

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

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CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a, b}
DUAL ELIGIBLE BENEFICIARIES, WYOMING, 2005

			Number of			ES, WYOMIN		Nı	umber of B	enefit Mo	onths	
Beneficiary						Other/						Other/
Characteristics	All	Aged	Disabled	Adults	Children		All	Aged	Disabled		Children	Unknown
All	6,847	3,660	3,090	88	5	4	71,319	36,618	33,949	665	51	36
Age												
5 and younger	2	0	0	0	2	0	15	0	0	0	15	0
6-14	4	0	2	0	2	0	48	0	24	0	24	0
15-20	11	0	10	0	1	0	130	0	118	0	12	0
21-44	1,523	0	1,453	70	0	0	16,543	0	16,023	520	0	0
45-64	1,614	0	1,596	17	0	1	17,694	0	17,539	143	0	12
65-74	1,149	1,124	22	0	0	3	12,198	11,971	203	0	0	24
75-84	1,302	1,297	5	0	0	0	13,017	12,978	39	0	0	0
85 and older	1,242	1,239	2	1	0	0	11,674	11,669	3	2	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	4,344	2,633	1,656	51	0	4	45,379	26,708	18,284	351	0	36
Male	2,503	1,027	1,434	37	5	0	25,940	9,910	15,665	314	51	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	5,995	3,195	2,714	77	5	4	62,104	31,609	29,839	569	51	36
African American	75	27	48	0	0	0	794	295	499	0	0	0
Other/unknown	777	438	328	11	0	0	8,421	4,714	3,611	96	0	0
Use of Nursing Facilities ^c												
Entire year	1,488	1,391	97	0	0	0	14,860	13,798	1,062	0	0	0
Part year	756	654	102	0	0	0	6,783	5,687	1,096	0	0	0
None	4,603	1,615	2,891	88	5	4	49,676	17,133	31,791	665	51	36
Maintenance Assistance Statu	ıs											
Cash	2,466	846	1,560	60	0	0	26,779	9,425	16,900	454	0	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0
Poverty-related	89	26	43	14	2	4	795	277	381	77	24	36
Other/unknown	4,292	2,788	1,487	14	3	0	43,745	26,916	16,668	134	27	0
Dual Medicare Status ^d												
Full dual, all year	6,615	3,524	3,000	82	5	4	68,961	35,185	33,066	623	51	36
Full dual, part year	232	136	90	6	0	0	2,358	1,433	883	42	0	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	6,847	3,660	3,090	88	5	4	71,319	36,618	33,949	665	51	36
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

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 2005. 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 eliability 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, 2005

Beneficiary Characteristics	Percentage with at Least One Rx	Mean Number of	Mean Rx \$	¢ nor Pv	Mean \$, All Medicaid FFS \$c	Rx \$ as a Percentage of All Medicaid FFS \$d	Number of Beneficiaries
All	86.9	49.2	\$3,249	\$66	\$22,721	14.3	6,847
Age			. ,		,		•
5 and younger	50.0	5.0	770	154	3,240	23.8	2
6-14	100.0	86.0	13,389	156	13,997	95.7	4
15-20	90.9	19.2	1,643	86	43,343	3.8	11
21-44	81.5	32.5	3,217	99	23,567	13.6	1,523
45-64	87.4	54.3	4,372	81	25,100	17.4	1,614
65-74	83.3	52.3	3,096	59	16,814	18.4	1,149
75-84	88.9	55.8	2,873	52	21,156	13.6	1,302
85 and older	94.3	53.2	2,348	44	25,576	9.2	1,242
Unknown	0.0	0.0	0	0	0	0.0	0
Basis of Eligibilitye							
Aged	89.2	54.1	2,771	51	21,445	12.9	3,660
Disabled	84.7	44.3	3,875	87	24,796	15.6	3,090
Adults	73.9	17.1	1,063	62	4,077	26.1	88
Children	80.0	48.2	5,851	121	18,964	30.9	5
Unknown	100.0	16.0	993	62	2,999	33.1	4
Gender							
Female	90.4	54.5	3,381	62	21,819	15.5	4,344
Male	80.9	39.9	3,018	76	24,287	12.4	2,503
Unknown	0.0	0.0	0	0	0	0.0	0
Race							
White	88.8	51.7	3,411	66	24,073	14.2	5,995
African American	80.0	35.6	2,743	77	14,410	19.0	75
Other/unknown	73.0	31.0	2,046	66	13,098	15.6	777
Use of Nursing Fac	ilities ^f						
Entire year	97.2	71.4	3,618	51	35,963	10.1	1,488
Part year	94.6	54.1	2,880	53	21,617	13.3	756
None	82.4	41.2	3,190	78	18,622	17.1	4,603
Maintenance Assist	tance Status						
Cash	79.5	35.4	2,656	75	6,373	41.7	2,466
Medically needy	0.0	0.0	0	0	0	0.0	0
Poverty related	71.9	14.7	1,327	90	3,694	35.9	89
Other/unknown	91.5	57.8	3,629	63	32,509	11.2	4,292

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

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

e. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability

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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, 2005

					Num	ber of Rx, P	ercentage w	rith:			Numbe	r
Beneficiary Characteristics	Mean Number of Rx	Mean Rx \$	Rx \$ as a Percentage of All Medicaid FFS \$°	None		More than 1, but 2 or Less	More than 2, but 5 or Less	More than 5, but 10 or Less		Mean \$, All Medicaid FFS \$ ^d	Beneficiaries	Benefit Months
All	4.7	\$312	14.3	13.1	14.8	9.0	26.7	27.4	9.0	\$2,181	6,847	71,319
Age												
5 and younger	0.7	103	23.8	50.0	50.0	0.0	0.0	0.0	0.0	432	2	15
6-14	7.2	1,116	95.7	0.0	0.0	0.0	0.0	100.0	0.0	1,166	4	48
15-20	1.6	139	3.8	9.1	36.4	27.3	27.3	0.0	0.0	3,668	11	130
21-44	3.0	296	13.6	18.5	25.9	11.8	25.4	16.0	2.5	2,170	1,523	16,543
45-64	5.0	399	17.4	12.6	14.6	9.0	26.4	26.8	10.7	2,290	1,614	17,694
65-74	4.9	292	18.4	16.7	13.2	7.7	23.3	27.8	11.3	1,584	1,149	12,198
75-84	5.6	287	13.6	11.1	9.1	6.8	27.6	32.6	12.9	2,116	1,302	13,017
85 and older	5.7	250	9.2	5.7	8.8	8.9	31.1	36.7	8.8	2,721	1,242	11,674
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Basis of Eligibility	y ^e											
Aged	5.4	277	12.9	10.8	10.2	7.8	27.5	32.6	11.1	2,143	3,660	36,618
Disabled	4.0	353	15.6	15.3	19.9	10.2	25.8	21.9	6.8	2,257	3,090	33,949
Adults	2.3	141	26.1	26.1	26.1	12.5	25.0	10.2	0.0	539	88	665
Children	4.7	574	30.9	20.0	20.0	0.0	20.0	40.0	0.0	1,859	5	51
Unknown	1.8	110	33.1	0.0	50.0	25.0	25.0	0.0	0.0	333	4	36
Gender												
Female	5.2	324	15.5	9.6	12.8	8.8	28.0	30.1	10.6	2,089	4,344	45,379
Male	3.9	291	12.4	19.1	18.2	9.3	24.5	22.8	6.2	2,344	2,503	25,940
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	5.0	329	14.2	11.2	14.1	8.9	27.2	28.7	10.0	2,324	5,995	62,104
African American	3.4	259	19.0	20.0	21.3	8.0	25.3	24.0	1.3	1,361	75	794
Other/unknown	2.9	189	15.6	27.0	19.6	9.7	23.3	18.1	2.3	1,209	777	8,421
Use of Nursing Fa	acilities ^f											
Entire year	7.2	362	10.1	2.8	4.7	6.4	25.5	43.6	17.0	3,601	1,488	14,860
Part year	6.0	321	13.3	5.4	8.7	6.9	30.7	36.1	12.2	2,409	756	6,783
None	3.8	296	17.1	17.6	19.1	10.1	26.5	20.8	5.9	1,726	4,603	49,676
Maintenance Ass	istance Status	;										
Cash	3.3	245	41.7	20.5	22.5	11.0	24.5	17.4	4.1	587	2,466	26,779
Medically needy	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Poverty related	1.6	149	35.9	28.1	38.2	12.4	14.6	6.7	0.0	414	89	795
Other/unknown	5.7	356	11.2	8.5	9.9	7.7	28.3	33.6	12.0	3,190	4,292	43,745

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

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

e. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability

or blindness. The children's group includes children receiving foster care and adoptive services.

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

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

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, 2005

			20,1222	Patented		ARIES, WY d-Name	Off-Pater		d-Name			
		All Rx			Drugs			Drugs		Gen	eric Dı	rugs
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	4.7	\$312	\$66	1.7	\$232	\$140	0.2	\$16	\$73	2.8	\$63	\$22
Age												
5 and younger	0.7	103	154	0.3	87	262	0.0	0	0	0.3	16	46
6-14	7.2	1,116	156	3.7	838	229	0.8	189	227	2.7	89	33
15-20	1.6	139	86	0.6	113	178	0.0	4	75	0.9	22	24
21-44	3.0	296	99	1.2	236	191	0.2	16	101	1.6	44	27
45-64	5.0	399	81	1.8	298	165	0.2	23	99	2.9	78	27
65-74	4.9	292	59	1.7	213	122	0.2	14	72	3.0	64	22
75-84	5.6	287	52	1.8	208	113	0.2	12	51	3.5	67	19
85 and older	5.7	250	44	1.7	172	99	0.3	14	44	3.6	63	18
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Basis of Eligibility	d											
Aged	5.4	277	51	1.8	198	111	0.2	13	53	3.3	65	19
Disabled	4.0	353	87	1.6	271	175	0.2	20	99	2.3	61	27
Adults	2.3	141	62	0.7	97	139	0.1	6	83	1.5	37	25
Children	4.7	574	121	2.3	319	142	0.7	176	236	1.7	79	46
Unknown	1.8	110	62	0.6	89	153	0.1	1	16	1.1	20	18
Gender												
Female	5.2	324	62	1.8	238	133	0.3	17	67	3.1	68	22
Male	3.9	291	76	1.4	222	155	0.2	15	90	2.2	55	24
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Race												
White	5.0	329	66	1.7	245	140	0.2	17	72	3.0	67	23
African American	3.4	259	77	1.2	198	161	0.1	22	251	2.0	40	20
Other/unknown	2.9	189	66	1.0	144	138	0.1	9	73	1.7	36	21
Use of Nursing Fa	cilities ^e											
Entire year	7.2	362	51	2.3	258	112	0.3	18	50	4.5	86	19
Part year	6.0	321	53	1.9	226	119	0.3	16	61	3.8	78	20
None	3.8	296	78	1.4	225	157	0.2	16	89	2.2	54	25
Maintenance Assi	stance Sta	tus										
Cash	3.3	245	75	1.2	184	156	0.1	13	99	1.9	47	25
Medically needy	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Poverty related	1.6	149	90	0.5	104	197	0.1	16	135	1.0	29	29
Other/unknown	5.7	356	63	2.0	264	134	0.3	18	65	3.4	73	22

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 combined. For information about this classification method, see Wolters Kluwer Health, http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9ad778d7b6615 (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 hidness. 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, 2005

			x per Bei long Use		\$ per	Benefit I	Month Am ers	nong		\$ pei	Rx					Userse	
Therapeutic Category	F Total	Patented Brand- Name	Brand-	Generic		Patented Brand- Name	Off- Patent Brand- Name G	Seneric	P	atented Brand- Name	Off- Patent Brand- Name G	Seneric	Total Number of Rx	Total Rx \$		As a Percentage of Dual Benes	Number of Benefit Months
Anti-infective Agents	0.4	0.1	0.0	0.2	\$21	\$13	\$3	\$5	\$56	\$128	\$79	\$22	15,962	\$899,168	3,900	57.0	42,803
Biologicals	0.1	0.1	0.0	0.0	43	2	36	5	347	21	1,861	171	134	46,439	102	1.5	1,079
Antineoplastic Agents	0.6	0.1	0.0	0.5	99	76	1	21	160	576	182	45	1,171	187,716	182	2.7	1,894
Endocrine/Metabolic Drugs	1.0	0.4	0.1	0.5	50	36	5	9	49	97	37	17	36,606	1,779,132	3,284	48.0	35,380
Cardiovascular Agents	1.7	0.5	0.0	1.2	59	41	1	18	35	90	24	15	70,418	2,466,701	3,923	57.3	41,613
Respiratory Agents	0.7	0.4	0.0	0.2	50	45	1	4	72	103	66	18	20,746	1,493,017	2,698	39.4	29,580
Gastrointestinal Agents	8.0	0.3	0.0	0.5	50	39	1	10	65	155	33	21	20,941	1,360,014	2,526	36.9	27,142
Genitourinary Agents	0.6	0.4	0.0	0.2	48	42	1	5	74	94	78	28	9,553	706,523	1,357	19.8	14,712
CNS Drugs	1.4	0.7	0.0	0.6	136	117	3	16	101	168	161	25	57,754	5,823,922	3,983	58.2	42,670
Stimulants/Anti-obesity/Anorexia	0.6	0.4	0.0	0.2	95	87	1	7	156	203	71	42	1,374	214,470	203	3.0	2,263
Miscellaneous Psychological/ Neurological Agents	0.9	0.9	0.0	0.0	220	220	0	0	250	251	0	18	5,051	1,261,677	553	8.1	5,732
Analgesics and Anesthetics	0.9	0.1	0.0	0.8	49	20	8	21	54	212	186	27	34,455	1,844,480	3,540	51.7	37,827
Neuromuscular Agents	1.0	0.3	0.1	0.6	98	62	6	29	94	180	86	47	26,162	2,446,353	2,288	33.4	25,087
Nutritional Products	0.6	0.0	0.0	0.6	12	0	1	11	18	34	27	18	10,235	185,190	1,520	22.2	16,073
Hematological Agents	0.9	0.2	0.1	0.6	51	40	2	9	57	199	29	14	13,256	752,189	1,400	20.4	14,800
Topical Products	0.4	0.2	0.0	0.2	19	12	1	6	48	81	49	26	10,270	497,302	2,364	34.5	26,257
Miscellaneous Products	0.4	0.2	0.0	0.2	73	61	4	7	186	390	303	33	1,344	249,435	319	4.7	3,440
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	7	0	0	0	23	0	0	0	1,252	29,226	372	5.4	3,954
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.	336,684	22,242,954	n.a.	n.a.	n.a.

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.

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

e. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 2005.

TABLE D.7 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP^{a, b, c} DUAL ELIGIBLE BENEFICIARIES, WYOMING, 2005

			Users		An	nong Use	rs
Top 10 Drug Groups	Total Medicaid Rx \$	Number of Users	As a Percentage of Dual Beneficiaries	Number of Benefit Months		\$ per Rx	Rx \$ per Benefit Month
ANTIPSYCHOTICS	\$3,744,426	2,030	29.6	22,216	0.7	\$228	\$169
ANTICONVULSANT	2,066,181	1,953	28.5	21,547	0.8	113	96
ANTIDEPRESSANTS MISC PSYCHOTHERAPEUTIC AND	1,848,921	3,967	57.9	43,020	0.7	62	43
NEUROLOGICAL	1,261,677	673	9.8	7,031	0.7	250	179
ANTIASTHMATIC	1,153,949	2,676	39.1	29,166	0.5	87	40
ULCER DRUGS	1,126,567	2,858	41.7	31,006	0.6	56	36
ANALGESICS - Narcotic	1,043,218	4,542	66.3	48,916	0.5	42	21
ANTIHYPERLIPIDEMIC	1,042,698	1,387	20.3	15,394	0.6	108	68
ANTIDIABETIC	987,520	2,039	29.8	22,087	0.7	66	45
ANALGESICS - ANTI-INFLAMMATORY	598,322	1,415	20.7	15,897	0.4	91	38
Total	14,873,479	23,540		256,280	n.a.	n.a.	n.a.

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 2005. A beneficiary who used drugs from two or more groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2005. For information about these drug groups, see Wolters Kluwer Health, http://www.medispan. com/marketing/ContentPage.aspx?contentId=09e011ed-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, 2005

All Top 10 Drug Groups ANTIPSYCHOTICS ANTICONVULSANT

Beneficiary Characteristics	Number of Rx	Rx \$	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	of Rx per Benefit	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	of Rx	Mean Rx \$ per Benefit Month
All	158,462	\$14,873,479	2,030	29.6	22,216	0.7	\$169	1,953	28.5	21,547	0.8	\$96
Female												
All Females	107,385	9,550,516	1,203	27.7	13,122	0.7	152	1,248	28.7	13,764	0.8	87
Female, Disabled												
All Ages	44,439	5,019,849	553		6,268		185	753	45.5	8,526	0.8	
5 and younger	0	0	0		0		0	0	0.0	0	0.0	
6-14	5	35	0		0		0	0	0.0	0	0.0	
15-20	23	3,462	2		24		91	1	33.3	12	0.3	
21-44	14,631	1,862,216	239	35.4	2,737		205	322	47.7	3,682	0.9	
45-64	29,456	3,116,609	311	32.4	3,497	0.7	171	429	44.7	4,831	0.8	94
65-74	227	20,421	1	7.7	10	0.8	127	1	7.7	1	1.0	93
75-84	97	17,106	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
Female, Other Eligibles												
All Ages	62,946	4,530,667	650	24.2	6,854	0.7	122	495	18.4	5,238	0.8	57
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	310	23,206	11	25.6	96	0.3	81	12	27.9	78	0.5	43
45-64	65	4,040	0	0.0	0	0.0	0	3	37.5	27	0.7	40
65-74	19,682	1,602,468	137	18.5	1,525	0.7	169	192	25.9	2,124	0.8	67
75-84	22,427	1,597,523	223	24.9	2,451	0.7	119	176	19.6	1,876	0.8	57
85 and older	20,462	1,303,430	279	27.9	2,782	0.7	99	112	11.2	1,133	0.7	38
Male												
All Males	51,077	5,322,963	827	33.0	9,094	0.8	192	705	28.2	7,783	0.9	111
Male, Disabled												
All Ages	29,145	3,586,269	541	37.7	6,199	0.8	219	536	37.4	6,105	0.9	122
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	73	8,038	2	28.6	24	1.0	189	2	28.6	24	0.5	116
21-44	13,142	1,794,720	321	41.3	3,696	0.8	220	285	36.6	3,235	0.9	135
45-64	15,835	1,773,618	218	34.3	2,479	0.8	216	248	39.0	2,834	1.0	106
65-74	95	9,893	0	0.0	0	0.0	0	1	11.1	12	0.9	293
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

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, 2005

All Top 10 Drug Groups **ANTIPSYCHOTICS** ANTICONVULSANT Mean Mean Number of Number Number of Number Users Benefit Mean Users Benefit of Rx Mean of Rx per Rx \$ per as % Months per Rx \$ per as % Months of Dual Benefit Benefit Number of Among Benefit Benefit Beneficiary Number of Among of Dual Rx\$ Month Month Characteristics Number of Rx Users Benes Users Month Month Users Benes Users Male, Other Eligibles All Ages 21,932 1,736,694 286 26.8 2,895 0.7 137 169 15.8 1,678 0.9 72 5 and younger 0 0 0 0.0 0 0.0 0 0 0.0 0 0.0 0 36 0 0 6-14 12,396 0 0.0 0 0.0 0 0.0 0 0.0 18 12 38 12 26 15-20 950 100.0 0.2 100.0 0.5 296 4 27 0.2 42 3 43 21-44 19,398 14.8 11.1 35 0.5 45-64 208 10,810 0 0.0 0 0.0 0 0 0.0 0 0.0 0 65-74 8.678 718.027 102 26.4 1.066 0.8 141 78 20.2 825 1.0 84 75-84 8,247 664,894 112 28.0 1,154 150 53 13.3 535 0.9 66 0.7 85 and older 4,449 310,219 67 27.9 636 8.0 111 34 271 8.0 54 14.2 Unknown 0 0 0 0.0 0 0.0 0 0 0.0 0 0.0 0

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 2005. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2005. For information about these drug groups, see Wolters Kluwer Health, http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615 (October 26, 2007).

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

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, 2005

MISC PSYCHOTHERAPEUTIC AND

		ANTI	DEPRESSAN	TS		MIS		UROLOGICA				AN ⁻	TIASTHMATI	С	
Beneficiary Characteristics	Number of Users		Number of Benefit N Months Among Users	Mean Number of Rx per F Benefit Month		Number of Users	Users as % of Dual Benes	Months Among	Mean Number of Rx per f Benefit Month		Number of Users	Users as % of Dual Benes	Months Among	Mean Number of Rx per I Benefit Month	Mean Rx \$ per Benefit Month
All	3,967	57.9	43,020	0.7	\$43	673	9.8	7,031	0.7	\$179	2,676	39.1	29,166	0.5	\$40
Female															
All Females	2,814	64.8	30,788	0.7	43	475	10.9	5,043	0.7	177	1,926	44.3	21,097	0.4	38
Female, Disabled															
All Ages	1,278	77.2	14,505	0.6	47	77	4.6	914	0.6	499	788	47.6	8,932	0.4	34
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	1	100.0	12	0.4	3	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	1	33.3	12	0.3	9	0	0.0	0	0.0	0	1	33.3	12	0.3	32
21-44	464	68.7	5,293	0.6	47	22	3.3	260	0.5	410	230	34.1	2,673	0.3	28
45-64	805	83.9	9,123	0.6	47	55	5.7	654	0.7	534	553	57.6	6,209	0.4	36
65-74	5	38.5	41	8.0	48	0	0.0	0	0.0	0	4	30.8	38	0.4	41
75-84	2	50.0	24	0.6	38	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
Female, Other Eligibles															
All Ages	1,536	57.1	16,283	0.7	39	398	14.8	4,129	0.7	106	1,138	42.3	12,165	0.5	41
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	27	62.8	221	0.4	26	1	2.3	12	0.2	23	9	20.9	66	0.2	5
45-64	3	37.5	27	0.9	93	0	0.0	0	0.0	0	2	25.0	24	0.2	8
65-74	443	59.9	4,915	0.7	39	59	8.0	642	0.7	139	378	51.1	4,224	0.5	47
75-84	530	59.1	5,661	0.7	37	152	16.9	1,644	0.7	97	408	45.5	4,321	0.5	44
85 and older	533	53.3	5,459	0.8	41	186	18.6	1,831	0.8	103	341	34.1	3,530	0.4	32
Male															
All Males	1,153	46.1	12,232	0.7	44	198	7.9	1,988	0.7	186	750	30.0	8,069	0.5	44
Male, Disabled															
All Ages	658	45.9	7,398	0.7	46	50	3.5	581	0.6	373	313	21.8	3,511	0.4	37
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	2	28.6	24	1.0	25	0	0.0	0	0.0	0	1	14.3	12	0.1	1
21-44	344	44.2	3,907	0.7	41	21	2.7	247	0.4	324	136	17.5	1,544	0.4	29
45-64	311	48.9	3,455	0.7	51	29	4.6		8.0	409	173	27.2	,	0.5	42
65-74	1	11.1	12	0.3	81	0	0.0		0.0	0	3	33.3	36	1.0	86
75-84	0	0.0	0	0.0	0	0	0.0		0.0	0	0	0.0		0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

TABLE D.7B MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR THIRD TO FIFTH TOP DRUG GROUPS

SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGEa, b, c

DUAL ELIGIBLE BENEFICIARIES, WYOMING, 2005

						MIS		OTHERAPE							
		ANTID	EPRESSAN	TS			NEU	JROLOGICA	L			AN	TIASTHMATIC		
		Users	Number of Benefit N	Mean Number of	Mean		Users	Number of Benefit N	Mean Number of	Mean		Users	Number of Benefit N	Mean lumber of	Mean
		as %	Months	Rx per	Rx \$ per		as %	Months	Rx per l	Rx \$ per		as %	Months	Rx per l	Rx \$ per
Beneficiary Characteristics	Number of Users	of Dual Benes	Among Users	Benefit Month		Number of Users	of Dual Benes	Among Users	Benefit Month		Number of Users	of Dual Benes	Among Users	Benefit Month	Benefit Month
Male, Other Eligibles															
All Ages	495	46.3	4,834	0.7	41	148	13.8	1,407	0.8	109	437	40.9	4,558	0.6	49
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	2	100.0	24	0.2	2
15-20	1	100.0	12	0.1	4	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	12	44.4	132	0.2	20	2	7.4	14	0.2	43	10	37.0	117	0.3	31
45-64	7	70.0	61	0.6	29	0	0.0	0	0.0	0	3	30.0	36	0.2	15
65-74	172	44.4	1,766	0.7	42	31	8.0	326	0.7	100	160	41.3	1,657	0.6	53
75-84	193	48.3	1,862	0.7	40	72	18.0	680	0.8	104	179	44.8	1,896	0.6	51
85 and older	110	45.8	1,001	0.8	47	43	17.9	387	0.9	126	83	34.6	828	0.6	39
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

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.

Source: Data for this table are from the MAX 2005 file for Wyoming, released by CMS in 12/2008. This table was produced on 04/23/2009.

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 2005. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2005. For information about these drug groups, see Wolters Kluwer Health, http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615 (October 26, 2007).

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, 2005

		UL	CER DRUGS					ESICS - Naro				ANTIH	YPERLIPIDE	MIC	
Beneficiary Characteristics	Number of Users		Number of Benefit N Months Among Users	Rx per l		Number of Users	Users as % of Dual Benes	Number of Benefit N Months Among Users			Number of Users	Users as % of Dual Benes	Number of Benefit I Months Among Users		Mean Rx \$ per Benefit Montl
All	2,858	41.7	31,006	0.6	\$36	4,542	66.3	48,916	0.5	\$21	1,387	20.3	15,394	0.6	\$68
Female															
All Females	1,991	45.8	21,703	0.6	37	3,303	76.0	35,893	0.5	20	905	20.8	10,032	0.6	67
Female, Disable	d														
All Ages	706	42.6	8,041	0.6	38	1,382	83.5	15,655	0.5	25	352	21.3	3,940	0.6	65
5 and younger	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	(
15-20	0	0.0	0	0.0	0	1	33.3	12	0.1	1	0	0.0	0	0.0	(
21-44	214	31.7	2,450	0.5	35	475	70.4	5,451	0.4	23	78	11.6	899	0.5	5
45-64	485	50.5	5,515	0.6	40	896	93.3	10,082	0.5	26	269	28.0	2,987	0.6	69
65-74	4	30.8	40	0.8	55	8	61.5	86	0.3	10	3	23.1	30	0.7	97
75-84	3	75.0	36	0.7	15	2	50.0	24	0.8	26	2	50.0	24	0.7	7
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	(
Female, Other El	ligibles														
All Ages	1,285	47.8	13,662	0.7	36	1,921	71.5	20,238	0.5	17	553	20.6	6,092	0.6	69
5 and younger	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	(
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	(
21-44	7	16.3	47	0.2	5	22	51.2	187	0.6	21	1	2.3	6	0.2	12
45-64	0	0.0	0	0.0	0	6	75.0	72	0.3	3	0	0.0	0	0.0	(
65-74	367	49.6	4,115	0.6	38	531	71.8	5,967	0.5	15	253	34.2	2,816	0.6	73
75-84	441	49.2	4,705	0.7	36	670	74.7	7,181	0.6	17	215	24.0	2,384	0.6	6
85 and older	470	47.0	4,795	0.8	34	692	69.2	6,831	0.6	17	84	8.4	886	0.6	66
Male															
All Males	867	34.6	9,303	0.7	36	1,239	49.5	13,023	0.5	25	482	19.3	5,362	0.7	68
Male, Disabled															
All Ages	429	29.9	4,825	0.6	37	689	48.0	7,599	0.4	30	252	17.6	2,924	0.6	63
5 and younger	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	(
15-20	0	0.0	0	0.0	0	5	71.4	58	0.2	2	0	0.0	0	0.0	(
21-44	191	24.6	2,210	0.6	31	310	39.8	3,417	0.4	20	90	11.6	1,040	0.6	54
45-64	237	37.3	2,603	0.7	41	370	58.2	4,077	0.5	39	162	25.5	1,884	0.7	69
65-74	1	11.1	12	0.3	35	4	44.4	47	0.7	34	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	(
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	(

TABLE D.7C MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE $^{\mathrm{a}}$, $^{\mathrm{b}}$, $^{\mathrm{c}}$

DUAL ELIGIBLE BENEFICIARIES, WYOMING, 2005

-		ULC	CER DRUGS				ANALG	ESICS - Nard	cotic			ANTIH	YPERLIPIDE	ИΙС	
			Number of	Mean				Number of	Mean				Number of	Mean	
		Users	Benefit N	umber of	Mean		Users	Benefit N	lumber of	Mean		Users	Benefit N	umber of	Mean
		as %	Months	Rx per	Rx \$ per		as %	Months	Rx per	Rx \$ per		as %	Months	Rx per F	Rx \$ per
Beneficiary	Number of	of Dual	Among	Benefit	Benefit	Number of	of Dual	Among	Benefit	Benefit	Number of	of Dual	Among	Benefit	Benefit
Characteristics	Users	Benes	Users	Month	Month	Users	Benes	Users	Month	Month	Users	Benes	Users	Month	Month
Male, Other Elig	ibles														
All Ages	438	41.0	4,478	0.7	35	550	51.4	5,424	0.5	17	230	21.5	2,438	0.7	74
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	1	50.0	12	0.2	46	0	0.0	0	0.0	0	1	50.0	12	1.0	50
15-20	1	100.0	12	0.4	9	3	300.0	36	0.1	1	0	0.0	0	0.0	0
21-44	4	14.8	46	0.5	39	21	77.8	217	0.6	25	3	11.1	26	0.5	78
45-64	5	50.0	48	0.6	53	14	140.0	130	0.4	12	3	30.0	32	0.3	26
65-74	146	37.7	1,518	0.7	42	205	53.0	2,113	0.5	23	110	28.4	1,232	0.7	77
75-84	182	45.5	1,875	0.7	31	191	47.8	1,855	0.5	15	83	20.8	849	0.7	72
85 and older	99	41.3	967	0.7	29	116	48.3	1,073	0.5	10	30	12.5	287	0.7	79
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

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 2005. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2005. For information about these drug groups, see Wolters Kluwer Health, http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615 (October 26, 2007).

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

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, 2005

ANTIDIABETIC ANALGESICS - ANTI-INFLAMMATORY Number of Mean Number of Mean Users Benefit Number of Mean Users Benefit Number of Mean Rx per Rx \$ per as % Rx per Rx \$ per as % Months Months Benefit Benefit Number of Beneficiary Number of of Dual Among Benefit Number of of Dual Among Benefit Number of Characteristics Benes Users Month Beneficiaries Benefit Months Users Users Month Month Benes Users Month ΑII 2.039 29.8 22.087 0.7 \$45 1.415 20.7 15,897 0.4 \$38 6.847 71.319 Female All Females 1,388 32.0 15,086 0.7 45 1,000 23.0 11,276 0.4 43 4,344 45,379 Female, Disabled All Ages 461 27.8 5,122 0.6 48 495 29.9 5,699 0.4 56 1,656 18,284 0 0.0 0 0 0 5 and younger 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 1 12 15-20 1 33.3 12 0.3 5 0 0.0 0 0.0 0 3 36 48 171 52 675 21-44 111 16.4 1,280 0.6 25.3 1,962 0.3 7,520 45-64 340 35.4 3,735 0.7 48 316 32.9 3,649 0.4 54 960 10,563 65-74 55 13 8 61.5 83 0.7 73 6 46.2 64 0.4 116 75-84 12 24 546 37 1 25.0 0.6 8 2 50.0 0.7 4 0 0 0 0 0 0 85 and older 0.0 0.0 0 0 0.0 0.0 Female, Other Eligibles 927 All Ages 34.5 9,964 0.7 43 505 18.8 5,577 0.4 29 2,688 27,095 0 0.0 0 0.0 0 0.0 0 0.0 0 0 0 0 5 and younger 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 4 9.3 31 0.4 12 7 16.3 69 0.3 14 43 297 0 8 45-64 0 0.0 0.0 0 0 0.0 0 0.0 0 64 65-74 351 47.4 3.950 0.7 50 173 23.4 1,976 0.4 39 740 7.968 75-84 357 39.8 3,790 0.7 40 166 18.5 1,812 24 897 9,238 0.4 85 and older 215 21.5 2,193 0.7 37 159 15.9 1,720 0.5 23 9,528 1,000 Male All Males 651 26.0 7,001 0.7 45 415 16.6 4,621 0.4 26 2,503 25,940 Male. Disabled All Ages 297 20.7 250 2,896 0.3 21 1,434 15,665 3,311 0.7 46 17.4 0 0.0 0 0.0 0 0.0 0 0.0 0 0 0 5 and younger 0 0.0 6-14 0 0 0.0 0 0 0.0 0 0.0 0 1 12 0 7 15-20 0.0 0 0.0 0 14.3 10 0.1 1 82 21-44 83 10.7 888 49 110 1,272 0.3 18 778 8,503 0.7 14.1 45-64 212 33.3 2,399 0.7 46 138 21.7 1,602 0.4 24 636 6,976 65-74 2 22.2 24 0.4 12 11.1 12 0.1 1 9 87 2 75-84 0 0.0 0 0.0 0 0 0.0 0 0.0 0 1 0 0 0.0 0 0.0 0 2 3 85 and older 0.0 0 0.0 0

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, 2005

		1A	NTIDIABETIC			ANAL	GESICS	- ANTI-INFLA	MMATOR	Υ		
		Users	Number of Benefit N	Mean lumber of	Mean		Users	Number of Benefit N	Mean lumber of	Mean		
		as %	Months		Rx \$ per		as %	Months		Rx \$ per		
Beneficiary	Number of		Among	Benefit		Number of	of Dual	Among	Benefit		Number of	Number of
Characteristics	Users	Benes	Users	Month	Month	Users	Benes	Users	Month	Month	Beneficiaries E	Benefit Months
Male, Other Elig	ibles											
All Ages	354	33.1	3,690	0.7	43	165	15.4	1,725	0.5	34	1,069	10,275
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	15
6-14	0	0.0	0	0.0	0	1	50.0	12	1.5	932	2	24
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12
21-44	3	11.1	15	0.7	6	7	25.9	56	0.3	11	27	223
45-64	9	90.0	94	0.4	24	5	50.0	56	0.5	23	10	91
65-74	157	40.6	1,684	0.7	45	57	14.7	615	0.6	35	387	4,027
75-84	116	29.0	1,181	0.7	44	64	16.0	662	0.5	26	400	3,740
85 and older	69	28.8	716	0.7	41	31	12.9	324	0.5	21	240	2,143
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0

Source: Data for this table are from the MAX 2005 file for Wyoming, released by CMS in 12/2008. This table was produced on 04/23/2009.

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 2005. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2005. For information about these drug groups, see Wolters Kluwer Health, http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615 (October 26, 2007).

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

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

DUAL ELIGIBLE BENEFICIARIES, WYOMING, 2005

Beneficiary		Number of Rx per Benefit	Number of All-Year Nursing	Benefit Months Among All- Year Nursing Facility
Characteristics	Rx \$ per Benefit Month	Month	•	Residents
All	\$362	7.2	1,488	14,860
Age				
0-64	609	8.2	97	1,062
65-74	446	8.1	198	2,052
75-84	379	7.5	479	4,714
85 and older	290	6.5	714	7,032
Unknown	0	0.0	0	0
Gender				
Female	351	7.3	1,053	10,712
Male	392	6.9	435	4,148
Unknown	0	0.0	0	0
Race				
White	364	7.2	1,403	13,942
African American	501	6.2	10	111
Other/unknown	307	5.9	75	807
Basis of Eligibility	:			
Aged	343	7.1	1,391	13,798
Disabled	609	8.2	97	1,062
Adults	0	0.0	0	0
Children	0	0.0	0	0
Unknown	0	0.0	0	0

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.

Source: Data for this table are from the MAX 2005 file for Wyoming, released by CMS in 12/2008. This table was produced on 04/23/2009.

a. Table D.8 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their 2005 Medicaid enrollment. A total of 756 beneficiaries who were in

nursing facilities for part of their enrollment and their 6,783 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 ebecause of disability

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, 2005

Number of Rx per Benefit \$ per Benefit Month Among

Month Among Users Users \$ per Rx Users

Therapeutic Category	P Total	atented Brand- Name	Off- Patent Brand- Name G	eneric		atented I Brand- Name	Off- Patent Brand- Name G	eneric		Patented Brand- Name	Off- Patent Brand- Name 0		Total Number of Rx	Total Rx \$	Number of Users	As a Percentage of Dual All-Year Nursing Facility Residents	Number of Benefit Months
Anti-infective Agents	0.4	0.1	0.0	0.2	\$18	\$10	\$4	\$5	\$45	\$78	\$85	\$20	4,537	\$204,072	1,050	70.6	11,234
Biologicals	0.1	0.1	0.0	0.0	3	2	0	1	23	20	0	31	95	2,228	83	5.6	873
Antineoplastic Agents	0.9	0.2	0.0	0.7	128	84	0	43	144	480	34	62	453	65,094	51	3.4	508
Endocrine/Metabolic Drugs	1.2	0.4	0.2	0.6	49	33	7	9	41	86	35	15	10,359	420,861	830	55.8	8,598
Cardiovascular Agents	2.1	0.4	0.0	1.6	54	31	1	22	26	78	24	13	24,121	625,106	1,129	75.9	11,582
Respiratory Agents	0.7	0.5	0.0	0.2	51	46	0	4	71	99	30	19	4,568	325,466	609	40.9	6,431
Gastrointestinal Agents	1.0	0.2	0.1	0.7	44	29	2	13	46	124	32	20	8,052	369,936	791	53.2	8,352
Genitourinary Agents	0.8	0.5	0.0	0.2	55	47	1	6	71	90	68	28	3,854	273,241	470	31.6	5,005
CNS Drugs	1.5	0.8	0.0	0.7	125	109	0	15	82	130	38	23	17,038	1,392,508	1,073	72.1	11,170
Stimulants/Anti-obesity/Anorexia	0.6	0.2	0.0	0.3	76	68	0	8	139	288	0	25	125	17,329	21	1.4	227
Miscellaneous Psychological/ Neurological Agents	1.0	1.0	0.0	0.0	174	174	0	0		168	0	20	2,766	462,956	261	17.5	2,662
Analgesics and Anesthetics	1.1	0.1	0.1	0.9	36	8	8	20	33	87	135	21	9,241	307,758	819	55.0	8,434
Neuromuscular Agents	1.2	0.3	0.1	8.0	79	38	5	35	65	124	57	44	5,965	388,501	467	31.4	4,948
Nutritional Products	0.8	0.0	0.0	0.8	13	0	1	12	17	27	32	16	4,336	72,296	517	34.7	5,434
Hematological Agents	1.3	0.2	0.1	1.0	57	45	1	10	44	183	19	11	6,051	267,556	451	30.3	4,729
Topical Products	0.5	0.2	0.0	0.3	23	13	1	9	46	66	43	31	3,757	172,304	686	46.1	7,522
Miscellaneous Products	0.2	0.0	0.0	0.2	4	2	0	2	19	39	0	13	214	4,023	90	6.0	980
Unknown Therapeutic Category	0.4	0.0	0.0	0.0	6	0	0	0	15	0	0	0	784	12,051	192	12.9	2,110
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.	106,316	5,383,286	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for Wyoming, released by CMS in 12/2008. This table was produced on 04/23/2009.

In Wyoming, 1.1 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 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.

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 2005. A total of 756 beneficiaries who were in nursing facilities for part of their enrollment and their 6,783 benefit months were excluded from the analysis.

b. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 2005. A beneficiary who used drugs from two or more categories was counted as a user for each category. Therefore, the sum of users across categories may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

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

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

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, 2005

			Users				Among Users
Top 10 Drug Groups in Nursing Facilities	Total Medicaid Rx \$	Number of Users	As a Percentage of All-Year Nursing Facility Residents	Number of Benefit Monthsp	Number of Rx er Benefit Month	\$ per Rx	Rx \$ per Benefit Month
ANTIPSYCHOTICS	\$866,195	586	39.4	6,287	0.8	\$167	\$138
ANTIDEPRESSANTS	479,418	991	66.6	10,464	0.8	54	46
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	462,956	318	21.4	3,278	0.8	167	141
ULCER DRUGS	309,460	783	52.6	8,306	0.8	44	37
ANTIASTHMATIC	268,941	612	41.1	6,488	0.5	84	41
ANTICONVULSANT	251,605	345	23.2	3,687	1.0	70	68
ANALGESICS - Narcotic	221,282	954	64.1	9,867	0.7	32	22
ANTIHYPERLIPIDEMIC	197,896	209	14.0	2,249	0.8	107	88
ANTIDIABETIC	195,698	438	29.4	4,657	0.8	52	42
URINARY ANTISPASMODICS	188,923	257	17.3	2,740	0.8	84	69
Total	3,442,374	5,493		58,023	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for Wyoming, released by CMS in 12/2008. This table was produced on 04/23/2009.

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 2005. A total of 756 beneficiaries who were in nursing facilities for part of their enrollment and their 6,783 benefit months were excluded from the analysis.

b. A user is a beneficiary who had at least one prescription filled in a given drug group during 2005. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

c. wedicald relinious/serient and action of the control of the con

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, 2005

All Top	10 Drug Groups			ANTIPS)	/CHOTICS				ANTIDEP	RESSANTS		
Beneficiary Characteristics	Number of Rx	Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Benefit Months	Mean Number of Rx		Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	
All	45,319	\$3,442,374	586	39.4		0.8		991	66.6		0.8	
Female	.,.	, , , , , , , , , , , , , , , , , , , ,			-, -		•			-, -		•
All Females	32,680	2,394,852	404	38.4	4,378	0.8	131	719	68.3	7,799	0.8	45
Female, Disabled												
All Ages	2,287	250,650	20	42.6	230	0.9	168	42	89.4	497	0.9	53
64 or younger	2,287	250,650		42.6	230	0.9	168	42	89.4	497	0.9	53
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
Female, Other Eligibles												
All Ages	30,393	2,144,202	384	38.2	4,148	0.8	129	677	67.3	7,302	0.8	44
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	4,508	358,677	49	43.4	534	1.0	201	96	85.0	1,059	0.8	41
75-84	10,986	796,375	137	43.6	1,516	0.8	135	230	73.2	2,508	0.9	45
85 and older	14,899	989,150	198	34.2	2,098	0.8	107	351	60.6	3,735	0.8	44
Male												
All Males	12,639	1,047,522	182	41.8	1,909	0.9	153	272	62.5	2,665	0.8	50
Male, Disabled												
All Ages	1,878	181,368	17	34.0	171	1.2	208	37	74.0	348	0.9	57
64 or younger	1,878	181,368	17	34.0	171	1.2	208	37	74.0	348	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
Male, Other Eligibles												
All Ages	10,761	866,154	165	42.9	1,738	0.8	147	235	61.0	2,317	0.8	49
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	3,318	276,436	48	56.5	552	0.9	156	66	77.6	684	0.9	49
75-84	4,388	361,421	71	43.0	726	0.8	162	100	60.6	978	0.9	47
85 and older	3,055	228,297	46	34.1	460	0.8	114	69	51.1	655	0.8	50
Unknown	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2005 file for Wyoming, released by CMS in 12/2008. This table was produced on 04/23/2009.

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.

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 2005. A total of 756 beneficiaries who were in nursing facilities for part of their enrollment and their 6,783 benefit months were excluded from the analysis.

b. A user is a beneficiary who had at least one prescription filled in a given drug group during 2005. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

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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 AGEa, b, c, d DUAL ELIGIBLE BENEFICIARIES, WYOMING, 2005

	MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL					-	ULCE	R DRUGS				ANTIAS	STHMATIC		
Beneficiary Characteristics	Number of Users	Year Nursing Facility	Number of Benefit Months Among I Users	Mean Number of Rx		Number of Users	Users as % of All- Year Nursing Facility Residents	Number of Benefit Months Among Users		Mean Rx \$	Number of Users	Users as % of All- Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	
All	318	21.4	3,278	0.8	\$141	783	52.6	8,306	0.8	\$37	612	41.1	6,488	0.5	\$42
Female															
All Females	226	21.5	2,407	0.8	134	570	54.1	6,127	0.8	37	427	40.6	4,537	0.4	37
Female, Disable	ed														
All Ages	9	19.1	107	0.7	511	32	68.1	374	0.8	56	16	34.0	192	0.3	25
64 or younger	9	19.1	107	0.7	511	32	68.1	374	0.8	56	16	34.0	192	0.3	25
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
Female, Other E	Eligibles														
All Ages	217	21.6	2,300	0.8	117	538	53.5	5,753	0.8	36	411	40.9	4,345	0.4	38
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	22	19.5	226	0.8	175	70	61.9	792	0.9	37	49	43.4	550	0.6	41
75-84	75	23.9	836	0.8	109	161	51.3	1,721	0.8	37	149	47.5	1,524	0.5	46
85 and older	120	20.7	1,238	0.9	111	307	53.0	3,240	0.8	36	213	36.8	2,271	0.4	32
Male															
All Males	92	21.1	871	0.9	160	213	49.0	2,179	0.8	37	185	42.5	1,951	0.6	51
Male, Disabled															
All Ages	4	8.0	48	0.7	704	23	46.0	212	1.1	82	18	36.0	210	0.5	35
64 or younger	4	8.0	48	0.7	704	23	46.0	212	1.1	82	18	36.0	210	0.5	35
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
Male, Other Elig	jibles														
All Ages	88	22.9	823	0.9	128	190	49.4	1,967	0.8	32	167	43.4	1,741	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	13	15.3	141	0.8	121	43	50.6	465	0.8	39	40	47.1	416	0.8	59
75-84	42	25.5	380	1.0	125	85	51.5	875	0.8	31	81	49.1	879	0.6	54
85 and older	33	24.4	302	0.9	136	62	45.9	627	0.7	29	46	34.1	446	0.6	45
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

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 2005. A total of 756 beneficiaries who were in nursing facilities for part of their enrollment and their 6,783 benefit months were excluded from the analysis.

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d. The top 10 drug groups were determined based on total 2005 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615 (October 26, 2007).

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

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, 2005

	ANTICONVULSANT				ANALGESICS - Narcotic						ANTIHYPERLIPIDEMIC				
Beneficiary Characteristics	Number of Users	Users as % of All-Year Nursing Facility Residents	Benefit Months Among			Number of Users	Users as % of All-Year Nursing Facility Residents	Benefit Months Among			Number of Users	Users as % of All-Year Nursing Facility Residents		Mean Number of Rx	
All	345	23.2	3,687	1.0	\$68	954	64.1	9,867	0.7	\$22	209	14.0	2,249	0.8	
Female															
All Females	234	22.2	2,540	1.0	64	750	71.2	7,892	0.7	23	129	12.3	1,426	0.8	86
Female, Disable	ed														
All Ages	31	66.0	369	1.1	111	34	72.3	400	0.9	82	12	25.5	138	0.8	114
64 or younger	31	66.0	369	1.1	111	34	72.3	400	0.9	82	12	25.5	138	0.8	114
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
Female, Other E	Eligibles														
All Ages	203	20.2	2,171	0.9	56	716	71.2	7,492	0.7	20	117	11.6	1,288	0.8	83
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	43	38.1	447	1.0	60	62	54.9	699	0.7	16	27	23.9	308	0.9	97
75-84	86	27.4	947	1.0	65	234	74.5	2,491	0.7	20	50	15.9	554	0.8	85
85 and older	74	12.8	777	0.8	44	420	72.5	4,302	0.7	21	40	6.9	426	0.7	70
Male															
All Males	111	25.5	1,147	1.0	77	204	46.9	1,975	0.7	18	80	18.4	823	0.9	92
Male, Disabled															
All Ages	34	68.0	378	1.1	92	27	54.0	268	0.9	21	9	18.0	108	0.9	82
64 or younger	34	68.0	378	1.1	92	27	54.0	268	0.9	21	9	18.0	108	0.9	82
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
Male, Other Elig	gibles														
All Ages	77	20.0	769	1.0	70	177	46.0	1,707	0.7	18	71	18.4	715	0.9	93
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	31	36.5	349	1.0	85	46	54.1	449	0.8	37	25	29.4	270	1.0	97
75-84	28	17.0	269	1.0	51	69	41.8	643	0.6	13	27	16.4	262	0.8	95
85 and older	18	13.3	151	1.0	69	62	45.9	615	0.6	9	19	14.1	183	0.8	85
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2005 file for Wyoming, released by CMS in 12/2008. This table was produced on 04/23/2009.

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.

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 2005. A total of 756 beneficiaries who were in nursing facilities for part of their enrollment and their 6,783 benefit months were excluded from the analysis.

b. A user is a beneficiary who had at least one prescription filled in a given drug group during 2005. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

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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 AGEa, b, c, d DUAL ELIGIBLE BENEFICIARIES, WYOMING, 2005

ANTIDIABETIC

URINARY ANTISPASMODICS

Beneficiary Characteristics	Number of Users	Users as % of All-Year Nursing Facility Residents	Benefit Months	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Benefit Months	Mean Number of Rx	Mean Rx \$	All-Year Nursing Facility Residents	Benefit Months Among All- Year Nursing Facility Residents
All	438	29.4	4,657	0.8	\$42	257	17.3	2,740	0.8	\$69	1,488	14,860
Female												
All Females	298	28.3	3,178	0.8	41	208	19.8	2,223	0.8	67	1,053	10,712
Female, Disable	ed											
All Ages	16	34.0	182	0.8	31	14	29.8	164	0.8	62	47	535
64 or younger	16	34.0	182	0.8	31	14	29.8	164	0.8	62	47	535
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
Female, Other E	ligibles											
All Ages	282	28.0	2,996	0.8	42	194	19.3	2,059	0.8	68	1,006	10,177
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	51	45.1	573	0.7	49	27	23.9	301	0.9	67	113	1,176
75-84	116	36.9	1,236	0.8	42	63	20.1	665	0.8	68	314	3,196
85 and older	115	19.9	1,187	0.8	38	104	18.0	1,093	0.8	68	579	5,805
Male												
All Males	140	32.2	1,479	0.8	45	49	11.3	517	0.8	76	435	4,148
Male, Disabled												
All Ages	18	36.0	213	0.9	58	6	12.0	71	0.9	79	50	527
64 or younger	18	36.0	213	0.9	58	6	12.0	71	0.9	79	50	527
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
Male, Other Elig	jibles											
All Ages	122	31.7	1,266	0.8	42	43	11.2	446	0.8	75	385	3,621
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	40	47.1	398	0.8	34	13	15.3	139	0.8	84	85	876
75-84	38	23.0	386	0.9	46	15	9.1	141	0.9	83	165	1,518
85 and older	44	32.6	482	0.8	46	15	11.1	166	0.8	62	135	1,227
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0

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.

Source: Data for this table are from the MAX 2005 file for Wyoming, released by CMS in 12/2008. This table was produced on 04/23/2009.

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 2005. A total of 756 beneficiaries who were in nursing facilities for part of their enrollment and their 6,783 benefit months were excluded from the analysis.

b. A user is a beneficiary who had at least one prescription filled in a given drug group during 2005. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

c. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state. d. The top 10 drug groups were determined based on total 2005 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters

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

TABLE D.11 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D AMONG DUALS, BY BENEFICIARY CHARACTERISTIC^{a,b} WYOMING, 2005

	Number of Beneficiaries with	Percentage of Beneficiaries with	Number of Part	Total Number	Part D Excluded Rx		Pa	rt D Excluded Rx \$ as a	Total Number
Beneficiary Characteristics	at Least One Part D Excluded Rx	at Least One Part D Excluded Rx		Part D Excluded Rx	\$ per	Total Part D Excluded Rx \$	\$ per Part D Per	centage of All Dual Rx \$	of Beneficiaries
All	4,069	59.4	7.1	48,832	\$156	\$1,071,409	\$22	4.8	6,847
Age									
5 and younger	1	50.0	0.5	1	3	5	5	0.3	2
6-14	4	100.0	15.3	61	336	1,345	22	2.5	4
15-20	4	36.4	1.6	18	26	286	16	1.6	11
21-44	780	51.2	5.5	8,360	132	200,417	24	4.1	1,523
45-64	1,022	63.3	9.1	14,731	222	359,105	24	5.1	1,614
65-74	670	58.3	7.2	8,249	176	202,777	25	5.7	1,149
75-84	800	61.4	7.2	9,335	131	170,109	18	4.5	1,302
85 and older	788	63.4	6.5	8,077	111	137,365	17	4.7	1,242
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Basis of Eligibilityc									
Aged	2,247	61.4	7.0	25,512	137	502,847	20	5.0	3,660
Disabled	1,789	57.9	7.5	23,150	183	566,410	24	4.7	3,090
Adults	28	31.8	1.3	117	15	1,276	11	1.4	88
Children	4	80.0	9.4	47	168	839	18	2.9	5
Unknown	1	25.0	1.5	6	9	37	6	0.9	4
Gender									
Female	2,791	64.2	7.9	34,174	170	737,220	22	5.0	4,344
Male	1,278	51.1	5.9	14,658	134	334,189	23	4.4	2,503
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Race									
White	3,692	61.6	7.6	45,452	167	1,002,202	22	4.9	5,995
African American	38	50.7	4.1	310	70	5,287	17	2.6	75
Other/unknown	339	43.6	4.0	3,070	82	63,920	21	4.0	777
Use of Nursing Fac	ilities ^d								
Entire year	969	65.1	7.8	11,653	125	186,201	16	3.5	1,488
Part year	557	73.7	7.3	5,542	141	106,552	19	4.9	756
None	2,543	55.2	6.9	31,637	169	778,656	25	5.3	4,603
Maintenance Assist	ance Status								
Cash	1,184	48.0	4.3	10,610	100	246,810	23	3.8	2,466
Medically needy	0	0.0	0.0	0	0	0	0	0.0	0
Poverty related	30	33.7	1.4	127	24	2,134	17	1.8	89
Other/unknown	2,855	66.5	8.9	38,095	192	822,465	22	5.3	4,292

Source: Data for this table are from the MAX 2005 file for Wyoming, released by CMS in 12/2008. This table was produced on 04/23/2009.

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.

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 2005.

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

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.

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, 2005

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	\$15	\$22	\$0	\$2	71,319
Age						
5 and younger	0.1	0	5	0	0	15
6-14	1.3	28	22	0	0	48
15-20	0.1	2	16	0	0	130
21-44	0.5	12	24	0	2	16,543
45-64	0.8	20	24	0	2	17,694
65-74	0.7	17	25	0	2	12,198
75-84	0.7	13	18	0	1	13,017
85 and older	0.7	12	17	0	1	11,674
Unknown	0.0	0	0	0	0	C
Basis of Eligibility	;					
Aged	0.7	14	20	0	1	36,618
Disabled	0.7	17	24	0	2	33,949
Adults	0.2	2	11	0	1	665
Children	0.9	16	18	0	0	51
Unknown	0.2	1	6	0	0	36
Gender						
Female	0.8	16	22	0	2	45,379
Male	0.6	13	23	0	1	25,940
Unknown	0.0	0	0	0	0	C
Race						
White	0.7	16	22	0	2	62,104
African American	0.4	7	17	0	1	794
Other/unknown	0.4	8	21	0	1	8,421
Use of Nursing Fac	ilitiesd					
Entire year	0.8	13	16	0	2	14,860
Part year	0.8	16	19	0	2	6,783
None	0.6	16	25	0	2	49,676
Maintenance Assis	tance Status					
Cash	0.4	9	23	0	2	26,779
Medically needy	0.0	0	0	0	0	C
Poverty related	0.2	3	17	0	0	795
Other/unknown	0.9	19	22	0	2	43,745

Source: Data for this table are from the MAX 2005 file for Wyoming, released by CMS in 12/2008. This table was produced on 04/23/2009.

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.

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 2005.

b. The statute establishing the Medicare Part D prescription program that started in 2006 excludes several types of drugs from coverage. State Medicaid programs have been allowed to exclude these drugs since 1990, but many states have chosen to cover them, and if states cover them for any Medicaid beneficiaries they must also cover them for dual eligibles, who as of 2006 receive the remainder of their prescription drug coverage through Part D. Excluded drugs include benzodiazepines; parbiturates; 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.

or blindness. The children's group includes children receiving foster care and adoptive services.

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.

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, 2005

Drug Category	Number of Users	Rx \$ per User	Total Rx \$	Rx \$ as a Percentage of All Part D Excluded Rx \$	Total Number Rx.	\$ per Rx	Number Rx as a Percentage of All Part D Excluded Rx
All	6,624	\$162	\$1,071,409	100.0	48,832	\$22	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	7	12	87	0.0	10	9	0.0
Cough and cold medications	871	52	45,584	4.3	2,200	21	4.5
Vitamins and minerals	1,451	121	176,047	16.4	9,846	18	20.2
Non-prescription drugs	2,610	263	686,311	64.1	26,003	26	53.2
Barbiturates	60	72	4,314	0.4	599	7	1.2
Benzodiazepines	1,517	80	121,217	11.3	9,827	12	20.1
Other Part D Excl Rx Drugs	108	350	37,849	3.5	347	109	0.7

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.

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 2005. A user is a beneficiary who had at least one prescription filled for a Part D excluded drug in 2005. A beneficiary who used drugs from two or more Part D excluded categories was counted as a user for each category. Therefore, the sum of users across drug categories may exceed the total number of individual users as noted on Table 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 strains 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.

SUPPLEMENTAL TABLE 1 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES^{a, b} WYOMING, 2005

Total Number of Dual Eligible Beneficiaries: 6,847

Total Pharmacy Reimbursement for Dual Eligible Beneficiaries: \$22,242,954

Mean Pharmacy Reimbursement per Dual Eligible Beneficiary: \$3,248

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	894	13.1	\$0	0.0
1-500	1,068	15.6	224,596	1.0
501-1,000	637	9.3	470,892	2.1
			•	
1,001-1,500	536	7.8	660,811	3.0
1,501-2,000	443	6.5	771,061	3.5
2,001-2,500	370	5.4	833,640	3.7
2,501-3,000	341	5.0	938,556	4.2
3,001-3,500	319	4.7	1,038,166	4.7
3,501-4,000	299	4.4	1,119,369	5.0
4,001-4,500	226	3.3	955,647	4.3
4,501-5,000	216	3.2	1,025,702	4.6
5,001-5,500	192	2.8	1,000,799	4.5
5,501-6,000	169	2.5	974,153	4.4
6,001-6,500	154	2.2	961,910	4.3
6,501-7,000	108	1.6	725,223	3.3
7,001-7,500	117	1.7	848,801	3.8
7,501-8,000	67	1.0	519,024	2.3
8,001-8,500	71	1.0	584,118	2.6
8,501-9,000	51	0.7	446,502	2.0
9,001-9,500	68	1.0	629,234	2.8
9,501-10,000	64	0.9	622,613	2.8
10,001+	437	6.4	6,892,137	31.0

Source: Data for this table are from the MAX 2005 file for Wyoming, released by CMS in 12/2008. This table was produced on 04/23/2009.

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

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 $65^{\rm a},\,{\rm b},\,{\rm c}$ WYOMING, 2005

Total Number of Disabled Dual Eligible Beneficiaries, Age < 65: 3,061

Total Pharmacy Reimbursement for Disabled Dual Eligible Beneficiaries, Age < 65: \$11,904,435

Mean Pharmacy Reimbursement per Disabled Dual Eligible Beneficiary, Age < 65: \$3,889

		Percent of Disabled Dual Beneficiaries,		Percent of Total Pharmacy
Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Age < 65	Pharmacy Reimbursement	Reimbursement
\$0	463	15.1	0	0.0
1-500	515	16.8	98,802	0.8
501-1,000	250	8.2	183,186	1.5
1,001-1,500	203	6.6	252,359	2.1
1,501-2,000	158	5.2	276,258	2.3
2,001-2,500	118	3.9	264,957	2.2
2,501-3,000	120	3.9	331,540	2.8
3,001-3,500	119	3.9	388,486	3.3
3,501-4,000	103	3.4	385,857	3.2
4,001-4,500	87	2.8	365,272	3.1
4,501-5,000	101	3.3	480,718	4.0
5,001-5,500	76	2.5	396,925	3.3
5,501-6,000	70	2.3	402,931	3.4
6,001-6,500	63	2.1	391,939	3.3
6,501-7,000	50	1.6	337,184	2.8
7,001-7,500	54	1.8	391,774	3.3
7,501-8,000	32	1.0	248,688	2.1
8,001-8,500	43	1.4	353,817	3.0
8,501-9,000	33	1.1	289,032	2.4
9,001-9,500	42	1.4	388,608	3.3
9,501-10,000	37	1.2	359,704	3.0
10,001+	324	10.6	5,316,398	44.7

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

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, 2005

Total Number of Dual Eligible Beneficiaries, Age 65+: 3,693

Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65+: \$10,214,449

Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65+: \$2,765

	F	Percent of Dual Beneficiaries, Age 65		Percent of Total Pharmacy
Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	+	Pharmacy Reimbursement	Reimbursement
\$0	408	11.0	0	0.0
1-500	522	14.1	119,549	1.2
501-1,000	379	10.3	281,663	2.8
1,001-1,500	325	8.8	399,233	3.9
1,501-2,000	281	7.6	488,180	4.8
2,001-2,500	247	6.7	557,049	5.5
2,501-3,000	217	5.9	595,753	5.8
3,001-3,500	197	5.3	639,624	6.3
3,501-4,000	195	5.3	729,960	7.1
4,001-4,500	139	3.8	590,375	5.8
4,501-5,000	114	3.1	540,177	5.3
5,001-5,500	114	3.1	593,329	5.8
5,501-6,000	99	2.7	571,222	5.6
6,001-6,500	91	2.5	569,971	5.6
6,501-7,000	58	1.6	388,039	3.8
7,001-7,500	63	1.7	457,027	4.5
7,501-8,000	35	0.9	270,336	2.6
8,001-8,500	28	0.8	230,301	2.3
8,501-9,000	18	0.5	157,470	1.5
9,001-9,500	26	0.7	240,626	2.4
9,501-10,000	27	0.7	262,909	2.6
10,001+	110	3.0	1,531,656	15.0

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 2005.

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, 2005

Total Number of Dual Eligible Beneficiaries, Age 65-74: 1,149

Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65-74: \$3,557,445

Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65-74: \$3,096

		Percent of Dual Beneficiaries, Age		Percent of Total Pharmacy
Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	65-74	Pharmacy Reimbursement	Reimbursement
\$0	192	16.7	0	0.0
1-500	154	13.4	33,545	0.9
501-1,000	100	8.7	76,361	2.1
1,001-1,500	77	6.7	94,490	2.7
1,501-2,000	72	6.3	124,099	3.5
2,001-2,500	63	5.5	142,571	4.0
2,501-3,000	62	5.4	169,483	4.8
3,001-3,500	48	4.2	156,979	4.4
3,501-4,000	54	4.7	203,115	5.7
4,001-4,500	44	3.8	187,283	5.3
4,501-5,000	29	2.5	136,890	3.8
5,001-5,500	32	2.8	167,436	4.7
5,501-6,000	26	2.3	149,841	4.2
6,001-6,500	33	2.9	206,233	5.8
6,501-7,000	27	2.3	181,074	5.1
7,001-7,500	26	2.3	188,708	5.3
7,501-8,000	11	1.0	84,858	2.4
8,001-8,500	11	1.0	90,016	2.5
8,501-9,000	10	0.9	87,637	2.5
9,001-9,500	6	0.5	55,356	1.6
9,501-10,000	11	1.0	107,932	3.0
10,001+	61	5.3	913,538	25.7

Source: Data for this table are from the MAX 2005 file for Wyoming, released by CMS in 12/2008. This table was produced on 04/23/2009.

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

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 $84^{\rm A,\ b}$ WYOMING, 2005

Total Number of Dual Eligible Beneficiaries, Age 75-84: 1,302

Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 75-84: \$3,740,972

Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 75-84: \$2,873

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries Percent of Dual Ben	eficiaries. Age 75-84	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	145	11.1	0	0.0
1-500	164	12.6	39,356	1.1
501-1,000	111	8.5	80,612	2.2
1,001-1,500	98	7.5	119,783	3.2
1,501-2,000	108	8.3	189,235	5.1
2,001-2,500	92	7.1	206,917	5.5
2,501-3,000	71	5.5	194,328	5.2
3,001-3,500	74	5.7	240,749	6.4
3,501-4,000	75	5.8	280,046	7.5
4,001-4,500	51	3.9	215,864	5.8
4,501-5,000	47	3.6	222,887	6.0
5,001-5,500	55	4.2	286,452	7.7
5,501-6,000	44	3.4	253,676	6.8
6,001-6,500	37	2.8	231,600	6.2
6,501-7,000	19	1.5	126,759	3.4
7,001-7,500	26	2.0	188,678	5.0
7,501-8,000	19	1.5	146,962	3.9
8,001-8,500	9	0.7	73,825	2.0
8,501-9,000	5	0.4	43,729	1.2
9,001-9,500	13	1.0	121,163	3.2
9,501-10,000	9	0.7	86,979	2.3
10,001+	30	2.3	391,372	10.5

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 2005.

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, 2005

Total Number of Dual Eligible Beneficiaries, Age 85+: 1,242
Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 85+: \$2,916,032
Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 85+: \$2,347

	F	Percent of Dual Beneficiaries, Age 85		Percent of Total Pharmacy	
Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	+	Pharmacy Reimbursement	Reimbursement	
\$0	71	5.7	0	0.0	
1-500	204	16.4	46,648	1.6	
501-1,000	168	13.5	124,690	4.3	
1,001-1,500	150	12.1	184,960	6.3	
1,501-2,000	101	8.1	174,846	6.0	
2,001-2,500	92	7.4	207,561	7.1	
2,501-3,000	84	6.8	231,942	8.0	
3,001-3,500	75	6.0	241,896	8.3	
3,501-4,000	66	5.3	246,799	8.5	
4,001-4,500	44	3.5	187,228	6.4	
4,501-5,000	38	3.1	180,400	6.2	
5,001-5,500	27	2.2	139,441	4.8	
5,501-6,000	29	2.3	167,705	5.8	
6,001-6,500	21	1.7	132,138	4.5	
6,501-7,000	12	1.0	80,206	2.8	
7,001-7,500	11	0.9	79,641	2.7	
7,501-8,000	5	0.4	38,516	1.3	
8,001-8,500	8	0.6	66,460	2.3	
8,501-9,000	3	0.2	26,104	0.9	
9,001-9,500	7	0.6	64,107	2.2	
9,501-10,000	7	0.6	67,998	2.3	
10,001+	19	1.5	226,746	7.8	

Source: Data for this table are from the MAX 2005 file for Wyoming, released by CMS in 12/2008. This table was produced on 04/23/2009.

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 2005.

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, 2005

	Number of Beneficiaries							Number of Benefit Months				
Beneficiary Characteristics	All	Aged	Blind/ Disabled	Adults	Children	Other/ Unknown	All	Aged	Blind/ Disabled	Adults	Children	Other/ Unknow
All	6,847	3,660	3,090	88	5	4	71,319	36,618	33,949	665	51	30
Age												
5 and younger	2	0	0	0	2	0	15	0	0	0	15	(
6-14	4	0	2	0	2	0	48	0	24	0	24	(
15-20	11	0	10	0	1	0	130	0	118	0	12	(
21-44	1,523	0	1,453	70	0	0	16,543	0	16,023	520	0	(
45-64	1,614	0	1,596	17	0	1	17,694	0	17,539	143	0	12
65-74	1,149	1,124	22	0	0	3	12,198	11,971	203	0	0	24
75-84	1,302	1,297	5	0	0	0	13,017	12,978	39	0	0	(
85 and older	1,242	1,239	2	1	0	0	11,674	11,669	3	2	0	(
Unknown	0	0	0	0	0	0	0	0	0	0	0	(
Gender												
Female	4,344	2,633	1,656	51	0	4	45,379	26,708	18,284	351	0	36
Male	2,503	1,027	1,434	37	5	0	25,940	9,910	15,665	314	51	(
Unknown	0	0	0	0	0	0	0	0	0	0	0	(
Race												
White	5,995	3,195	2,714	77	5	4	62,104	31,609	29,839	569	51	36
African American	75	27	48	0	0	0	794	295	499	0	0	(
Other/unknown	777	438	328	11	0	0	8,421	4,714	3,611	96	0	(
Use of Nursing Facilities ^c												
Entire year	1,488	1,391	97	0	0	0	14,860	13,798	1,062	0	0	(
Part year	756	654	102	0	0	0	6,783	5,687	1,096	0	0	(
None	4,603	1,615	2,891	88	5	4	49,676	17,133	31,791	665	51	36
Maintenance Assistance Statu	ıs											
Cash	2,466	846	1,560	60	0	0	26,779	9,425	16,900	454	0	(
Medically needy	0	0	0	0	0	0	0	0	0	0	0	(
Poverty related	89	26	43	14	2	4	795	277	381	77	24	36
Other/unknown	4,292	2,788	1,487	14	3	0	43,745	26,916	16,668	134	27	(
Dual Status ^d												
Full dual, all year	6,615	3,524	3,000	82	5	4	68,961	35,185	33,066	623	51	36
Full dual, part year	232	136	90	6	0	0	2,358	1,433	883	42	0	(
Managed Care (MC) Status							,	,				
Fee-for-service (FFS) all year	6,847	3,660	3,090	88	5	4	71,319	36,618	33,949	665	51	36
FFS part year, with Rx claims	0,017	0,000	0,000	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	(

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.

are not consistent with basis or engionity.

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 2005. 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, 2005

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 Number of Number of Number of Number of Number of **Beneficiary Characteristics** Beneficiaries Benefit Months Beneficiaries Benefit Months Beneficiaries Benefit Months 71,319 6,847 71,319 ΑII 6,847 0 0 6,847 71,319 6,847 71,319 0 0 Fee-for-service (FFS) all year FFS part year, with Rx claims 0 0 0 0 0 0 FFS part year, with no Rx claims 0 0 0 0 Managed care (MC) all year, with Rx claims 0 0 0 0 0 0 0 0 0 0 0 MC all year, with no Rx claims 0

Source: Data for this table are from the MAX 2005 file for Wyoming, released by CMS in 12/2008. This table was produced on 04/23/2009.

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

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