

# STATISTICAL COMPENDIUM: MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2001 ARKANSAS

## LIST OF TABLES

### OVERVIEW OF STUDY POPULATION

TABLE 1. OVERVIEW OF BENEFICIARY SELECTION CRITERIA FOR STUDY POPULATION

### FOR ALL MEDICAID BENEFICIARIES

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

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

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

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

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

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

### FOR ALL NONDUAL BENEFICIARIES

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

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

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

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

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

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

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

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

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

TABLE ND.11. USE OF AND REIMBURSEMENT FOR PART D EXCLUDED DRUGS AMONG NONDUALS, BY BENEFICIARY CHARACTERISTIC

TABLE ND.12. USE OF AND REIMBURSEMENT FOR PART D EXCLUDED DRUGS AMONG NONDUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC

TABLE ND.13. USE OF AND REIMBURSEMENT FOR PART D EXCLUDED DRUGS FOR SELECTED DRUG CATEGORIES AMONG NONDUALS, BY BENEFICIARY CHARACTERISTIC

**FOR DUAL ELIGIBLE BENEFICIARIES**

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

**SUPPLEMENTAL TABLES**

- SUPPLEMENTAL TABLE 1. MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES
- SUPPLEMENTAL TABLE 1A. MEDICAID PHARMACY REIMBURSEMENT FOR DISABLED DUAL ELIGIBLE BENEFICIARIES UNDER AGE 65
- SUPPLEMENTAL TABLE 1B. MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 AND OLDER
- SUPPLEMENTAL TABLE 1C. MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 TO 74
- SUPPLEMENTAL TABLE 1D. MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 75 TO 84
- SUPPLEMENTAL TABLE 1E. MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 85 AND OLDER

**APPENDIX TABLE**

- APPENDIX TABLE A.1. CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY, NONDUAL BENEFICIARIES
- APPENDIX TABLE A.2. MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS, NONDUAL BENEFICIARIES
- APPENDIX TABLE A.3. CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY, DUAL ELIGIBLE BENEFICIARIES
- APPENDIX TABLE A.4. MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS, DUAL ELIGIBLE BENEFICIARIES

TABLE D.2  
 CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY<sup>a,b</sup>  
 DUAL ELIGIBLE BENEFICIARIES, ARKANSAS, 2001

Beneficiary Characteristics	No. of Benes						No. of Bene Mos					
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown
<b>All</b>	<b>69,902</b>	<b>34,973</b>	<b>34,349</b>	<b>580</b>	<b>0</b>	<b>0</b>	<b>738,040</b>	<b>360,875</b>	<b>372,210</b>	<b>4,955</b>	<b>0</b>	<b>0</b>
<b>Age</b>												
5 and younger	7	0	7	0	0	0	82	0	82	0	0	0
6-14	12	0	12	0	0	0	143	0	143	0	0	0
15-20	167	0	157	10	0	0	1,827	0	1,729	98	0	0
21-44	11,205	0	10,763	442	0	0	119,987	0	115,992	3,995	0	0
45-64	12,969	0	12,849	120	0	0	135,526	0	134,684	842	0	0
65-74	14,077	7,496	6,574	7	0	0	151,828	77,415	74,395	18	0	0
75-84	16,680	13,604	3,075	1	0	0	177,541	142,552	34,987	2	0	0
85 and older	14,785	13,873	912	0	0	0	151,106	140,908	10,198	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
<b>Gender</b>												
Female	47,669	26,831	20,385	453	0	0	509,343	280,730	224,424	4,189	0	0
Male	22,233	8,142	13,964	127	0	0	228,697	80,145	147,786	766	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
<b>Race</b>												
White	46,652	24,685	21,529	438	0	0	486,214	250,408	232,056	3,750	0	0
African American	18,854	8,219	10,496	139	0	0	204,852	88,205	115,471	1,176	0	0
Other/unknown	4,396	2,069	2,324	3	0	0	46,974	22,262	24,683	29	0	0
<b>Use of Nursing Facilities<sup>c</sup></b>												
Entire year	13,350	11,814	1,536	0	0	0	133,883	117,050	16,833	0	0	0
Part year	4,041	3,429	612	0	0	0	39,481	32,944	6,537	0	0	0
None	52,511	19,730	32,201	580	0	0	564,676	210,881	348,840	4,955	0	0
<b>Maintenance Assistance Status</b>												
Cash	43,517	14,191	29,205	121	0	0	483,028	157,826	324,205	997	0	0
Medically needy	1,653	210	1,263	180	0	0	7,463	775	5,625	1,063	0	0
Poverty-related	556	168	348	40	0	0	5,039	1,653	3,095	291	0	0
Other/unknown	24,176	20,404	3,533	239	0	0	242,510	200,621	39,285	2,604	0	0
<b>Dual Medicare Status<sup>d</sup></b>												
Full dual, all year	68,607	34,244	33,793	570	0	0	724,948	353,160	366,932	4,856	0	0
Full dual, part year	1,295	729	556	10	0	0	13,092	7,715	5,278	99	0	0
<b>Managed Care Status</b>												
FFS all year	69,902	34,973	34,349	580	0	0	738,040	360,875	372,210	4,955	0	0
FFS part year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
FFS part year, no Rx claims	0	0	0	0	0	0	0	0	0	0	0	0

Table D2

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2001 file for Arkansas, released by CMS in 06/2005. This table was produced on 09/19/2006.

- 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 2001. 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 = Center for Medicare and Medicaid Services; FFS = fee-for-service pharmacy benefit; MAX = Medicaid Analytic Extract; Rx = pharmacy benefit.

TABLE D.3  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC<sup>a,b</sup>  
 DUAL ELIGIBLE BENEFICIARIES, ARKANSAS, 2001

Beneficiary Characteristics	% with at Least One Rx	Mean No. of Rx	Mean Rx \$	\$ per Rx	Mean \$, All Services	Rx \$ as % of All Services	No. of Benes
All	88.9 %	34.6	\$1,741	\$50	\$11,320	15.4 %	69,902
<b>Age</b>							
5 and younger	100.0	51.9	5,706	110	33,395	17.1	7
6-14	91.7	84.9	8,429	99	16,360	51.5	12
15-20	69.5	19.5	2,137	110	9,276	23.0	167
21-44	77.1	18.7	1,515	81	9,676	15.7	11,205
45-64	86.0	30.8	1,825	59	10,344	17.6	12,969
65-74	89.5	35.3	1,704	48	8,581	19.9	14,077
75-84	93.3	41.4	1,884	46	11,907	15.8	16,680
85 and older	95.0	41.5	1,703	41	15,379	11.1	14,785
Unknown	0.0	0.0	0	0	0	0.0	0
<b>Basis of Eligibility<sup>c</sup></b>							
Aged	92.4	40.4	1,792	44	13,333	13.4	34,973
Disabled	85.9	29.0	1,708	59	9,419	18.1	34,349
Adults	54.7	9.9	691	70	2,536	27.2	580
Children	0.0	0.0	0	0	0	0.0	0
Unknown	0.0	0.0	0	0	0	0.0	0
<b>Gender</b>							
Female	92.2	38.3	1,839	48	11,401	16.1	47,669
Male	81.8	26.6	1,532	58	11,148	13.7	22,233
Unknown	0.0	0.0	0	0	0	0.0	0
<b>Race</b>							
White	89.5	37.6	1,912	51	12,567	15.2	46,652
African American	87.5	28.1	1,368	49	9,349	14.6	18,854
Other/unknown	87.6	30.6	1,537	50	6,552	23.4	4,396
<b>Use of Nursing Facilities<sup>d</sup></b>							
Entire year	96.3	58.2	2,605	45	25,482	10.2	13,350
Part year	96.2	43.5	2,080	48	17,710	11.7	4,041
None	86.4	27.9	1,496	54	7,228	20.7	52,511
<b>Maintenance Assistance Status</b>							
Cash	88.5	29.2	1,549	53	6,121	25.3	43,517
Medically needy	74.7	10.7	985	92	6,033	16.3	1,653
Poverty related	68.7	11.5	632	55	3,599	17.6	556
Other/unknown	91.1	46.4	2,165	47	21,218	10.2	24,176

Source: Data for this table are from the MAX 2001 file for Arkansas, released by CMS in 06/2005. This table was produced on 09/19/2006.

- 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. 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 of Table 1 for methodology used to determine nursing facility residence.
- Bene(s) = beneficiary (or beneficiaries); CMS = Center for Medicare and Medicaid Services; 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<sup>a,b</sup>  
 DUAL ELIGIBLE BENEFICIARIES, ARKANSAS, 2001

Beneficiary Characteristics	Mean No. of Rx	Mean Rx \$	Rx \$ as % of All Services	No. of Rx, % with:					Mean \$, All Services	Benes	Bene Mos	
				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	3.3	\$165	15.4 %	11.1 %	18.3 %	14.6 %	37.9 %	16.0 %	2.1 %	\$1,072	69,902	738,040
<b>Age</b>												
5 and younger	4.4	487	17.1	0.0	28.6	14.3	14.3	42.9	0.0	2,851	7	82
6-14	7.1	707	51.5	8.3	0.0	0.0	16.7	58.3	16.7	1,373	12	143
15-20	1.8	195	23.0	30.5	34.1	9.6	18.0	7.2	0.6	848	167	1,827
21-44	1.8	142	15.7	22.9	32.1	16.0	24.5	4.3	0.2	904	11,205	119,987
45-64	3.0	175	17.6	14.0	18.4	15.5	38.6	12.5	1.0	990	12,969	135,526
65-74	3.3	158	19.9	10.5	17.1	14.9	40.5	15.2	1.8	796	14,077	151,828
75-84	3.9	177	15.8	6.7	14.0	13.4	41.8	20.5	3.6	1,119	16,680	177,541
85 and older	4.1	167	11.1	5.0	13.6	13.7	40.7	23.8	3.2	1,505	14,785	151,106
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<b>Basis of Eligibility<sup>c</sup></b>												
Aged	3.9	174	13.4	7.6	14.6	13.3	39.3	21.5	3.7	1,292	34,973	360,875
Disabled	2.7	158	18.1	14.1	22.1	15.8	36.8	10.6	0.5	869	34,349	372,210
Adults	1.2	81	27.2	45.3	20.7	12.8	18.1	3.1	0.0	297	580	4,955
Children	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<b>Gender</b>												
Female	3.6	172	16.1	7.8	15.9	14.4	41.3	18.2	2.4	1,067	47,669	509,343
Male	2.6	149	13.7	18.2	23.6	15.0	30.5	11.3	1.4	1,084	22,233	228,697
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<b>Race</b>												
White	3.6	183	15.2	10.5	15.7	13.3	38.4	19.3	2.9	1,206	46,652	486,214
African American	2.6	126	14.6	12.5	24.1	17.5	36.4	8.9	0.6	860	18,854	204,852
Other/unknown	2.9	144	23.4	12.4	21.2	15.9	38.5	11.4	0.6	613	4,396	46,974
<b>use or nursing Facilities<sup>d</sup></b>												
Entire year	5.8	260	10.2	3.7	6.7	7.6	32.9	39.2	9.8	2,541	13,350	133,883
Part year	4.5	213	11.7	3.8	11.9	12.2	41.9	26.7	3.5	1,813	4,041	39,481
None	2.6	139	20.7	13.6	21.8	16.5	38.8	9.3	0.0	672	52,511	564,676
<b>Maintenance Assistance Status</b>												
Cash	2.6	140	25.3	11.5	22.7	17.0	39.1	9.6	0.1	552	43,517	483,028
Medically needy	2.4	218	16.3	25.3	17.9	17.9	33.0	5.9	0.0	1,336	1,653	7,463
Poverty related	1.3	70	17.6	31.3	37.1	15.1	15.6	0.9	0.0	397	556	5,039
Other/unknown	4.6	216	10.2	8.9	10.1	9.9	36.6	28.6	5.8	2,115	24,176	242,510

Table D4

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2001 file for Arkansas, released by CMS in 06/2005. This table was produced on 09/19/2006.

- 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. 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 of Table 1 for methodology used to determine nursing facility residence.

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



TABLE D.5  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, ARKANSAS, 2001

Beneficiary Characteristics	All Rx			Patented Brand-Name Drugs			Off-Patent Brand-Name Drugs			Generic Drugs		
	No. of Rx	Rx \$	\$ per Rx	No. of Rx	Rx \$	\$ per Rx	No. of Rx	Rx \$	\$ per Rx	No. of Rx	Rx \$	\$ per Rx
<b>All</b>	<b>3.3</b>	<b>\$165</b>	<b>\$50</b>	<b>1.4</b>	<b>\$122</b>	<b>\$85</b>	<b>0.3</b>	<b>\$13</b>	<b>\$43</b>	<b>1.5</b>	<b>\$30</b>	<b>\$20</b>
<b>Age</b>												
5 and younger	4.4	487	110	2.5	463	182	0.1	3	25	1.8	21	12
6-14	7.1	707	99	3.8	591	155	0.5	65	128	2.8	51	18
15-20	1.8	195	110	0.7	150	216	0.2	29	118	0.8	16	19
21-44	1.8	142	81	0.8	110	139	0.1	11	77	0.8	20	25
45-64	3.0	175	59	1.4	132	96	0.2	13	57	1.3	30	22
65-74	3.3	158	48	1.5	116	78	0.3	12	42	1.5	30	20
75-84	3.9	177	46	1.7	129	76	0.4	14	38	1.8	34	19
85 and older	4.1	167	41	1.6	117	74	0.4	15	34	2.0	35	17
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
<b>Basis of Eligibility<sup>d</sup></b>												
Aged	3.9	174	44	1.7	126	76	0.4	14	37	1.9	34	18
Disabled	2.7	158	59	1.2	118	98	0.2	13	54	1.2	27	22
Adults	1.2	81	70	0.5	63	124	0.1	5	72	0.6	13	22
Children	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
<b>Gender</b>												
Female	3.6	172	48	1.6	127	80	0.3	14	41	1.7	32	19
Male	2.6	149	58	1.1	110	102	0.2	11	50	1.3	27	21
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
<b>Race</b>												
White	3.6	183	51	1.6	135	86	0.3	15	43	1.7	34	20
African American	2.6	126	49	1.1	92	83	0.2	10	43	1.2	24	19
Other/unknown	2.9	144	50	1.3	106	82	0.3	12	47	1.3	26	20
<b>Use of Nursing Facilities<sup>e</sup></b>												
Entire year	5.8	260	45	2.3	186	80	0.5	21	38	2.9	53	18
Part year	4.5	213	48	1.9	156	82	0.4	17	39	2.1	41	19
None	2.6	139	54	1.2	104	88	0.2	11	47	1.2	24	21
<b>Maintenance Assistance Status</b>												
Cash	2.6	140	53	1.2	104	87	0.2	11	47	1.2	25	20
Medically needy	2.4	218	92	1.2	175	151	0.2	13	74	1.0	30	29
Poverty related	1.3	70	55	0.6	51	86	0.1	7	61	0.6	12	22
Other/unknown	4.6	216	47	1.9	156	81	0.4	17	39	2.3	42	19

Source: Data for this table are from the MAX 2001 file for Arkansas, released by CMS in 06/2005. This table was produced on 09/19/2006.

- a. Table D.5 includes the beneficiaries represented by Cell G of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- b. The Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
- c. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In Arkansas, 0.3 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all combined. For information about this classification method, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).
- 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 = Center for Medicare and 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<sup>a, b, c, d</sup>  
 DUAL ELIGIBLE BENEFICIARIES, ARKANSAS, 2001

Therapeutic Category	No. of Rx per Bene Mo among Users			\$ per Bene Mo among Users			\$ per Rx			Users							
	Total	Patented Brand-Name	Off-Patent Brand-Name	Total	Patented Brand-Name	Off-Patent Brand-Name	Total	Patented Brand-Name	Off-Patent Brand-Name	Total No. of Rx	Total Rx \$	No. Dual Benes	As % of Benes	No. of Bene Mos			
															Generic	Generic	Generic
Anti-infective Agents	0.3	0.1	0.0	0.1	\$15	\$13	\$0	\$2	\$56	\$93	\$46	\$16	105,769	\$5,900,657	35,812	51.2 %	394,129
Biologics	0.1	0.0	0.1	0.0	11	3	8	0	87	102	93	18	10	871	7	0.0	81
Antineoplastic Agents	0.5	0.2	0.1	0.3	70	36	18	16	133	203	197	63	15,869	2,115,418	2,910	4.2	30,018
Endocrine/Metabolic Drugs	0.8	0.5	0.1	0.2	33	28	2	3	39	56	17	13	244,903	9,568,652	26,583	38.0	291,591
Cardiovascular Agents	1.5	0.5	0.1	0.8	48	29	4	14	32	54	30	18	707,110	22,793,817	43,836	62.7	474,815
Respiratory Agents	0.5	0.3	0.0	0.2	25	19	0	5	48	67	40	24	99,641	4,783,021	17,458	25.0	190,486
Gastrointestinal Agents	0.6	0.3	0.0	0.3	47	39	3	5	73	116	76	20	177,804	12,930,474	25,083	35.9	273,661
Genitourinary Agents	0.5	0.3	0.0	0.1	26	23	0	2	56	69	41	19	45,151	2,519,082	8,885	12.7	97,279
CNS Drugs	1.0	0.5	0.1	0.5	75	57	7	11	75	118	109	25	351,841	26,346,610	32,741	46.8	352,323
Stimulants/Anti-obesity/Anorexia	0.5	0.2	0.0	0.2	31	21	3	8	67	113	64	32	1,758	117,918	347	0.5	3,782
Miscellaneous Psychological/Neurological Agents	0.7	0.6	0.0	0.1	77	76	0	2	116	128	84	22	24,973	2,895,340	3,551	5.1	37,481
Analgesics and Anesthetics	0.6	0.3	0.0	0.4	33	25	2	6	53	100	89	18	230,307	12,286,433	33,929	48.5	370,736
Neuromuscular Agents	0.8	0.3	0.1	0.4	44	30	4	10	58	107	41	26	140,431	8,099,776	16,786	24.0	183,171
Nutritional Products	0.6	0.0	0.2	0.4	11	0	6	5	19	27	29	13	94,498	1,786,556	14,826	21.2	159,200
Hematological Agents	0.7	0.2	0.1	0.3	41	32	3	7	60	145	22	19	89,563	5,383,699	12,285	17.6	130,915
Topical Products	0.3	0.2	0.0	0.1	13	10	1	2	39	54	41	18	78,141	3,022,361	20,791	29.7	232,081
Miscellaneous Products	0.4	0.2	0.1	0.2	109	78	19	12	243	429	261	60	4,387	1,064,055	938	1.3	9,761
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	7	0	0	0	26	0	0	0	4,362	113,621	1,401	2.0	15,530
<b>TOTAL NO. OF RX AND RX \$</b>	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	2,416,518	121,728,361	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2001 file for Arkansas, released by CMS in 06/2005. This table was produced on 09/19/2006.

- a. Table D.6 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 therapeutic category during 2001. 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.Medi-Span.com/products/product\\_mdmb.asp](http://www.Medi-Span.com/products/product_mdmb.asp) (May 13 2003).
  - 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 Arkansas, 0.3 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mdmb.asp](http://www.Medi-Span.com/products/product_mdmb.asp) (May 13 2003).
- Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Center for Medicare and 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<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, ARKANSAS, 2001

Top 10 Drug Groups	Users			Among Users		
	Total Medicaid Rx \$	No.	As % of Dual Benes	No. of Bene Mos	No. of Rx per Bene Mo	Rx \$ per Bene Mo
ANTIPSYCHOTICS	\$13,431,151	13,487	19.3 %	146,171	0.6	\$145
ULCER DRUGS	11,597,953	24,255	34.7	267,139	0.5	83
ANTIDEPRESSANTS	9,765,928	24,740	35.4	268,692	0.6	62
ANTIHYPERTENSIVE	6,625,115	26,184	37.5	288,098	0.7	35
ANTIDIABETIC	6,119,332	16,585	23.7	183,894	0.6	52
ANALGESICS - ANTI-INFLAMMATORY	6,104,052	18,464	26.4	208,028	0.4	67
ANTICONVULSANT	6,041,521	11,873	17.0	130,121	0.7	68
CALCIUM BLOCKERS	5,718,754	14,958	21.4	164,830	0.7	47
ANALGESICS - Narcotic	5,468,611	32,452	46.4	356,456	0.3	45
ANTHYPERLIPIDEMIC	4,807,463	8,634	12.4	96,994	0.6	79
<b>Total</b>	<b>75,679,880</b>	<b>191,632</b>		<b>2,110,423</b>	<b>n.a.</b>	<b>n.a.</b>

Source: Data for this table are from the MAX 2001 file for Arkansas, released by CMS in 06/2005. This table was produced on 09/19/2006.

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 2001. 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 2001. For information about these drug groups, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Center for Medicare and 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 PER BENEFIT MONTH FOR TOP 10 DRUG GROUPS COMBINED  
 AND FIRST AND SECOND GROUPS SEPARATELY, BY SEX, BOE, AND AGE<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, ARKANSAS, 2001

Beneficiary Characteristics	All Top 10 Drug Groups				ANTIPSYCHOTICS				ULCER DRUGS			
	No. of Rx	Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
<b>All</b>	<b>1,174,514</b>	<b>\$75,679,880</b>	<b>13,487</b>	<b>19.3 %</b>	<b>146,171</b>	<b>0.6</b>	<b>\$92</b>	<b>24,255</b>	<b>34.7 %</b>	<b>267,139</b>	<b>0.5</b>	<b>\$43</b>
<b>Female</b>	871,969	54,000,412	8,415	17.7	91,141	0.6	80	18,057	37.9	200,132	0.5	44
<b>Disabled</b>	362,872	24,840,164	3,392	16.6	38,217	0.6	94	7,452	36.6	85,293	0.4	41
5 and younger	10	181	0	0.0	0	0.0	0	2	100.0	24	0.4	7
6-14	78	4,293	0	0.0	0	0.0	0	2	50.0	24	0.3	13
15-20	463	42,200	4	6.3	48	0.5	108	11	17.5	132	0.2	10
21-44	55,880	4,795,522	1,136	23.9	12,791	0.5	96	1,289	27.1	14,710	0.3	33
45-64	143,640	10,479,412	1,398	18.4	15,593	0.6	106	2,931	38.5	33,128	0.4	44
65-74	100,047	6,015,312	466	9.8	5,376	0.6	83	1,926	40.7	22,375	0.5	42
75-84	49,768	2,838,392	289	11.7	3,299	0.6	68	1,011	41.1	11,708	0.5	43
85 and older	12,986	664,852	99	13.1	1,110	0.5	49	280	37.2	3,192	0.6	44
<b>Other Eligibles</b>	509,097	29,160,248	5,023	18.4	52,924	0.6	70	10,605	38.9	114,839	0.6	46
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	11	646	0	0.0	0	0.0	0	2	22.2	20	0.2	10
21-44	1,502	111,696	24	6.6	177	0.4	38	44	12.0	415	0.3	28
45-64	646	40,801	3	3.9	28	0.2	32	17	22.4	183	0.2	25
65-74	93,956	5,808,081	821	16.4	8,920	0.7	89	1,695	33.8	18,460	0.5	45
75-84	214,044	12,402,593	1,932	18.6	20,407	0.7	72	4,232	40.7	46,599	0.6	46
85 and older	198,938	10,796,431	2,243	19.6	23,392	0.6	62	4,615	40.4	49,162	0.6	46
<b>Male</b>	302,545	21,679,468	5,072	22.8	55,030	0.7	111	6,198	27.9	67,007	0.5	43
<b>Disabled</b>	178,693	14,705,225	3,403	24.4	38,218	0.7	129	3,404	24.4	38,226	0.5	42
5 and younger	61	3,831	2	40.0	20	0.3	28	2	40.0	24	0.4	80
6-14	141	11,037	2	25.0	22	0.3	101	4	50.0	47	0.3	17
15-20	878	69,231	14	14.9	168	0.5	74	26	27.7	304	0.5	36
21-44	62,690	6,460,049	1,818	30.2	20,585	0.6	137	1,102	18.3	12,511	0.4	39
45-64	75,625	5,871,790	1,262	24.1	13,931	0.7	129	1,434	27.4	15,848	0.5	44
65-74	27,639	1,662,828	188	10.2	2,168	0.6	105	564	30.7	6,508	0.5	43
75-84	9,341	509,800	84	13.7	960	0.7	67	205	33.4	2,282	0.5	41
85 and older	2,318	116,659	33	20.8	364	0.7	56	67	42.1	702	0.6	39
<b>Other Eligibles</b>	123,852	6,974,243	1,669	20.2	16,812	0.7	69	2,794	33.8	28,781	0.6	44
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	8	529	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	655	66,169	5	6.6	40	0.4	88	9	11.8	84	0.5	72
45-64	262	14,280	0	0.0	0	0.0	0	5	11.4	49	0.3	45
65-74	37,454	2,175,868	447	18.0	4,688	0.7	82	720	29.0	7,587	0.5	43
75-84	50,455	2,842,346	674	21.0	6,800	0.7	71	1,140	35.5	11,779	0.6	43
85 and older	35,018	1,875,051	543	22.1	5,284	0.6	57	920	37.5	9,282	0.6	45
<b>Unknown</b>	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 2001 file for Arkansas, released by CMS in 06/2005. This table was produced on 09/19/2006.

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 2001. 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 2001. For information about these drug groups, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mdmb.asp](http://www.Medi-Span.com/products/product_mdmb.asp) (May 13 2003).

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

TABLE D.7B  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR THIRD TO FIFTH TOP DRUG GROUPS  
 SEPARATELY, BY SEX, BOE, AND AGE<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, ARKANSAS, 2001

Beneficiary Characteristics	ANTIDEPRESSANTS					ANTIHYPERTENSIVE					ANTIDIABETIC				
	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean Rx	Mean Rx \$
<b>All</b>	<b>24,740</b>	<b>35.4 %</b>	<b>268,692</b>	<b>0.6</b>	<b>\$36</b>	<b>26,184</b>	<b>37.5 %</b>	<b>288,098</b>	<b>0.7</b>	<b>\$23</b>	<b>16,585</b>	<b>23.7 %</b>	<b>183,994</b>	<b>0.6</b>	<b>\$33</b>
<b>Female</b>	18,626	39.1	203,323	0.6	36	19,425	40.7	215,405	0.7	23	12,762	26.8	142,944	0.6	33
<b>Disabled</b>	8,379	41.1	94,290	0.5	34	7,684	37.7	87,586	0.6	23	6,347	31.1	72,401	0.6	35
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	3	75.0	36	0.4	16	0	0.0	0	0.0	0
15-20	17	27.0	196	0.4	21	6	9.5	72	0.5	9	2	3.2	24	0.5	27
21-44	2,302	48.5	25,749	0.4	34	595	12.5	6,639	0.5	19	536	11.3	5,979	0.5	31
45-64	3,929	51.6	43,833	0.5	37	2,775	36.4	30,966	0.6	22	2,523	33.1	28,230	0.6	35
65-74	1,361	28.7	15,655	0.5	28	2,604	55.0	30,124	0.6	24	2,142	45.2	24,819	0.6	36
75-84	613	24.9	7,036	0.5	28	1,344	54.6	15,645	0.6	23	955	38.8	11,178	0.6	34
85 and older	157	20.8	1,921	0.6	29	357	47.4	4,104	0.7	22	189	25.1	2,171	0.7	27
<b>Other Eligibles</b>	10,247	37.6	109,033	0.7	38	11,741	43.0	127,819	0.7	24	6,415	23.5	70,543	0.7	31
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	22.2	20	0.3	21	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	114	31.1	1,001	0.3	26	27	7.4	232	0.3	13	18	4.9	168	0.4	21
45-64	31	40.8	315	0.4	32	22	28.9	202	0.5	21	12	15.8	134	0.6	30
65-74	1,755	35.0	18,979	0.6	38	2,219	44.2	24,429	0.7	23	1,579	31.5	17,466	0.6	34
75-84	4,088	39.3	43,880	0.7	38	4,891	47.0	53,726	0.7	24	3,024	29.1	33,541	0.7	32
85 and older	4,257	37.3	44,838	0.7	39	4,582	40.1	49,230	0.7	24	1,782	15.6	19,234	0.7	28
<b>Male</b>	6,114	27.5	65,369	0.6	37	6,759	30.4	72,693	0.6	22	3,823	17.2	40,950	0.6	34
<b>Disabled</b>	3,594	25.7	39,801	0.5	36	3,549	25.4	38,913	0.6	22	2,133	15.3	23,520	0.6	36
5 and younger	0	0.0	0	0.0	0	3	60.0	34	0.5	8	0	0.0	0	0.0	0
6-14	1	12.5	12	0.7	245	3	37.5	35	0.7	19	0	0.0	0	0.0	0
15-20	25	26.6	284	0.4	30	21	22.3	231	0.4	12	1	1.1	12	0.1	11
21-44	1,716	28.5	19,260	0.5	38	792	13.2	8,743	0.5	19	501	8.3	5,659	0.6	39
45-64	1,404	26.8	15,169	0.5	36	1,596	30.5	17,081	0.6	22	971	18.6	10,416	0.6	34
65-74	309	16.8	3,576	0.5	24	795	43.2	8,997	0.6	22	490	26.6	5,486	0.7	36
75-84	104	16.9	1,125	0.6	30	271	44.1	3,028	0.7	24	146	23.8	1,678	0.6	33
85 and older	35	22.0	375	0.6	33	68	42.8	764	0.6	19	24	15.1	269	0.7	26
<b>Other Eligibles</b>	2,520	30.5	25,568	0.7	38	3,210	38.8	33,780	0.7	22	1,690	20.4	17,430	0.7	32
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	34	44.7	296	0.4	29	18	23.7	145	0.3	13	11	14.5	85	0.6	37
45-64	8	18.2	69	0.3	21	11	25.0	88	0.5	19	9	20.5	71	0.5	28
65-74	643	25.9	6,672	0.6	38	953	38.4	10,153	0.7	22	655	26.4	6,851	0.7	35
75-84	993	30.9	10,148	0.7	39	1,340	41.8	14,216	0.7	23	654	20.4	6,785	0.6	30
85 and older	842	34.3	8,383	0.7	37	888	36.2	9,178	0.7	21	361	14.7	3,638	0.7	30
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Table D7B

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2001 file for Arkansas, released by CMS in 06/2005. This table was produced on 09/19/2006.

- 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 2001. 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 2001. For information about these drug groups, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).
- Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.



TABLE D.7C  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR SIXTH TO EIGHTH TOP DRUG GROUPS  
 SEPARATELY, BY SEX, BOE, AND AGE<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, ARKANSAS, 2001

Beneficiary Characteristics	ANALGESICS - ANTI-INFLAMMATORY					ANTICONVULSANT					CALCIUM BLOCKERS				
	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
<b>All</b>	<b>18,464</b>	<b>26.4 %</b>	<b>208,028</b>	<b>0.4</b>	<b>\$29</b>	<b>11,873</b>	<b>17.0 %</b>	<b>130,121</b>	<b>0.7</b>	<b>\$46</b>	<b>14,958</b>	<b>21.4 %</b>	<b>164,930</b>	<b>0.7</b>	<b>\$35</b>
<b>Female</b>	14,332	30.1	162,141	0.4	31	7,656	16.1	84,277	0.7	43	11,689	24.5	129,513	0.7	35
<b>Disabled</b>	6,257	30.7	72,333	0.4	27	4,119	20.2	46,581	0.6	49	4,433	21.7	50,639	0.7	35
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	4	100.0	48	0.9	49
15-20	15	23.8	180	0.2	59	12	19.0	144	0.8	96	5	7.9	60	0.5	33
21-44	978	20.6	11,213	0.3	15	1,477	31.1	16,686	0.6	59	296	6.2	3,348	0.5	28
45-64	2,185	28.7	24,825	0.4	29	1,758	23.1	19,656	0.6	47	1,540	20.2	17,236	0.7	35
65-74	1,854	39.2	21,775	0.4	28	561	11.9	6,479	0.6	37	1,524	32.2	17,636	0.7	36
75-84	962	39.1	11,286	0.4	30	244	9.9	2,835	0.6	28	828	33.6	9,602	0.7	36
85 and older	263	34.9	3,054	0.5	29	67	8.9	781	0.5	23	236	31.3	2,709	0.8	36
<b>Other Eligibles</b>	8,075	29.6	89,808	0.5	35	3,537	13.0	37,696	0.7	35	7,256	26.6	78,874	0.8	35
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	11.1	11	0.2	2	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	31	8.5	288	0.2	11	45	12.3	407	0.5	48	15	4.1	108	0.4	20
45-64	17	22.4	187	0.3	18	13	17.1	118	0.4	17	7	9.2	67	0.7	38
65-74	1,517	30.2	16,914	0.4	31	814	16.2	8,813	0.7	42	1,291	25.7	14,168	0.7	35
75-84	3,442	33.1	38,791	0.5	35	1,489	14.3	15,956	0.7	36	2,978	28.6	32,703	0.8	35
85 and older	3,067	26.9	33,617	0.5	37	1,176	10.3	12,402	0.7	30	2,965	26.0	31,828	0.8	34
<b>Male</b>	4,132	18.6	45,887	0.4	23	4,217	19.0	45,844	0.7	53	3,269	14.7	35,317	0.7	34
<b>Disabled</b>	2,386	17.1	27,070	0.3	17	3,067	22.0	34,302	0.7	59	1,701	12.2	18,781	0.7	35
5 and younger	0	0.0	0	0.0	0	1	20.0	12	1.1	15	3	60.0	36	0.5	25
6-14	0	0.0	0	0.0	0	1	12.5	11	1.1	21	6	75.0	71	1.0	54
15-20	8	8.5	93	0.2	13	16	17.0	192	1.2	125	14	14.9	161	0.5	45
21-44	756	12.6	8,624	0.2	9	1,590	26.4	17,944	0.7	65	337	5.6	3,745	0.6	32
45-64	922	17.6	10,338	0.4	19	1,192	22.8	13,108	0.8	55	745	14.2	8,031	0.7	35
65-74	490	26.6	5,650	0.4	24	191	10.4	2,198	0.6	35	406	22.1	4,625	0.7	35
75-84	175	28.5	1,981	0.4	22	61	9.9	663	0.7	33	156	25.4	1,748	0.7	36
85 and older	35	22.0	384	0.4	26	15	9.4	174	0.6	26	34	21.4	364	0.7	33
<b>Other Eligibles</b>	1,746	21.1	18,817	0.5	31	1,150	13.9	11,542	0.7	38	1,568	19.0	16,536	0.7	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	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	100.0	12	0.7	44
21-44	15	19.7	151	0.3	11	16	21.1	126	0.6	91	6	7.9	60	0.2	12
45-64	1	2.3	4	0.3	20	3	6.8	23	0.4	40	5	11.4	23	0.4	21
65-74	481	19.4	5,184	0.4	27	396	15.9	4,191	0.8	42	477	19.2	5,169	0.7	34
75-84	693	21.6	7,563	0.5	32	463	14.4	4,622	0.7	36	634	19.8	6,742	0.7	34
85 and older	556	22.7	5,915	0.5	33	272	11.1	2,580	0.7	31	445	18.1	4,530	0.8	34
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Table D7C

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2001 file for Arkansas, released by CMS in 06/2005. This table was produced on 09/19/2006.

- 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 2001. 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 2001. For information about these drug groups, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).
- Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.7D  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR NINTH AND TENTH TOP DRUG GROUPS  
 SEPARATELY, BY SEX, BOE, AND AGE<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, ARKANSAS, 2001

Beneficiary Characteristics	ANALGESICS - Narcotic				ANTHYPERLIPIDEMIC							
	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Bene Mos	
<b>All</b>	<b>32,452</b>	<b>46.4 %</b>	<b>356,456</b>	<b>0.3</b>	<b>\$15</b>	<b>8,634</b>	<b>12.4 %</b>	<b>96,994</b>	<b>0.6</b>	<b>\$50</b>	<b>69,902</b>	<b>738,040</b>
<b>Female</b>	23,930	50.2	265,071	0.3	15	6,525	13.7	73,782	0.6	50	47,669	509,343
<b>Disabled</b>	12,007	58.9	136,453	0.3	16	3,255	16.0	37,212	0.6	49	20,385	224,424
5 and younger	1	50.0	12	0.1	1	0	0.0	0	0.0	0	2	24
6-14	2	50.0	24	0.1	1	2	50.0	24	0.6	43	4	48
15-20	34	54.0	406	0.2	8	1	1.6	12	0.9	69	63	716
21-44	3,062	64.4	34,861	0.3	16	212	4.5	2,410	0.5	40	4,751	51,803
45-64	4,784	62.8	53,376	0.4	21	1,384	18.2	15,527	0.6	46	7,617	81,248
65-74	2,513	53.1	29,173	0.3	13	1,172	24.8	13,601	0.6	52	4,734	53,908
75-84	1,263	51.3	14,646	0.3	11	428	17.4	4,997	0.6	53	2,461	28,198
85 and older	348	46.2	3,955	0.3	8	56	7.4	641	0.7	52	753	8,479
<b>Other Eligibles</b>	11,923	43.7	128,618	0.3	13	3,270	12.0	36,570	0.7	51	27,284	284,919
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	11.1	9	0.1	1	0	0.0	0	0.0	0	9	86
21-44	145	39.6	1,390	0.4	24	6	1.6	45	0.5	42	366	3,451
45-64	35	46.1	336	0.4	24	7	9.2	60	0.2	20	76	644
65-74	2,220	44.2	24,247	0.3	15	967	19.3	10,795	0.6	51	5,018	52,627
75-84	4,796	46.1	52,505	0.4	13	1,664	16.0	18,776	0.7	52	10,396	110,651
85 and older	4,726	41.4	50,131	0.3	12	626	5.5	6,894	0.7	50	11,419	117,460
<b>Male</b>	8,522	38.3	91,385	0.3	17	2,109	9.5	23,212	0.6	48	22,233	228,697
<b>Disabled</b>	5,578	39.9	61,483	0.3	20	1,390	10.0	15,459	0.6	48	13,964	147,786
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	5	58
6-14	1	12.5	12	0.2	1	1	12.5	11	0.4	28	8	95
15-20	33	35.1	393	0.3	5	0	0.0	0	0.0	0	94	1,013
21-44	2,414	40.2	26,928	0.3	21	292	4.9	3,291	0.5	39	6,012	64,189
45-64	2,116	40.4	22,793	0.4	22	707	13.5	7,733	0.6	49	5,232	53,436
65-74	725	39.4	8,144	0.3	13	316	17.2	3,551	0.7	56	1,840	20,487
75-84	228	37.1	2,543	0.3	11	67	10.9	795	0.6	44	614	6,789
85 and older	61	38.4	670	0.3	9	7	4.4	78	0.5	37	159	1,719
<b>Other Eligibles</b>	2,944	35.6	29,902	0.3	12	719	8.7	7,753	0.6	48	8,269	80,911
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12
21-44	56	73.7	482	0.5	57	4	5.3	29	0.6	59	76	544
45-64	23	52.3	176	0.6	22	6	13.6	48	0.6	34	44	198
65-74	873	35.1	9,056	0.3	12	298	12.0	3,263	0.6	48	2,485	24,806
75-84	1,135	35.4	11,742	0.3	12	317	9.9	3,388	0.6	47	3,209	31,903
85 and older	857	34.9	8,446	0.3	9	94	3.8	1,025	0.6	49	2,454	23,448
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0

Table D7D

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2001 file for Arkansas, released by CMS in 06/2005. This table was produced on 09/19/2006.

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 2001. 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 2001. For information about these drug groups, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Center for Medicare and 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<sup>a, b</sup>  
 DUAL ELIGIBLE BENEFICIARIES, ARKANSAS, 2001**

Beneficiary Characteristics	Rx \$ per Bene Mo	No. of Rx per Bene Mo	Bene Mos among All-Year NF Residents	All-Year NF Residents
<b>All</b>	<b>\$260</b>	<b>5.8</b>	<b>13,350</b>	<b>133,883</b>
<b>Age</b>				
0-64	310	5.8	1,015	10,963
65-74	308	6.2	1,670	17,271
75-84	284	6.3	4,244	42,452
85 and older	221	5.4	6,421	63,197
Unknown	0	0.0	0	0
<b>Gender</b>				
Female	261	5.9	9,888	100,382
Male	258	5.5	3,462	33,501
Unknown	0	0.0	0	0
<b>Race</b>				
White	266	6	11,030	109,568
African American	225	4.9	2,096	21,974
Other/unknown	279	5.9	224	2,341
<b>Basis of Eligibility<sup>c</sup></b>				
Aged	256	5.8	11,814	117,050
Disabled	286	5.6	1,536	16,833
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 2001 file for Arkansas, released by CMS in 06/2005. This table was produced on 09/19/2006.

a. Table D.8 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their 2001 Medicaid enrollment. A total of 4,041 beneficiaries who were in nursing facilities for part of their enrollment and their 39,481 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 = Center for Medicare and 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<sup>a, b, c, d, e</sup>  
 DUAL ELIGIBLE BENEFICIARIES, ARKANSAS, 2001

Therapeutic Category	No. of Rx per Bene Mo among Users			\$ per Bene Mo among Users			Total # of Rx			Total Rx \$			Users		
	Total	Patented	Off-Patent	Total	Patented	Off-Patent	Total	Patented	Off-Patent	Total	Rx \$	Patented	Off-Patent	No.	As % of Dual All-Year NF Residents
		Brand-Name	Generic		Brand-Name	Generic		Brand-Name	Generic		Brand-Name	Generic	Brand-Name	Generic	
Anti-infective Agents	0.4	0.2	0.0	0.2	\$0	\$2	\$48	\$15	\$47	\$15	34,808	\$1,658,521	9,360	70.1	97,903
Biologics	0.1	0.1	0.0	0.0	6	0	74	102	0	18	3	222	3	0.0	36
Antineoplastic Agents	0.6	0.1	0.1	0.3	66	15	117	161	200	71	6,551	768,539	1,183	8.9	11,626
Endocrine/Metabolic Drugs	1.1	0.5	0.2	0.3	37	30	34	56	16	11	64,699	2,199,473	5,776	43.3	59,869
Cardiovascular Agents	2.0	0.5	0.2	1.3	46	23	23	46	20	15	197,569	4,586,523	9,726	72.9	98,859
Respiratory Agents	0.6	0.2	0.0	0.3	23	14	40	58	26	25	29,816	1,186,683	5,037	37.7	52,626
Gastrointestinal Agents	1.0	0.4	0.1	0.5	56	41	58	104	68	20	64,176	3,696,581	6,338	47.5	65,534
Genitourinary Agents	0.6	0.5	0.0	0.2	36	32	56	70	47	19	19,838	1,104,481	2,901	21.7	30,579
CNS Drugs	1.5	0.8	0.1	0.5	103	83	70	99	90	22	135,555	9,530,898	9,009	67.5	92,534
Stimulants/Anti-obesity/Anorexia	0.5	0.1	0.0	0.5	14	6	27	108	14	19	413	11,295	75	0.6	783
Miscellaneous Psychological/Neurological Agents	0.8	0.8	0.0	0.0	95	95	120	123	0	25	13,550	1,631,434	1,676	12.6	17,168
Analgesics and Anesthetics	0.8	0.4	0.0	0.4	37	31	48	82	41	14	53,062	2,525,307	6,585	49.3	67,626
Neuromuscular Agents	1.2	0.4	0.1	0.6	58	35	50	84	42	29	47,726	2,391,758	3,943	29.5	41,162
Nutritional Products	0.8	0.0	0.2	0.6	14	0	17	24	29	13	40,195	696,139	4,928	36.9	50,604
Hematological Agents	0.9	0.3	0.2	0.5	43	32	46	128	18	16	38,383	1,784,370	4,080	30.6	41,334
Topical Products	0.4	0.2	0.0	0.2	14	9	34	51	46	17	27,991	953,166	6,540	49.0	70,102
Miscellaneous Products	0.2	0.0	0.0	0.2	7	1	34	42	170	31	846	28,691	398	3.0	4,001
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	6	0	20	0	0	0	1,225	24,312	416	3.1	4,419
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.	776,406	34,778,393	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2001 file for Arkansas, released by CMS in 06/2005. This table was produced on 09/19/2006.

- 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 2001. A total of 4,041 beneficiaries who were in nursing facilities for part of their enrollment and their 39,481 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 2001. 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/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).
- 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/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003). In Arkansas, 0.3 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.

Bene Mo(s) = benefit month(s); CMS = Center for Medicare and 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<sup>a, b, c, d</sup>  
 DUAL ELIGIBLE BENEFICIARIES, ARKANSAS, 2001

Top 10 Drug Groups in Nursing Facilities	Users				Among Users		
	Total Medicaid Rx \$	No. of Users	As % of All-Year NF Residents	No. of Bene Mos	No. of Rx per Bene Mo	\$ per Rx	Rx \$ per Bene Mo
ANTIPSYCHOTICS	\$4,843,851	5,436	40.7 %	57,961	0.8	\$111	\$84
ANTIDEPRESSANTS	3,721,267	7,360	55.1	77,157	0.8	59	48
ULCER DRUGS	3,311,584	6,130	45.9	64,735	0.7	71	51
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	1,631,434	1,598	12.0	16,790	0.8	120	97
ANTICONVULSANT	1,640,404	3,249	24.3	34,640	0.9	53	47
ANALGESICS - ANTI-INFLAMMATORY	1,534,244	3,269	24.5	35,165	0.7	67	44
ANTIHYPERTENSIVE	1,349,932	4,928	36.9	51,291	0.8	31	26
CALCIUM BLOCKERS	1,086,871	2,740	20.5	28,415	0.9	42	38
MISC. HEMATOLOGICAL	1,020,007	1,629	12.2	16,910	0.8	76	60
ANTIDIABETIC	982,792	2,530	19.0	26,829	0.8	46	37
<b>Total</b>	<b>21,122,386</b>	<b>38,869</b>		<b>409,893</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>

Source: Data for this table are from the MAX 2001 file for Arkansas, released by CMS in 06/2005. This table was produced on 09/19/2006.

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 2001. A total of 4,041 beneficiaries who were in nursing facilities for part of their enrollment and their 39,481 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 2001. 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 2001 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/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).

Bene Mo(s) = benefit month(s); CMS = Center for Medicare and 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, BOE, AND AGE<sup>a, b, c, d</sup>  
DUAL ELIGIBLE BENEFICIARIES, ARKANSAS, 2001

Beneficiary Characteristics	All Top 10 Drug Groups					ANTIPSYCHOTICS					ANTIDEPRESSANTS				
	No. of Rx	Rx \$	Users as %			Mean Rx \$	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	Users as % of All-Year Residents	No. of Bene Mos among Users	Mean No. of Rx	No. of Users	No. of Bene Mos among Users	Mean No. of Rx
			No. of Users	Residents	NF										
<b>All</b>	<b>324,520</b>	<b>\$21,122,386</b>	<b>5,436</b>	<b>40.7 %</b>	<b>57,961</b>	<b>0.8</b>	<b>\$84</b>	<b>7,360</b>	<b>55.1 %</b>	<b>77,157</b>	<b>0.8</b>	<b>\$48</b>	<b>7,360</b>	<b>55.1 %</b>	<b>\$48</b>
<b>Female</b>	243,243	15,789,252	3,867	39.1	41,390	0.7	83	5,668	57.3	59,884	0.8	48	5,668	57.3	48
<b>Disabled</b>	24,414	1,749,855	499	59.2	5,757	0.8	103	438	52.0	4,805	0.8	52	438	52.0	52
64 or younger	14,405	1,094,094	272	56.2	3,164	0.8	119	298	61.6	3,248	0.9	54	298	61.6	54
65-74	3,037	212,169	78	75.7	915	0.8	97	34	33.0	375	0.8	53	34	33.0	53
75-84	4,691	307,463	107	64.1	1,228	0.8	86	75	44.9	831	0.8	46	75	44.9	46
85 and older	2,281	136,129	42	47.2	450	0.5	50	31	34.8	351	0.8	45	31	34.8	45
<b>Other Eligibles</b>	218,829	14,039,397	3,368	37.2	35,633	0.7	79	5,230	57.8	55,079	0.8	48	5,230	57.8	48
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0
65-74	28,743	2,046,492	526	57.7	5,814	0.8	102	636	69.8	6,799	0.8	53	636	69.8	53
75-84	80,484	5,279,994	1,264	43.4	13,395	0.8	82	1,903	65.3	20,173	0.8	49	1,903	65.3	49
85 and older	109,602	6,712,911	1,578	30.2	16,424	0.7	69	2,691	51.5	28,107	0.8	47	2,691	51.5	47
<b>Male</b>	81,277	5,333,134	1,569	45.3	16,571	0.8	86	1,692	48.9	17,273	0.8	48	1,692	48.9	48
<b>Disabled</b>	19,489	1,435,065	453	65.4	5,236	0.9	107	300	43.3	3,339	0.8	51	300	43.3	51
64 or younger	15,360	1,152,634	335	63.1	3,865	0.9	115	236	44.4	2,602	0.8	51	236	44.4	51
65-74	1,816	138,549	45	68.2	530	0.9	107	26	39.4	310	0.8	53	26	39.4	53
75-84	1,663	110,217	54	85.7	624	0.7	76	28	44.4	329	0.8	47	28	44.4	47
85 and older	650	33,665	19	57.6	217	0.8	60	10	30.3	98	0.9	62	10	30.3	62
<b>Other Eligibles</b>	61,788	3,898,069	1,116	40.3	11,335	0.7	77	1,392	50.3	13,934	0.8	47	1,392	50.3	47
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0
65-74	15,648	1,006,068	286	48.5	3,059	0.8	92	305	51.7	3,146	0.8	49	305	51.7	49
75-84	25,170	1,592,631	449	40.8	4,566	0.8	77	554	50.3	5,601	0.8	49	554	50.3	49
85 and older	20,970	1,299,370	381	35.3	3,710	0.7	64	533	49.4	5,187	0.8	43	533	49.4	43
<b>Unknown</b>	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 2001 file for Arkansas, released by CMS in 06/2005. This table was produced on 09/19/2006.

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 2001. A total of 4,041 beneficiaries who were in nursing facilities for part of their enrollment and their 39,481 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 2001. 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 2001 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/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).

Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Center for Medicare and 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, BOE, AND AGE<sup>a, b, c, d</sup>  
 DUAL ELIGIBLE BENEFICIARIES, ARKANSAS, 2001

Beneficiary Characteristics	ULCER DRUGS						MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL						ANTICONVULSANT					
	Users as %			Users as %			Users as %			Users as %			Users as %			Users as %		
	No. of Users	No. of Bene among Users	Mean No. of Rx	No. of Users	No. of Bene among Users	Mean No. of Rx	No. of Users	No. of Bene among Users	Mean No. of Rx	No. of Users	No. of Bene among Users	Mean No. of Rx	No. of Users	No. of Bene among Users	Mean No. of Rx	No. of Users	No. of Bene among Users	Mean No. of Rx
<b>All</b>	<b>6,130</b>	<b>45.9 %</b>	<b>0.7</b>	<b>1,598</b>	<b>12.0 %</b>	<b>0.8</b>	<b>3,249</b>	<b>24.3 %</b>	<b>0.9</b>	<b>34,640</b>	<b>0.9</b>	<b>\$47</b>						
<b>Female</b>	4,602	46.5	0.7	1,234	12.5	0.8	2,216	22.4	0.9	23,816	0.9	45						
<b>Disabled</b>	389	46.1	0.7	53	6.3	0.7	363	43.1	1.0	4,104	1.0	61						
64 or younger	211	43.6	0.7	25	5.2	0.6	289	55.4	1.0	3,032	1.0	67						
65-74	50	48.5	0.7	4	4.9	0.5	60	35.0	0.9	408	0.9	63						
75-84	75	44.9	0.8	12	7.2	0.8	144	26.9	0.9	506	0.9	38						
85 and older	53	59.6	0.7	11	12.4	0.8	112	15.7	0.6	158	0.6	25						
<b>Other Eligibles</b>	4,213	46.6	0.7	1,181	13.1	0.8	1,853	20.5	0.9	19,712	0.9	42						
64 or younger	0	0.0	0.0	0	0.0	0.0	0	0.0	0.0	0	0.0	0						
65-74	413	45.3	0.7	96	10.5	0.8	411	45.1	0.9	4,482	0.9	54						
75-84	1,433	49.2	0.7	460	15.8	0.8	743	25.5	0.9	7,942	0.9	42						
85 and older	2,367	45.3	0.7	625	12.0	0.8	699	13.4	0.8	7,288	0.8	35						
<b>Male</b>	1,528	44.1	0.7	364	10.5	0.8	1,033	29.8	0.9	10,824	0.9	52						
<b>Disabled</b>	296	42.7	0.7	31	4.5	0.6	391	56.4	1.0	4,437	1.0	63						
64 or younger	239	45.0	0.7	22	4.1	0.7	334	62.9	1.0	3,786	1.0	66						
65-74	19	28.8	0.8	2	3.0	0.3	30	45.5	0.9	340	0.9	45						
75-84	23	36.5	0.7	7	11.1	0.7	20	31.7	1.0	230	1.0	46						
85 and older	15	45.5	0.6	0	0.0	0.0	7	21.2	0.8	81	0.8	29						
<b>Other Eligibles</b>	1,232	44.5	0.7	333	12.0	0.8	642	23.2	0.9	6,387	0.9	44						
64 or younger	0	0.0	0.0	0	0.0	0.0	0	0.0	0.0	0	0.0	0						
65-74	261	44.2	0.7	52	8.8	0.9	188	31.9	0.9	2,010	0.9	51						
75-84	472	42.9	0.7	126	11.4	0.8	285	25.9	0.9	2,791	0.9	43						
85 and older	499	46.3	0.7	155	14.4	0.8	169	15.7	0.8	1,586	0.8	38						
<b>Unknown</b>	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 2001 file for Arkansas, released by CMS in 06/2005. This table was produced on 09/19/2006.

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 2001. A total of 4,041 beneficiaries who were in nursing facilities for part of their enrollment and their 39,481 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 2001. 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 2001 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/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).

Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Center for Medicare and 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, BOE, AND AGE<sup>a, b, c, d</sup>  
 DUAL ELIGIBLE BENEFICIARIES, ARKANSAS, 2001

Beneficiary Characteristics	ANALGESICS - ANTI-INFLAMMATORY					ANTIHYPERTENSIVE					CALCIUM BLOCKERS				
	Users as %					Users as %					Users as %				
	No. of Users	No. of Bene Mos among Residents	Mean No. of Rx	Mean Rx \$	Mean No. of Rx	No. of Users	No. of Bene Mos among Residents	Mean No. of Rx	Mean Rx \$	Mean No. of Rx	No. of Users	No. of Bene Mos among Residents	Mean No. of Rx	Mean Rx \$	Mean No. of Rx
<b>All</b>	<b>3,269</b>	<b>24.5 %</b>	<b>0.7</b>	<b>\$44</b>	<b>0.7</b>	<b>4,928</b>	<b>36.9 %</b>	<b>0.8</b>	<b>\$26</b>	<b>0.8</b>	<b>2,740</b>	<b>20.5 %</b>	<b>28,415</b>	<b>0.9</b>	<b>\$38</b>
<b>Female</b>	2,574	26.0	0.7	45	0.7	3,643	36.8	0.8	26	0.8	2,138	21.6	22,278	0.9	38
<b>Disabled</b>	211	25.0	0.7	38	0.7	302	35.8	0.9	27	0.9	138	16.4	1,544	0.9	41
64 or younger	104	21.5	0.6	31	0.6	152	31.4	0.9	30	0.9	68	14.0	777	0.9	45
65-74	38	36.9	0.7	40	0.7	36	35.0	0.8	25	0.8	20	19.4	205	0.9	36
75-84	40	24.0	0.8	49	0.8	73	43.7	0.8	24	0.8	27	16.2	316	0.8	39
85 and older	29	32.6	0.6	44	0.6	41	46.1	0.9	26	0.9	23	25.8	246	0.9	31
<b>Other Eligibles</b>	2,363	26.1	0.7	46	0.7	3,341	36.9	0.8	26	0.8	2,000	22.1	20,734	0.9	38
64 or younger	0	0.0	0.0	0	0.0	0	0.0	0.0	0	0.0	0	0.0	0	0.0	0
65-74	234	25.7	0.6	45	0.6	368	40.4	0.8	27	0.8	206	22.6	2,249	0.9	43
75-84	872	29.9	0.7	46	0.7	1,131	38.8	0.8	27	0.8	680	23.3	7,063	0.9	38
85 and older	1,257	24.1	0.7	45	0.7	1,842	35.3	0.8	26	0.8	1,114	21.3	11,422	0.9	37
<b>Male</b>	695	20.1	0.6	39	0.6	1,285	37.1	0.9	26	0.9	602	17.4	6,137	0.9	38
<b>Disabled</b>	109	15.7	0.5	24	0.5	239	34.5	0.9	27	0.9	106	15.3	1,175	0.9	41
64 or younger	79	14.9	0.6	24	0.6	191	36.0	0.9	27	0.9	75	14.1	813	0.8	39
65-74	11	16.7	0.5	20	0.5	25	37.9	0.9	34	0.9	13	19.7	156	1.0	50
75-84	14	22.2	0.5	25	0.5	13	20.6	1.0	20	1.0	14	22.2	158	0.8	36
85 and older	5	15.2	0.4	26	0.4	10	30.3	0.9	23	0.9	4	12.1	48	1.3	58
<b>Other Eligibles</b>	586	21.2	0.7	42	0.7	1,046	37.8	0.8	26	0.8	496	17.9	4,962	0.9	38
64 or younger	0	0.0	0.0	0	0.0	0	0.0	0.0	0	0.0	0	0.0	0	0.0	0
65-74	112	19.0	0.7	41	0.7	229	38.8	0.9	26	0.9	122	20.7	1,275	1.0	40
75-84	249	22.6	0.6	42	0.6	454	41.2	0.8	27	0.8	196	17.8	1,989	0.9	38
85 and older	225	20.9	0.7	43	0.7	363	33.7	0.8	25	0.8	178	16.5	1,698	0.9	36
<b>Unknown</b>	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 2001 file for Arkansas, released by CMS in 06/2005. This table was produced on 09/19/2006.

- 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 2001. A total of 4,041 beneficiaries who were in nursing facilities for part of their enrollment and their 39,481 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 2001. 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 2001 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/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).
- Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Center for Medicare and 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, BOE, AND AGE<sup>a, b, c, d</sup>  
 DUAL ELIGIBLE BENEFICIARIES, ARKANSAS, 2001

Beneficiary Characteristics	MISC. HEMATOLOGICAL					ANTI-DIABETIC						
	Users as %		No. of Bene		Mean Rx \$	Users as %		No. of Bene		Mean Rx \$		
	No. of Users	Residents	NF	Mos among Users		No. of Users	Residents	NF	Mos among Users			
<b>All</b>	<b>1,629</b>	<b>12.2 %</b>	<b>16,910</b>	<b>0.8</b>	<b>\$60</b>	<b>2,530</b>	<b>19.0 %</b>	<b>26,929</b>	<b>0.8</b>	<b>\$37</b>	<b>13,350</b>	<b>133,883</b>
<b>Female</b>	1,201	12.1	12,578	0.8	61	1,852	18.7	19,929	0.8	37	9,888	100,382
<b>Disabled</b>	75	8.9	810	0.8	51	199	23.6	2,281	0.8	39	843	9,207
64 or younger	32	6.6	326	0.8	59	102	21.1	1,156	0.8	46	484	5,189
65-74	7	6.8	84	0.9	65	28	27.2	326	0.7	34	103	1,174
75-84	23	13.8	268	0.8	41	49	29.3	569	0.7	32	167	1,876
85 and older	13	14.6	132	0.8	45	20	22.5	230	0.9	32	89	968
<b>Other Eligibles</b>	1,126	12.4	11,768	0.8	62	1,653	18.3	17,648	0.8	36	9,045	91,175
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	113	12.4	1,228	0.8	66	246	27.0	2,709	0.8	44	911	9,569
75-84	379	13.0	4,077	0.8	62	696	23.9	7,445	0.8	37	2,913	29,554
85 and older	634	12.1	6,463	0.8	61	711	13.6	7,494	0.8	32	5,221	52,052
<b>Male</b>	428	12.4	4,332	0.8	58	678	19.6	6,900	0.8	37	3,462	33,501
<b>Disabled</b>	47	6.8	524	0.8	56	98	14.1	1,100	0.7	42	693	7,626
64 or younger	33	6.2	366	0.9	68	69	13.0	752	0.7	39	531	5,774
65-74	3	4.5	36	0.7	46	14	21.2	168	0.8	74	66	760
75-84	9	14.3	98	0.5	26	11	17.5	132	0.7	24	63	729
85 and older	2	6.1	24	0.6	22	4	12.1	48	0.8	33	33	363
<b>Other Eligibles</b>	381	13.8	3,808	0.8	58	580	20.9	5,800	0.8	35	2,769	25,875
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	75	12.7	770	0.8	57	184	31.2	1,896	0.8	41	590	5,768
75-84	146	13.3	1,498	0.8	63	233	21.2	2,309	0.8	33	1,101	10,293
85 and older	160	14.8	1,540	0.8	54	163	15.1	1,595	0.8	32	1,078	9,814
<b>Unknown</b>	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 2001 file for Arkansas, released by CMS in 06/2005. This table was produced on 09/19/2006.

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 2001. A total of 4,041 beneficiaries who were in nursing facilities for part of their enrollment and their 39,481 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 2001. 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 2001 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/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).

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

TABLE D.11  
 USE OF AND REIMBURSEMENT FOR PART D EXCLUDED DRUGS AMONG DUALS  
 BY BENEFICIARY CHARACTERISTIC<sup>a,b</sup>  
 ARKANSAS, 2001

Beneficiary Characteristics	No. of Benes with at Least One Part D Excl Rx	% Benes with at Least One Part D Excl Rx	No. of Part D Excl Rx per Bene		Total No. Part D Excl Rx	Total Part D Excl Rx \$	\$ per Part D Excl Rx	Part D Excl Rx as % of All Rx \$	Total No. of Benes
			2.6	41.2 %					
<b>All</b>	<b>28,823</b>	<b>41.2 %</b>	<b>2.6</b>	<b>184,727</b>	<b>\$60</b>	<b>\$4,206,134</b>	<b>\$23</b>	<b>3.5 %</b>	<b>69,902</b>
<b>Age</b>									
5 and younger	5	71.4	13.9	97	561	3,924	40	9.8	7
6-14	9	75.0	8.9	107	163	1,954	18	1.9	12
15-20	56	33.5	2.0	332	62	10,414	31	2.9	167
21-44	3,026	27.0	1.4	16,131	43	483,392	30	2.8	11,205
45-64	4,715	36.4	2.2	29,120	57	737,587	25	3.1	12,969
65-74	5,436	38.6	2.5	34,816	60	850,030	24	3.5	14,077
75-84	7,826	46.9	3.1	52,268	68	1,126,502	22	3.6	16,680
85 and older	7,750	52.4	3.5	51,856	67	992,331	19	3.9	14,785
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
<b>Basis of Eligibility<sup>c</sup></b>									
Aged	16,541	47.3	3.1	110,128	65	2,273,650	21	3.6	34,973
Disabled	12,164	35.4	2.2	74,101	56	1,919,693	26	3.3	34,349
Adults	118	20.3	0.9	498	22	12,791	26	3.2	580
Children	0	0.0	0.0	0	0	0	0	0.0	0
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
<b>Gender</b>									
Female	21,552	45.2	2.9	140,161	65	3,087,508	22	3.5	47,669
Male	7,271	32.7	2.0	44,566	50	1,118,626	25	3.3	22,233
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
<b>Race</b>									
White	20,652	44.3	2.9	137,283	67	3,103,981	23	3.5	46,652
African American	6,575	34.9	2.0	37,750	47	878,937	23	3.4	18,854
Other/unknown	1,596	36.3	2.2	9,694	51	223,216	23	3.3	4,396
<b>Use of Nursing Facilities<sup>d</sup></b>									
Entire year	8,182	61.3	4.8	63,963	96	1,275,155	20	3.7	13,350
Part year	2,558	63.3	3.5	14,255	72	289,618	20	3.4	4,041
None	18,083	34.4	2.0	106,509	50	2,641,361	25	3.4	52,511
<b>Maintenance Assistance Status</b>									
Cash	15,247	35.0	2.1	91,775	52	2,244,782	24	3.3	43,517
Medically needy	462	27.9	0.9	1,409	30	50,198	36	3.1	1,653
Poverty related	147	26.4	1.0	532	31	17,399	33	5.0	556
Other/unknown	12,967	53.6	3.8	91,011	78	1,893,755	21	3.6	24,176

Source: Data for this table are from the MAX 2001 file for Arkansas, released by CMS in 06/2005. This table was produced on 09/19/2006.

- 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 2001.
  - b. 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 = Center for Medicare and Medicaid Services; Excl = excluded; MAX = Medicaid Analytic Extract; OTC = over-the-counter; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.12  
 USE OF AND REIMBURSEMENT FOR PART D EXCLUDED DRUGS AMONG DUALS PER BENEFIT MONTH  
 BY BENEFICIARY CHARACTERISTIC<sup>a,b</sup>  
 ARKANSAS, 2001

Beneficiary Characteristics	No. Rx per Bene Mo.	Rx \$ per Bene Mo.	\$ per Rx	Barbiturate \$ per Bene Mo.	Benzodiazapine \$ per Bene Mo.	No. of Bene Mos
	0.3	\$6	\$23	\$0	\$2	738,040
<b>Age</b>						
5 and younger	1.2	48	40	0	0	82
6-14	0.7	14	18	0	0	143
15-20	0.2	6	31	0	1	1,827
21-44	0.1	4	30	0	2	119,987
45-64	0.2	5	25	0	3	135,526
65-74	0.2	6	24	0	2	151,828
75-84	0.3	6	22	0	2	177,541
85 and older	0.3	7	19	0	2	151,106
Unknown	0.0	0	0	0	0	0
<b>Basis of Eligibility<sup>c</sup></b>						
Aged	0.3	6	21	0	2	360,875
Disabled	0.2	5	26	0	2	372,210
Adults	0.1	3	26	0	2	4,955
Children	0.0	0	0	0	0	0
Unknown	0.0	0	0	0	0	0
<b>Gender</b>						
Female	0.3	6	22	0	2	509,343
Male	0.2	5	25	0	2	228,697
Unknown	0.0	0	0	0	0	0
<b>Race</b>						
White	0.3	6	23	0	3	486,214
African American	0.2	4	23	0	1	204,852
Other/unknown	0.2	5	23	0	2	46,974
<b>Use of Nursing Facilities<sup>d</sup></b>						
Entire year	0.5	10	20	0	2	133,883
Part year	0.4	7	20	0	2	39,481
None	0.2	5	25	0	2	564,676
<b>Maintenance Assistance Status</b>						
Cash	0.2	5	24	0	2	483,028
Medically needy	0.2	7	36	0	3	7,463
Poverty related	0.1	3	33	0	1	5,039
Other/unknown	0.4	8	21	0	2	242,510

Source: Data for this table are from the MAX 2001 file for Arkansas, released by CMS in 06/2005. This table was produced on 09/19/2006.

- 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 2001.
- b. 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 = Center for Medicare and Medicaid Services; Excl = excluded; MAX = Medicaid Analytic Extract; OTC = over-the-counter; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.



TABLE D.13  
 USE OF AND REIMBURSEMENT FOR PART D EXCLUDED DRUGS FOR SELECTED DRUG CATEGORIES AMONG DUALS<sup>a,b,c</sup>  
 ARKANSAS, 2001

Drug Category	No. Users	Rx \$ per User	Total Rx \$	Rx \$ as % of All Part D Excl Rx \$	Total No. Rx.	\$ per Rx	No. Rx as % of All Part D Excl Rx
<b>All</b>	<b>34,593</b>	<b>\$122</b>	<b>\$4,206,134</b>	<b>100.0 %</b>	<b>184,727</b>	<b>\$23</b>	<b>100.0 %</b>
Anorexia or weight loss/gain	769	183	140,916	3.4	1,169	121	0.6
Fertility drugs	2	86	171	0.0	2	86	0.0
Drugs for cosmetic purposes	324	680	220,202	5.2	2,033	108	1.1
Cough and cold medications	1,917	75	143,596	3.4	4,532	32	2.5
Vitamins and minerals	14,609	123	1,798,905	42.8	93,073	19	50.4
Non-prescription drugs	2,724	79	214,030	5.1	8,690	25	4.7
Barbiturates	821	62	50,645	1.2	6,968	7	3.8
Benzodiazepines	12,444	126	1,567,808	37.3	65,752	24	35.6
Other Part D Excl Rx Drugs	983	71	69,861	1.7	2,508	28	1.4

Source: Data for this table are from the MAX 2001 file for Arkansas, released by CMS in 06/2005. This table was produced on 09/19/2006.

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 2001. A user is a beneficiary who had at least one prescription filled for a Part D excluded drug in 2001. 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. 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 = Center for Medicare and Medicaid Services; Excl = excluded; MAX = Medicaid Analytic Extract; OTC = over-the-counter; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.













APPENDIX TABLE A.3

CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY<sup>a, b</sup>  
DUAL ELIGIBLE BENEFICIARIES, ARKANSAS, 2001

Beneficiary Characteristics	No. of Benes					No. of Bene Mos				
	All	Aged	Disabled	Adults	Unknown	All	Aged	Disabled	Adults	Unknown
<b>All</b>	<b>69,902</b>	<b>34,973</b>	<b>34,349</b>	<b>580</b>	<b>0</b>	<b>738,040</b>	<b>360,875</b>	<b>372,210</b>	<b>4,955</b>	<b>0</b>
<b>Age</b>										
5 and younger	7	0	7	0	0	82	0	82	0	0
6-14	12	0	12	0	0	143	0	143	0	0
15-20	167	0	157	10	0	1,827	0	1,729	98	0
21-44	11,205	0	10,763	442	0	119,987	0	115,992	3,995	0
45-64	12,969	0	12,849	120	0	135,526	0	134,684	842	0
65-74	14,077	7,496	6,574	7	0	151,828	77,415	74,395	18	0
75-84	16,680	13,604	3,075	1	0	177,541	142,552	34,987	2	0
85 and older	14,785	13,873	912	0	0	151,106	140,908	10,198	0	0
Unknown	0	0	0	0	0	0	0	0	0	0
<b>Gender</b>										
Female	47,669	26,831	20,385	453	0	509,343	280,730	224,424	4,189	0
Male	22,233	8,142	13,964	127	0	228,697	80,145	147,786	766	0
Unknown	0	0	0	0	0	0	0	0	0	0
<b>Race</b>										
White	46,652	24,685	21,529	438	0	486,214	250,408	232,056	3,750	0
African American	18,854	8,219	10,496	139	0	204,852	88,205	115,471	1,176	0
Other/unknown	4,396	2,069	2,324	3	0	46,974	22,262	24,683	29	0
<b>Use of Nursing Facilities<sup>c</sup></b>										
Entire year	13,350	11,814	1,536	0	0	133,883	117,050	16,833	0	0
Part year	4,041	3,429	612	0	0	39,481	32,944	6,537	0	0
None	52,511	19,730	32,201	580	0	564,676	210,881	348,840	4,955	0
<b>Maintenance Assistance Status</b>										
Cash	43,517	14,191	29,205	121	0	483,028	157,826	324,205	997	0
Medically needy	1,653	210	1,263	180	0	7,463	775	5,625	1,063	0
Poverty related	556	168	348	40	0	5,039	1,653	3,095	291	0
Other/unknown	24,176	20,404	3,533	239	0	242,510	200,621	39,285	2,604	0
<b>Dual Status<sup>d</sup></b>										
Full dual, all year	68,607	34,244	33,793	570	0	724,948	353,160	366,932	4,856	0
Full dual, part year	1,295	729	556	10	0	13,092	7,715	5,278	99	0
<b>Managed Care Status</b>										
FFS all year	69,902	34,973	34,349	580	0	738,040	360,875	372,210	4,955	0
FFS part year, with Rx claims	0	0	0	0	0	0	0	0	0	0
FFS part year, no Rx claims	0	0	0	0	0	0	0	0	0	0
MC all year, with Rx claims	0	0	0	0	0	0	0	0	0	0
MC all year, no Rx claims	0	0	0	0	0	0	0	0	0	0



Source: Data for this table are from the MAX 2001 file for Arkansas, released by CMS in 06/2005. This table was produced on 09/19/2006.

- 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 2001. 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 Mo(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Center for Medicare and 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<sup>a</sup>  
 DUAL ELIGIBLE BENEFICIARIES, ARKANSAS, 2001

Beneficiary Characteristics	Benes and					
	Bene Mos in Cell F of Table 1		Included in Cell G of Table 1		Excluded from Cell G of Table 1	
	No. of Benes	No. of Bene Mos	No. of Benes	No. of Bene Mos	No. of Benes	No. of Bene Mos
<b>All</b>	<b>69,902</b>	<b>738,040</b>	<b>69,902</b>	<b>738,040</b>	<b>0</b>	<b>0</b>
FFS all year	69,902	738,040	69,902	738,040	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
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 2001 file for Arkansas, released by CMS in 06/2005. This table was produced on 09/19/2006.

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

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