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**STATISTICAL COMPENDIUM:
MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2005
ARKANSAS**

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TABLE ND.2
CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a, b}
NONDUAL BENEFICIARIES, ARKANSAS, 2005

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown
All	642,724	3,786	68,474	171,323	398,667	474	6,376,495	39,506	713,015	1,545,747	4,074,687	3,540
Age												
5 and younger	156,577	0	6,090	57	150,430	0	1,537,855	0	64,868	569	1,472,418	0
6-14	194,250	0	12,410	82	181,758	0	2,069,666	0	137,860	758	1,931,048	0
15-20	108,146	0	8,183	33,523	66,437	3	1,054,910	0	88,782	295,228	670,876	24
21-44	151,292	0	19,339	131,756	41	156	1,401,926	0	201,904	1,198,628	343	1,051
45-64	28,566	0	22,357	5,894	1	314	272,082	0	219,124	50,492	2	2,464
65-74	1,146	1,041	95	9	0	1	11,378	10,850	477	50	0	1
75-84	1,138	1,137	0	1	0	0	11,687	11,675	0	12	0	0
85 and older	1,609	1,608	0	1	0	0	16,991	16,981	0	10	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	394,959	2,478	34,072	159,781	198,154	474	3,875,816	26,250	359,630	1,453,558	2,032,838	3,540
Male	245,898	1,255	34,338	11,360	198,945	0	2,483,839	12,799	352,959	90,871	2,027,210	0
Unknown	1,867	53	64	182	1,568	0	16,840	457	426	1,318	14,639	0
Race												
White	384,815	2,000	32,930	108,904	240,618	363	3,802,944	20,318	336,677	982,780	2,460,474	2,695
African American	189,705	1,276	19,286	52,428	116,619	96	1,908,215	13,633	203,407	488,649	1,201,806	720
Other/unknown	68,204	510	16,258	9,991	41,430	15	665,336	5,555	172,931	74,318	412,407	125
Use of Nursing Facilities^c												
Entire year	306	143	162	1	0	0	1,931	890	1,040	1	0	0
Part year	1,120	349	768	3	0	0	12,189	3,637	8,528	24	0	0
None	641,298	3,294	67,544	171,319	398,667	474	6,362,375	34,979	703,447	1,545,722	4,074,687	3,540
Maintenance Assistance Status												
Cash	112,766	2,407	62,112	21,328	26,919	0	1,138,446	27,870	658,889	182,931	268,756	0
Medically needy	8,907	100	2,053	5,050	1,704	0	60,448	455	8,869	34,795	16,329	0
Poverty-related	299,693	3	13	37,773	261,430	474	2,941,599	34	108	286,977	2,650,940	3,540
Other/unknown	221,358	1,276	4,296	107,172	108,614	0	2,236,002	11,147	45,149	1,041,044	1,138,662	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	642,724	3,786	68,474	171,323	398,667	474	6,376,495	39,506	713,015	1,545,747	4,074,687	3,540
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 2005 file for Arkansas, released by CMS in 2/2009. This table was produced on 04/23/2009.

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

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

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

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

TABLE ND.3
ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC^{a, b}
NONDUAL BENEFICIARIES, ARKANSAS, 2005

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	59.9	6.0	\$401	\$67	\$2,469	16.2	642,724
Age							
5 and younger	73.7	5.3	235	44	2,556	9.2	156,577
6-14	63.5	5.1	382	74	1,818	21.0	194,250
15-20	56.7	5.0	364	73	2,444	14.9	108,146
21-44	41.4	5.0	355	72	2,151	16.5	151,292
45-64	73.4	23.8	1,766	74	7,785	22.7	28,566
65-74	47.3	18.2	1,123	62	7,229	15.5	1,146
75-84	35.3	15.5	896	58	6,579	13.6	1,138
85 and older	15.2	7.1	364	52	3,501	10.4	1,609
Unknown	0.0	0.0	0	0	0	0.0	0
Basis of Eligibility^e							
Aged	29.9	12.8	747	58	5,465	13.7	3,786
Disabled	80.5	20.5	1,977	97	10,807	18.3	68,474
Adults	38.9	3.2	145	46	1,061	13.7	171,323
Children	65.6	4.6	236	51	1,601	14.7	398,667
Unknown	90.1	14.8	1,167	79	12,843	9.1	474
Gender							
Female	56.1	5.7	338	59	2,059	16.4	394,959
Male	66.1	6.4	503	78	3,130	16.1	245,898
Unknown	53.0	4.8	257	54	2,008	12.8	1,867
Race							
White	61.7	6.4	426	66	2,387	17.9	384,815
African American	56.2	4.9	293	60	2,159	13.6	189,705
Other/unknown	59.6	6.4	554	87	3,791	14.6	68,204
Use of Nursing Facilities^f							
Entire year	92.5	50.6	3,229	64	32,334	10.0	306
Part year	96.4	75.9	5,368	71	44,209	12.1	1,120
None	59.8	5.8	391	67	2,382	16.4	641,298
Maintenance Assistance Status							
Cash	73.5	14.4	1,242	86	6,558	18.9	112,766
Medically needy	66.8	7.9	533	68	4,481	11.9	8,907
Poverty related	67.1	4.7	224	48	1,757	12.7	299,693
Other/unknown	42.9	3.4	206	61	1,270	16.2	221,358

Source: Data for this table are from the MAX 2005 file for Arkansas, released by CMS in 2/2009. This table was produced on 04/23/2009.

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

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

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

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

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

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

Bene(s) = beneficiary (or beneficiaries); 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 ND.4
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a, b}
 NONDUAL BENEFICIARIES, ARKANSAS, 2005

Beneficiary Characteristics	Mean Number of Rx	Mean Rx \$	Number of Rx, Percentage with:							Mean \$, All Medicaid FFS \$ ^d	Number	
			Rx \$ as a Percentage of All Medicaid FFS \$ ^c	None	More than 0, but 1 or Less	More than 1, but 2 or Less	More than 2, but 5 or Less	More than 5, but 10 or Less	More than 10		Beneficiaries	Benefit Months
All	0.6	\$40	16.2	40.1	49.0	5.5	4.5	0.8	0.1	\$249	642,724	6,376,495
Age												
5 and younger	0.5	24	9.2	26.3	65.9	5.8	1.9	0.1	0.0	260	156,577	1,537,855
6-14	0.5	36	21.0	36.5	55.5	4.8	2.9	0.3	0.0	171	194,250	2,069,666
15-20	0.5	37	14.9	43.3	48.2	5.0	3.0	0.4	0.0	251	108,146	1,054,910
21-44	0.5	38	16.5	58.6	30.5	5.1	5.0	0.7	0.0	232	151,292	1,401,926
45-64	2.5	185	22.7	26.6	18.5	13.4	31.3	9.6	0.6	817	28,566	272,082
65-74	1.8	113	15.5	52.7	9.5	7.9	18.8	9.2	1.9	728	1,146	11,378
75-84	1.5	87	13.6	64.7	7.3	4.3	13.3	8.6	1.8	641	1,138	11,687
85 and older	0.7	35	10.4	84.8	1.7	2.2	5.6	4.9	0.8	332	1,609	16,991
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	1.2	72	13.7	70.1	5.4	4.3	11.5	7.2	1.4	524	3,786	39,506
Disabled	2.0	190	18.3	19.5	35.1	14.2	24.2	6.5	0.4	1,038	68,474	713,015
Adults	0.4	16	13.7	61.1	32.4	3.9	2.4	0.2	0.0	118	171,323	1,545,747
Children	0.5	23	14.7	34.4	58.9	4.7	1.9	0.1	0.0	157	398,667	4,074,687
Unknown	2.0	156	9.1	9.9	34.0	28.3	26.2	1.7	0.0	1,720	474	3,540
Gender												
Female	0.6	34	16.4	43.9	45.7	5.0	4.4	0.9	0.1	210	394,959	3,875,816
Male	0.6	50	16.1	33.9	54.2	6.3	4.7	0.8	0.1	310	245,898	2,483,839
Unknown	0.5	29	12.8	47.0	44.2	4.0	2.9	1.7	0.2	223	1,867	16,840
Race												
White	0.7	43	17.9	38.3	49.7	6.0	5.0	1.0	0.1	242	384,815	3,802,944
African American	0.5	29	13.6	43.8	47.7	4.6	3.3	0.5	0.0	215	189,705	1,908,215
Other/unknown	0.7	57	14.6	40.4	48.2	5.1	5.0	1.2	0.1	389	68,204	665,336
Use of Nursing Facilities^f												
Entire year	8.0	512	10.0	7.5	1.6	4.2	29.1	33.3	24.2	5,124	306	1,931
Part year	7.0	493	12.1	3.6	5.6	6.3	24.7	43.7	16.1	4,062	1,120	12,189
None	0.6	39	16.4	40.2	49.1	5.5	4.5	0.8	0.0	240	641,298	6,362,375
Maintenance Assistance Status												
Cash	1.4	123	18.9	26.5	41.8	11.7	16.1	3.8	0.2	650	112,766	1,138,446
Medically needy	1.2	79	11.9	33.2	35.2	14.0	15.7	1.8	0.0	660	8,907	60,448
Poverty related	0.5	23	12.7	32.9	60.0	5.1	2.0	0.1	0.0	179	299,693	2,941,599
Other/unknown	0.3	20	16.2	57.1	38.3	2.6	1.5	0.3	0.1	126	221,358	2,236,002

Source: Data for this table are from the MAX 2005 file for Arkansas, released by CMS in 2/2009. This table was produced on 04/23/2009.

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

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

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

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

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

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

Benef(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 ND.5
 AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC^{a, b, c}
 NONDUAL BENEFICIARIES, ARKANSAS, 2005

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	0.6	\$40	\$67	0.2	\$31	\$129	0.0	\$2	\$62	0.3	\$8	\$23
Age												
5 and younger	0.5	24	44	0.2	17	92	0.0	1	41	0.3	6	18
6-14	0.5	36	74	0.2	29	128	0.0	2	66	0.2	5	23
15-20	0.5	37	73	0.2	29	149	0.0	2	60	0.3	6	21
21-44	0.5	38	72	0.2	29	145	0.0	2	75	0.3	8	26
45-64	2.5	185	74	1.0	136	139	0.1	8	91	1.4	42	29
65-74	1.8	113	62	0.7	83	123	0.1	3	49	1.1	27	25
75-84	1.5	87	58	0.6	65	108	0.0	3	54	0.9	20	23
85 and older	0.7	35	52	0.2	24	101	0.0	2	52	0.4	9	21
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Basis of Eligibility^d												
Aged	1.2	72	58	0.5	53	113	0.0	2	52	0.7	17	23
Disabled	2.0	190	97	0.8	151	183	0.1	7	90	1.1	31	29
Adults	0.4	16	46	0.1	11	88	0.0	1	55	0.2	4	21
Children	0.5	23	51	0.2	17	95	0.0	2	51	0.2	5	19
Unknown	2.0	156	79	0.8	122	160	0.1	3	60	1.2	31	26
Gender												
Female	0.6	34	59	0.2	25	115	0.0	2	58	0.3	8	23
Male	0.6	50	78	0.3	40	147	0.0	2	68	0.3	8	24
Unknown	0.5	29	54	0.2	20	98	0.0	2	69	0.3	7	23
Race												
White	0.7	43	66	0.3	32	124	0.0	2	64	0.4	8	24
African American	0.5	29	60	0.2	22	121	0.0	2	56	0.3	6	21
Other/unknown	0.7	57	87	0.3	46	175	0.0	2	66	0.4	8	23
Use of Nursing Facilities^e												
Entire year	8.0	512	64	3.0	373	126	0.3	21	73	4.8	117	25
Part year	7.0	493	71	2.5	362	144	0.3	18	72	4.2	113	27
None	0.6	39	67	0.2	30	129	0.0	2	62	0.3	8	23
Maintenance Assistance Status												
Cash	1.4	123	86	0.6	96	169	0.1	5	81	0.8	22	27
Medically needy	1.2	79	68	0.4	57	139	0.0	4	81	0.7	18	26
Poverty related	0.5	23	48	0.2	16	92	0.0	2	49	0.3	5	19
Other/unknown	0.3	20	61	0.1	15	106	0.0	1	60	0.2	4	22

Source: Data for this table are from the MAX 2005 file for Arkansas, released by CMS in 2/2009. This table was produced on 04/23/2009.

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

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

c. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In 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.medispain.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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

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

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

TABLE ND.6
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d}
 NONDUAL BENEFICIARIES, ARKANSAS, 2005

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				\$ per Rx				Users ^e				
	Total	Off-Brand-Name		Generic	Total	Off-Brand-Name		Generic	Total	Off-Brand-Name		Generic	Total Number of Rx	Total Rx \$	Number of Users	As a Percentage of All Benes	Number of Benefit Months
		Patented	Patent			Patented	Patent			Patented	Patent						
Anti-infective Agents	0.2	0.1	0.0	0.1	\$11	\$6	\$2	\$3	\$45	\$90	\$64	\$22	696,240	\$31,627,320	270,709	42.1	2,947,208
Biologicals	0.4	0.3	0.0	0.0	445	363	13	68	1244	1,168	1,241	1,899	4,888	6,082,365	1,444	0.2	13,679
Antineoplastic Agents	0.5	0.2	0.0	0.4	123	103	1	20	233	677	129	53	8,279	1,924,888	1,526	0.2	15,646
Endocrine/Metabolic Drugs	0.4	0.2	0.0	0.2	21	14	3	4	58	90	65	27	353,726	20,616,504	91,487	14.2	991,388
Cardiovascular Agents	0.8	0.3	0.0	0.5	36	26	0	9	43	81	29	19	303,681	13,156,177	34,988	5.4	370,173
Respiratory Agents	0.3	0.1	0.0	0.2	16	13	1	2	48	89	26	15	674,862	32,730,619	191,056	29.7	2,092,832
Gastrointestinal Agents	0.3	0.2	0.0	0.2	28	23	0	4	83	148	68	22	152,850	12,700,544	43,148	6.7	459,684
Genitourinary Agents	0.2	0.1	0.0	0.1	11	8	1	2	55	85	64	24	37,075	2,026,212	17,576	2.7	184,407
CNS Drugs	0.6	0.3	0.0	0.3	63	56	0	7	110	190	68	25	456,865	50,194,377	73,708	11.5	794,085
Stimulants/Anti-obesity/Anorexia	0.6	0.5	0.0	0.1	60	56	0	3	101	110	53	42	203,409	20,592,036	30,935	4.8	345,711
Miscellaneous Psychological/ Neurological Agents	0.4	0.3	0.0	0.1	108	100	0	8	295	354	80	98	6,390	1,884,402	1,624	0.3	17,418
Analgesics and Anesthetics	0.3	0.0	0.0	0.2	11	4	1	5	39	162	188	21	355,302	13,869,775	121,050	18.8	1,296,752
Neuromuscular Agents	0.6	0.2	0.0	0.3	54	41	3	11	98	174	84	38	209,757	20,634,546	35,066	5.5	378,616
Nutritional Products	0.3	0.0	0.0	0.2	4	0	0	3	14	10	14	14	57,782	798,707	22,221	3.5	226,021
Hematological Agents	0.5	0.2	0.0	0.3	237	231	1	5	465	1,078	65	19	29,439	13,686,772	5,589	0.9	57,671
Topical Products	0.2	0.1	0.0	0.1	8	5	0	3	46	87	44	25	272,205	12,398,225	134,899	21.0	1,480,318
Miscellaneous Products	0.1	0.1	0.0	0.0	15	12	1	3	120	114	322	133	19,246	2,317,111	13,803	2.1	150,787
Unknown Therapeutic Category	0.1	0.0	0.0	0.0	7	0	0	0	44	0	0	0	5,690	252,695	3,419	0.5	38,207
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.	3,847,686	257,493,275	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for Arkansas, released by CMS in 2/2009. This table was produced on 04/23/2009.

a. Table ND.6 includes the beneficiaries represented by Cell K of Table 1. A beneficiary who used drugs from two or more categories was counted as a user for each category. Therefore, the sum of users across categories may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

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

d. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In 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.medispans.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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

Benef(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 ND.7
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP^{a, b, c}
 NONDUAL BENEFICIARIES, ARKANSAS, 2005

Top 10 Drug Groups	Users			Among Users			
	Total Medicaid Rx \$	Number of Users	As a Percentage of All Beneficiaries	Number of Benefit Months	Number of Rx per Benefit Month	\$ per Rx	Rx \$ per Benefit Month
ANTIPSYCHOTICS	\$33,748,867	24,504	3.8	271,238	0.5	\$263	\$124
STIMULANTS/ANTI-OBESITY/ANOREXIANTS	20,592,036	37,305	5.8	419,704	0.5	101	49
ANTIASTHMATIC	20,375,066	106,469	16.6	1,180,527	0.2	72	17
ANTICONVULSANT	18,129,384	23,461	3.7	257,419	0.6	124	70
ANTIDEPRESSANTS	13,139,746	48,966	7.6	526,672	0.4	65	25
MISC. HEMATOLOGICAL	11,814,691	2,155	0.3	22,320	0.5	976	529
ULCER DRUGS	9,123,076	34,603	5.4	368,466	0.3	86	25
CEPHALOSPORINS	7,775,075	112,132	17.4	1,253,274	0.1	52	6
DERMATOLOGICAL	7,743,288	112,689	17.5	1,248,416	0.1	47	6
ANALGESICS - Narcotic	7,196,037	122,242	19.0	1,308,496	0.2	29	5
Total	149,637,266	624,526		6,856,532	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for Arkansas, released by CMS in 2/2009. This table was produced on 04/23/2009.

a. Table ND.7 includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2005. A beneficiary who used drugs from two or more groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

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

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

Nondual Beneficiaries

TABLE ND.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}
 NONDUAL BENEFICIARIES, ARKANSAS, 2005

Beneficiary Characteristics	All Top 10 Drug Groups		ANTIPSYCHOTICS					STIMULANTS/ANTI-OBESITY/ANOREXIANTS				
	Number of Rx	Rx \$	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	1,638,556	\$149,637,266	24,504	3.8	271,238	0.5	\$124	37,305	5.8	419,704	0.5	\$49
Female												
All Females	872,107	69,118,069	11,589	2.9	127,374	0.5	117	11,045	2.8	124,702	0.5	47
Female, Disabled												
All Ages	358,350	37,184,698	7,150	21.0	80,621	0.5	143	2,209	6.5	25,311	0.5	53
5 and younger	12,168	959,353	50	2.1	575	0.5	88	79	3.4	902	0.4	35
6-14	35,695	3,967,206	732	17.6	8,494	0.5	118	1,247	30.0	14,380	0.5	51
15-20	26,247	3,096,516	732	23.5	8,385	0.5	135	437	14.0	4,985	0.5	54
21-44	111,446	12,402,359	2,891	27.1	32,511	0.5	143	282	2.6	3,163	0.4	54
45-64	172,568	16,744,610	2,738	19.9	30,608	0.6	154	164	1.2	1,881	0.5	71
65-74	226	14,654	7	13.2	48	0.6	97	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	513,757	31,933,371	4,439	1.2	46,753	0.3	72	8,836	2.4	99,391	0.5	45
5 and younger	114,124	5,810,294	116	0.2	1,340	0.3	59	329	0.4	3,712	0.3	30
6-14	166,998	12,519,823	1,424	1.6	16,021	0.4	79	6,723	7.5	76,181	0.5	47
15-20	94,103	5,720,358	1,227	2.0	13,236	0.3	68	1,360	2.2	15,322	0.4	44
21-44	116,718	6,233,456	1,352	1.0	13,023	0.3	60	375	0.3	3,676	0.4	44
45-64	13,290	942,824	146	2.7	1,321	0.3	69	46	0.8	464	0.4	54
65-74	3,588	331,484	71	11.1	784	0.7	175	1	0.2	12	0.7	15
75-84	2,661	209,983	52	7.6	512	0.7	124	2	0.3	24	0.3	10
85 and older	2,275	165,149	51	4.4	516	0.7	109	0	0.0	0	0.0	0
Male												
All Males	762,718	80,248,107	12,856	5.2	143,320	0.5	131	26,168	10.6	294,115	0.5	50
Male, Disabled												
All Ages	296,529	44,739,020	7,798	22.7	87,762	0.5	158	6,047	17.6	69,090	0.5	57
5 and younger	21,265	2,644,291	148	3.9	1,701	0.4	81	315	8.4	3,579	0.3	32
6-14	85,966	13,752,832	2,388	29.0	27,354	0.5	123	4,250	51.5	48,511	0.6	58
15-20	43,121	9,410,104	1,410	27.8	16,133	0.5	146	1,234	24.4	14,176	0.5	58
21-44	69,893	10,986,568	2,433	28.1	26,853	0.6	192	200	2.3	2,268	0.5	62
45-64	76,135	7,935,885	1,414	16.5	15,681	0.6	183	48	0.6	556	0.5	58
65-74	149	9,340	5	11.9	40	0.5	35	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

Nondual Beneficiaries

TABLE ND.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}
 NONDUAL BENEFICIARIES, ARKANSAS, 2005

Beneficiary Characteristics	All Top 10 Drug Groups		ANTIPSYCHOTICS					STIMULANTS/ANTI-OBESITY/ANOREXIANTS				
	Number of Rx	Rx \$	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month
Male, Other Eligibles												
All Ages	466,189	35,509,087	5,058	2.4	55,558	0.4	88	20,121	9.5	225,025	0.5	48
5 and younger	138,146	7,752,699	326	0.4	3,697	0.3	69	964	1.3	10,993	0.3	29
6-14	240,264	20,573,258	3,095	3.4	34,644	0.4	90	16,150	17.7	180,800	0.5	49
15-20	71,410	5,970,744	1,353	3.5	14,575	0.4	86	2,961	7.6	32,799	0.4	48
21-44	8,358	593,330	132	4.7	1,143	0.3	78	40	1.4	376	0.4	54
45-64	2,426	172,652	26	3.5	235	0.3	53	4	0.5	33	0.6	53
65-74	2,350	203,325	54	13.7	561	0.7	133	1	0.3	12	0.3	29
75-84	2,189	171,054	53	12.3	503	0.7	132	1	0.2	12	1.0	216
85 and older	1,046	72,025	19	4.4	200	0.8	102	0	0.0	0	0.0	0
Unknown	3,731	271,090	59	3.2	544	0.6	116	92	4.9	887	0.5	44

Source: Data for this table are from the MAX 2005 file for Arkansas, released by CMS in 2/2009. This table was produced on 04/23/2009.

a. Table ND.7A includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2005. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

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

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

Nondual Beneficiaries

TABLE ND.7B
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY,
 BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, ARKANSAS, 2005

Beneficiary Characteristics	ANTIASTHMATIC					ANTICONVULSANT					ANTIDEPRESSANTS				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	106,469	16.6	1,180,527	0.2	\$17	23,461	3.7	257,419	0.6	\$70	48,966	7.6	526,672	0.4	\$25
Female															
All Females	50,432	12.8	557,926	0.2	17	13,663	3.5	148,942	0.5	66	33,457	8.5	357,501	0.4	25
Female, Disabled															
All Ages	10,447	30.7	117,013	0.3	27	8,248	24.2	92,630	0.6	79	14,143	41.5	157,405	0.5	33
5 and younger	1,227	52.7	13,948	0.3	19	248	10.6	2,814	0.8	109	27	1.2	324	0.4	17
6-14	1,402	33.7	16,259	0.3	26	871	20.9	10,139	0.8	116	687	16.5	7,942	0.4	23
15-20	717	23.0	8,183	0.3	25	700	22.5	7,953	0.7	106	1,039	33.3	11,902	0.4	28
21-44	2,405	22.5	27,172	0.3	20	3,207	30.0	36,004	0.6	79	5,507	51.6	61,351	0.4	32
45-64	4,688	34.1	51,410	0.4	33	3,220	23.4	35,711	0.6	59	6,873	50.0	75,830	0.5	36
65-74	8	15.1	41	0.4	46	2	3.8	9	0.9	61	10	18.9	56	0.7	35
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	39,985	11.1	440,913	0.2	14	5,415	1.5	56,312	0.4	44	19,314	5.4	200,096	0.3	20
5 and younger	14,812	20.2	162,737	0.2	12	260	0.4	2,799	0.4	39	116	0.2	1,343	0.2	9
6-14	15,328	17.0	175,107	0.2	17	1,103	1.2	12,451	0.4	58	3,331	3.7	37,898	0.3	17
15-20	5,594	9.2	61,670	0.2	14	1,285	2.1	13,954	0.4	49	5,726	9.4	62,080	0.3	18
21-44	3,652	2.8	35,621	0.2	12	2,384	1.8	23,360	0.3	35	8,953	6.9	87,427	0.3	21
45-64	407	7.5	3,818	0.3	23	265	4.9	2,525	0.4	38	935	17.2	8,798	0.4	29
65-74	107	16.7	1,114	0.4	30	56	8.7	605	0.7	58	94	14.7	1,024	0.6	35
75-84	40	5.9	382	0.3	15	39	5.7	377	0.8	66	82	12.0	777	0.7	37
85 and older	45	3.9	464	0.3	21	23	2.0	241	0.9	44	77	6.6	749	0.7	39
Male															
All Males	55,758	22.7	619,750	0.2	18	9,755	4.0	108,067	0.6	77	15,405	6.3	168,205	0.4	24
Male, Disabled															
All Ages	9,361	27.3	105,074	0.3	27	6,565	19.1	73,328	0.7	89	7,390	21.5	81,033	0.5	30
5 and younger	2,372	63.1	26,914	0.3	21	348	9.3	3,934	0.7	85	59	1.6	689	0.4	14
6-14	3,062	37.1	35,249	0.4	27	1,580	19.2	18,134	0.7	93	1,590	19.3	18,254	0.5	23
15-20	1,139	22.5	13,007	0.4	28	1,086	21.4	12,544	0.7	115	1,265	25.0	14,506	0.5	27
21-44	942	10.9	10,527	0.3	23	2,072	23.9	22,740	0.7	92	2,284	26.4	24,491	0.5	34
45-64	1,842	21.5	19,353	0.4	38	1,474	17.2	15,952	0.7	62	2,185	25.5	23,049	0.5	32
65-74	4	9.5	24	0.2	19	5	11.9	24	1.0	42	7	16.7	44	0.9	67
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

Nondual Beneficiaries

TABLE ND.7B
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY,
 BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, ARKANSAS, 2005

Beneficiary Characteristics	ANTIASTHMATIC					ANTICONVULSANT					ANTIDEPRESSANTS				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
Male, Other Eligibles															
All Ages	46,397	21.9	514,676	0.2	16	3,190	1.5	34,739	0.4	52	8,015	3.8	87,172	0.4	19
5 and younger	21,240	27.7	231,741	0.2	13	425	0.6	4,706	0.4	44	179	0.2	1,983	0.3	10
6-14	20,085	22.1	227,732	0.2	18	1,624	1.8	18,373	0.4	53	4,099	4.5	46,183	0.4	17
15-20	4,701	12.1	51,798	0.2	16	769	2.0	8,370	0.4	58	2,953	7.6	31,834	0.3	20
21-44	183	6.5	1,605	0.3	18	249	8.8	2,137	0.4	49	513	18.1	4,507	0.3	26
45-64	78	10.4	690	0.3	26	40	5.3	307	0.4	39	127	16.9	1,213	0.3	18
65-74	50	12.7	508	0.6	45	39	9.9	393	0.6	39	53	13.5	570	0.6	33
75-84	43	10.0	440	0.4	30	26	6.0	285	0.9	34	60	13.9	601	0.6	38
85 and older	17	4.0	162	0.4	30	18	4.2	168	0.6	27	31	7.2	281	0.7	43
Unknown	279	14.9	2,851	0.2	14	43	2.3	410	0.6	41	104	5.6	966	0.5	26

Source: Data for this table are from the MAX 2005 file for Arkansas, released by CMS in 2/2009. This table was produced on 04/23/2009.

a. Table ND.7B includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2005. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

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

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

Nondual Beneficiaries

TABLE ND.7C
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY,
 BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, ARKANSAS, 2005

Beneficiary Characteristics	MISC. HEMATOLOGICAL					ULCER DRUGS					CEPHALOSPORINS				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	2,155	0.3	22,320	0.5	\$529	34,603	5.4	368,466	0.3	\$25	112,132	17.4	1,253,274	0.1	\$6
Female															
All Females	1,293	0.3	13,653	0.5	75	21,727	5.5	233,151	0.3	25	60,406	15.3	671,559	0.1	6
Female, Disabled															
All Ages	1,078	3.2	11,651	0.5	72	8,331	24.5	93,822	0.4	39	7,630	22.4	87,954	0.1	6
5 and younger	3	0.1	30	0.3	19	377	16.2	4,151	0.4	25	1,135	48.7	13,154	0.1	8
6-14	2	0.0	24	0.4	33	430	10.3	4,995	0.4	37	1,242	29.8	14,572	0.1	10
15-20	2	0.1	13	0.2	3,450	454	14.6	5,280	0.3	25	775	24.9	9,027	0.1	5
21-44	126	1.2	1,376	0.4	66	2,459	23.0	28,050	0.3	33	2,214	20.7	25,533	0.1	4
45-64	939	6.8	10,174	0.6	69	4,603	33.5	51,300	0.4	46	2,259	16.4	25,631	0.1	4
65-74	6	11.3	34	0.5	33	8	15.1	46	0.7	41	5	9.4	37	0.2	6
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	215	0.1	2,002	0.5	97	13,396	3.7	139,329	0.2	16	52,776	14.6	583,605	0.1	6
5 and younger	3	0.0	36	0.2	416	3,113	4.2	29,145	0.2	11	21,811	29.8	243,470	0.1	7
6-14	3	0.0	36	0.1	112	2,900	3.2	33,529	0.2	13	16,329	18.1	187,942	0.1	6
15-20	1	0.0	11	0.5	69	2,986	4.9	32,671	0.2	13	7,620	12.6	83,672	0.1	4
21-44	66	0.1	579	0.3	158	3,682	2.9	36,772	0.2	21	6,546	5.1	63,807	0.1	3
45-64	56	1.0	448	0.5	55	455	8.4	4,439	0.3	37	335	6.2	3,236	0.1	3
65-74	31	4.8	331	0.6	73	106	16.5	1,176	0.5	35	57	8.9	636	0.1	4
75-84	33	4.8	324	0.6	63	94	13.8	987	0.5	41	36	5.3	399	0.1	4
85 and older	22	1.9	237	0.7	56	60	5.1	610	0.6	33	42	3.6	443	0.1	10
Male															
All Males	849	0.3	8,550	0.6	1,261	12,803	5.2	134,628	0.3	24	51,468	20.9	578,936	0.1	7
Male, Disabled															
All Ages	707	2.1	7,253	0.6	1,416	4,680	13.6	51,631	0.4	38	6,721	19.6	77,245	0.1	7
5 and younger	7	0.2	78	0.7	13,006	540	14.4	5,925	0.4	28	1,771	47.1	20,416	0.1	8
6-14	18	0.2	207	0.8	18,921	609	7.4	7,067	0.4	33	1,992	24.2	23,317	0.1	8
15-20	11	0.2	121	0.6	30,540	497	9.8	5,705	0.4	33	916	18.1	10,614	0.1	6
21-44	70	0.8	700	0.4	1,784	1,208	13.9	13,410	0.4	40	1,107	12.8	12,612	0.1	4
45-64	601	7.0	6,147	0.6	64	1,821	21.3	19,482	0.5	43	935	10.9	10,286	0.1	4
65-74	0	0.0	0	0.0	0	5	11.9	42	0.5	54	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

Nondual Beneficiaries

TABLE ND.7C
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY,
 BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, ARKANSAS, 2005

Beneficiary Characteristics	MISC. HEMATOLOGICAL					ULCER DRUGS					CEPHALOSPORINS				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
Male, Other Eligibles															
All Ages	142	0.1	1,297	0.5	393	8,123	3.8	82,997	0.2	15	44,747	21.2	501,691	0.1	7
5 and younger	7	0.0	81	0.3	831	3,710	4.8	34,472	0.2	12	24,330	31.7	269,315	0.1	7
6-14	12	0.0	118	0.3	718	2,424	2.7	27,666	0.2	15	15,354	16.9	176,580	0.1	6
15-20	9	0.0	98	0.4	2,968	1,483	3.8	16,269	0.2	16	4,701	12.1	52,324	0.1	4
21-44	20	0.7	135	0.5	56	255	9.0	2,186	0.3	33	228	8.0	2,107	0.1	4
45-64	29	3.9	202	0.5	59	96	12.8	866	0.4	39	49	6.5	445	0.1	3
65-74	32	8.1	320	0.6	76	55	14.0	524	0.6	38	28	7.1	282	0.1	6
75-84	22	5.1	226	0.6	64	72	16.7	740	0.5	33	32	7.4	354	0.1	8
85 and older	11	2.6	117	0.6	67	28	6.5	274	0.6	39	25	5.8	284	0.1	9
Unknown	13	0.7	117	0.4	48	73	3.9	687	0.5	38	258	13.8	2,779	0.1	6

Source: Data for this table are from the MAX 2005 file for Arkansas, released by CMS in 2/2009. This table was produced on 04/23/2009.

a. Table ND.7C includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2005. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

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

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

Nondual Beneficiaries

TABLE ND.7D
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR NINTH AND TENTH TOP DRUG GROUPS
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, ARKANSAS, 2005

Beneficiary Characteristics	DERMATOLOGICAL					ANALGESICS - Narcotic					Number of Beneficiaries	Number of Benefit Months
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month		
All	112,689	17.5	1,248,416	0.1	\$6	122,242	19.0	1,308,496	0.2	\$6	642,724	6,376,495
Female												
All Females	61,895	15.7	686,881	0.1	7	83,834	21.2	886,123	0.2	5	394,959	3,875,816
Female, Disabled												
All Ages	7,382	21.7	85,142	0.1	8	20,275	59.5	226,851	0.3	14	34,072	359,630
5 and younger	1,215	52.1	14,100	0.1	6	320	13.7	3,731	0.1	1	2,330	24,763
6-14	1,473	35.4	17,319	0.1	7	720	17.3	8,419	0.1	1	4,163	46,598
15-20	756	24.3	8,781	0.1	7	1,315	42.2	15,168	0.2	2	3,116	34,138
21-44	1,719	16.1	19,820	0.1	8	8,125	76.1	91,517	0.3	11	10,673	113,768
45-64	2,215	16.1	25,095	0.2	9	9,773	71.1	107,882	0.4	19	13,737	140,068
65-74	4	7.5	27	0.3	8	22	41.5	134	0.5	16	53	295
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	54,513	15.1	601,739	0.1	6	63,559	17.6	659,272	0.2	3	360,887	3,516,186
5 and younger	27,111	37.0	293,865	0.1	5	5,267	7.2	60,484	0.1	1	73,256	718,603
6-14	17,654	19.6	202,767	0.1	8	10,754	12.0	123,539	0.1	1	89,970	960,177
15-20	5,909	9.7	66,025	0.1	7	16,869	27.8	180,371	0.1	2	60,709	583,342
21-44	3,347	2.6	33,980	0.1	6	28,717	22.3	276,006	0.2	4	129,019	1,179,818
45-64	278	5.1	2,789	0.2	9	1,596	29.3	14,994	0.3	11	5,444	47,924
65-74	79	12.3	879	0.2	10	172	26.8	1,904	0.3	7	641	6,835
75-84	77	11.3	855	0.2	10	113	16.6	1,248	0.3	13	681	7,103
85 and older	58	5.0	579	0.2	10	71	6.1	726	0.4	22	1,167	12,384
Male												
All Males	50,511	20.5	558,532	0.1	6	38,167	15.5	419,984	0.2	6	245,898	2,483,839
Male, Disabled												
All Ages	7,031	20.5	80,560	0.1	7	11,139	32.4	120,170	0.3	15	34,338	352,959
5 and younger	1,904	50.7	21,782	0.1	6	631	16.8	7,298	0.1	1	3,758	40,081
6-14	2,289	27.8	26,716	0.1	6	1,259	15.3	14,684	0.1	1	8,245	91,238
15-20	885	17.5	10,284	0.1	7	1,257	24.8	14,406	0.1	2	5,067	54,644
21-44	983	11.4	11,167	0.2	10	3,581	41.4	38,539	0.3	16	8,660	88,096
45-64	965	11.3	10,567	0.2	10	4,399	51.4	45,167	0.4	26	8,566	78,718
65-74	5	11.9	44	0.1	4	12	28.6	76	0.4	15	42	182
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

Nondual Beneficiaries

TABLE ND.7D
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR NINTH AND TENTH TOP DRUG GROUPS
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, ARKANSAS, 2005

Beneficiary Characteristics	DERMATOLOGICAL						ANALGESICS - Narcotic					
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Month	Mean Rx \$ per Benefit Month	Number of Beneficiaries	Number of Benefit Months
Male, Other Eligibles												
All Ages	43,480	20.6	477,972	0.1	6	27,028	12.8	299,814	0.1	2	211,560	2,130,880
5 and younger	25,542	33.3	273,784	0.1	5	6,678	8.7	75,613	0.1	1	76,755	749,835
6-14	14,236	15.6	163,403	0.1	6	10,359	11.4	118,689	0.1	1	91,074	964,184
15-20	3,365	8.7	37,535	0.1	7	8,175	21.0	89,714	0.1	2	38,887	379,570
21-44	149	5.3	1,307	0.2	9	1,301	45.9	11,090	0.3	12	2,837	19,545
45-64	38	5.1	362	0.2	8	321	42.7	2,746	0.4	21	751	4,946
65-74	49	12.4	477	0.2	12	97	24.6	943	0.4	21	394	3,939
75-84	57	13.2	638	0.3	12	57	13.2	624	0.4	12	432	4,364
85 and older	44	10.2	466	0.2	15	40	9.3	395	0.3	6	430	4,497
Unknown	283	15.2	3,003	0.2	8	241	12.9	2,389	0.2	6	1,867	16,840

Source: Data for this table are from the MAX 2005 file for Arkansas, released by CMS in 2/2009. This table was produced on 04/23/2009.

a. Table ND.7D includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2005. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

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

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

Nondual Beneficiaries

TABLE ND.8
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BENEFICIARY CHARACTERISTIC^{a, b}
 NONDUAL BENEFICIARIES, ARKANSAS, 2005

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	\$512	8.0	306	1,931
Age				
0-64	606	9.2	157	1,017
65-74	491	6.9	41	256
75-84	449	7.1	48	306
85 and older	308	6.2	60	352
Unknown	0	0.0	0	0
Gender				
Female	584	8.7	158	1,057
Male	441	7.4	128	731
Unknown	336	6.1	20	143
Race				
White	555	8.6	218	1,384
African American	403	6.5	76	492
Other/unknown	405	7.1	12	55
Basis of Eligibility^c				
Aged	410	6.7	143	890
Disabled	599	9.1	162	1,040
Adults	54	3.0	1	1
Children	0	0.0	0	0
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 2005 file for Arkansas, released by CMS in 2/2009. This table was produced on 04/23/2009.

a. Table ND.8 includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their 2005 Medicaid enrollment. A total of 1,120 beneficiaries who were in nursing facilities for part of their enrollment and their 12,189 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 ND.9
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d, e}
 NONDUAL BENEFICIARIES, ARKANSAS, 2005

Therapeutic Category	Number of Rx per Benefit Month Among Users			\$ per Benefit Month Among Users									Users				
	Total	Patented Brand-Name	Off-Patent Brand-Name	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 of Users	As a Percentage of All-Year Nursing Facility Residents	Number of Benefit Months	
Anti-infective Agents	0.5	0.1	0.1	0.3	\$40	\$21	\$8	\$11	\$82	\$146	\$144	\$39	723	\$59,446	195	63.7	1,468
Biologicals	0.0	0.0	0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0.0	0
Antineoplastic Agents	0.5	0.0	0.0	0.5	42	0	0	42	80	0	0	80	104	8,317	26	8.5	200
Endocrine/Metabolic Drugs	1.2	0.5	0.2	0.6	61	44	7	10	50	92	40	18	1,311	65,041	149	48.7	1,061
Cardiovascular Agents	2.2	0.7	0.0	1.5	78	54	0	23	35	78	11	15	3,287	113,809	219	71.6	1,465
Respiratory Agents	0.6	0.3	0.0	0.3	40	35	0	5	66	102	18	19	500	33,091	110	35.9	824
Gastrointestinal Agents	1.3	0.4	0.0	0.8	73	55	1	17	58	140	49	20	1,362	78,540	158	51.6	1,073
Genitourinary Agents	0.7	0.5	0.0	0.2	54	46	0	8	76	96	30	34	414	31,291	75	24.5	579
CNS Drugs	1.8	1.0	0.0	0.8	190	166	1	23	104	160	45	31	2,683	279,661	212	69.3	1,471
Stimulants/Anti-obesity/Anorexia	0.7	0.6	0.0	0.1	106	104	0	2	154	181	0	14	31	4,767	5	1.6	45
Miscellaneous Psychological/Neurological Agents	1.2	1.2	0.0	0.0	161	160	0	1	139	139	0	176	325	45,204	41	13.4	281
Analgesics and Anesthetics	1.0	0.1	0.1	0.9	45	12	9	24	44	106	131	29	1,116	48,776	152	49.7	1,082
Neuromuscular Agents	1.4	0.3	0.1	1.0	94	46	5	43	68	134	100	43	1,392	94,189	134	43.8	998
Nutritional Products	0.9	0.0	0.0	0.9	16	0	0	16	18	0	20	18	660	11,599	99	32.4	716
Hematological Agents	1.1	0.4	0.0	0.7	92	83	0	9	88	213	114	14	952	83,330	128	41.8	903
Topical Products	0.5	0.3	0.0	0.2	26	19	1	6	53	71	53	30	549	29,056	148	48.4	1,121
Miscellaneous Products	0.4	0.1	0.0	0.3	13	8	0	5	30	81	0	16	48	1,461	14	4.6	114
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	11	0	0	0	36	0	0	0	15	534	5	1.6	50
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.	15,472	988,112	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for Arkansas, released by CMS in 2/2009. This table was produced on 04/23/2009.

a. Table ND.9 includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2005. A total of 1,120 beneficiaries who were in nursing facilities for part of their enrollment and their 12,189 benefit months were excluded from the analysis.

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

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

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

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

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 = 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.

Nondual Beneficiaries

TABLE ND.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}
 NONDUAL BENEFICIARIES, ARKANSAS, 2005

Top 10 Drug Groups in Nursing Facilities	Total Medicaid Rx \$	Users			Among Users		
		Number of Users	As a Percentage of All-Year Nursing Facility Residents	Number of Benefit Months per	Number of Rx per Benefit Month	Rx \$ per Benefit Month	\$ per Rx
ANTIPSYCHOTICS	\$196,620	127	41.5	1,056	1.0	\$187	\$186
ANTICONVULSANT	74,987	110	35.9	955	1.0	75	79
ANTIDEPRESSANTS	67,928	153	50.0	1,159	0.9	63	59
ULCER DRUGS	53,793	126	41.2	995	0.8	65	54
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	45,204	45	14.7	331	1.0	139	137
ANTIDIABETIC	42,108	87	28.4	700	1.0	62	60
MISC. HEMATOLOGICAL	39,215	49	16.0	367	1.0	111	107
ANTHYPERLIPIDEMIC	39,104	47	15.4	413	0.8	113	95
ANALGESICS - Narcotic	33,636	166	54.2	1,268	0.7	41	27
ANTHYPERTENSIVE	28,892	106	34.6	797	1.0	36	36
Total	621,487	1,016		8,041	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for Arkansas, released by CMS in 2/2009. This table was produced on 04/23/2009.

a. Table ND.10 includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2005. A total of 1,120 beneficiaries who were in nursing facilities for part of their enrollment and their 12,189 benefit months were excluded from the analysis.

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

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

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

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

Nondual Beneficiaries

TABLE ND.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}
 NONDUAL BENEFICIARIES, ARKANSAS, 2005

Beneficiary Characteristics	All Top 10 Drug Groups			ANTIPSYCHOTICS				ANTICONVULSANT				
	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	7,296	\$621,487	127	41.5	1,056	1.0	\$186	110	35.9	955	1.0	\$79
Female												
All Females	4,224	392,150	78	49.4	710	0.9	200	71	44.9	612	0.9	69
Female, Disabled												
All Ages	2,814	262,732	43	51.8	426	1.0	212	52	62.7	459	0.9	74
64 or younger	2,765	260,792	42	53.8	423	1.0	213	51	65.4	456	0.9	74
65-74	49	1,940	1	20.0	3	0.7	169	1	20.0	3	0.7	86
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	1,410	129,418	35	46.7	284	0.8	181	19	25.3	153	0.9	53
64 or younger	1	21	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	229	25,181	10	90.9	87	0.7	170	5	45.5	36	0.6	22
75-84	681	67,257	13	48.1	109	0.7	222	9	33.3	68	0.9	70
85 and older	499	36,959	12	33.3	88	1.1	139	5	13.9	49	1.0	53
Male												
All Males	2,652	198,610	43	33.6	295	1.1	165	35	27.3	304	1.4	101
Male, Disabled												
All Ages	1,769	125,908	18	24.0	133	1.1	188	24	32.0	222	1.5	112
64 or younger	1,769	125,908	18	24.3	133	1.1	188	24	32.4	222	1.5	112
65-74	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male, Other Eligibles												
All Ages	883	72,702	25	47.2	162	1.2	147	11	20.8	82	1.1	71
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	380	33,778	12	66.7	80	1.1	159	5	27.8	34	1.1	116
75-84	294	21,122	9	56.3	49	1.1	72	1	6.3	12	2.0	61
85 and older	209	17,802	4	21.1	33	1.5	227	5	26.3	36	0.8	32
Unknown	420	30,727	6	30.0	51	1.0	120	4	20.0	39	1.0	52

Source: Data for this table are from the MAX 2005 file for Arkansas, released by CMS in 2/2009. This table was produced on 04/23/2009.
 a. Table ND.10A includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2005. A total of 1,120 beneficiaries who were in nursing facilities for part of their enrollment and their 12,189 benefit months were excluded from the analysis.
 b. A user is a beneficiary who had at least one prescription filled in a given drug group during 2005. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
 c. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
 d. The top 10 drug groups were determined based on total 2005 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispain.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).
 Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE ND.10B
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY
 AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c, d}
 NONDUAL BENEFICIARIES, ARKANSAS, 2005

Beneficiary Characteristics	ANTIDEPRESSANTS					ULCER DRUGS					MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL				
	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	153	50.0	1,159	0.9	\$59	126	41.2	995	0.8	\$54	45	14.7	331	1.0	\$137
Female															
All Females	95	60.1	750	0.8	55	73	46.2	627	0.8	54	21	13.3	167	0.9	129
Female, Disabled															
All Ages	50	60.2	422	0.9	61	50	60.2	434	0.8	55	4	4.8	36	0.7	170
64 or younger	47	60.3	406	0.9	63	46	59.0	422	0.8	56	4	5.1	36	0.7	170
65-74	3	60.0	16	0.8	22	4	80.0	12	0.8	27	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	45	60.0	328	0.8	46	23	30.7	193	0.8	51	17	22.7	131	0.9	117
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	7	63.6	51	0.6	44	2	18.2	14	0.4	22	1	9.1	12	0.6	87
75-84	18	66.7	138	1.0	50	10	37.0	88	0.8	82	9	33.3	71	1.1	144
85 and older	20	55.6	139	0.7	42	11	30.6	91	1.0	26	7	19.4	48	0.7	85
Male															
All Males	50	39.1	341	1.1	71	41	32.0	277	0.9	57	18	14.1	104	1.1	148
Male, Disabled															
All Ages	28	37.3	211	1.3	81	23	30.7	161	1.1	62	6	8.0	47	0.6	93
64 or younger	28	37.8	211	1.3	81	23	31.1	161	1.1	62	6	8.1	47	0.6	93
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	22	41.5	130	0.9	54	18	34.0	116	0.7	50	12	22.6	57	1.5	192
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	7	38.9	41	1.0	54	12	66.7	77	0.7	53	6	33.3	17	1.0	117
75-84	8	50.0	57	0.8	44	4	25.0	27	0.3	9	6	37.5	40	1.4	181
85 and older	7	36.8	32	1.1	71	2	10.5	12	1.5	125	0	0.0	0	0.0	0
Unknown	8	40.0	68	0.9	44	12	60.0	91	0.6	47	6	30.0	60	1.1	140

Source: Data for this table are from the MAX 2005 file for Arkansas, released by CMS in 2/2009. This table was produced on 04/23/2009.

a. Table ND.10B includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2005. A total of 1,120 beneficiaries who were in nursing facilities for part of their enrollment and their 12,189 benefit months were excluded from the analysis.

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

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

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

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

TABLE ND.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}
 NONDUAL BENEFICIARIES, ARKANSAS, 2005

Beneficiary Characteristics	ANTIDIABETIC					MISC. HEMATOLOGICAL					ANTIHYPERLIPIDEMIC				
	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	87	28.4	700	1.0	\$60	49	16.0	367	1.0	\$107	47	15.4	413	0.8	\$95
Female															
All Females	59	37.3	484	0.9	61	24	15.2	172	1.0	110	30	19.0	279	0.8	84
Female, Disabled															
All Ages	44	53.0	401	0.8	63	13	15.7	90	0.9	98	26	31.3	251	0.7	80
64 or younger	44	56.4	401	0.8	63	13	16.7	90	0.9	98	26	33.3	251	0.7	80
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	15	20.0	83	1.1	53	11	14.7	82	1.1	123	4	5.3	28	1.1	114
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	3	27.3	17	0.8	18	2	18.2	13	1.2	151	3	27.3	16	0.9	109
75-84	7	25.9	52	1.3	72	4	14.8	23	1.3	153	1	3.7	12	1.5	121
85 and older	5	13.9	14	0.8	27	5	13.9	46	1.0	101	0	0.0	0	0.0	0
Male															
All Males	24	18.8	170	1.4	66	21	16.4	160	1.1	119	16	12.5	122	1.0	115
Male, Disabled															
All Ages	16	21.3	113	1.4	63	10	13.3	74	1.3	158	12	16.0	101	1.0	114
64 or younger	16	21.6	113	1.4	63	10	13.5	74	1.3	158	12	16.2	101	1.0	114
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male, Other Eligibles															
All Ages	8	15.1	57	1.3	72	11	20.8	86	0.8	86	4	7.5	21	1.1	123
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	7	38.9	51	0.8	34	5	27.8	37	0.9	94	2	11.1	12	1.1	116
75-84	0	0.0	0	0.0	0	4	25.0	31	0.7	89	1	6.3	3	1.0	100
85 and older	1	5.3	6	1.8	100	2	10.5	18	0.9	62	1	5.3	6	1.3	148
Unknown	4	20.0	46	0.6	29	4	20.0	35	0.3	36	1	5.0	12	1.3	138

Source: Data for this table are from the MAX 2005 file for Arkansas, released by CMS in 2/2009. This table was produced on 04/23/2009.

a. Table ND.10C includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2005. A total of 1,120 beneficiaries who were in nursing facilities for part of their enrollment and their 12,189 benefit months were excluded from the analysis.

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

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

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

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

TABLE ND.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}
 NONDUAL BENEFICIARIES, ARKANSAS, 2005

Beneficiary Characteristics	ANALGESICS - Narcotic					ANTIHYPERTENSIVE					All-Year Nursing Facility Residents	Benefit Months Among All-Year Nursing Facility Residents
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$		
All	166	54.2	1,268	0.7	\$27	106	34.6	797	1.0	\$36	306	1,931
Female												
All Females	103	65.2	798	0.6	30	63	39.9	488	0.9	34	158	1,057
Female, Disabled												
All Ages	75	90.4	583	0.7	35	33	39.8	238	1.1	33	83	579
64 or younger	69	88.5	558	0.6	36	32	41.0	235	1.1	33	78	558
65-74	6	120.0	25	0.8	16	1	20.0	3	0.7	34	5	21
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	28	37.3	215	0.4	16	30	40.0	250	0.8	35	75	478
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	1
65-74	4	36.4	31	0.3	4	9	81.8	72	0.8	26	11	77
75-84	13	48.1	119	0.3	4	13	48.1	119	0.8	39	27	182
85 and older	11	30.6	65	0.7	41	8	22.2	59	0.7	36	36	218
Male												
All Males	57	44.5	431	0.8	22	37	28.9	263	1.1	39	128	731
Male, Disabled												
All Ages	38	50.7	318	0.8	24	20	26.7	150	1.3	44	75	441
64 or younger	38	51.4	318	0.8	24	20	27.0	150	1.3	44	74	438
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	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	19	35.8	113	0.5	16	17	32.1	113	0.8	31	53	290
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	11	61.1	58	0.6	25	4	22.2	24	0.8	33	18	104
75-84	4	25.0	40	0.4	6	7	43.8	69	0.7	26	16	93
85 and older	4	21.1	15	0.5	7	6	31.6	20	1.2	46	19	93
Unknown	6	30.0	39	0.8	13	6	30.0	46	1.1	48	20	143

Source: Data for this table are from the MAX 2005 file for Arkansas, released by CMS in 2/2009. This table was produced on 04/23/2009.

a. Table ND.10D includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2005. A total of 1,120 beneficiaries who were in nursing facilities for part of their enrollment and their 12,189 benefit months were excluded from the analysis.

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

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

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

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

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

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		Part D Excluded Rx \$ as a Percentage of All Nondual Rx \$		Total Number of Beneficiaries
					\$ per Beneficiary	Total Part D Excluded Rx \$	\$ per Part D Excluded Rx	Percentage of All Nondual Rx \$	
All	162,686	25.3	0.7	427,180	\$13	\$8,469,642	\$20	3.3	642,724
Age									
5 and younger	63,590	40.6	1.0	150,050	14	2,219,793	15	6.0	156,577
6-14	52,506	27.0	0.6	114,977	13	2,552,004	22	3.4	194,250
15-20	21,043	19.5	0.4	46,048	10	1,082,430	24	2.7	108,146
21-44	16,204	10.7	0.4	60,722	9	1,351,489	22	2.5	151,292
45-64	8,812	30.8	1.8	51,938	42	1,200,564	23	2.4	28,566
65-74	233	20.3	1.2	1,424	24	27,598	19	2.1	1,146
75-84	168	14.8	1.0	1,154	19	21,643	19	2.1	1,138
85 and older	130	8.1	0.5	867	9	14,121	16	2.4	1,609
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Basis of Eligibility^c									
Aged	506	13.4	0.9	3,346	16	61,779	18	2.2	3,786
Disabled	23,920	34.9	1.7	117,100	52	3,545,048	30	2.6	68,474
Adults	16,221	9.5	0.2	40,990	4	710,158	17	2.9	171,323
Children	121,874	30.6	0.7	265,213	10	4,142,346	16	4.4	398,667
Unknown	165	34.8	1.1	531	22	10,311	19	1.9	474
Gender									
Female	89,746	22.7	0.6	242,181	12	4,607,077	19	3.5	394,959
Male	72,559	29.5	0.7	184,071	16	3,846,781	21	3.1	245,898
Unknown	381	20.4	0.5	928	8	15,784	17	3.3	1,867
Race									
White	101,268	26.3	0.7	273,415	15	5,610,940	21	3.4	384,815
African American	43,926	23.2	0.6	104,685	9	1,665,627	16	3.0	189,705
Other/unknown	17,492	25.6	0.7	49,080	17	1,193,075	24	3.2	68,204
Use of Nursing Facilities^d									
Entire year	173	56.5	4.4	1,349	80	24,414	18	2.5	306
Part year	680	60.7	6.2	6,972	161	180,506	26	3.0	1,120
None	161,833	25.2	0.7	418,859	13	8,264,722	20	3.3	641,298
Maintenance Assistance Status									
Cash	36,042	32.0	1.3	148,140	33	3,677,286	25	2.6	112,766
Medically needy	2,211	24.8	0.8	6,864	15	129,961	19	2.7	8,907
Poverty related	92,771	31.0	0.7	203,072	10	3,116,692	15	4.6	299,693
Other/unknown	31,662	14.3	0.3	69,104	7	1,545,703	22	3.4	221,358

Source: Data for this table are from the MAX 2005 file for Arkansas, released by CMS in 2/2009. This table was produced on 04/23/2009.

a. Table ND.11 includes the beneficiaries represented by Cell K of Table 1. Beneficiaries include all nondual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2005.

b. The statute establishing the Medicare Part D prescription program that started in 2006 excludes several types of drugs from coverage. State Medicaid programs have been allowed to exclude these drugs since 1990, but many states have chosen to cover them, and if states cover them for any Medicaid beneficiaries they must also cover them for dual eligibles, who as of 2006 receive the remainder of their prescription drug coverage through Part D. Excluded drugs include benzodiazepines; barbiturates; nonprescription (OTC) medications; prescription vitamins and minerals (not including prenatal vitamins and fluoride preparations); and drugs used for anorexia, weight loss, or weight gain. Other excluded drugs include those that promote fertility; those used for cosmetic purposes or hair growth, for symptomatic relief of coughs and colds; or drugs for which the manufacturer requires that associated tests or monitoring services be purchased exclusively from 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 ND.12
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
 AMONG NONDUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a,b}
 ARKANSAS, 2005

Beneficiary Characteristics	Number Rx per Benefit Month	Rx \$ per Benefit Month	\$ per Rx	Barbiturate \$ per Benefit Month	Benzodiazepine \$ per Benefit Month	Number of Benefit Months
All	0.1	\$1	\$20	\$0	\$0	6,376,495
Age						
5 and younger	0.1	1	15	0	0	1,537,855
6-14	0.1	1	22	0	0	2,069,666
15-20	0.0	1	24	0	0	1,054,910
21-44	0.0	1	22	0	1	1,401,926
45-64	0.2	4	23	0	2	272,082
65-74	0.1	2	19	0	1	11,378
75-84	0.1	2	19	0	1	11,687
85 and older	0.1	1	16	0	0	16,991
Unknown	0.0	0	0	0	0	0
Basis of Eligibility^c						
Aged	0.1	2	18	0	1	39,506
Disabled	0.2	5	30	0	2	713,015
Adults	0.0	0	17	0	0	1,545,747
Children	0.1	1	16	0	0	4,074,687
Unknown	0.2	3	19	0	2	3,540
Gender						
Female	0.1	1	19	0	0	3,875,816
Male	0.1	2	21	0	0	2,483,839
Unknown	0.1	1	17	0	0	16,840
Race						
White	0.1	1	21	0	0	3,802,944
African American	0.1	1	16	0	0	1,908,215
Other/unknown	0.1	2	24	0	1	665,336
Use of Nursing Facilities^d						
Entire year	0.7	13	18	0	6	1,931
Part year	0.6	15	26	0	5	12,189
None	0.1	1	20	0	0	6,362,375
Maintenance Assistance Status						
Cash	0.1	3	25	0	1	1,138,446
Medically needy	0.1	2	19	0	1	60,448
Poverty related	0.1	1	15	0	0	2,941,599
Other/unknown	0.0	1	22	0	0	2,236,002

Source: Data for this table are from the MAX 2005 file for Arkansas, released by CMS in 2/2009. This table was produced on 04/23/2009.

a. Table ND.12 includes the beneficiaries represented by Cell K of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits. Beneficiaries include all nondual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2005.

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

TABLE ND.13
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D FOR SELECTED DRUG CATEGORIES AMONG NONDUALS^{a,b,c}
 ARKANSAS, 2005

Drug Category	Number of Users	Rx \$ per User	Total Rx \$	Rx \$ as a		Number Rx as a	
				Percentage of All Part D Excluded Rx \$	Total Number Rx. \$ per Rx	Percentage of All Part D Excluded Rx	Total Number Rx. \$ per Rx
All	192,763	\$44	\$8,469,642	100.0	427,180	\$20	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	104	21	2,199	0.0	132	17	0.0
Cough and cold medications	110,406	29	3,167,915	37.4	208,125	15	48.7
Vitamins and minerals	4,798	104	497,843	5.9	20,805	24	4.9
Non-prescription drugs	55,270	24	1,342,081	15.8	99,084	14	23.2
Barbiturates	877	55	48,436	0.6	6,322	8	1.5
Benzodiazepines	17,897	118	2,107,882	24.9	85,953	25	20.1
Other Part D Excl Rx Drugs	3,411	382	1,303,286	15.4	6,759	193	1.6

Source: Data for this table are from the MAX 2005 file for Arkansas, released by CMS in 2/2009. This table was produced on 04/23/2009.

a. Table ND.13 includes the beneficiaries represented by Cell K of Table 1. Beneficiaries include all nondual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2005. A user is a beneficiary who had at least one prescription filled for a Part D excluded drug in 2005. A beneficiary who used drugs from two or more Part D excluded categories was counted as a user for each category. Therefore, the sum of users across drug categories may exceed the total number of individual users as noted on Table ND11.

b. Includes OTC drugs as well as prescription drugs.

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

Benef(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.

Nondual Beneficiaries

APPENDIX TABLE A.1
 CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY^{a, b}
 NONDUAL BENEFICIARIES, ARKANSAS, 2005

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	642,724	3,786	68,474	171,323	398,667	474	6,376,495	39,506	713,015	1,545,747	4,074,687	3,540
Age												
5 and younger	156,577	0	6,090	57	150,430	0	1,537,855	0	64,868	569	1,472,418	0
6-14	194,250	0	12,410	82	181,758	0	2,069,666	0	137,860	758	1,931,048	0
15-20	108,146	0	8,183	33,523	66,437	3	1,054,910	0	88,782	295,228	670,876	24
21-44	151,292	0	19,339	131,756	41	156	1,401,926	0	201,904	1,198,628	343	1,051
45-64	28,566	0	22,357	5,894	1	314	272,082	0	219,124	50,492	2	2,464
65-74	1,146	1,041	95	9	0	1	11,378	10,850	477	50	0	1
75-84	1,138	1,137	0	1	0	0	11,687	11,675	0	12	0	0
85 and older	1,609	1,608	0	1	0	0	16,991	16,981	0	10	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	394,959	2,478	34,072	159,781	198,154	474	3,875,816	26,250	359,630	1,453,558	2,032,838	3,540
Male	245,898	1,255	34,338	11,360	198,945	0	2,483,839	12,799	352,959	90,871	2,027,210	0
Unknown	1,867	53	64	182	1,568	0	16,840	457	426	1,318	14,639	0
Race												
White	384,815	2,000	32,930	108,904	240,618	363	3,802,944	20,318	336,677	982,780	2,460,474	2,695
African American	189,705	1,276	19,286	52,428	116,619	96	1,908,215	13,633	203,407	488,649	1,201,806	720
Other/unknown	68,204	510	16,258	9,991	41,430	15	665,336	5,555	172,931	74,318	412,407	125
Use of Nursing Facilities^c												
Entire year	306	143	162	1	0	0	1,931	890	1,040	1	0	0
Part year	1,120	349	768	3	0	0	12,189	3,637	8,528	24	0	0
None	641,298	3,294	67,544	171,319	398,667	474	6,362,375	34,979	703,447	1,545,722	4,074,687	3,540
Maintenance Assistance Status												
Cash	112,766	2,407	62,112	21,328	26,919	0	1,138,446	27,870	658,889	182,931	268,756	0
Medically needy	8,907	100	2,053	5,050	1,704	0	60,448	455	8,869	34,795	16,329	0
Poverty related	299,693	3	13	37,773	261,430	474	2,941,599	34	108	286,977	2,650,940	3,540
Other/unknown	221,358	1,276	4,296	107,172	108,614	0	2,236,002	11,147	45,149	1,041,044	1,138,662	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	642,724	3,786	68,474	171,323	398,667	474	6,376,495	39,506	713,015	1,545,747	4,074,687	3,540
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

Source: Data for this table are from the MAX 2005 file for Arkansas, released by CMS in 2/2009. This table was produced on 04/23/2009.

a. Table A.1 includes the beneficiaries represented by Cell J of Table 1. Benefit months are months during which beneficiaries had pharmacy benefit coverage.
 b. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services. The total includes some beneficiaries with unknown basis of eligibility and some whose age categories are not consistent with basis of eligibility.
 c. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.
 Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; FFS = fee-for-service pharmacy benefit; MAX = Medicaid Analytic Extract; MC = managed care; Rx = pharmacy benefit.

APPENDIX TABLE A.2
 MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS^a
 NONDUAL BENEFICIARIES, ARKANSAS, 2005

	Beneficiaries and Benefit Months in Cell J of					
	Table 1		Included in Cell K of Table 1		Excluded from Cell K of Table 1	
	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months
All	642,724	6,376,495	642,724	6,376,495	0	0
Fee-for-service (FFS) all year	642,724	6,376,495	642,724	6,376,495	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 2005 file for Arkansas, released by CMS in 2/2009. This table was produced on 04/23/2009.

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

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

MC = managed care; Rx = pharmacy benefit.

Nondual Beneficiaries