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

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

NONDUAL 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	**68,084**	**92**	**4,814**	**13,456**	**49,600**	**122**	**603,080**	**651**	**49,663**	**99,163**	**452,520**	**1,083**
Age												
5 and younger	21,595	0	266	0	21,329	0	193,911	0	2,613	0	191,298	0
6-14	20,390	0	723	0	19,667	0	195,637	0	7,924	0	187,713	0
15-20	10,266	0	569	1,310	8,385	2	88,988	0	6,191	9,964	72,820	13
21-44	13,084	0	1,626	11,260	135	63	100,035	0	16,866	82,068	587	514
45-64	2,568	0	1,627	884	0	57	23,734	0	16,053	7,125	0	556
65-74	32	29	3	0	0	0	272	256	16	0	0	0
75-84	24	24	0	0	0	0	184	184	0	0	0	0
85 and older	39	39	0	0	0	0	211	211	0	0	0	0
Unknown	86	0	0	2	84	0	108	0	0	6	102	0
Gender												
Female	37,899	63	2,557	10,892	24,265	122	329,365	409	26,809	80,504	220,560	1,083
Male	30,027	29	2,257	2,564	25,177	0	273,397	242	22,854	18,659	231,642	0
Unknown	158	0	0	0	158	0	318	0	0	0	318	0
Race												
White	53,192	73	3,842	10,729	38,431	117	467,121	527	39,573	77,809	348,171	1,041
African American	1,321	1	110	184	1,026	0	11,876	4	1,139	1,313	9,420	0
Other/unknown	13,571	18	862	2,543	10,143	5	124,083	120	8,951	20,041	94,929	42
Use of Nursing Facilities[c]												
Entire year	97	25	72	0	0	0	855	226	629	0	0	0
Part year	100	11	88	1	0	0	842	68	765	9	0	0
None	67,887	56	4,654	13,455	49,600	122	601,383	357	48,269	99,154	452,520	1,083
Maintenance Assistance Status												
Cash	17,196	23	3,739	6,278	7,156	0	153,660	207	38,812	46,940	67,701	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0
Poverty-related	36,328	0	0	3,695	32,511	122	327,362	0	0	22,972	303,307	1,083
Other/unknown	14,560	69	1,075	3,483	9,933	0	122,058	444	10,851	29,251	81,512	0
Managed Care (MC) Status							0					
Fee-for-service (FFS) all year	68,084	92	4,814	13,456	49,600	122	603,080	651	49,663	99,163	452,520	1,083
FFS part year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
FFS part year, no Rx claims	0	0	0	0	0	0	0	0	0	0	0	0

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 ND.2 includes the beneficiaries represented by Cell K of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

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

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

ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC[a, b]
NONDUAL BENEFICIARIES, 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	**61.6 %**	**6.2**	**$394**	**$64**	**$3,146**	**12.5 %**	**68,084**
Age							
5 and younger	63.2	3.5	153	44	1,978	7.7	21,595
6-14	55.4	4.2	285	68	1,848	15.4	20,390
15-20	60.7	5.8	399	69	3,186	12.5	10,266
21-44	67.3	9.4	602	64	5,365	11.2	13,084
45-64	73.6	29.7	2,188	74	11,491	19.0	2,568
65-74	59.4	32.0	1,983	62	18,093	11.0	32
75-84	54.2	41.1	1,581	38	15,389	10.3	24
85 and older	61.5	24.3	1,073	44	10,830	9.9	39
Unknown	0.0	0.0	0	0	69	0.0	86
Basis of Eligibility[e]							
Aged	60.9	32.1	1,557	48	14,839	10.5	92
Disabled	77.7	26.8	2,321	87	17,434	13.3	4,814
Adults	66.4	7.4	376	51	3,208	11.7	13,456
Children	58.7	3.8	208	55	1,707	12.2	49,600
Unknown	63.9	13.9	1,432	103	8,623	16.6	122
Gender							
Female	64.6	7.0	410	59	3,316	12.4	37,899
Male	58.1	5.2	377	72	2,945	12.8	30,027
Unknown	5.7	0.1	2	21	480	0.4	158
Race							
White	64.2	6.7	430	64	3,240	13.3	53,192
African American	57.8	5.4	321	60	2,331	13.8	1,321
Other/unknown	51.7	4.2	261	62	2,857	9.1	13,571
Use of Nursing Facilities[f]							
Entire year	93.8	71.3	4,407	62	42,570	10.4	97
Part year	90.0	59.3	3,823	65	43,297	8.8	100
None	61.5	6.0	384	64	3,030	12.7	67,887
Maintenance Assistance Status							
Cash	62.1	10.3	732	71	4,140	17.7	17,196
Medically needy	0.0	0.0	0	0	0	0.0	0
Poverty related	60.6	3.8	195	52	1,493	13.1	36,328
Other/unknown	63.4	7.4	493	67	6,094	8.1	14,560

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

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

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

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

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

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

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

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT *PER BENEFIT MONTH*, BY BENEFICIARY CHARACTERISTIC[a, b]
NONDUAL 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	**0.7**	**$45**	**12.5 %**	**38.4 %**	**50.0 %**	**5.6 %**	**4.4 %**	**1.4 %**	**0.3 %**	**$355**	**68,084**	**603,080**
Age												
5 and younger	0.4	17	7.7	36.8	59.1	3.1	0.9	0.1	0.0	220	21,595	193,911
6-14	0.4	30	15.4	44.6	48.1	4.1	2.9	0.3	0.0	193	20,390	195,637
15-20	0.7	46	12.5	39.3	48.1	7.1	4.7	0.7	0.1	368	10,266	88,988
21-44	1.2	79	11.2	32.7	45.0	9.9	9.0	2.8	0.5	702	13,084	100,035
45-64	3.2	237	19.0	26.4	23.7	9.8	20.9	14.8	4.4	1,243	2,568	23,734
65-74	3.8	233	11.0	40.6	9.4	3.1	28.1	12.5	6.3	2,129	32	272
75-84	5.4	206	10.3	45.8	0.0	12.5	4.2	29.2	8.3	2,007	24	184
85 and older	4.5	198	9.9	38.5	10.3	12.8	7.7	30.8	0.0	2,002	39	211
Unknown	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	0.0	55	86	108
Basis of Eligibility[e]												
Aged	4.5	220	10.5	39.1	7.6	9.8	14.1	25.0	4.3	2,097	92	651
Disabled	2.6	225	13.3	22.3	31.3	11.3	20.5	11.3	3.2	1,690	4,814	49,663
Adults	1.0	51	11.7	33.6	47.3	9.5	7.4	1.9	0.3	435	13,456	99,163
Children	0.4	23	12.2	41.3	52.6	3.9	2.0	0.2	0.0	187	49,600	452,520
Unknown	1.6	161	16.6	36.1	34.4	11.5	11.5	5.7	0.8	971	122	1,083
Gender												
Female	0.8	47	12.4	35.4	51.1	6.4	5.1	1.7	0.4	382	37,899	329,365
Male	0.6	41	12.8	41.9	48.8	4.6	3.6	1.0	0.1	323	30,027	273,397
Unknown	0.1	1	0.4	94.3	5.7	0.0	0.0	0.0	0.0	239	158	318
Race												
White	0.8	49	13.3	35.8	51.3	6.1	4.9	1.5	0.3	369	53,192	467,121
African American	0.6	36	13.8	42.2	48.4	4.4	3.9	0.9	0.2	259	1,321	11,876
Other/unknown	0.5	29	9.1	48.3	44.6	3.7	2.5	0.8	0.1	313	13,571	124,083
Use of Nursing Facilities[f]												
Entire year	8.1	500	10.4	6.2	7.2	7.2	12.4	42.3	24.7	4,830	97	855
Part year	7.0	454	8.8	10.0	10.0	6.0	29.0	30.0	15.0	5,142	100	842
None	0.7	43	12.7	38.5	50.1	5.6	4.4	1.3	0.2	342	67,887	601,383
Maintenance Assistance Status												
Cash	1.1	82	17.7	37.9	42.4	7.2	8.4	3.3	0.9	463	17,196	153,660
Medically needy	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Poverty related	0.4	22	13.1	39.4	54.0	4.4	2.1	0.2	0.0	166	36,328	327,362
Other/unknown	0.9	59	8.1	36.6	48.9	6.6	5.6	2.0	0.3	727	14,560	122,058

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 ND.4 includes the beneficiaries represented by Cell K of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

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

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

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

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

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

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

NONDUAL BENEFICIARIES, WYOMING, 2004

Beneficiary	All Rx			Patented Brand-Name Drugs			Off-Patent Brand-Name Drugs			Generic Drugs		
Beneficiary Characteristics	Number of Rx	Rx $	$ per Rx	Number of Rx	Rx $	$ per Rx	Number of Rx	Rx $	$ per Rx	Number of Rx	Rx $	$ per Rx
All	**0.7**	**$45**	**$64**	**0.3**	**$34**	**$117**	**0.0**	**$3**	**$68**	**0.4**	**$8**	**$22**
Age												
5 and younger	0.4	17	44	0.1	13	85	0.0	1	39	0.2	4	17
6-14	0.4	30	68	0.2	25	103	0.0	1	58	0.2	4	23
15-20	0.7	46	69	0.3	36	120	0.0	2	66	0.3	8	24
21-44	1.2	79	64	0.4	57	137	0.1	6	75	0.7	16	22
45-64	3.2	237	74	1.2	169	144	0.2	20	99	1.8	47	26
65-74	3.8	233	62	1.5	168	110	0.3	18	56	1.9	47	25
75-84	5.4	206	38	1.4	117	86	0.2	7	42	3.7	81	22
85 and older	4.5	198	44	1.3	127	95	0.2	10	40	2.9	60	21
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Basis of Eligibility[d]												
Aged	4.5	220	48	1.5	144	99	0.3	13	48	2.8	62	22
Disabled	2.6	225	87	1.1	172	159	0.2	17	92	1.3	36	27
Adults	1.0	51	51	0.3	35	113	0.1	4	67	0.6	12	20
Children	0.4	23	55	0.2	18	92	0.0	1	47	0.2	4	20
Unknown	1.6	161	103	0.6	130	223	0.1	6	74	0.9	26	29
Gender												
Female	0.8	47	59	0.3	34	114	0.0	3	68	0.5	10	21
Male	0.6	41	72	0.3	33	121	0.0	2	69	0.3	6	23
Unknown	0.1	1	21	0.0	1	36	0.0	0	0	0.0	1	16
Race												
White	0.8	49	64	0.3	37	117	0.0	3	69	0.4	9	22
African American	0.6	36	60	0.3	28	110	0.0	1	44	0.3	7	21
Other/unknown	0.5	29	62	0.2	21	121	0.0	2	66	0.3	6	22
Use of Nursing Facilities[e]												
Entire year	8.1	500	62	2.5	362	143	0.5	26	55	5.0	111	22
Part year	7.0	454	65	2.0	302	150	0.3	29	92	4.6	122	26
None	0.7	43	64	0.3	33	117	0.0	3	68	0.4	8	22
Maintenance Assistance Status												
Cash	1.1	82	71	0.4	61	136	0.1	6	88	0.6	15	24
Medically needy	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Poverty related	0.4	22	52	0.2	16	91	0.0	1	45	0.2	4	19
Other/unknown	0.9	59	67	0.4	46	122	0.1	3	64	0.5	10	22

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 ND.5 includes the beneficiaries represented by Cell K of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

c. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In Wyoming, 1.3 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all combined. For information about this classification method, see Wolters Kluwer Health, http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615 (October 26, 2007).

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

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

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

TABLE ND.6
MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY[a, b, c, d]
NONDUAL 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		Number of Benefit Months
	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic			Number of Users	As a Percentage of All Benes	
Anti-infective Agents	0.2	0.1	0.0	0.1	$10	$6	$1	$3	$42	$71	$58	$22	69,541	$2,929,473	28,802	42.3 %	295,964
Biologicals	0.3	0.2	0.0	0.0	237	213	0	25	925	897	0	1,264	580	536,470	240	0.4	2,262
Antineoplastic Agents	0.4	0.1	0.0	0.3	146	124	3	20	326	866	201	68	679	221,271	149	0.2	1,515
Endocrine/Metabolic Drugs	0.4	0.1	0.1	0.2	23	16	2	5	60	120	38	24	32,081	1,924,398	8,234	12.1	82,667
Cardiovascular Agents	0.8	0.2	0.0	0.5	30	20	1	9	38	82	38	17	25,248	959,291	3,138	4.6	31,979
Respiratory Agents	0.4	0.2	0.0	0.2	18	15	0	3	52	80	28	19	69,437	3,600,747	18,808	27.6	196,318
Gastrointestinal Agents	0.3	0.1	0.0	0.2	30	22	2	6	88	161	58	35	15,339	1,351,065	4,524	6.6	45,315
Genitourinary Agents	0.2	0.1	0.0	0.1	12	8	1	2	52	88	42	23	5,593	292,436	2,526	3.7	24,154
CNS Drugs	0.8	0.4	0.0	0.3	74	60	5	9	96	148	110	29	60,066	5,788,458	7,812	11.5	77,971
Stimulants/Anti-obesity/Anorexia	0.7	0.6	0.0	0.1	70	65	1	4	95	103	64	44	22,993	2,178,826	2,959	4.3	30,995
Miscellaneous Psychological/ Neurological Agents	0.4	0.4	0.0	0.0	233	233	0	1	520	551	0	26	746	387,812	158	0.2	1,661
Analgesics and Anesthetics	0.4	0.1	0.0	0.3	16	10	1	5	40	177	127	16	48,752	1,949,667	12,250	18.0	120,334
Neuromuscular Agents	0.6	0.3	0.1	0.3	65	47	10	8	102	163	128	29	24,914	2,547,311	3,785	5.6	39,076
Nutritional Products	0.2	0.0	0.0	0.2	4	0	0	3	18	34	30	17	12,113	216,516	5,602	8.2	52,763
Hematological Agents	0.5	0.1	0.1	0.4	103	93	3	7	192	750	54	19	3,607	690,909	678	1.0	6,737
Topical Products	0.2	0.1	0.0	0.1	7	5	0	2	40	75	46	20	27,367	1,097,617	14,112	20.7	147,732
Miscellaneous Products	0.2	0.1	0.0	0.1	16	11	1	3	96	115	252	50	1,469	140,558	828	1.2	8,880
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	5	0	0	0	27	0	0	0	1,172	31,667	597	0.9	6,481
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.	421,697	26,844,492	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 ND.6 includes the beneficiaries represented by Cell K of Table 1. A beneficiary who used drugs from two or more categories was counted as a user for each category. Therefore, the sum of users across categories may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

c. For information about these therapeutic categories, see Wolters Kluwer Health, http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615 (October 26, 2007).

d. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In 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.

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP[a, b, c]
NONDUAL BENEFICIARIES, WYOMING, 2004

| Top 10 Drug Groups | Total Medicaid Rx $ | Users | | | Among Users | | |
		Number of Users	As a Percentage of All Beneficiaries	Number of Benefit Months	Number of Rx per Benefit Month	$ per Rx	Rx $ per Benefit Month
ANTIPSYCHOTICS	$3,057,915	2,261	3.3 %	23,811	0.6	$218	$128
ANTIDEPRESSANTS	2,524,065	7,596	11.2	76,748	0.5	71	33
ANTICONVULSANT	2,268,099	2,576	3.8	27,282	0.6	129	83
STIMULANTS/ANTI-OBESITY/ANOREXIANTS	2,178,826	3,643	5.4	38,561	0.6	95	57
ANTIASTHMATIC	2,099,178	11,482	16.9	121,990	0.3	68	17
ANALGESICS - Narcotic	1,092,507	13,936	20.5	138,024	0.3	31	8
ANTIHISTAMINES	824,099	8,484	12.5	90,687	0.2	44	9
ULCER DRUGS	821,878	4,108	6.0	41,356	0.3	67	20
DERMATOLOGICAL	740,611	10,820	15.9	115,216	0.1	46	6
MISC. ENDOCRINE	695,053	380	0.6	4,095	0.4	386	170
Total	16,302,231	65,286		677,770	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 ND.7 includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2004. A beneficiary who used drugs from two or more groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

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

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

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS COMBINED

AND FIRST AND SECOND GROUPS SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE[a, b, c]

NONDUAL BENEFICIARIES, WYOMING, 2004

Beneficiary Characteristics	All Top 10 Drug Groups		ANTIPSYCHOTICS					ANTIDEPRESSANTS				
	Number of Rx	Rx $	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx $ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx $ per Benefit Month
All	**205,143**	**$16,302,231**	**2,261**	**3.3 %**	**23,811**	**0.6**	**$128**	**7,596**	**11.2 %**	**76,748**	**0.5**	**$33**
Female	120,287	8,659,871	1,224	3.2	12,710	0.5	111	5,403	14.3	53,802	0.4	32
Disabled	41,221	3,971,297	556	21.7	6,224	0.6	157	1,301	50.9	14,344	0.6	40
5 and younger	479	49,036	0	0.0	0	0.0	0	1	0.8	12	1.0	120
6-14	2,514	281,074	34	12.1	389	0.7	96	38	13.5	436	0.6	38
15-20	2,268	271,382	49	22.3	536	0.6	112	90	40.9	1,007	0.5	33
21-44	13,917	1,353,768	219	23.9	2,481	0.6	151	506	55.2	5,604	0.6	40
45-64	22,043	2,016,037	254	24.9	2,818	0.7	178	666	65.3	7,285	0.6	41
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	79,066	4,688,574	668	1.9	6,486	0.4	66	4,102	11.6	39,458	0.4	29
5 and younger	9,653	427,940	15	0.1	172	0.5	70	27	0.3	278	0.3	17
6-14	16,551	1,216,050	109	1.1	1,199	0.6	94	486	5.1	5,155	0.4	26
15-20	14,655	904,931	188	3.4	1,905	0.4	69	993	17.9	10,085	0.4	27
21-44	33,537	1,821,710	313	3.3	2,787	0.3	51	2,365	25.2	21,760	0.4	30
45-64	3,998	281,613	34	5.8	342	0.4	65	213	36.5	2,017	0.5	41
65-74	215	16,402	3	21.4	36	0.7	165	4	28.6	48	0.7	38
75-84	255	8,489	3	17.6	30	0.5	22	7	41.2	61	0.9	42
85 and older	202	11,439	3	9.4	15	0.9	142	7	21.9	54	0.7	52
Male	84,850	7,642,273	1,037	3.5	11,101	0.7	149	2,193	7.3	22,946	0.5	35
Disabled	25,605	3,091,808	531	23.5	5,878	0.8	192	656	29.1	6,976	0.6	43
5 and younger	777	68,904	5	3.4	60	0.7	111	3	2.0	31	0.5	9
6-14	5,494	627,757	97	21.9	1,086	0.8	177	96	21.7	1,037	0.6	39
15-20	4,031	629,967	104	29.8	1,187	0.7	185	113	32.4	1,288	0.7	55
21-44	8,476	1,118,582	247	34.8	2,717	0.7	204	236	33.2	2,529	0.6	46
45-64	6,827	646,598	78	12.9	828	0.8	187	208	34.3	2,091	0.6	34
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	59,245	4,550,465	506	1.8	5,223	0.6	101	1,537	5.5	15,970	0.5	32
5 and younger	12,888	668,604	20	0.2	222	0.4	60	25	0.2	266	0.3	10
6-14	28,348	2,427,339	245	2.4	2,626	0.6	102	681	6.8	7,430	0.5	30
15-20	11,886	1,063,196	182	4.4	1,862	0.6	112	503	12.1	5,221	0.5	36
21-44	4,592	295,803	41	2.0	346	0.3	63	261	12.7	2,385	0.3	30
45-64	1,170	66,553	9	2.5	95	0.3	37	54	15.1	531	0.4	31
65-74	215	17,873	6	40.0	48	0.8	139	8	53.3	85	0.9	56
75-84	76	5,573	1	14.3	12	0.9	172	2	28.6	24	0.5	34
85 and older	70	5,524	2	28.6	12	1.0	212	3	42.9	28	0.9	54
Unknown	6	87	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 ND.7A includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2004. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

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

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

TABLE ND.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]

NONDUAL BENEFICIARIES, WYOMING, 2004

Beneficiary Characteristics	ANTICONVULSANT					STIMULANTS/ANTI-OBESITY/ANOREXIANTS					ANTIASTHMATIC				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx $ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx $ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx $ per Benefit Month
All	**2,576**	**3.8 %**	**27,282**	**0.6**	**$83**	**3,643**	**5.4 %**	**38,561**	**0.6**	**$57**	**11,482**	**16.9 %**	**121,990**	**0.3**	**$17**
Female	1,627	4.3	17,066	0.6	79	1,134	3.0	12,017	0.6	53	6,002	15.8	63,044	0.3	18
Disabled	820	32.1	9,194	0.7	103	215	8.4	2,398	0.6	63	1,002	39.2	11,228	0.4	30
5 and younger	12	10.1	126	0.6	84	0	0.0	0	0.0	0	39	32.8	418	0.4	40
6-14	72	25.6	838	0.7	107	83	29.5	943	0.6	55	80	28.5	938	0.3	21
15-20	72	32.7	811	0.7	155	33	15.0	376	0.7	65	43	19.5	491	0.3	14
21-44	325	35.5	3,603	0.8	107	56	6.1	591	0.5	54	281	30.7	3,132	0.3	21
45-64	339	33.2	3,816	0.7	88	43	4.2	488	0.6	89	559	54.8	6,249	0.5	38
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	807	2.3	7,872	0.5	52	919	2.6	9,619	0.5	50	5,000	14.1	51,816	0.2	15
5 and younger	20	0.2	227	0.5	35	44	0.4	493	0.4	35	1,518	15.0	16,598	0.2	12
6-14	104	1.1	1,084	0.6	63	570	5.9	6,053	0.6	51	1,344	14.0	14,706	0.2	16
15-20	138	2.5	1,393	0.5	67	155	2.8	1,641	0.5	45	781	14.1	7,825	0.2	13
21-44	480	5.1	4,531	0.4	44	140	1.5	1,348	0.4	59	1,225	13.0	11,441	0.3	17
45-64	60	10.3	588	0.5	62	10	1.7	84	0.5	49	117	20.0	1,131	0.4	26
65-74	1	7.1	12	0.6	34	0	0.0	0	0.0	0	6	42.9	72	0.9	53
75-84	3	17.6	36	1.0	39	0	0.0	0	0.0	0	5	29.4	35	2.0	62
85 and older	1	3.1	1	2.0	64	0	0.0	0	0.0	0	4	12.5	8	1.0	42
Male	949	3.2	10,216	0.7	89	2,509	8.4	26,544	0.6	58	5,480	18.3	58,946	0.2	17
Disabled	551	24.4	6,104	0.8	106	298	13.2	3,285	0.7	68	535	23.7	5,863	0.4	34
5 and younger	17	11.6	200	0.5	79	6	4.1	66	0.2	26	74	50.3	826	0.3	30
6-14	116	26.2	1,359	0.8	94	177	40.0	1,948	0.7	68	125	28.3	1,449	0.4	30
15-20	94	26.9	1,096	0.7	120	79	22.6	872	0.7	70	34	9.7	381	0.4	21
21-44	218	30.7	2,383	0.8	104	24	3.4	282	0.8	80	95	13.4	1,013	0.4	33
45-64	106	17.5	1,066	0.8	116	12	2.0	117	0.3	54	207	34.1	2,194	0.5	42
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	398	1.4	4,112	0.5	65	2,211	8.0	23,259	0.6	57	4,945	17.8	53,083	0.2	15
5 and younger	36	0.3	389	0.4	69	135	1.2	1,429	0.4	36	2,409	21.7	26,073	0.2	12
6-14	165	1.6	1,779	0.6	67	1,647	16.4	17,433	0.6	57	1,871	18.6	20,221	0.3	17
15-20	108	2.6	1,116	0.6	73	386	9.3	4,043	0.6	62	489	11.8	5,167	0.3	18
21-44	68	3.3	611	0.4	50	40	1.9	326	0.4	54	143	6.9	1,284	0.3	19
45-64	19	5.3	201	0.4	36	3	0.8	28	0.7	105	29	8.1	297	0.3	20
65-74	2	13.3	16	0.9	146	0	0.0	0	0.0	0	1	6.7	12	0.8	18
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	28.6	24	0.2	11
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	14.3	5	1.6	101
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 ND.7B includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2004. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

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

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

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

Beneficiary Characteristics	ANALGESICS - Narcotic					ANTIHISTAMINES					ULCER DRUGS				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx $ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx $ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx $ per Benefit Month
All	**13,936**	**20.5 %**	**138,024**	**0.3**	**$8**	**8,484**	**12.5 %**	**90,687**	**0.2**	**$9**	**4,108**	**6.0 %**	**41,356**	**0.3**	**$20**
Female	10,429	27.5	101,711	0.3	8	5,003	13.2	52,599	0.2	9	2,732	7.2	27,569	0.3	20
Disabled	1,686	65.9	18,596	0.4	21	608	23.8	6,860	0.4	19	778	30.4	8,730	0.4	33
5 and younger	17	14.3	193	0.1	1	19	16.0	207	0.1	4	19	16.0	212	0.4	28
6-14	41	14.6	477	0.1	1	61	21.7	710	0.2	11	24	8.5	288	0.4	28
15-20	70	31.8	775	0.2	3	49	22.3	553	0.2	10	34	15.5	408	0.2	13
21-44	678	74.0	7,555	0.4	15	205	22.4	2,348	0.4	18	244	26.6	2,796	0.4	30
45-64	880	86.3	9,596	0.5	28	274	26.9	3,042	0.4	24	457	44.8	5,026	0.5	36
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	8,743	24.7	83,115	0.2	5	4,395	12.4	45,739	0.2	8	1,954	5.5	18,839	0.2	14
5 and younger	376	3.7	4,227	0.1	1	1,204	11.9	13,241	0.1	4	342	3.4	3,068	0.2	10
6-14	829	8.6	9,174	0.1	2	1,154	12.0	12,755	0.2	10	303	3.1	3,247	0.2	12
15-20	1,867	33.7	18,117	0.2	2	811	14.6	8,266	0.2	8	372	6.7	3,776	0.2	13
21-44	5,290	56.3	47,857	0.3	6	1,151	12.3	10,718	0.2	9	825	8.8	7,682	0.2	15
45-64	353	60.4	3,471	0.4	17	72	12.3	729	0.3	15	92	15.8	877	0.4	29
65-74	7	50.0	75	0.7	30	0	0.0	0	0.0	0	3	21.4	36	0.7	54
75-84	5	29.4	60	0.7	6	3	17.6	30	0.2	11	6	35.3	59	0.4	12
85 and older	16	50.0	134	0.7	34	0	0.0	0	0.0	0	11	34.4	94	0.5	13
Male	3,506	11.7	36,302	0.2	9	3,479	11.6	38,071	0.2	9	1,375	4.6	13,782	0.3	20
Disabled	706	31.3	7,439	0.4	24	314	13.9	3,567	0.3	17	392	17.4	4,207	0.5	32
5 and younger	20	13.6	227	0.1	2	39	26.5	461	0.2	7	20	13.6	224	0.4	22
6-14	47	10.6	563	0.2	2	95	21.5	1,105	0.3	16	45	10.2	537	0.4	29
15-20	63	18.1	719	0.1	2	45	12.9	509	0.3	17	35	10.0	380	0.4	33
21-44	227	32.0	2,422	0.4	21	80	11.3	924	0.4	22	139	19.6	1,505	0.5	36
45-64	349	57.5	3,508	0.5	37	55	9.1	568	0.3	18	153	25.2	1,561	0.5	30
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	2,800	10.1	28,863	0.2	5	3,165	11.4	34,504	0.2	8	983	3.5	9,575	0.2	15
5 and younger	461	4.1	5,063	0.1	1	1,486	13.4	16,468	0.2	5	425	3.8	3,931	0.2	11
6-14	774	7.7	8,507	0.1	1	1,220	12.1	13,230	0.2	11	196	2.0	2,131	0.2	11
15-20	731	17.6	7,589	0.1	2	350	8.4	3,772	0.2	13	168	4.0	1,738	0.2	17
21-44	697	33.8	6,343	0.3	14	91	4.4	860	0.3	13	149	7.2	1,382	0.3	20
45-64	127	35.6	1,249	0.4	13	15	4.2	146	0.3	15	36	10.1	300	0.4	37
65-74	4	26.7	48	0.4	11	1	6.7	12	0.8	21	5	33.3	60	0.7	44
75-84	4	57.1	48	0.4	12	1	14.3	12	0.2	2	2	28.6	24	0.8	46
85 and older	2	28.6	16	1.1	42	1	14.3	4	1.5	27	2	28.6	9	0.3	19
Unknown	1	0.6	11	0.2	2	2	1.3	17	0.1	2	1	0.6	5	0.2	5

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

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

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

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

TABLE ND.7D
MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR NINTH AND TENTH TOP DRUG GROUPS
SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE[a, b, c]
NONDUAL BENEFICIARIES, WYOMING, 2004

Beneficiary Characteristics	DERMATOLOGICAL					MISC. ENDOCRINE						
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx $ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx $ per Benefit Month	Number of Beneficiaries	Number of Benefit Months
All	**10,820**	**15.9 %**	**115,216**	**0.1**	**$6**	**380**	**0.6 %**	**4,095**	**0.4**	**$170**	**68,084**	**603,080**
Female	6,099	16.1	64,412	0.1	6	177	0.5	1,913	0.4	119	37,898	329,363
Disabled	753	29.4	8,641	0.2	9	93	3.6	1,058	0.5	105	2,557	26,809
5 and younger	51	42.9	525	0.1	3	3	2.5	28	0.5	419	119	1,127
6-14	64	22.8	750	0.1	5	9	3.2	97	0.5	482	281	3,095
15-20	66	30.0	754	0.1	6	2	0.9	24	0.3	146	220	2,361
21-44	261	28.5	3,027	0.1	7	15	1.6	180	0.4	77	916	9,716
45-64	311	30.5	3,585	0.2	11	64	6.3	729	0.5	49	1,020	10,498
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12
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	5,346	15.1	55,771	0.1	6	84	0.2	855	0.4	136	35,341	302,554
5 and younger	2,302	22.7	24,383	0.1	4	2	0.0	18	0.1	6	10,130	90,822
6-14	1,131	11.8	12,412	0.1	6	50	0.5	543	0.4	184	9,622	91,816
15-20	882	15.9	9,308	0.2	8	7	0.1	77	0.4	116	5,547	46,126
21-44	931	9.9	8,652	0.2	9	12	0.1	87	0.3	40	9,395	68,569
45-64	87	14.9	879	0.2	11	12	2.1	127	0.3	32	584	4,812
65-74	2	14.3	15	0.8	13	0	0.0	0	0.0	0	14	130
75-84	7	41.2	84	0.2	4	0	0.0	0	0.0	0	17	121
85 and older	4	12.5	38	0.1	5	1	3.1	3	0.3	29	32	158
Male	4,720	15.7	50,803	0.1	6	203	0.7	2,182	0.4	214	30,026	273,393
Disabled	518	23.0	5,942	0.2	8	50	2.2	524	0.5	326	2,257	22,854
5 and younger	46	31.3	539	0.2	7	3	2.0	36	0.5	223	147	1,486
6-14	111	25.1	1,305	0.1	5	20	4.5	222	0.5	231	442	4,829
15-20	109	31.2	1,274	0.2	11	11	3.2	126	0.6	805	349	3,830
21-44	145	20.4	1,636	0.2	9	10	1.4	85	0.3	89	710	7,150
45-64	107	17.6	1,188	0.2	9	6	1.0	55	0.6	44	607	5,555
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	4
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	4,202	15.1	44,861	0.1	6	153	0.6	1,658	0.4	179	27,769	250,539
5 and younger	2,350	21.1	24,816	0.1	5	11	0.1	108	0.2	30	11,126	100,271
6-14	1,039	10.3	11,422	0.1	6	124	1.2	1,346	0.4	164	10,044	95,886
15-20	701	16.9	7,519	0.2	10	16	0.4	180	0.5	394	4,150	36,671
21-44	86	4.2	839	0.1	8	0	0.0	0	0.0	0	2,063	14,600
45-64	25	7.0	258	0.1	7	0	0.0	0	0.0	0	357	2,869
65-74	1	6.7	7	0.3	2	1	6.7	12	0.4	35	15	126
75-84	0	0.0	0	0.0	0	1	14.3	12	0.8	60	7	63
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	7	53
Unknown	1	0.6	1	1.0	8	0	0.0	0	0.0	0	160	324

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

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

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

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

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

BY BENEFICIARY CHARACTERISTIC[a, b]

NONDUAL BENEFICIARIES, 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	**$500**	**8.1**	**97**	**855**
Age				
0-64	576	8.7	72	629
65-74	239	3.5	3	31
75-84	306	8.0	7	80
85 and older	289	6.3	15	115
Unknown	0	0.0	0	0
Gender				
Female	493	8.8	48	470
Male	509	7.3	49	385
Unknown	0	0.0	0	0
Race				
White	497	8.4	82	696
African American	333	7.4	1	12
Other/unknown	529	6.9	14	147
Basis of Eligibility[c]				
Aged	288	6.5	25	226
Disabled	576	8.7	72	629
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 ND.8 includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their 2004 Medicaid enrollment. A total of 100 beneficiaries who were in nursing facilities for part of their enrollment and their 842 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.

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

BY BRAND STATUS AND THERAPEUTIC CATEGORY [a, b, c, d, e]

NONDUAL 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		Number of Benefit Months
	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic			Number of Users	As a Percentage of All-Year Nursing Facility Residents	
Anti-infective Agents	0.6	0.2	0.1	0.3	$53	$36	$9	$9	$96	$179	$142	$30	365	$35,081	62	63.9 %	657
Biologicals	0.1	0.0	0.0	0.1	3	2	0	1	28	37	0	21	5	138	5	5.2	43
Antineoplastic Agents	0.8	0.1	0.0	0.7	90	30	0	60	114	221	0	92	41	4,679	5	5.2	52
Endocrine/Metabolic Drugs	1.2	0.3	0.1	0.8	46	27	3	16	37	78	36	20	545	20,349	47	48.5	444
Cardiovascular Agents	2.3	0.5	0.1	1.7	65	34	3	27	28	64	33	16	1,273	36,046	58	59.8	556
Respiratory Agents	1.1	0.8	0.0	0.3	76	68	1	7	67	90	28	20	412	27,632	36	37.1	362
Gastrointestinal Agents	1.1	0.2	0.1	0.8	52	28	3	21	46	132	32	25	523	24,235	45	46.4	468
Genitourinary Agents	0.9	0.5	0.0	0.4	54	45	1	8	63	94	52	23	269	16,945	29	29.9	315
CNS Drugs	1.7	0.8	0.1	0.8	161	131	6	24	96	156	75	31	1,137	108,833	73	75.3	675
Stimulants/Anti-obesity/Anorexia	0.6	0.0	0.0	0.6	16	3	0	13	27	73	0	23	14	374	2	2.1	23
Miscellaneous Psychological/ Neurological Agents	0.8	0.8	0.0	0.0	229	229	0	0	288	288	0	0	66	19,011	7	7.2	83
Analgesics and Anesthetics	1.3	0.4	0.0	0.9	99	83	0	17	76	228	5	18	726	55,255	60	61.9	557
Neuromuscular Agents	1.5	0.4	0.3	0.9	124	79	15	30	82	215	61	33	481	39,318	34	35.1	316
Nutritional Products	0.9	0.0	0.0	0.8	20	0	1	19	23	0	21	23	241	5,555	29	29.9	281
Hematological Agents	1.5	0.1	0.1	1.3	71	54	2	15	47	560	18	11	488	22,805	32	33.0	323
Topical Products	0.4	0.1	0.0	0.3	19	10	2	7	44	89	47	25	217	9,479	46	47.4	494
Miscellaneous Products	0.5	0.1	0.0	0.4	5	3	0	2	10	22	0	6	54	523	9	9.3	102
Unknown Therapeutic Category	0.5	0.0	0.0	0.0	9	0	0	0	19	0	0	0	63	1,204	14	14.4	128
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.	6,920	427,462	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 ND.9 includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2004. A total of 100 beneficiaries who were in nursing facilities for part of their enrollment and their 842 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.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615 (October 26, 2007).

e. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. For information about this classification method, see Wolters Kluwer Health, http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615 (October 26, 2007).

In 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.

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS,
BY TOP-10 DRUG GROUP[a, b, c, d]
NONDUAL BENEFICIARIES, 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	$73,482	44	45.4 %	471	0.8	$199	$156
ANALGESICS - Narcotic	31,837	68	70.1	620	0.8	67	51
ANTIDEPRESSANTS	29,037	63	64.9	592	0.8	61	49
ANTICONVULSANT	22,235	33	34.0	314	1.0	73	71
ANTIASTHMATIC	21,314	40	41.2	387	0.8	72	55
ULCER DRUGS	21,466	50	51.5	491	0.8	53	44
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	19,011	8	8.2	95	0.7	288	200
ANALGESICS - ANTI-INFLAMMATORY	18,950	26	26.8	269	0.7	103	70
HEMATOPOIETIC AGENTS	16,776	11	11.3	132	0.9	146	127
ANTIDIABETIC	13,286	30	30.9	274	0.9	54	48
Total	267,394	373		3,645	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 ND.10 includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2004. A total of 100 beneficiaries who were in nursing facilities for part of their enrollment and their 842 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); CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; $ = Medicaid reimbursement.

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR TOP 10 DRUG GROUPS COMBINED AND FIRST
AND SECOND TOP DRUG GROUPS SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE[a, b, c, d]
NONDUAL BENEFICIARIES, WYOMING, 2004

Beneficiary Characteristics	All Top 10 Drug Groups		ANTIPSYCHOTICS					ANALGESICS - Narcotic				
	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	**2,936**	**$267,394**	**44**	**45.4 %**	**471**	**0.8**	**$156**	**68**	**70.1 %**	**620**	**0.8**	**$51**
Female	1,758	153,315	24	50.0	266	0.7	141	36	75.0	354	0.9	80
Disabled	1,383	134,105	19	59.4	227	0.7	154	21	65.6	216	1.1	113
	1,383	134,105	19	59.4	227	0.7	154	21	65.6	216	1.1	113
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
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												
Other Eligibles	375	19,210	5	31.3	39	0.6	63	15	93.8	138	0.7	29
	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	213	8,614	2	33.3	24	0.5	14	4	66.7	48	0.6	7
75-84	162	10,596	3	30.0	15	0.9	142	11	110.0	90	0.7	41
85 and older												
Male	1,178	114,079	20	40.8	205	0.9	176	32	65.3	266	0.6	13
Disabled	997	96,150	15	37.5	162	0.9	187	30	75.0	242	0.6	14
	997	96,150	15	37.5	162	0.9	187	30	75.0	242	0.6	14
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
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												
Other Eligibles	181	17,929	5	55.6	43	0.9	137	2	22.2	24	0.4	5
	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
64 or younger	59	5,184	2	66.7	19	0.7	67	0	0.0	0	0.0	0
65-74	51	5,627	1	100.0	12	0.9	172	1	100.0	12	0.1	1
75-84	71	7,118	2	40.0	12	1.0	212	1	20.0	12	0.8	9
85 and older												
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 ND.10A includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2004. A total of 100 beneficiaries who were in nursing facilities for part of their enrollment and their 842 benefit months were excluded from the analysis.

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

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

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

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

TABLE ND.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]

NONDUAL BENEFICIARIES, WYOMING, 2004

Beneficiary Characteristics	ANTIDEPRESSANTS					ANTICONVULSANT					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	**63**	**64.9 %**	**592**	**0.8**	**$49**	**33**	**34.0 %**	**314**	**1.0**	**$71**	**40**	**41.2 %**	**387**	**0.8**	**$55**
Female	37	77.1	380	0.8	43	22	45.8	243	1.0	80	24	50.0	230	0.8	54
Disabled	28	87.5	301	0.8	40	18	56.3	206	1.0	88	16	50.0	190	0.6	53
r	28	87.5	301	0.8	40	18	56.3	206	1.0	88	16	50.0	190	0.6	53
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	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															
Other Eligibles	9	56.3	79	0.7	55	4	25.0	37	1.0	39	8	50.0	40	1.9	56
r	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
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	4	66.7	40	0.7	48	3	50.0	36	1.0	39	4	66.7	32	2.1	60
75-84	5	50.0	39	0.8	61	1	10.0	1	2.0	64	4	40.0	8	1.0	42
85 and older															
Male	26	53.1	212	0.9	60	11	22.4	71	0.9	39	16	32.7	157	0.7	57
Disabled	21	52.5	152	0.9	57	11	27.5	71	0.9	39	15	37.5	152	0.7	56
r	21	52.5	152	0.9	57	11	27.5	71	0.9	39	15	37.5	152	0.7	56
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	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															
Other Eligibles	5	55.6	60	0.8	68	0	0.0	0	0.0	0	1	11.1	5	1.6	101
r	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
64 or younger	1	33.3	12	1.1	152	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	2	200.0	24	0.5	34	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	2	40.0	24	0.8	59	0	0.0	0	0.0	0	1	20.0	5	1.6	101
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 ND.10B includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2004. A total of 100 beneficiaries who were in nursing facilities for part of their enrollment and their 842 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.

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

AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE[a, b, c, d]

NONDUAL BENEFICIARIES, WYOMING, 2004

Beneficiary Characteristics	ULCER DRUGS					MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL					ANALGESICS - ANTI-INFLAMMATORY				
	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	**50**	**51.5 %**	**491**	**0.8**	**$44**	**8**	**8.2 %**	**95**	**0.7**	**$200**	**26**	**26.8 %**	**269**	**0.7**	**$70**
Female	26	54.2	280	0.7	38	5	10.4	59	0.6	245	16	33.3	181	0.6	24
Disabled	18	56.3	207	0.8	47	4	12.5	47	0.6	275	13	40.6	155	0.5	20
r	18	56.3	207	0.8	47	4	12.5	47	0.6	275	13	40.6	155	0.5	20
64 or younge	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
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 **Other Eligibles**	8	50.0	73	0.6	13	1	6.3	12	0.9	130	3	18.8	26	0.6	45
r	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
64 or younge	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	4	66.7	44	0.4	11	1	16.7	12	0.9	130	1	16.7	12	0.3	3
75-84	4	40.0	29	0.9	16	0	0.0	0	0.0	0	2	20.0	14	0.9	81
85 and older															
Male	24	49.0	211	1.0	52	3	6.1	36	0.8	126	10	20.4	88	1.0	166
Disabled	21	52.5	182	0.9	48	0	0.0	0	0.0	0	9	22.5	76	1.0	185
r	21	52.5	182	0.9	48	0	0.0	0	0.0	0	9	22.5	76	1.0	185
64 or younge	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
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 **Other Eligibles**	3	33.3	29	1.2	74	3	33.3	36	0.8	126	1	11.1	12	0.9	49
r	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
64 or younge	2	66.7	24	1.3	88	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	0	0.0	0	0.0	0	2	200.0	24	0.7	90	1	100.0	12	0.9	49
75-84	1	20.0	5	0.4	10	1	20.0	12	1.0	200	0	0.0	0	0.0	0
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 ND.10C includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2004. A total of 100 beneficiaries who were in nursing facilities for part of their enrollment and their 842 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.

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR NINTH AND TENTH TOP DRUG GROUPS
SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE[a, b, c, d]
NONDUAL BENEFICIARIES, WYOMING, 2004

Beneficiary Characteristics	HEMATOPOIETIC AGENTS					ANTIDIABETIC					All-Year Nursing Facility Residents	Benefit Months Among All-Year Nursing Facility Residents
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx $	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx $		
All	11	11.3 %	132	0.9	$127	30	30.9 %	274	0.9	$49	97	855
Female	6	12.5	72	0.8	6	17	35.4	174	0.8	56	48	470
Disabled	6	18.8	72	0.8	6	11	34.4	131	0.9	66	32	334
	6	18.8	72	0.8	6	11	34.4	131	0.9	66	32	334
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
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 / Other Eligibles	0	0.0	0	0.0	0	6	37.5	43	0.5	26	16	136
	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	0	0.0	0	0.0	0	2	33.3	24	0.6	28	6	68
75-84	0	0.0	0	0.0	0	4	40.0	19	0.5	23	10	68
85 and older												
Male	5	10.2	60	1.0	273	13	26.5	100	1.1	36	49	385
Disabled	5	12.5	60	1.0	273	12	30.0	88	1.2	39	40	295
	5	12.5	60	1.0	273	12	30.0	88	1.2	39	40	295
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
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 / Other Eligibles	0	0.0	0	0.0	0	1	11.1	12	0.7	7	9	90
	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	31
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12
75-84	0	0.0	0	0.0	0	1	20.0	12	0.7	7	5	47
85 and older												
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 ND.10D includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2004. A total of 100 beneficiaries who were in nursing facilities for part of their enrollment and their 842 benefit months were excluded from the analysis.

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

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

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

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

TABLE ND.11

USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D

AMONG NONDUALS, 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 Nondual Rx $	Total Number of Beneficiaries
All	**17,271**	**25.4 %**	**0.8**	**54,097**	**$25**	**$1,672,116**	**$31**	**6.2 %**	**68,084**
Age									
5 and younger	6,520	30.2	0.6	13,415	17	364,068	27	11.0	21,595
6-14	3,965	19.4	0.5	9,820	20	414,127	42	7.1	20,390
15-20	2,151	21.0	0.5	5,632	18	183,211	33	4.5	10,266
21-44	3,510	26.8	1.2	15,508	35	459,101	30	5.8	13,084
45-64	1,089	42.4	3.6	9,332	95	244,072	26	4.3	2,568
65-74	13	40.6	6.8	217	162	5,198	24	8.2	32
75-84	10	41.7	3.7	88	60	1,445	16	3.8	24
85 and older	13	33.3	2.2	85	23	894	11	2.1	39
Unknown	0	0.0	0.0	0	0	0	0	0.0	86
Basis of Eligibility[c]									
Aged	36	39.1	4.2	390	82	7,537	19	5.3	92
Disabled	2,169	45.1	4.3	20,698	206	991,440	48	8.9	4,814
Adults	3,283	24.4	0.7	9,598	13	174,054	18	3.4	13,456
Children	11,742	23.7	0.5	23,191	10	494,535	21	4.8	49,600
Unknown	41	33.6	1.8	220	37	4,550	21	2.6	122
Gender									
Female	10,129	26.7	0.9	33,031	24	912,373	28	5.9	37,899
Male	7,141	23.8	0.7	21,065	25	759,736	36	6.7	30,027
Unknown	1	0.6	0.0	1	0	7	7	2.1	158
Race									
White	13,921	26.2	0.8	44,951	26	1,367,950	30	6.0	53,192
African American	293	22.2	0.6	827	18	23,453	28	5.5	1,321
Other/unknown	3,057	22.5	0.6	8,319	21	280,713	34	7.9	13,571
Use of Nursing Facilities[d]									
Entire year	61	62.9	6.4	620	125	12,141	20	2.8	97
Part year	75	75.0	12.4	1,235	372	37,178	30	9.7	100
None	17,135	25.2	0.8	52,242	24	1,622,797	31	6.2	67,887
Maintenance Assistance Status									
Cash	4,934	28.7	1.3	22,334	42	721,712	32	5.7	17,196
Medically needy	0	0.0	0.0	0	0	0	0	0.0	0
Poverty related	8,353	23.0	0.4	16,032	10	347,520	22	4.9	36,328
Other/unknown	3,984	27.4	1.1	15,731	41	602,884	38	8.4	14,560

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 ND.11 includes the beneficiaries represented by Cell K of Table 1. Beneficiaries include all nondual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2004.

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

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

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

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

USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
AMONG NONDUALS 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	Benzodiazepine $ per Benefit Month	Number of Benefit Months
All	**0.1**	**$3**	**$31**	**$0**	**$0**	**603,080**
Age						
5 and younger	0.1	2	27	0	0	193,911
6-14	0.1	2	42	0	0	195,637
15-20	0.1	2	33	0	0	88,988
21-44	0.2	5	30	0	1	100,035
45-64	0.4	10	26	0	2	23,734
65-74	0.8	19	24	0	4	272
75-84	0.5	8	16	0	1	184
85 and older	0.4	4	11	0	1	211
Unknown	0.0	0	0	0	0	108
Basis of Eligibility[c]						
Aged	0.6	12	19	0	2	651
Disabled	0.4	20	48	0	2	49,663
Adults	0.1	2	18	0	0	99,163
Children	0.1	1	21	0	0	452,520
Unknown	0.2	4	21	0	1	1,083
Gender						
Female	0.1	3	28	0	0	329,365
Male	0.1	3	36	0	0	273,397
Unknown	0.0	0	7	0	0	318
Race						
White	0.1	3	30	0	0	467,121
African American	0.1	2	28	0	0	11,876
Other/unknown	0.1	2	34	0	0	124,083
Use of Nursing Facilities[d]						
Entire year	0.7	14	20	0	3	855
Part year	1.5	44	30	0	5	842
None	0.1	3	31	0	0	601,383
Maintenance Assistance Status						
Cash	0.1	5	32	0	1	153,660
Medically needy	0.0	0	0	0	0	0
Poverty related	0.0	1	22	0	0	327,362
Other/unknown	0.1	5	38	0	0	122,058

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 ND.12 includes the beneficaries represented by Cell K of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits. Beneficiaries include all nondual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 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 beneficaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.

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

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

TABLE ND.13

USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D

FOR SELECTED DRUG CATEGORIES AMONG NONDUALS[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	**21,448**	**$78**	**$1,672,116**	**100.0 %**	**54,097**	**$31**	**100.0 %**
Anorexia or weight loss/gain	2	30	59	0.0	2	30	0.0
Fertility drugs	0	0	0	0.0	0	0	0.0
Drugs for cosmetic purposes	21	12	255	0.0	28	9	0.1
Cough and cold medications	10,408	37	381,055	22.8	17,539	22	32.4
Vitamins and minerals	1,690	57	96,365	5.8	4,882	20	9.0
Non-prescription drugs	6,967	134	937,008	56.0	21,254	44	39.3
Barbiturates	73	58	4,234	0.3	500	8	0.9
Benzodiazepines	1,846	90	165,375	9.9	8,634	19	16.0
Other Part D Excl Rx Drugs	441	199	87,765	5.2	1,258	70	2.3

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

b. Includes OTC drugs as well as prescription drugs.

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

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

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

NONDUAL 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	**68,084**	**92**	**4,814**	**13,456**	**49,600**	**122**	**603,080**	**651**	**49,663**	**99,163**	**452,520**	**1,083**
Age												
5 and younger	21,595	0	266	0	21,329	0	193,911	0	2,613	0	191,298	0
6-14	20,390	0	723	0	19,667	0	195,637	0	7,924	0	187,713	0
15-20	10,266	0	569	1,310	8,385	2	88,988	0	6,191	9,964	72,820	13
21-44	13,084	0	1,626	11,260	135	63	100,035	0	16,866	82,068	587	514
45-64	2,568	0	1,627	884	0	57	23,734	0	16,053	7,125	0	556
65-74	32	29	3	0	0	0	272	256	16	0	0	0
75-84	24	24	0	0	0	0	184	184	0	0	0	0
85 and older	39	39	0	0	0	0	211	211	0	0	0	0
Unknown	86	0	0	2	84	0	108	0	0	6	102	0
Gender												
Female	37,899	63	2,557	10,892	24,265	122	329,365	409	26,809	80,504	220,560	1,083
Male	30,027	29	2,257	2,564	25,177	0	273,397	242	22,854	18,659	231,642	0
Unknown	158	0	0	0	158	0	318	0	0	0	318	0
Race												
White	53,192	73	3,842	10,729	38,431	117	467,121	527	39,573	77,809	348,171	1,041
African American	1,321	1	110	184	1,026	0	11,876	4	1,139	1,313	9,420	0
Other/unknown	13,571	18	862	2,543	10,143	5	124,083	120	8,951	20,041	94,929	42
Use of Nursing Facilities[c]												
Entire year	97	25	72	0	0	0	855	226	629	0	0	0
Part year	100	11	88	1	0	0	842	68	765	9	0	0
None	67,887	56	4,654	13,455	49,600	122	601,383	357	48,269	99,154	452,520	1,083
Maintenance Assistance Status												
Cash	17,196	23	3,739	6,278	7,156	0	153,660	207	38,812	46,940	67,701	0
Medically needy	0	0	0	0	0	0		0	0	0	0	0
Poverty related	36,328	0	0	3,695	32,511	122	327,362	0	0	22,972	303,307	1,083
Other/unknown	14,560	69	1,075	3,483	9,933	0	122,058	444	10,851	29,251	81,512	0
Managed Care (MC) Status						0						
Fee-for-service (FFS) all year	68,084	92	4,814	13,456	49,600	122	603,080	651	49,663	99,163	452,520	1,083
FFS part year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
FFS part year, no Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
MC all year, with Rx claims	0	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	0

0
0
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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.1 includes the beneficiaries represented by Cell J of Table 1. Benefit months are months during which beneficiaries had pharmacy benefit coverage.

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

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

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

APPENDIX TABLE A.2

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

NONDUAL BENEFICIARIES, WYOMING, 2004

	Beneficiaries and Benefit Months in Cell J of Table 1		Included in Cell K of Table 1		Excluded from Cell K of Table 1	
	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months
All	**68,084**	**603,080**	**68,084**	**603,080**	**0**	**0**
Fee-for-service (FFS) all year	68,084	603,080	68,084	603,080	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 & Medicaid Services; FFS = fee-for-service pharmacy benefit; MAX = Medicaid Analytic Extract; MC = managed care; Rx = pharmacy benefit.