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STATISTICAL COMPENDIUM:
MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2007
WYOMING

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TABLE D.2
CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a, b}
DUAL ELIGIBLE BENEFICIARIES, WYOMING, 2007

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown
All	6,975	3,608	3,278	72	8	9	73,292	36,252	36,315	572	72	81
Age												
5 and younger	1	0	0	0	1	0	12	0	0	0	12	0
6-14	5	0	0	0	5	0	44	0	0	0	44	0
15-20	17	0	16	0	1	0	202	0	192	0	10	0
21-44	1,515	1	1,469	44	1	0	16,745	12	16,357	370	6	0
45-64	1,789	0	1,760	24	0	5	19,685	0	19,449	176	0	60
65-74	1,168	1,134	27	3	0	4	12,385	12,094	245	25	0	21
75-84	1,230	1,223	6	1	0	0	12,400	12,327	72	1	0	0
85 and older	1,250	1,250	0	0	0	0	11,819	11,819	0	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	4,417	2,610	1,753	43	2	9	46,562	26,489	19,619	355	18	81
Male	2,558	998	1,525	29	6	0	26,730	9,763	16,696	217	54	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	6,111	3,168	2,871	58	6	8	64,085	31,578	31,897	487	54	69
African American	75	26	46	2	1	0	810	263	527	10	10	0
Other/unknown	789	414	361	12	1	1	8,397	4,411	3,891	75	8	12
Use of Nursing Facilities^c												
Entire year	1,391	1,301	90	0	0	0	13,937	12,977	960	0	0	0
Part year	724	627	97	0	0	0	6,406	5,402	1,004	0	0	0
None	4,860	1,680	3,091	72	8	9	52,949	17,873	34,351	572	72	81
Maintenance Assistance Status												
Cash	2,433	791	1,588	54	0	0	26,536	8,769	17,316	451	0	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0
Poverty-related	90	29	40	7	5	9	870	296	405	44	44	81
Other/unknown	4,452	2,788	1,650	11	3	0	45,886	27,187	18,594	77	28	0
Dual Medicare Status^d												
Full dual, all year	6,735	3,467	3,179	72	8	9	70,826	34,797	35,304	572	72	81
Full dual, part year	240	141	99	0	0	0	2,466	1,455	1,011	0	0	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	6,975	3,608	3,278	72	8	9	73,292	36,252	36,315	572	72	81
FFS part year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
FFS part year, no Rx claims	0	0	0	0	0	0	0	0	0	0	0	0

Source: Data for this table are from the MAX 2007 file for Wyoming, released by CMS in 4/2010. This table was produced on 10/06/2010.

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 2007. The "Full dual, part year" group contains beneficiaries who had such benefits for some, but not all, months of their enrollment. Refer to footnote g of Table 1 for more information about how we determined dual eligibility status.

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

TABLE D.3
ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC^{a, b}
DUAL ELIGIBLE BENEFICIARIES, WYOMING, 2007

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	33.6	3.7	\$202	\$55	\$26,185	0.8	6,975
Age							
5 and younger	0.0	0.0	0	0	1,981	0.0	1
6-14	80.0	10.4	2,612	251	4,307	60.7	5
15-20	82.4	19.2	2,617	137	17,458	15.0	17
21-44	36.4	5.2	370	71	27,141	1.4	1,515
45-64	39.7	4.8	288	60	27,982	1.0	1,789
65-74	30.3	3.5	167	48	21,685	0.8	1,168
75-84	29.6	2.0	27	14	24,509	0.1	1,230
85 and older	27.6	1.9	37	19	28,534	0.1	1,250
Unknown	0.0	0.0	0	0	0	0.0	0
Basis of Eligibility^e							
Aged	29.0	2.3	67	29	25,168	0.3	3,608
Disabled	37.9	4.8	313	65	27,807	1.1	3,278
Adults	61.1	18.6	1,467	79	7,523	19.5	72
Children	62.5	7.3	1,693	234	9,304	18.2	8
Unknown	66.7	27.6	2,214	80	7,427	29.8	9
Gender							
Female	36.1	4.1	210	51	25,570	0.8	4,417
Male	29.3	3.0	188	63	27,247	0.7	2,558
Unknown	0.0	0.0	0	0	0	0.0	0
Race							
White	34.4	3.8	209	54	27,070	0.8	6,111
African American	37.3	3.7	220	59	16,884	1.3	75
Other/unknown	27.2	2.5	146	58	20,218	0.7	789
Use of Nursing Facilities^f							
Entire year	33.8	3.1	70	23	41,930	0.2	1,391
Part year	35.9	2.4	56	23	27,537	0.2	724
None	33.2	4.0	261	65	21,477	1.2	4,860
Maintenance Assistance Status							
Cash	31.7	4.0	218	55	8,105	2.7	2,433
Medically needy	0.0	0.0	0	0	0	0.0	0
Poverty related	44.4	10.1	878	87	4,601	19.1	90
Other/unknown	34.4	3.4	179	53	36,502	0.5	4,452

Source: Data for this table are from the MAX 2007 file for Wyoming, released by CMS in 4/2010. This table was produced on 10/06/2010.

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, TN, TX, 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, TN, TX, and WV) the Rx share of expenditures for all Medicaid services shown in this column is higher than it would be if all expenditures for these other services, including services provided in capitated managed care plans and long-term-care services, were included.

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

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

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

TABLE D.4
MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a, b}
DUAL ELIGIBLE BENEFICIARIES, WYOMING, 2007

Beneficiary Characteristics	Number of Rx, Percentage with:										Number	
	Mean Number of Rx	Mean Rx \$	Rx \$ as a Percentage of All Medicaid FFS \$ ^c	Number of Rx						Mean \$, All Medicaid FFS \$ ^d	Beneficiaries	Benefit Months
				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			
All	0.4	\$19	0.8	66.4	27.5	3.0	2.1	0.8	0.2	\$2,492	6,975	73,292
Age												
5 and younger	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	0.0	165	1	12
6-14	1.2	297	60.7	20.0	60.0	0.0	20.0	0.0	0.0	490	5	44
15-20	1.6	220	15.0	17.6	47.1	5.9	17.6	11.8	0.0	1,469	17	202
21-44	0.5	34	1.4	63.6	27.9	3.2	3.8	1.4	0.2	2,456	1,515	16,745
45-64	0.4	26	1.0	60.3	31.9	3.7	2.8	1.1	0.2	2,543	1,789	19,685
65-74	0.3	16	0.8	69.7	24.5	2.9	1.6	0.9	0.4	2,045	1,168	12,385
75-84	0.2	3	0.1	70.4	26.4	2.4	0.6	0.2	0.0	2,431	1,230	12,400
85 and older	0.2	4	0.1	72.4	24.2	2.2	0.6	0.4	0.2	3,018	1,250	11,819
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Basis of Eligibility^e												
Aged	0.2	7	0.3	71.0	25.1	2.5	0.8	0.4	0.2	2,505	3,608	36,252
Disabled	0.4	28	1.1	62.1	30.1	3.4	3.1	1.1	0.2	2,510	3,278	36,315
Adults	2.3	185	19.5	38.9	27.8	8.3	13.9	8.3	2.8	947	72	572
Children	0.8	188	18.2	37.5	50.0	0.0	12.5	0.0	0.0	1,034	8	72
Unknown	3.1	246	29.8	33.3	11.1	0.0	33.3	22.2	0.0	825	9	81
Gender												
Female	0.4	20	0.8	63.9	29.4	3.2	2.2	1.1	0.2	2,426	4,417	46,562
Male	0.3	18	0.7	70.7	24.3	2.5	1.9	0.4	0.2	2,608	2,558	26,730
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	0.4	20	0.8	65.6	28.0	3.2	2.0	0.9	0.2	2,581	6,111	64,085
African American	0.3	20	1.3	62.7	33.3	0.0	4.0	0.0	0.0	1,563	75	810
Other/unknown	0.2	14	0.7	72.8	23.2	1.3	2.4	0.4	0.0	1,900	789	8,397
Use of Nursing Facilities^f												
Entire year	0.3	7	0.2	66.2	28.0	3.9	1.0	0.7	0.2	4,185	1,391	13,937
Part year	0.3	6	0.2	64.1	31.5	2.8	1.2	0.4	0.0	3,112	724	6,406
None	0.4	24	1.2	66.8	26.8	2.8	2.5	0.9	0.2	1,971	4,860	52,949
Maintenance Assistance Status												
Cash	0.4	20	2.7	68.3	25.5	2.6	2.5	0.9	0.2	743	2,433	26,536
Medically needy	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Poverty related	1.0	91	19.1	55.6	24.4	3.3	8.9	7.8	0.0	476	90	870
Other/unknown	0.3	17	0.5	65.6	28.7	3.2	1.7	0.7	0.2	3,542	4,452	45,886

Source: Data for this table are from the MAX 2007 file for Wyoming, released by CMS in 4/2010. This table was produced on 10/06/2010.

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, TN, TX, 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, TN, TX, 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, 2007

Beneficiary Characteristics	All Rx			Patented Brand-Name Drugs			Off-Patent Brand-Name Drugs			Generic Drugs		
	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx
All	0.4	\$19	\$55	0.1	\$13	\$195	0.0	\$1	\$114	0.3	\$5	\$19
Age												
5 and younger	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
6-14	1.2	297	251	0.5	282	591	0.2	4	19	0.5	12	22
15-20	1.6	220	137	0.8	190	231	0.0	2	42	0.7	27	36
21-44	0.5	34	71	0.1	25	211	0.0	1	104	0.3	7	21
45-64	0.4	26	60	0.1	16	201	0.0	2	133	0.3	9	26
65-74	0.3	16	48	0.1	11	182	0.0	1	128	0.3	3	13
75-84	0.2	3	14	0.0	1	76	0.0	0	44	0.2	2	9
85 and older	0.2	4	19	0.0	2	94	0.0	0	64	0.2	2	9
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Basis of Eligibility^d												
Aged	0.2	7	29	0.0	4	152	0.0	0	100	0.2	2	10
Disabled	0.4	28	65	0.1	19	207	0.0	1	115	0.3	8	24
Adults	2.3	185	79	0.7	140	196	0.0	4	99	1.6	40	25
Children	0.8	188	234	0.3	179	536	0.1	2	19	0.4	8	21
Unknown	3.1	246	80	1.1	162	141	0.3	59	190	1.6	25	16
Gender												
Female	0.4	20	51	0.1	13	181	0.0	1	118	0.3	6	20
Male	0.3	18	63	0.1	14	222	0.0	1	104	0.2	3	15
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Race												
White	0.4	20	54	0.1	13	192	0.0	1	112	0.3	6	19
African American	0.3	20	59	0.1	14	244	0.0	0	0	0.3	7	22
Other/unknown	0.2	14	58	0.0	10	217	0.0	1	129	0.2	3	15
Use of Nursing Facilities^e												
Entire year	0.3	7	23	0.0	4	131	0.0	0	88	0.3	3	10
Part year	0.3	6	23	0.0	3	91	0.0	1	143	0.2	2	10
None	0.4	24	65	0.1	17	206	0.0	1	112	0.3	6	22
Maintenance Assistance Status												
Cash	0.4	20	55	0.1	14	198	0.0	1	106	0.3	5	17
Medically needy	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Poverty related	1.0	91	87	0.4	69	177	0.1	10	141	0.6	12	20
Other/unknown	0.3	17	53	0.1	11	195	0.0	1	116	0.3	5	20

Source: Data for this table are from the MAX 2007 file for Wyoming, released by CMS in 4/2010. This table was produced on 10/06/2010.

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.medi-span.com/master-drug-database.aspx>.

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

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

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

TABLE D.6
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, WYOMING, 2007

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				\$ per Rx				Users ^e				
	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total Number of Rx	Total Rx \$	Number	As a Percentage of Dual Benes	Number of Benefit Months
Anti-infective Agents	0.3	0.1	0.0	0.2	\$26	\$20	\$1	\$5	\$97	\$282	\$265	\$25	682	\$66,310	251	3.6	2,584
Biologicals	0.1	0.1	0.0	0.0	9	9	0	0	85	85	0	0	3	255	3	0.0	29
Antineoplastic Agents	0.4	0.1	0.0	0.2	187	184	0	4	532	1,396	0	17	75	39,909	20	0.3	213
Endocrine/Metabolic Drugs	0.6	0.2	0.0	0.4	66	26	0	39	110	124	37	104	1,418	155,390	234	3.4	2,359
Cardiovascular Agents	0.8	0.1	0.0	0.6	24	13	2	10	31	100	61	16	2,058	63,987	273	3.9	2,619
Respiratory Agents	0.3	0.1	0.0	0.2	15	10	1	4	50	113	124	20	2,095	104,667	639	9.2	7,116
Gastrointestinal Agents	0.5	0.1	0.1	0.3	62	23	21	17	124	259	144	65	773	95,654	148	2.1	1,550
Genitourinary Agents	0.3	0.1	0.0	0.2	21	14	1	7	65	102	102	37	168	10,927	48	0.7	515
CNS Drugs	0.6	0.1	0.0	0.5	26	20	0	6	41	195	100	11	10,058	415,814	1,472	21.1	15,869
Stimulants/Anti-obesity/Anorexia	0.4	0.2	0.0	0.2	65	61	0	4	167	276	0	22	110	18,407	26	0.4	283
Miscellaneous Psychological/Neurological Agents	0.4	0.4	0.0	0.0	131	131	0	0	348	349	0	42	283	98,548	76	1.1	752
Analgesics and Anesthetics	0.6	0.1	0.0	0.6	37	23	0	13	57	404	131	22	1,832	104,372	285	4.1	2,854
Neuromuscular Agents	0.7	0.1	0.0	0.5	30	21	3	7	46	210	151	12	3,234	148,538	443	6.4	4,912
Nutritional Products	0.4	0.0	0.0	0.3	7	2	0	5	18	63	19	14	701	12,715	184	2.6	1,922
Hematological Agents	0.5	0.1	0.0	0.5	11	6	0	4	20	119	62	9	1,781	36,097	321	4.6	3,435
Topical Products	0.3	0.1	0.0	0.1	15	12	1	2	58	119	67	16	332	19,406	123	1.8	1,290
Miscellaneous Products	0.5	0.1	0.0	0.3	107	92	0	15	229	633	0	46	64	14,673	13	0.2	137
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	5	0	0	0	33	0	0	0	39	1,279	22	0.3	250
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.	25,706	1,406,948	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2007 file for Wyoming, released by CMS in 4/2010. This table was produced on 10/06/2010.

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.

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.medi-span.com/master-drug-database.aspx>.

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, 1.6 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.medi-span.com/master-drug-database.aspx>.

e. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 2007.

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

TABLE D.7
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, WYOMING, 2007

Top 10 Drug Groups	Users			Among Users			
	Total Medicaid Rx \$	Number of Users	As a Percentage of Dual Beneficiaries	Number of Benefit Months	Number of Rx per Benefit Month	Rx \$ per Rx	Rx \$ per Benefit Month
ANTIPSYCHOTICS	\$214,406	154	2.2	1,667	0.5	\$261	\$129
ANTICONVULSANT	135,143	413	5.9	4,672	0.6	47	29
ANTIDEPRESSANTS	114,614	353	5.1	3,719	0.4	72	31
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	98,689	88	1.3	899	0.3	344	110
DIETARY PRODUCTS	91,132	145	2.1	1,685	0.5	116	54
MISC. ENDOCRINE	91,018	35	0.5	381	0.3	695	239
ANTIASTHMATIC	71,544	217	3.1	2,221	0.3	98	32
ULCER DRUGS	66,246	174	2.5	1,826	0.4	93	36
ANTIANSXIETY AGENTS	56,790	1,142	16.4	12,502	0.5	9	5
ANALGESICS - ANTI-INFLAMMATORY	52,105	113	1.6	1,232	0.3	155	42
Total	991,687	2,834	n.a.	30,804	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2007 file for Wyoming, released by CMS in 4/2010. This table was produced on 10/06/2010.

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 2007. 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 2007. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

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, 2007

Beneficiary Characteristics	All Top 10 Drug Groups								ANTIPSYCHOTICS					ANTICONVULSANT				
	Number of Rx	Rx \$	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	
All	14,685	\$991,687	154	2.2	1,667	0.5	\$129	413	5.9	4,672	0.6	\$29						
Female																		
All Females	10,175	658,208	78	1.8	847	0.4	95	278	6.3	3,125	0.6	27						
Female, Disabled																		
All Ages	5,776	462,855	58	3.3	653	0.4	104	196	11.2	2,227	0.6	31						
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	56	7,840	2	33.3	24	0.8	184	2	33.3	24	0.3	30						
21-44	2,130	182,881	35	5.2	388	0.4	98	80	11.9	893	0.5	25						
45-64	3,522	268,959	21	2.0	241	0.5	106	114	10.8	1,310	0.7	35						
65-74	67	3,169	0	0.0	0	0.0	0	0	0.0	0	0.0	0						
75-84	1	6	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	4,399	195,353	20	0.8	194	0.3	64	82	3.1	898	0.6	16						
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0						
6-14	5	335	0	0.0	0	0.0	0	0	0.0	0	0.0	0						
15-20	1	38	0	0.0	0	0.0	0	0	0.0	0	0.0	0						
21-44	383	43,391	4	13.3	48	0.5	65	8	26.7	96	0.8	53						
45-64	182	16,688	1	6.3	12	0.1	29	1	6.3	12	0.8	129						
65-74	1,524	101,563	9	1.2	83	0.3	87	31	4.1	362	0.6	17						
75-84	1,131	19,594	4	0.5	36	0.2	29	26	3.0	258	0.7	5						
85 and older	1,173	13,744	2	0.2	15	0.2	42	16	1.6	170	0.6	4						
Male																		
All Males	4,510	333,479	76	3.0	820	0.6	163	135	5.3	1,547	0.6	33						
Male, Disabled																		
All Ages	3,466	291,994	60	3.9	667	0.6	190	117	7.7	1,342	0.6	34						
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	135	25,143	5	50.0	60	0.8	279	3	30.0	36	0.8	104						
21-44	1,806	182,838	46	5.8	524	0.6	166	63	7.9	740	0.6	44						
45-64	1,453	79,233	9	1.3	83	0.7	274	49	7.0	557	0.6	17						
65-74	72	4,780	0	0.0	0	0.0	0	2	16.7	9	0.4	3						
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	1,044	41,485	16	1.5	153	0.3	49	18	1.7	205	0.5	26						
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	51	6,827	1	6.3	12	0.3	49	4	25.0	48	0.5	83						
45-64	17	614	0	0.0	0	0.0	0	0	0.0	0	0.0	0						
65-74	403	14,668	8	2.1	77	0.3	54	8	2.1	93	0.6	10						
75-84	395	10,435	1	0.3	4	0.5	54	4	1.1	40	0.7	5						
85 and older	178	8,941	6	2.4	60	0.4	43	2	0.8	24	0.3	9						
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 2007 file for Wyoming, released by CMS in 4/2010. This table was produced on 10/06/2010.
 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 2007. 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 2007. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.
 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.

Dual Medicaid Beneficiaries

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, 2007

Beneficiary Characteristics	ANTIDEPRESSANTS					MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL					DIETARY PRODUCTS				
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	353	5.1	3,719	0.4	\$31	88	1.3	899	0.3	\$110	145	2.1	1,685	0.5	\$54
Female															
All Females	252	5.7	2,684	0.4	32	61	1.4	619	0.3	120	86	1.9	1,011	0.4	53
Female, Disabled															
All Ages	164	9.4	1,829	0.4	34	39	2.2	442	0.3	156	46	2.6	550	0.5	60
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	1	16.7	12	1.1	129	1	16.7	12	0.3	26	0	0.0	0	0.0	0
21-44	78	11.6	874	0.4	34	15	2.2	169	0.3	227	10	1.5	120	0.4	82
45-64	82	7.8	907	0.4	34	23	2.2	261	0.3	116	36	3.4	430	0.5	54
65-74	3	20.0	36	0.4	12	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 Eligibles															
All Ages	88	3.3	855	0.4	27	22	0.8	177	0.4	30	40	1.5	461	0.4	44
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	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	21	70.0	207	0.6	37	3	10.0	36	0.2	17	0	0.0	0	0.0	0
45-64	10	62.5	103	0.5	60	2	12.5	21	0.2	22	0	0.0	0	0.0	0
65-74	33	4.4	341	0.4	25	5	0.7	35	0.3	39	19	2.5	218	0.5	53
75-84	12	1.4	118	0.2	7	7	0.8	52	0.5	27	13	1.5	154	0.3	45
85 and older	12	1.2	86	0.2	3	5	0.5	33	0.5	42	8	0.8	89	0.4	21
Male															
All Males	101	3.9	1,035	0.4	28	27	1.1	280	0.3	88	59	2.3	674	0.5	56
Male, Disabled															
All Ages	80	5.2	870	0.5	31	15	1.0	163	0.3	116	41	2.7	470	0.6	60
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	6	60.0	72	0.8	64	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	42	5.3	462	0.5	27	8	1.0	86	0.3	188	14	1.8	158	0.6	55
45-64	30	4.3	312	0.3	29	7	1.0	77	0.3	36	27	3.8	312	0.6	63
65-74	2	16.7	24	1.0	43	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 Eligibles															
All Ages	21	2.0	165	0.3	14	12	1.2	117	0.4	48	18	1.7	204	0.3	47
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	3	18.8	36	0.3	25	2	12.5	24	0.2	22	0	0.0	0	0.0	0
45-64	0	0.0	0	0.0	0	1	7.7	6	0.3	36	0	0.0	0	0.0	0
65-74	9	2.3	64	0.3	17	2	0.5	24	0.3	28	8	2.1	96	0.3	46
75-84	5	1.4	31	0.3	4	3	0.8	25	0.2	32	8	2.3	90	0.4	52
85 and older	4	1.6	34	0.3	6	4	1.6	38	0.7	90	2	0.8	18	0.2	20
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 2007 file for Wyoming, released by CMS in 4/2010. This table was produced on 10/06/2010.
 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 2007. 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 2007. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.
 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.

Dual Medicaid Beneficiaries

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, 2007

Beneficiary Characteristics	MISC. ENDOCRINE					ANTIASTHMATIC					ULCER DRUGS				
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	35	0.5	381	0.3	\$239	217	3.1	2,221	0.3	\$32	174	2.5	1,826	0.4	\$36
Female															
All Females	29	0.7	328	0.4	264	149	3.4	1,528	0.3	31	115	2.6	1,243	0.4	44
Female, Disabled															
All Ages	17	1.0	200	0.4	401	79	4.5	875	0.3	25	72	4.1	813	0.4	42
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	2	33.3	24	0.2	18	1	16.7	12	0.1	28
21-44	4	0.6	47	0.3	29	35	5.2	404	0.3	24	40	5.9	463	0.4	47
45-64	12	1.1	141	0.4	555	40	3.8	423	0.3	27	29	2.7	314	0.4	33
65-74	1	6.7	12	0.7	55	2	13.3	24	0.1	12	2	13.3	24	0.5	53
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 Eligibles															
All Ages	12	0.5	128	0.3	49	70	2.6	653	0.4	40	43	1.6	430	0.4	47
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	1	100.0	8	0.6	42
15-20	0	0.0	0	0.0	0	1	100.0	10	0.1	4	0	0.0	0	0.0	0
21-44	1	3.3	12	0.7	55	7	23.3	65	0.4	52	5	16.7	49	0.8	127
45-64	2	12.5	24	0.1	11	3	18.8	36	0.7	37	7	43.8	73	0.7	86
65-74	8	1.1	87	0.2	60	48	6.4	459	0.4	43	19	2.5	202	0.3	35
75-84	1	0.1	5	0.2	3	6	0.7	51	0.5	16	5	0.6	52	0.1	4
85 and older	0	0.0	0	0.0	0	5	0.5	32	0.3	14	6	0.6	46	0.2	4
Male															
All Males	6	0.2	53	0.3	85	68	2.7	693	0.3	34	59	2.3	583	0.4	21
Male, Disabled															
All Ages	4	0.3	43	0.3	100	49	3.2	533	0.3	37	44	2.9	466	0.4	22
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	1	10.0	12	0.8	7
21-44	4	0.5	43	0.3	100	25	3.1	266	0.4	50	22	2.8	231	0.4	20
45-64	0	0.0	0	0.0	0	23	3.3	255	0.2	26	20	2.8	211	0.3	19
65-74	0	0.0	0	0.0	0	1	8.3	12	0.1	1	1	8.3	12	0.9	111
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 Eligibles															
All Ages	2	0.2	10	0.2	18	19	1.8	160	0.3	24	15	1.5	117	0.3	18
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	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	6.3	12	0.6	69
45-64	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	7.7	12	0.1	12
65-74	1	0.3	3	0.3	37	5	1.3	35	0.3	33	5	1.3	33	0.3	3
75-84	1	0.3	7	0.1	9	8	2.3	71	0.4	26	5	1.4	31	0.2	12
85 and older	0	0.0	0	0.0	0	6	2.4	54	0.1	15	3	1.2	29	0.3	24
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 2007 file for Wyoming, released by CMS in 4/2010. This table was produced on 10/06/2010.
 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 2007. 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 2007. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.
 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.

Dual Medicaid Beneficiaries

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, 2007

Beneficiary Characteristics	ANTIANXIETY AGENTS					ANALGESICS - ANTI-INFLAMMATORY							
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Beneficiaries	Number of Benefit Months	
All	1,142	16.4	12,502	0.5	\$5	113	1.6	1,232	0.3	\$42	6,975	73,292	
Female													
All Females	814	18.4	8,946	0.5	5	77	1.7	850	0.3	57	4,417	46,562	
Female, Disabled													
All Ages	364	20.8	4,201	0.5	5	45	2.6	510	0.3	6	1,753	19,619	
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	1	16.7	12	0.7	5	1	16.7	12	0.2	2	6	72	
21-44	121	18.0	1,415	0.5	7	20	3.0	222	0.2	9	673	7,557	
45-64	239	22.7	2,738	0.5	5	22	2.1	252	0.3	2	1,055	11,773	
65-74	2	13.3	24	0.6	4	2	13.3	24	0.6	18	15	169	
75-84	1	25.0	12	0.1	1	0	0.0	0	0.0	0	4	48	
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0	
Female, Other Eligibles													
All Ages	450	16.9	4,745	0.5	5	32	1.2	340	0.3	135	2,664	26,943	
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0	
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	8	
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	10	
21-44	8	26.7	90	0.7	7	5	16.7	60	0.4	269	30	255	
45-64	2	12.5	24	0.8	8	3	18.8	36	0.5	4	16	147	
65-74	121	16.1	1,347	0.5	4	20	2.7	228	0.3	129	752	8,091	
75-84	159	18.3	1,683	0.5	4	0	0.0	0	0.0	0	869	8,873	
85 and older	160	16.1	1,601	0.6	5	4	0.4	16	0.3	11	995	9,559	
Male													
All Males	328	12.8	3,556	0.5	4	36	1.4	382	0.3	9	2,558	26,730	
Male, Disabled													
All Ages	198	13.0	2,265	0.5	4	29	1.9	313	0.3	10	1,525	16,696	
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	10	120	
21-44	84	10.6	978	0.4	4	14	1.8	158	0.3	2	796	8,800	
45-64	113	16.0	1,275	0.5	4	13	1.8	131	0.2	3	705	7,676	
65-74	1	8.3	12	1.8	12	2	16.7	24	0.5	93	12	76	
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	24	
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0	
Male, Other Eligibles													
All Ages	130	12.6	1,291	0.5	4	7	0.7	69	0.2	5	1,033	10,034	
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12	
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	4	36	
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0	
21-44	1	6.3	12	0.1	0	0	0.0	0	0.0	0	16	133	
45-64	2	15.4	11	0.5	4	3	23.1	30	0.3	7	13	89	
65-74	42	10.8	457	0.5	4	2	0.5	22	0.1	5	389	4,049	
75-84	57	16.1	552	0.5	4	1	0.3	11	0.1	1	355	3,455	
85 and older	28	11.0	259	0.3	3	1	0.4	6	0.8	3	255	2,260	
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 2007 file for Wyoming, released by CMS in 4/2010. This table was produced on 10/06/2010.
 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 2007. 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 2007. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.
 Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare &

TABLE D.8
MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
BY BENEFICIARY CHARACTERISTIC^{a, b}
DUAL ELIGIBLE BENEFICIARIES, WYOMING, 2007

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	\$7	0.3	1,391	13,937
Age				
0-64	28	0.6	88	947
65-74	8	0.4	189	1,932
75-84	5	0.3	437	4,407
85 and older	5	0.2	677	6,651
Unknown	0	0.0	0	0
Gender				
Female	5	0.3	1,015	10,306
Male	12	0.3	376	3,631
Unknown	0	0.0	0	0
Race				
White	7	0.3	1,321	13,239
African American	0	0	4	48
Other/unknown	2	0.2	66	650
Basis of Eligibility^c				
Aged	5	0.3	1,301	12,977
Disabled	28	0.6	90	960
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 2007 file for Wyoming, released by CMS in 4/2010. This table was produced on 10/06/2010.

a. Table D.8 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their 2007 Medicaid enrollment. A total of 724 beneficiaries who were in nursing facilities for part of their enrollment and their 6,406 benefit months were excluded from the analysis. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

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

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

TABLE D.9
MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d, e}
DUAL ELIGIBLE BENEFICIARIES, WYOMING, 2007

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				\$ per Rx				Users				
	Total	Patent Brand-Name	Off-Patent Brand-Name	Generic	Total	Patent Brand-Name	Off-Patent Brand-Name	Generic	Total	Patent Brand-Name	Off-Patent Brand-Name	Generic	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	0.3	0.1	0.0	0.2	\$11	\$7	\$0	\$3	\$38	\$65	\$0	\$20	43	\$1,629	19	1.4	153
Biologicals	0.2	0.2	0.0	0.0	12	12	0	0	62	62	0	0	1	62	1	0.1	5
Antineoplastic Agents	0.0	0.0	0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0.0	0
Endocrine/Metabolic Drugs	0.5	0.2	0.0	0.3	15	10	1	4	30	65	41	12	97	2,880	26	1.9	195
Cardiovascular Agents	0.6	0.0	0.0	0.6	11	3	0	7	18	100	45	13	170	2,997	39	2.8	279
Respiratory Agents	0.3	0.1	0.0	0.2	11	6	2	3	43	94	195	16	129	5,523	51	3.7	511
Gastrointestinal Agents	0.4	0.1	0.1	0.3	20	8	6	6	45	131	109	19	52	2,320	14	1.0	116
Genitourinary Agents	0.4	0.4	0.0	0.0	39	39	0	0	98	98	0	0	11	1,080	4	0.3	28
CNS Drugs	0.7	0.0	0.0	0.6	14	9	0	5	20	203	68	8	2,313	47,301	322	23.1	3,377
Stimulants/Anti-obesity/Anorexia	0.6	0.6	0.0	0.0	208	208	0	0	357	357	0	0	7	2,499	1	0.1	12
Miscellaneous Psychological/Neurological Agents	0.9	0.8	0.0	0.0	81	81	0	0	95	96	0	42	73	6,924	13	0.9	85
Analgesics and Anesthetics	0.7	0.0	0.0	0.7	18	6	0	12	25	122	0	18	109	2,694	21	1.5	153
Neuromuscular Agents	0.7	0.0	0.0	0.7	10	4	0	5	14	210	0	8	306	4,281	42	3.0	444
Nutritional Products	0.4	0.0	0.0	0.4	4	0	0	3	9	19	7	9	189	1,744	51	3.7	485
Hematological Agents	0.6	0.1	0.0	0.6	11	6	0	6	18	94	0	10	786	13,838	117	8.4	1,215
Topical Products	0.3	0.2	0.0	0.1	14	11	0	3	45	62	0	24	36	1,630	15	1.1	118
Miscellaneous Products	0.0	0.0	0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0.0	0
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	2	0	0	0	6	0	0	0	5	30	2	0.1	15
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.	4,327	97,432	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2007 file for Wyoming, released by CMS in 4/2010. This table was produced on 10/06/2010.

- 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 2007. A total of 724 beneficiaries who were in nursing facilities for part of their enrollment and their 6,406 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 2007. 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.medi-span.com/master-drug-database.aspx>.
 - 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.medi-span.com/master-drug-database.aspx>.
- In Wyoming, 1.6 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.
- Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; CNS = Central Nervous System; MAX = Medicaid Analytic Extract; n.a. = not applicable; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.10
MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS,
BY TOP-10 DRUG GROUP^{a, b, c, d}
DUAL ELIGIBLE BENEFICIARIES, WYOMING, 2007

Top 10 Drug Groups in Nursing Facilities	Users				Among Users			
	Total Medicaid Rx \$	Number of Users	As a Percentage of All-Year Nursing Facility Residents	Number of Benefit Months	Number of Rx per Benefit Month	\$ per Rx	Rx \$ per Benefit Month	
ANTIPSYCHOTICS	\$23,076	21	1.5	191	0.4	\$285	\$121	
ANTIANKXIETY AGENTS	15,948	274	19.7	2,963	0.6	8	5	
HEMATOPOIETIC AGENTS	12,317	120	8.6	1,279	0.6	17	10	
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	6,924	15	1.1	118	0.6	95	59	
HYPNOTICS	6,102	37	2.7	377	0.6	26	16	
ANTIASTHMATIC	4,409	21	1.5	196	0.3	80	22	
STIMULANTS/ANTI-OBESITY/ANOREXIANTS	2,499	1	0.1	12	0.6	357	208	
ANALGESICS - Narcotic	2,248	22	1.6	167	0.6	24	13	
ANTIDEPRESSANTS	2,175	29	2.1	249	0.3	30	9	
ANTIPARKINSONIAN	2,213	9	0.6	62	0.4	92	36	
Total	77,911	549	n.a.	5,614	n.a.	n.a.	n.a.	

Source: Data for this table are from the MAX 2007 file for Wyoming, released by CMS in 4/2010. This table was produced on 10/06/2010.

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 2007. A total of 724 beneficiaries who were in nursing facilities for part of their enrollment and their 6,406 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 2007. 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 2007 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

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; n.a. = not applicable.

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, 2007

Beneficiary Characteristics	All Top 10 Drug Groups		ANTIPSYCHOTICS					ANTIANKXIETY AGENTS				
	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	3,280	\$77,911	21	1.5	191	0.4	\$121	274	19.7	2,963	0.6	\$5
Female												
All Females	2,411	41,228	6	0.6	50	0.3	44	199	19.6	2,149	0.7	6
Female, Disabled												
All Ages	225	7,758	1	2.2	12	0.4	44	17	37.0	186	0.8	8
64 or younger	225	7,758	1	2.2	12	0.4	44	17	37.0	186	0.8	8
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	2,186	33,470	5	0.5	38	0.3	43	182	18.8	1,963	0.7	6
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	337	5,732	1	0.9	2	1.0	124	28	24.1	308	0.7	6
75-84	827	12,493	3	1.0	30	0.2	27	64	20.6	707	0.6	5
85 and older	1,022	15,245	1	0.2	6	0.2	97	90	16.6	948	0.7	6
Male												
All Males	869	36,683	15	4.0	141	0.5	148	75	19.9	814	0.5	4
Male, Disabled												
All Ages	201	16,200	2	4.5	24	1.0	605	14	31.8	152	0.7	6
64 or younger	180	16,059	2	4.8	24	1.0	605	13	31.0	140	0.6	5
65-74	21	141	0	0.0	0	0.0	0	1	50.0	12	1.8	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
Male, Other Eligibles												
All Ages	668	20,483	13	3.9	117	0.4	55	61	18.4	662	0.5	4
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	176	5,925	6	8.5	53	0.4	68	16	22.5	189	0.5	5
75-84	285	5,238	1	0.8	4	0.5	54	29	23.0	295	0.5	4
85 and older	207	9,320	6	4.4	60	0.4	43	16	11.9	178	0.4	3
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 2007 file for Wyoming, released by CMS in 4/2010. This table was produced on 10/06/2010.

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 2007. A total of 724 beneficiaries who were in nursing facilities for part of their enrollment and their 6,406 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 2007. 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 2007 Medicaid reimbursement for all-year nursing facility residents in this state.

For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

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

TABLE D.10B
MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY
AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c, d}
DUAL ELIGIBLE BENEFICIARIES, WYOMING, 2007

Beneficiary Characteristics	HEMATOPOIETIC AGENTS					MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL					HYPNOTICS				
	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	120	8.6	1,279	0.6	\$10	15	1.1	118	0.6	\$59	37	2.7	377	0.6	\$16
Female															
All Females	88	8.7	952	0.6	11	8	0.8	55	0.7	49	28	2.8	288	0.7	18
Female, Disabled															
All Ages	3	6.5	36	0.5	24	2	4.3	24	0.2	20	2	4.3	24	0.4	3
64 or younger	3	6.5	36	0.5	24	2	4.3	24	0.2	20	2	4.3	24	0.4	3
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 Eligibles															
All Ages	85	8.8	916	0.6	10	6	0.6	31	1.1	72	26	2.7	264	0.7	19
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	9	7.8	103	0.4	4	0	0.0	0	0.0	0	6	5.2	63	0.8	30
75-84	33	10.6	360	0.5	7	4	1.3	22	1.1	45	12	3.9	117	0.8	22
85 and older	43	7.9	453	0.6	14	2	0.4	9	1.1	139	8	1.5	84	0.5	7
Male															
All Males	32	8.5	327	0.5	7	7	1.9	63	0.5	67	9	2.4	89	0.5	11
Male, Disabled															
All Ages	4	9.1	48	0.9	6	0	0.0	0	0.0	0	0	0.0	0	0.0	0
64 or younger	4	9.5	48	0.9	6	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	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male, Other Eligibles															
All Ages	28	8.4	279	0.5	7	7	2.1	63	0.5	67	9	2.7	89	0.5	11
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	2	2.8	18	0.4	9	0	0.0	0	0.0	0	4	5.6	32	0.5	3
75-84	16	12.7	157	0.5	7	3	2.4	25	0.2	32	3	2.4	33	0.6	5
85 and older	10	7.4	104	0.5	8	4	3.0	38	0.7	90	2	1.5	24	0.4	30
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 2007 file for Wyoming, released by CMS in 4/2010. This table was produced on 10/06/2010.

- Table D.10B includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2007. A total of 724 beneficiaries who were in nursing facilities for part of their enrollment and their 6,406 benefit months were excluded from the analysis.
- A user is a beneficiary who had at least one prescription filled in a given drug group during 2007. 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.
- Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
- The top 10 drug groups were determined based on total 2007 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.
 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, 2007

Beneficiary Characteristics	ANTIASTHMATIC					STIMULANTS/ANTI-OBESITY/ANOREXIANTS					ANALGESICS - Narcotic				
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
All	21	1.5	196	0.3	\$23	1	0.1	12	0.6	\$208	22	1.6	167	0.6	\$14
Female															
All Females	9	0.9	74	0.4	26	1	0.1	12	0.6	208	15	1.5	111	0.4	15
Female, Disabled															
All Ages	0	0.0	0	0.0	0	1	2.2	12	0.6	208	2	4.3	24	0.8	34
64 or younger	0	0.0	0	0.0	0	1	2.2	12	0.6	208	2	4.3	24	0.8	34
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 Eligibles															
All Ages	9	0.9	74	0.4	26	0	0.0	0	0.0	0	13	1.3	87	0.3	10
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	5	4.3	51	0.1	22	0	0.0	0	0.0	0	2	1.7	15	0.1	1
75-84	3	1.0	21	0.9	28	0	0.0	0	0.0	0	7	2.3	53	0.3	12
85 and older	1	0.2	2	1.0	107	0	0.0	0	0.0	0	4	0.7	19	0.5	9
Male															
All Males	12	3.2	122	0.2	20	0	0.0	0	0.0	0	7	1.9	56	0.8	11
Male, Disabled															
All Ages	2	4.5	24	0.2	17	0	0.0	0	0.0	0	2	4.5	24	0.7	5
64 or younger	2	4.8	24	0.2	17	0	0.0	0	0.0	0	2	4.8	24	0.7	5
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 Eligibles															
All Ages	10	3.0	98	0.2	21	0	0.0	0	0.0	0	5	1.5	32	0.9	15
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	2	2.8	8	1.6	21
75-84	4	3.2	44	0.4	29	0	0.0	0	0.0	0	1	0.8	11	0.7	4
85 and older	6	4.4	54	0.1	15	0	0.0	0	0.0	0	2	1.5	13	0.7	21
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 2007 file for Wyoming, released by CMS in 4/2010. This table was produced on 10/06/2010.

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 2007. A total of 724 beneficiaries who were in nursing facilities for part of their enrollment and their 6,406 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 2007. 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 2007 Medicaid reimbursement for all-year nursing facility residents in this state.

For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

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

TABLE D.10D
MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR NINTH AND TENTH TOP DRUG GROUPS
SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c, d}
DUAL ELIGIBLE BENEFICIARIES, WYOMING, 2007

Beneficiary Characteristics	ANTIDEPRESSANTS					ANTIPARKINSONIAN					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-Year Nursing Facility Residents	Benefit Months Among All-Year Nursing Facility Residents
All	29	2.1	249	0.3	\$9	9	0.6	62	0.4	\$36	1,391	13,937
Female												
All Females	19	1.9	170	0.3	11	5	0.5	33	0.3	20	1,015	10,306
Female, Disabled												
All Ages	3	6.5	36	0.3	26	0	0.0	0	0.0	0	46	506
64 or younger	3	6.5	36	0.3	26	0	0.0	0	0.0	0	46	506
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	16	1.7	134	0.3	7	5	0.5	33	0.3	20	969	9,800
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	3	2.6	26	0.2	7	1	0.9	2	1.0	25	116	1,204
75-84	6	1.9	56	0.3	11	0	0.0	0	0.0	0	311	3,171
85 and older	7	1.3	52	0.3	2	4	0.7	31	0.3	20	542	5,425
Male												
All Males	10	2.7	79	0.3	4	4	1.1	29	0.4	54	376	3,631
Male, Disabled												
All Ages	1	2.3	12	0.1	1	0	0.0	0	0.0	0	44	454
64 or younger	1	2.4	12	0.1	1	0	0.0	0	0.0	0	42	441
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	13
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	9	2.7	67	0.3	5	4	1.2	29	0.4	54	332	3,177
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	3	4.2	19	0.3	2	2	2.8	23	0.5	44	71	715
75-84	2	1.6	14	0.4	3	2	1.6	6	0.3	92	126	1,236
85 and older	4	3.0	34	0.3	6	0	0.0	0	0.0	0	135	1,226
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 2007 file for Wyoming, released by CMS in 4/2010. This table was produced on 10/06/2010.

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 2007. A total of 724 beneficiaries who were in nursing facilities for part of their enrollment and their 6,406 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 2007. 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 2007 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

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

TABLE D.11
USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
AMONG DUALS, BY BENEFICIARY CHARACTERISTIC^{a,b}
WYOMING, 2007

Beneficiary Characteristics	Number of Beneficiaries with at Least One Part D Excluded Rx	Percentage of Beneficiaries with at Least One Part D Excluded Rx	Number of Part D Excluded Rx per Beneficiary	Total Number Part D Excluded Rx	Part D Excluded Rx \$ per Beneficiary	Total Part D Excluded Rx \$	\$ per Part D Excluded Rx	Part D Excluded Rx \$ as a Percentage of All Dual Rx \$	Total Number of Beneficiaries
All	2,324	33.3	2.6	18,269	\$46	\$321,844	\$18	22.9	6,975
Age									
5 and younger	1	100.0	10.0	10	100	100	10	0.0	1
6-14	2	40.0	4.0	20	113	564	28	4.3	5
15-20	10	58.8	4.0	68	42	720	11	1.6	17
21-44	506	33.4	2.7	4,154	50	74,996	18	13.4	1,515
45-64	750	41.9	3.8	6,778	69	123,529	18	24.0	1,789
65-74	380	32.5	2.5	2,913	51	59,249	20	30.4	1,168
75-84	373	30.3	2.0	2,467	33	40,012	16	119.1	1,230
85 and older	302	24.2	1.5	1,859	18	22,674	12	49.1	1,250
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Basis of Eligibility^c									
Aged	1,042	28.9	2.0	7,133	33	120,528	17	49.8	3,608
Disabled	1,251	38.2	3.3	10,903	60	198,318	18	19.3	3,278
Adults	23	31.9	2.6	184	30	2,165	12	2.1	72
Children	3	37.5	3.8	30	83	664	22	4.9	8
Unknown	5	55.6	2.1	19	19	169	9	0.8	9
Gender									
Female	1,588	36.0	2.9	12,643	49	218,017	17	23.6	4,417
Male	736	28.8	2.2	5,626	41	103,827	18	21.6	2,558
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Race									
White	2,093	34.2	2.8	16,872	49	299,577	18	23.5	6,111
African American	24	32.0	2.2	165	33	2,475	15	15.0	75
Other/unknown	207	26.2	1.6	1,232	25	19,792	16	17.2	789
Use of Nursing Facilities^d									
Entire year	375	27.0	1.9	2,682	19	26,260	10	27.0	1,391
Part year	245	33.8	1.8	1,325	28	20,186	15	50.1	724
None	1,704	35.1	2.9	14,262	57	275,398	19	21.7	4,860
Maintenance Assistance Status									
Cash	700	28.8	2.0	4,748	31	76,385	16	14.4	2,433
Medically needy	0	0.0	0.0	0	0	0	0	0.0	0
Poverty related	26	28.9	1.1	100	17	1,500	15	1.9	90
Other/unknown	1,598	35.9	3.0	13,421	55	243,959	18	30.6	4,452

Source: Data for this table are from the MAX 2007 file for Wyoming, released by CMS in 4/2010. This table was produced on 10/06/2010.

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 2007.

b. The statute establishing the Medicare Part D prescription program that started in 2007 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 2007 receive the remainder of their prescription drug coverage through Part D. Excluded drugs include benzodiazepines; barbiturates; nonprescription (OTC) medications; prescription vitamins and minerals (not including prenatal vitamins and fluoride preparations); and drugs used for anorexia, weight loss, or weight gain. Other excluded drugs include those that promote fertility; those used for cosmetic purposes or hair growth, for symptomatic relief of coughs and colds; or drugs for which the manufacturer requires that associated tests or monitoring services be purchased exclusively from the manufacturer.

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

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

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

TABLE D.12
USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
AMONG DUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a,b}
WYOMING, 2007

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	0.2	\$4	\$18	\$0	\$1	73,292
Age						
5 and younger	0.8	8	10	0	0	12
6-14	0.5	13	28	0	0	44
15-20	0.3	4	11	0	0	202
21-44	0.2	4	18	0	1	16,745
45-64	0.3	6	18	0	1	19,685
65-74	0.2	5	20	0	1	12,385
75-84	0.2	3	16	0	1	12,400
85 and older	0.2	2	12	0	1	11,819
Unknown	0.0	0	0	0	0	0
Basis of Eligibility^c						
Aged	0.2	3	17	0	1	36,252
Disabled	0.3	5	18	0	1	36,315
Adults	0.3	4	12	0	1	572
Children	0.4	9	22	0	0	72
Unknown	0.2	2	9	0	1	81
Gender						
Female	0.3	5	17	0	1	46,562
Male	0.2	4	18	0	1	26,730
Unknown	0.0	0	0	0	0	0
Race						
White	0.3	5	18	0	1	64,085
African American	0.2	3	15	0	1	810
Other/unknown	0.1	2	16	0	0	8,397
Use of Nursing Facilities^d						
Entire year	0.2	2	10	0	2	13,937
Part year	0.2	3	15	0	1	6,406
None	0.3	5	19	0	1	52,949
Maintenance Assistance Status						
Cash	0.2	3	16	0	1	26,536
Medically needy	0.0	0	0	0	0	0
Poverty related	0.1	2	15	0	0	870
Other/unknown	0.3	5	18	0	1	45,886

Source: Data for this table are from the MAX 2007 file for Wyoming, released by CMS in 4/2010. This table was produced on 10/06/2010.

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 2007.

b. The statute establishing the Medicare Part D prescription program that started in 2007 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 2007 receive the remainder of their prescription drug coverage through Part D. Excluded drugs include benzodiazepines; barbiturates; nonprescription (OTC) medications; prescription vitamins and minerals (not including prenatal vitamins and fluoride preparations); and drugs used for anorexia, weight loss, or weight gain. Other excluded drugs include those that promote fertility; those used for cosmetic purposes or hair growth, for symptomatic relief of coughs and colds; or drugs for which the manufacturer requires that associated tests or monitoring services be purchased exclusively from the manufacturer.

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

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

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

TABLE D.13
USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D FOR SELECTED DRUG CATEGORIES AMONG DUALS^{a,b,c}
WYOMING, 2007

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	3,020	\$107	\$321,844	100.0	18,269	\$18	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	1	5	5	0.0	1	5	0.0
Cough and cold medications	469	40	18,905	5.9	1,041	18	5.7
Vitamins and minerals	153	51	7,808	2.4	575	14	3.1
Non-prescription drugs	942	229	215,880	67.1	7,231	30	39.6
Barbiturates	48	69	3,301	1.0	349	9	1.9
Benzodiazepines	1,375	54	74,745	23.2	8,951	8	49.0
Other Part D Excl Rx Drugs	32	38	1,200	0.4	121	10	0.7

Source: Data for this table are from the MAX 2007 file for Wyoming, released by CMS in 4/2010. This table was produced on 10/06/2010.

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 2007. A user is a beneficiary who had at least one prescription filled for a Part D excluded drug in 2007. 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 2007 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 2007 receive the remainder of their prescription drug coverage through Part D. Excluded drugs include benzodiazepines; barbiturates; nonprescription (OTC) medications; prescription vitamins and minerals (not including prenatal vitamins and fluoride preparations); and drugs used for anorexia, weight loss, or weight gain. Other excluded drugs include those that promote fertility; those used for cosmetic purposes or hair growth, for symptomatic relief of coughs and colds; or drugs for which the manufacturer requires that associated tests or monitoring services be purchased exclusively from the manufacturer.

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

SUPPLEMENTAL TABLE 1
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES^{a, b}
 WYOMING, 2007

Total Number of Dual Eligible Beneficiaries: 6,975
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries: \$1,406,948
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary: \$201

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	4,632	66.4	\$0	0.0
1-500	2,011	28.8	143,949	10.2
501-1,000	86	1.2	62,089	4.4
1,001-1,500	47	0.7	58,818	4.2
1,501-2,000	37	0.5	63,798	4.5
2,001-2,500	21	0.3	46,636	3.3
2,501-3,000	16	0.2	44,331	3.2
3,001-3,500	14	0.2	45,036	3.2
3,501-4,000	10	0.1	36,877	2.6
4,001-4,500	17	0.2	71,578	5.1
4,501-5,000	12	0.2	56,999	4.1
5,001-5,500	7	0.1	36,356	2.6
5,501-6,000	11	0.2	62,825	4.5
6,001-6,500	4	0.1	25,287	1.8
6,501-7,000	3	0.0	19,778	1.4
7,001-7,500	9	0.1	64,767	4.6
7,501-8,000	4	0.1	30,672	2.2
8,001-8,500	6	0.1	49,682	3.5
8,501-9,000	3	0.0	26,230	1.9
9,001-9,500	1	0.0	9,176	0.7
9,501-10,000	1	0.0	9,687	0.7
10,001+	23	0.3	442,377	31.4

Source: Data for this table are from the MAX 2007 file for Wyoming, released by CMS in 4/2010. This table was produced on 10/06/2010.

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 2007.

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

Dual Medicaid Beneficiaries

SUPPLEMENTAL TABLE 1A
 MEDICAID PHARMACY REIMBURSEMENT FOR DISABLED DUAL ELIGIBLE BENEFICIARIES UNDER AGE 65^{a, b, c}
 WYOMING, 2007

Total Number of Disabled Dual Eligible Beneficiaries, Age < 65: 3,245
 Total Pharmacy Reimbursement for Disabled Dual Eligible Beneficiaries, Age < 65: \$1,005,093
 Mean Pharmacy Reimbursement per Disabled Dual Eligible Beneficiary, Age < 65: \$309

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Disabled Dual Beneficiaries,		Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
		Age < 65	Pharmacy Reimbursement		
\$0	2,016	62.1	\$0	0.0	
1-500	1,002	30.9	76,165	7.6	
501-1,000	54	1.7	38,723	3.9	
1,001-1,500	28	0.9	35,757	3.6	
1,501-2,000	28	0.9	48,629	4.8	
2,001-2,500	15	0.5	32,779	3.3	
2,501-3,000	12	0.4	33,315	3.3	
3,001-3,500	10	0.3	32,253	3.2	
3,501-4,000	8	0.2	29,732	3.0	
4,001-4,500	9	0.3	38,357	3.8	
4,501-5,000	9	0.3	42,403	4.2	
5,001-5,500	6	0.2	31,205	3.1	
5,501-6,000	10	0.3	57,212	5.7	
6,001-6,500	2	0.1	12,421	1.2	
6,501-7,000	2	0.1	13,242	1.3	
7,001-7,500	7	0.2	50,261	5.0	
7,501-8,000	1	0.0	7,722	0.8	
8,001-8,500	5	0.2	41,558	4.1	
8,501-9,000	3	0.1	26,230	2.6	
9,001-9,500	1	0.0	9,176	0.9	
9,501-10,000	0	0.0	0	0.0	
10,001+	17	0.5	347,953	34.6	

Source: Data for this table are from the MAX 2007 file for Wyoming, released by CMS in 4/2010. This table was produced on 10/06/2010.

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 2007.

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, 2007

Total Number of Dual Eligible Beneficiaries, Age 65+: 3,648
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65+: \$274,592
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65+: \$75

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 65+	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	2,585	70.9	\$0	0.0
1-500	986	27.0	64,762	23.6
501-1,000	27	0.7	19,871	7.2
1,001-1,500	16	0.4	19,378	7.1
1,501-2,000	8	0.2	13,541	4.9
2,001-2,500	3	0.1	6,679	2.4
2,501-3,000	1	0.0	2,771	1.0
3,001-3,500	3	0.1	9,611	3.5
3,501-4,000	1	0.0	3,566	1.3
4,001-4,500	7	0.2	28,796	10.5
4,501-5,000	2	0.1	9,617	3.5
5,001-5,500	0	0.0	0	0.0
5,501-6,000	1	0.0	5,613	2.0
6,001-6,500	1	0.0	6,394	2.3
6,501-7,000	0	0.0	0	0.0
7,001-7,500	2	0.1	14,506	5.3
7,501-8,000	1	0.0	7,862	2.9
8,001-8,500	1	0.0	8,124	3.0
8,501-9,000	0	0.0	0	0.0
9,001-9,500	0	0.0	0	0.0
9,501-10,000	1	0.0	9,687	3.5
10,001+	2	0.1	43,814	16.0

Source: Data for this table are from the MAX 2007 file for Wyoming, released by CMS in 4/2010. This table was produced on 10/06/2010.

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 2007.

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

Dual Medicaid Beneficiaries

SUPPLEMENTAL TABLE 1C
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 TO 74^{a, b}
 WYOMING, 2007

Total Number of Dual Eligible Beneficiaries, Age 65-74: 1,168
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65-74: \$194,853
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65-74: \$166

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 65-74	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	814	69.7	\$0	0.0
1-500	304	26.0	22,051	11.3
501-1,000	14	1.2	10,103	5.2
1,001-1,500	11	0.9	13,390	6.9
1,501-2,000	4	0.3	7,051	3.6
2,001-2,500	1	0.1	2,191	1.1
2,501-3,000	1	0.1	2,771	1.4
3,001-3,500	1	0.1	3,443	1.8
3,501-4,000	1	0.1	3,566	1.8
4,001-4,500	6	0.5	24,670	12.7
4,501-5,000	2	0.2	9,617	4.9
5,001-5,500	0	0.0	0	0.0
5,501-6,000	1	0.1	5,613	2.9
6,001-6,500	1	0.1	6,394	3.3
6,501-7,000	0	0.0	0	0.0
7,001-7,500	2	0.2	14,506	7.4
7,501-8,000	1	0.1	7,862	4.0
8,001-8,500	1	0.1	8,124	4.2
8,501-9,000	0	0.0	0	0.0
9,001-9,500	0	0.0	0	0.0
9,501-10,000	1	0.1	9,687	5.0
10,001+	2	0.2	43,814	22.5

Source: Data for this table are from the MAX 2007 file for Wyoming, released by CMS in 4/2010. This table was produced on 10/06/2010.

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 2007.

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

Dual Medicaid Beneficiaries

SUPPLEMENTAL TABLE 1D
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 75 TO 84^{a, b}
 WYOMING, 2007

Total Number of Dual Eligible Beneficiaries, Age 75-84: 1,230
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 75-84: \$33,591
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 75-84: \$27

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 75-84	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	866	70.4	\$0	0.0
1-500	356	28.9	23,857	71.0
501-1,000	3	0.2	2,272	6.8
1,001-1,500	3	0.2	3,500	10.4
1,501-2,000	1	0.1	1,618	4.8
2,001-2,500	1	0.1	2,344	7.0
2,501-3,000	0	0.0	0	0.0
3,001-3,500	0	0.0	0	0.0
3,501-4,000	0	0.0	0	0.0
4,001-4,500	0	0.0	0	0.0
4,501-5,000	0	0.0	0	0.0
5,001-5,500	0	0.0	0	0.0
5,501-6,000	0	0.0	0	0.0
6,001-6,500	0	0.0	0	0.0
6,501-7,000	0	0.0	0	0.0
7,001-7,500	0	0.0	0	0.0
7,501-8,000	0	0.0	0	0.0
8,001-8,500	0	0.0	0	0.0
8,501-9,000	0	0.0	0	0.0
9,001-9,500	0	0.0	0	0.0
9,501-10,000	0	0.0	0	0.0
10,001+	0	0.0	0	0.0

Source: Data for this table are from the MAX 2007 file for Wyoming, released by CMS in 4/2010. This table was produced on 10/06/2010.

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 2007.

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

Dual Medicaid Beneficiaries

SUPPLEMENTAL TABLE 1E
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 85 AND OLDER^{a, b}
 WYOMING, 2007

Total Number of Dual Eligible Beneficiaries, Age 85+: 1,250
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 85+: \$46,148
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 85+: \$36

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 85+	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	905	72.4	\$0	0.0
1-500	326	26.1	18,854	40.9
501-1,000	10	0.8	7,496	16.2
1,001-1,500	2	0.2	2,488	5.4
1,501-2,000	3	0.2	4,872	10.6
2,001-2,500	1	0.1	2,144	4.6
2,501-3,000	0	0.0	0	0.0
3,001-3,500	2	0.2	6,168	13.4
3,501-4,000	0	0.0	0	0.0
4,001-4,500	1	0.1	4,126	8.9
4,501-5,000	0	0.0	0	0.0
5,001-5,500	0	0.0	0	0.0
5,501-6,000	0	0.0	0	0.0
6,001-6,500	0	0.0	0	0.0
6,501-7,000	0	0.0	0	0.0
7,001-7,500	0	0.0	0	0.0
7,501-8,000	0	0.0	0	0.0
8,001-8,500	0	0.0	0	0.0
8,501-9,000	0	0.0	0	0.0
9,001-9,500	0	0.0	0	0.0
9,501-10,000	0	0.0	0	0.0
10,001+	0	0.0	0	0.0

Source: Data for this table are from the MAX 2007 file for Wyoming, released by CMS in 4/2010. This table was produced on 10/06/2010.

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 2007.

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

Dual Medicaid Beneficiaries

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, 2007

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Blind/ Disabled	Adults	Children	Other/ Unknown	All	Aged	Blind/ Disabled	Adults	Children	Other/ Unknown
All	6,975	3,608	3,278	72	8	9	73,292	36,252	36,315	572	72	81
Age												
5 and younger	1	0	0	0	1	0	12	0	0	0	12	0
6-14	5	0	0	0	5	0	44	0	0	0	44	0
15-20	17	0	16	0	1	0	202	0	192	0	10	0
21-44	1,515	1	1,469	44	1	0	16,745	12	16,357	370	6	0
45-64	1,789	0	1,760	24	0	5	19,685	0	19,449	176	0	60
65-74	1,168	1,134	27	3	0	4	12,385	12,094	245	25	0	21
75-84	1,230	1,223	6	1	0	0	12,400	12,327	72	1	0	0
85 and older	1,250	1,250	0	0	0	0	11,819	11,819	0	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	4,417	2,610	1,753	43	2	9	46,562	26,489	19,619	355	18	81
Male	2,558	998	1,525	29	6	0	26,730	9,763	16,696	217	54	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	6,111	3,168	2,871	58	6	8	64,085	31,578	31,897	487	54	69
African American	75	26	46	2	1	0	810	263	527	10	10	0
Other/unknown	789	414	361	12	1	1	8,397	4,411	3,891	75	8	12
Use of Nursing Facilities^c												
Entire year	1,391	1,301	90	0	0	0	13,937	12,977	960	0	0	0
Part year	724	627	97	0	0	0	6,406	5,402	1,004	0	0	0
None	4,860	1,680	3,091	72	8	9	52,949	17,873	34,351	572	72	81
Maintenance Assistance Status												
Cash	2,433	791	1,588	54	0	0	26,536	8,769	17,316	451	0	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0
Poverty related	90	29	40	7	5	9	870	296	405	44	44	81
Other/unknown	4,452	2,788	1,650	11	3	0	45,886	27,187	18,594	77	28	0
Dual Status^d												
Full dual, all year	6,735	3,467	3,179	72	8	9	70,826	34,797	35,304	572	72	81
Full dual, part year	240	141	99	0	0	0	2,466	1,455	1,011	0	0	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	6,975	3,608	3,278	72	8	9	73,292	36,252	36,315	572	72	81
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	0	0	0	0	0	0	0	0	0	0

Source: Data for this table are from the MAX 2007 file for Wyoming, released by CMS in 4/2010. This table was produced on 10/06/2010.

a. Table A.3 includes the beneficiaries represented by Cell F of Table 1. Benefit months are months during which beneficiaries had pharmacy benefit coverage.

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

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

d. The "Full dual, all year" group contains beneficiaries who had Medicare as well as Medicaid pharmacy benefits during all months of Medicaid enrollment in 2007. 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, 2007

Beneficiary Characteristics	Beneficiaries and Benefit Months in Cell F of Table 1		Included in Cell G of Table 1		Excluded from Cell G of Table 1	
	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months
All	6,975	73,292	6,975	73,292	0	0
Fee-for-service (FFS) all year	6,975	73,292	6,975	73,292	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 2007 file for Wyoming, released by CMS in 4/2010. This table was produced on 10/06/2010.
a. Benefit months are months during which beneficiaries had pharmacy benefit coverage.
Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Centers for Medicare and Medicaid Services; FFS = fee-for-service pharmacy benefit; MAX = Medicaid Analytic Extract; MC = managed care; Rx = pharmacy benefit.