.4
1,001-1,500	330	8.9	407,335	3.8
1,501-2,000	291	7.8	505,295	4.7
2,001-2,500	251	6.8	563,872	5.3
2,501-3,000	232	6.3	642,170	6.0
3,001-3,500	196	5.3	637,945	6.0
3,501-4,000	178	4.8	667,606	6.3
4,001-4,500	148	4.0	626,143	5.9
4,501-5,000	161	4.3	761,515	7.1
5,001-5,500	117	3.2	612,655	5.7
5,501-6,000	84	2.3	481,126	4.5
6,001-6,500	78	2.1	488,613	4.6
6,501-7,000	63	1.7	425,779	4.0
7,001-7,500	58	1.6	421,327	3.9
7,501-8,000	42	1.1	324,806	3.0
8,001-8,500	38	1.0	313,378	2.9
8,501-9,000	34	0.9	297,903	2.8
9,001-9,500	29	0.8	267,953	2.5
9,501-10,000	18	0.5	174,459	1.6
10,001+	120	3.2	1,675,791	15.7

Source: Data for this table are from the MAX 2004 file for Wyoming, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004.

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

SUPPLEMENTAL TABLE 1C
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 TO 74 ^{a, b}
 WYOMING, 2004

Total Number of Dual Eligible Beneficiaries, Age 65-74	1,164
Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65-74	\$3,587,801
Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65-74	\$3,082

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 65-74	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	185	15.9 %	0	0.0 %
1-500	160	13.7	32,952	0.9
501-1,000	91	7.8	68,862	1.9
1,001-1,500	91	7.8	113,924	3.2
1,501-2,000	69	5.9	121,350	3.4
2,001-2,500	75	6.4	166,986	4.7
2,501-3,000	55	4.7	153,045	4.3
3,001-3,500	48	4.1	156,193	4.4
3,501-4,000	67	5.8	251,000	7.0
4,001-4,500	34	2.9	143,130	4.0
4,501-5,000	45	3.9	213,431	5.9
5,001-5,500	33	2.8	172,815	4.8
5,501-6,000	25	2.1	143,250	4.0
6,001-6,500	32	2.7	200,685	5.6
6,501-7,000	13	1.1	87,034	2.4
7,001-7,500	19	1.6	138,112	3.8
7,501-8,000	15	1.3	115,938	3.2
8,001-8,500	16	1.4	132,330	3.7
8,501-9,000	13	1.1	113,665	3.2
9,001-9,500	12	1.0	110,641	3.1
9,501-10,000	10	0.9	96,993	2.7
10,001+	56	4.8	855,465	23.8

Source: Data for this table are from the MAX 2004 file for Wyoming, released by CMS in 02/2008. This table was produced on 03/25/2008.

- 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 2004.
- 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, 2004

Total Number of Dual Eligible Beneficiaries, Age 75-84	1,322
Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 75-84	\$4,003,314
Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 75-84	\$3,028

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 75-84	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	126	9.5 %	0	0.0 %
1-500	156	11.8	36,761	0.9
501-1,000	112	8.5	81,435	2.0
1,001-1,500	120	9.1	149,336	3.7
1,501-2,000	109	8.2	189,199	4.7
2,001-2,500	88	6.7	198,832	5.0
2,501-3,000	89	6.7	244,897	6.1
3,001-3,500	72	5.4	233,109	5.8
3,501-4,000	58	4.4	217,291	5.4
4,001-4,500	51	3.9	216,593	5.4
4,501-5,000	74	5.6	348,858	8.7
5,001-5,500	51	3.9	266,321	6.7
5,501-6,000	30	2.3	171,691	4.3
6,001-6,500	28	2.1	174,604	4.4
6,501-7,000	25	1.9	169,205	4.2
7,001-7,500	24	1.8	174,145	4.4
7,501-8,000	15	1.1	116,012	2.9
8,001-8,500	15	1.1	122,968	3.1
8,501-9,000	14	1.1	123,381	3.1
9,001-9,500	16	1.2	148,100	3.7
9,501-10,000	5	0.4	48,664	1.2
10,001+	44	3.3	571,912	14.3

Source: Data for this table are from the MAX 2004 file for Wyoming, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004.

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

SUPPLEMENTAL TABLE 1E
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 85 AND OLDER^{a, b}
 WYOMING, 2004

Total Number of Dual Eligible Beneficiaries, Age 85+	1,224
Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 85+	\$3,080,420
Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 85+	\$2,517

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 85+	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	68	5.6 %	0	0.0 %
1-500	201	16.4	49,446	1.6
501-1,000	143	11.7	106,408	3.5
1,001-1,500	119	9.7	144,075	4.7
1,501-2,000	113	9.2	194,746	6.3
2,001-2,500	88	7.2	198,054	6.4
2,501-3,000	88	7.2	244,228	7.9
3,001-3,500	76	6.2	248,643	8.1
3,501-4,000	53	4.3	199,315	6.5
4,001-4,500	63	5.1	266,420	8.6
4,501-5,000	42	3.4	199,226	6.5
5,001-5,500	33	2.7	173,519	5.6
5,501-6,000	29	2.4	166,185	5.4
6,001-6,500	18	1.5	113,324	3.7
6,501-7,000	25	2.0	169,540	5.5
7,001-7,500	15	1.2	109,070	3.5
7,501-8,000	12	1.0	92,856	3.0
8,001-8,500	7	0.6	58,080	1.9
8,501-9,000	7	0.6	60,857	2.0
9,001-9,500	1	0.1	9,212	0.3
9,501-10,000	3	0.2	28,802	0.9
10,001+	20	1.6	248,414	8.1

Source: Data for this table are from the MAX 2004 file for Wyoming, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004.

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, 2004

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Disabled	Adults	Children	Unknown	All	Aged	Disabled	Adults	Children	Unknown
All	6,729	3,674	2,971	75	3	6	69,638	36,596	32,397	548	36	61
Age												
5 and younger	1	0	0	0	1	0	12	0	0	0	12	0
6-14	4	0	2	0	2	0	48	0	24	0	24	0
15-20	15	0	15	0	0	0	156	0	156	0	0	0
21-44	1,459	0	1,401	56	0	2	15,880	0	15,435	422	0	23
45-64	1,540	1	1,523	15	0	1	16,638	1	16,538	89	0	10
65-74	1,164	1,133	24	4	0	3	12,306	12,034	207	37	0	28
75-84	1,322	1,318	4	0	0	0	13,186	13,155	31	0	0	0
85 and older	1,224	1,222	2	0	0	0	11,412	11,406	6	0	0	0
Unknown	0	0	0	0	0	0		0	0	0	0	0
Gender												
Female	4,305	2,662	1,589	48	0	6	44,553	26,789	17,332	371	0	61
Male	2,424	1,012	1,382	27	3	0	25,085	9,807	15,065	177	36	0
Unknown	0	0	0	0	0	0		0	0	0	0	0
Race												
White	5,866	3,188	2,609	60	3	6	60,479	31,354	28,565	463	36	61
African American	79	32	47	0	0	0	820	339	481	0	0	0
Other/unknown	784	454	315	15	0	0	8,339	4,903	3,351	85	0	0
Use of Nursing Facilities^c												
Entire year	1,529	1,411	118	0	0	0	15,241	13,981	1,260	0	0	0
Part year	729	654	75	0	0	0	6,421	5,665	756	0	0	0
None	4,471	1,609	2,778	75	3	6	47,976	16,950	30,381	548	36	61
Maintenance Assistance Status												
Cash	2,455	862	1,542	51	0	0	26,422	9,565	16,494	363	0	0
Medically needy	0	0	0	0	0	0		0	0	0	0	0
Poverty related	78	23	36	11	2	6	768	243	367	73	24	61
Other/unknown	4,196	2,789	1,393	13	1	0	42,448	26,788	15,536	112	12	0
Dual Status^d												
Full dual, all year	6,522	3,543	2,897	73	3	6	67,439	35,183	31,633	526	36	61
Full dual, part year	207	131	74	2	0	0	2,199	1,413	764	22	0	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	6,729	3,674	2,971	75	3	6	69,638	36,596	32,397	548	36	61
FFS part year, with Rx claims	0	0	0	0	0	0		0	0	0	0	0
FFS part year, no Rx claims	0	0	0	0	0	0		0	0	0	0	0
MC all year, with Rx claims	0	0	0	0	0	0		0	0	0	0	0
MC all year, no Rx claims	0	0	0	0	0	0		0	0	0	0	0

Source: Data for this table are from the MAX 2004 file for Wyoming, released by CMS in 02/2008. This table was produced on 03/25/2008.

- 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 2004. 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, 2004

Beneficiary Characteristics	Beneficiaries and Benefit Months in Cell F of Table 1		Included in Cell G of Table 1		Excluded from Cell G 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	6,729	69,638	6,729	69,638	0	0
Fee-for-service (FFS) all year	6,729	69,638	6,729	69,638	0	0
FFS part year, with Rx claims	0	0	0	0	0	0
FFS part year, with no Rx claims	0	0	0	0	0	0
Managed care (MC) all year, with Rx claims	0	0	0	0	0	0
MC all year, with no Rx claims	0	0	0	0	0	0

Source: Data for this table are from the MAX 2004 file for Wyoming, released by CMS in 02/2008. This table was produced on 03/25/2008.

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

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