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**STATISTICAL COMPENDIUM:
MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2006
ARKANSAS**

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TABLE ND.2
CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a, b}
NONDUAL BENEFICIARIES, ARKANSAS, 2006

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown
All	651,412	3,699	70,800	149,618	426,724	571	6,423,033	39,886	742,933	1,331,650	4,304,026	4,538
Age												
5 and younger	160,846	0	6,410	54	154,382	0	1,562,775	0	68,121	493	1,494,161	0
6-14	202,718	0	13,356	89	189,273	0	2,130,036	0	148,599	892	1,980,545	0
15-20	111,700	0	8,624	20,048	83,025	3	1,071,743	0	94,301	148,535	828,881	26
21-44	143,147	0	19,515	123,391	44	197	1,336,106	0	204,874	1,129,312	439	1,481
45-64	29,205	0	22,809	6,028	0	368	281,876	0	226,498	52,368	0	3,010
65-74	1,096	1,004	86	3	0	3	11,466	10,895	540	10	0	21
75-84	1,042	1,038	0	4	0	0	10,970	10,941	0	29	0	0
85 and older	1,657	1,656	0	1	0	0	18,059	18,048	0	11	0	0
Unknown	1	1	0	0	0	0	2	2	0	0	0	0
Gender												
Female	394,441	2,436	34,854	142,506	214,074	571	3,854,728	26,569	370,327	1,287,950	2,165,344	4,538
Male	256,174	1,242	35,917	7,026	211,989	0	2,561,285	13,131	372,372	43,162	2,132,620	0
Unknown	797	21	29	86	661	0	7,020	186	234	538	6,062	0
Race												
White	383,326	1,935	33,247	93,236	254,461	447	3,752,321	20,416	342,163	831,773	2,554,401	3,568
African American	190,789	1,242	19,419	46,080	123,947	101	1,910,821	13,735	206,221	424,638	1,265,447	780
Other/unknown	77,297	522	18,134	10,302	48,316	23	759,891	5,735	194,549	75,239	484,178	190
Use of Nursing Facilities^c												
Entire year	749	242	506	0	0	1	7,316	2,331	4,983	0	0	2
Part year	609	148	455	5	1	0	6,263	1,510	4,708	33	12	0
None	650,054	3,309	69,839	149,613	426,723	570	6,409,454	36,045	733,242	1,331,617	4,304,014	4,536
Maintenance Assistance Status												
Cash	110,667	2,377	64,292	19,512	24,486	0	1,131,270	27,839	688,936	168,544	245,951	0
Medically needy	8,035	80	2,077	4,519	1,359	0	52,043	433	8,308	30,117	13,185	0
Poverty-related	317,258	95	7	29,371	287,214	571	3,101,850	980	45	185,656	2,910,631	4,538
Other/unknown	215,452	1,147	4,424	96,216	113,665	0	2,137,870	10,634	45,644	947,333	1,134,259	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	651,412	3,699	70,800	149,618	426,724	571	6,423,033	39,886	742,933	1,331,650	4,304,026	4,538
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 2006 file for Arkansas, released by CMS in 9/2009. This table was produced on 02/09/2010.

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.

Nondual Medicaid Beneficiaries

TABLE ND.3
ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC^{a, b}
NONDUAL BENEFICIARIES, ARKANSAS, 2006

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	60.0	6.0	\$420	\$71	\$2,646	15.9	651,412
Age							
5 and younger	73.1	5.2	235	46	2,756	8.5	160,846
6-14	61.9	5.0	395	80	1,924	20.6	202,718
15-20	56.8	5.0	379	76	2,566	14.8	111,700
21-44	43.5	5.3	399	75	2,400	16.6	143,147
45-64	73.1	24.3	1,884	78	8,262	22.8	29,205
65-74	37.5	10.8	702	65	6,631	10.6	1,096
75-84	21.5	4.6	273	60	5,658	4.8	1,042
85 and older	10.0	1.7	86	50	3,281	2.6	1,657
Unknown	0.0	0.0	0	0	0	0.0	1
Basis of Eligibility^e							
Aged	19.8	4.9	298	61	4,780	6.2	3,699
Disabled	80.1	20.7	2,049	99	11,237	18.2	70,800
Adults	38.3	3.1	146	47	1,089	13.4	149,618
Children	64.6	4.5	246	55	1,730	14.2	426,724
Unknown	89.0	15.8	1,512	96	15,850	9.5	571
Gender							
Female	57.0	5.8	360	63	2,244	16.0	394,441
Male	64.8	6.3	514	82	3,268	15.7	256,174
Unknown	37.0	1.8	92	53	1,303	7.1	797
Race							
White	62.1	6.5	454	70	2,566	17.7	383,326
African American	56.2	4.9	313	64	2,323	13.4	190,789
Other/unknown	59.2	6.1	520	85	3,836	13.5	77,297
Use of Nursing Facilities^f							
Entire year	89.1	62.2	4,485	72	45,533	9.8	749
Part year	90.5	60.8	4,622	76	44,128	10.5	609
None	60.0	5.8	412	70	2,557	16.1	650,054
Maintenance Assistance Status							
Cash	73.8	15.0	1,354	90	7,145	19.0	110,667
Medically needy	64.6	7.7	526	68	4,919	10.7	8,035
Poverty related	66.2	4.6	231	51	1,900	12.2	317,258
Other/unknown	43.7	3.3	215	65	1,348	15.9	215,452

Source: Data for this table are from the MAX 2006 file for Arkansas, released by CMS in 9/2009. This table was produced on 02/09/2010.

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 ten states (DE, IA, IL, NC, NE, NY, TN, 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 ten states (DE, IA, IL, NC, NE, NY, TN, 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, 2006

Beneficiary Characteristics	Number of Rx, Percentage with:										Number	
	Mean Number of Rx	Mean Rx \$	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	Mean \$, All Medicaid FFS \$ ^d	Beneficiaries	Benefit Months
All	0.6	\$43	15.9	40.0	49.0	5.5	4.6	0.9	0.1	\$268	651,412	6,423,033
Age												
5 and younger	0.5	24	8.5	26.9	65.3	5.7	1.9	0.1	0.0	284	160,846	1,562,775
6-14	0.5	38	20.6	38.1	54.0	4.6	3.0	0.4	0.0	183	202,718	2,130,036
15-20	0.5	40	14.8	43.2	48.0	5.2	3.1	0.5	0.0	268	111,700	1,071,743
21-44	0.6	43	16.6	56.5	31.8	5.5	5.5	0.8	0.0	257	143,147	1,336,106
45-64	2.5	195	22.8	26.9	18.1	12.9	31.5	9.9	0.7	856	29,205	281,876
65-74	1.0	67	10.6	62.5	15.1	5.6	11.3	4.9	0.5	634	1,096	11,466
75-84	0.4	26	4.8	78.5	13.5	1.7	3.2	2.6	0.5	538	1,042	10,970
85 and older	0.2	8	2.6	90.0	7.2	0.8	0.9	0.8	0.3	301	1,657	18,059
Unknown	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	0.0	0	1	2
Basis of Eligibility^e												
Aged	0.5	28	6.2	80.2	11.0	2.3	3.8	2.3	0.4	443	3,699	39,886
Disabled	2.0	195	18.2	19.9	34.7	14.0	24.3	6.6	0.5	1,071	70,800	742,933
Adults	0.3	16	13.4	61.7	31.5	3.9	2.7	0.2	0.0	122	149,618	1,331,650
Children	0.4	24	14.2	35.4	57.9	4.7	1.9	0.1	0.0	172	426,724	4,304,026
Unknown	2.0	190	9.5	11.0	37.1	21.9	27.0	3.0	0.0	1,994	571	4,538
Gender												
Female	0.6	37	16.0	43.0	46.4	5.1	4.5	0.9	0.1	230	394,441	3,854,728
Male	0.6	51	15.7	35.2	53.1	6.1	4.7	0.8	0.1	327	256,174	2,561,285
Unknown	0.2	11	7.1	63.0	34.0	1.9	1.0	0.1	0.0	148	797	7,020
Race												
White	0.7	46	17.7	37.9	49.8	6.1	5.1	1.0	0.1	262	383,326	3,752,321
African American	0.5	31	13.4	43.8	47.7	4.6	3.3	0.5	0.0	232	190,789	1,910,821
Other/unknown	0.6	53	13.5	40.8	48.3	4.8	4.8	1.2	0.1	390	77,297	759,891
Use of Nursing Facilities^f												
Entire year	6.4	459	9.8	10.9	15.2	6.0	16.8	32.7	18.3	4,662	749	7,316
Part year	5.9	450	10.5	9.5	14.9	5.6	24.0	29.9	16.1	4,291	609	6,263
None	0.6	42	16.1	40.0	49.1	5.5	4.5	0.8	0.0	259	650,054	6,409,454
Maintenance Assistance Status												
Cash	1.5	133	19.0	26.2	40.8	11.6	17.0	4.1	0.2	699	110,667	1,131,270
Medically needy	1.2	81	10.7	35.4	31.7	14.8	16.4	1.6	0.0	759	8,035	52,043
Poverty related	0.5	24	12.2	33.8	59.2	4.9	2.0	0.1	0.0	194	317,258	3,101,850
Other/unknown	0.3	22	15.9	56.3	38.9	2.8	1.6	0.3	0.0	136	215,452	2,137,870

Source: Data for this table are from the MAX 2006 file for Arkansas, released by CMS in 9/2009. This table was produced on 02/09/2010.

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

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

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

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

TABLE ND.5
 AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC^{a, b, c}
 NONDUAL BENEFICIARIES, ARKANSAS, 2006

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	\$43	\$71	0.2	\$32	\$148	0.0	\$2	\$72	0.4	\$8	\$24
Age												
5 and younger	0.5	24	46	0.2	16	105	0.0	2	38	0.3	6	19
6-14	0.5	38	80	0.2	30	146	0.0	1	60	0.2	6	24
15-20	0.5	40	76	0.2	31	167	0.0	2	81	0.3	7	22
21-44	0.6	43	75	0.2	32	167	0.0	3	102	0.4	9	24
45-64	2.5	195	78	0.9	137	157	0.1	13	113	1.5	45	29
65-74	1.0	67	65	0.3	45	131	0.1	5	104	0.6	17	26
75-84	0.4	26	60	0.1	18	125	0.0	2	88	0.3	6	24
85 and older	0.2	8	50	0.0	5	108	0.0	1	83	0.1	2	21
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Basis of Eligibility^d												
Aged	0.5	28	61	0.1	18	126	0.0	2	95	0.3	7	25
Disabled	2.0	195	99	0.8	154	201	0.1	9	104	1.1	32	29
Adults	0.3	16	47	0.1	10	95	0.0	1	96	0.2	5	21
Children	0.4	24	55	0.2	18	114	0.0	1	47	0.3	6	21
Unknown	2.0	190	96	0.7	148	218	0.1	9	131	1.2	32	26
Gender												
Female	0.6	37	63	0.2	26	133	0.0	2	77	0.4	8	23
Male	0.6	51	82	0.2	41	165	0.0	2	65	0.4	9	24
Unknown	0.2	11	53	0.1	7	111	0.0	1	44	0.1	3	25
Race												
White	0.7	46	70	0.2	35	144	0.0	3	73	0.4	9	24
African American	0.5	31	64	0.2	23	140	0.0	2	66	0.3	7	22
Other/unknown	0.6	53	85	0.2	42	181	0.0	2	74	0.4	9	24
Use of Nursing Facilities^e												
Entire year	6.4	459	72	2.0	329	161	0.3	27	94	4.0	103	26
Part year	5.9	450	76	1.9	318	167	0.3	26	97	3.7	105	28
None	0.6	42	70	0.2	31	148	0.0	2	71	0.3	8	24
Maintenance Assistance Status												
Cash	1.5	133	90	0.5	103	190	0.1	7	99	0.9	23	27
Medically needy	1.2	81	68	0.4	58	159	0.0	4	97	0.8	19	24
Poverty related	0.5	24	51	0.2	17	109	0.0	1	49	0.3	6	20
Other/unknown	0.3	22	65	0.1	16	122	0.0	1	66	0.2	4	23

Source: Data for this table are from the MAX 2006 file for Arkansas, released by CMS in 9/2009. This table was produced on 02/09/2010.

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

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

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

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

TABLE ND.6
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d}
 NONDUAL BENEFICIARIES, ARKANSAS, 2006

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				\$ per Rx				Users ^e				
	Total	Patented	Off-Patent	Generic	Total	Patented	Off-Patent	Generic	Total	Patented	Off-Patent	Generic	Total Number of Rx	Total Rx \$	Number of Users	As a Percentage of All Benes	Number of Benefit Months
		Brand-Name	Brand-Name			Brand-Name	Brand-Name										
Anti-infective Agents	0.2	0.0	0.0	0.2	\$11	\$5	\$1	\$4	\$45	\$138	\$49	\$25	683,911	\$30,739,506	270,939	41.6	2,913,274
Biologicals	0.4	0.4	0.0	0.0	497	488	3	5	1324	1,326	1,055	1,354	4,809	6,367,273	1,424	0.2	12,820
Antineoplastic Agents	0.5	0.2	0.0	0.3	147	130	0	17	283	777	251	47	7,914	2,241,326	1,494	0.2	15,246
Endocrine/Metabolic Drugs	0.4	0.1	0.0	0.2	22	15	1	6	62	107	65	30	341,966	21,195,584	90,866	13.9	975,789
Cardiovascular Agents	0.8	0.2	0.1	0.5	36	16	8	12	45	71	129	24	305,643	13,819,863	36,072	5.5	383,343
Respiratory Agents	0.3	0.1	0.0	0.2	17	13	1	3	52	95	32	19	652,983	34,166,238	185,729	28.5	2,007,390
Gastrointestinal Agents	0.3	0.2	0.0	0.1	33	28	2	3	96	145	233	21	179,711	17,232,313	49,339	7.6	521,541
Genitourinary Agents	0.2	0.1	0.0	0.1	11	6	3	3	55	85	101	26	36,457	2,002,983	17,143	2.6	177,005
CNS Drugs	0.6	0.3	0.0	0.3	70	59	4	7	118	224	104	24	489,673	57,661,456	77,239	11.9	827,920
Stimulants/Anti-obesity/Anorexia	0.6	0.5	0.0	0.1	67	64	0	3	112	121	160	41	211,294	23,561,360	31,924	4.9	353,229
Miscellaneous Psychological/Neurological Agents	0.4	0.3	0.0	0.0	137	130	0	6	376	417	81	125	5,051	1,901,684	1,298	0.2	13,907
Analgesics and Anesthetics	0.3	0.0	0.0	0.3	10	4	0	5	35	171	84	20	371,391	12,847,024	125,845	19.3	1,331,698
Neuromuscular Agents	0.6	0.3	0.0	0.3	60	48	2	10	106	186	101	35	210,353	22,277,807	34,384	5.3	369,813
Nutritional Products	0.3	0.0	0.0	0.2	3	0	0	3	13	9	12	14	57,172	771,235	22,658	3.5	226,193
Hematological Agents	0.5	0.2	0.0	0.3	209	199	1	10	417	1,141	54	30	29,310	12,212,796	5,696	0.9	58,539
Topical Products	0.2	0.1	0.0	0.1	8	5	0	2	43	93	47	19	270,805	11,747,248	136,004	20.9	1,474,731
Miscellaneous Products	0.1	0.1	0.0	0.0	17	15	0	2	132	143	280	72	20,935	2,771,773	15,023	2.3	162,047
Unknown Therapeutic Category	0.1	0.0	0.0	0.0	7	0	0	0	51	0	0	0	3,074	157,048	2,091	0.3	23,060
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.	3,882,452	273,674,517	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2006 file for Arkansas, released by CMS in 9/2009. This table was produced on 02/09/2010.
 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.medi-span.com/master-drug-database.aspx>.
 d. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In 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/master-drug-database.aspx>.
 e. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 2006.
 Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; CNS = Central Nervous System; MAX = Medicaid Analytic Extract; n.a. = not applicable; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE ND.7
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP^{a, b, c}
 NONDUAL BENEFICIARIES, ARKANSAS, 2006

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	\$40,332,685	26,538	4.1	293,333	0.5	\$282	\$137	
STIMULANTS/ANTI-OBESITY/ANOREXIANTS	23,561,360	37,343	5.7	416,500	0.5	112	57	
ANTIASTHMATIC	22,564,285	111,675	17.1	1,229,264	0.2	76	18	
ANTICONVULSANT	20,658,967	24,863	3.8	272,030	0.6	131	76	
ANTIDEPRESSANTS	13,523,017	49,399	7.6	528,829	0.4	65	26	
ULCER DRUGS	13,401,493	39,541	6.1	417,505	0.3	105	32	
MISC. HEMATOLOGICAL	10,121,220	2,161	0.3	22,554	0.5	828	449	
CEPHALOSPORINS	7,897,401	108,872	16.7	1,201,302	0.1	55	7	
MISC. ENDOCRINE	7,392,626	4,168	0.6	47,122	0.4	371	157	
CONTRACEPTIVES	6,719,604	35,755	5.5	377,461	0.4	44	18	
Total	166,172,658	440,315	n.a.	4,805,900	n.a.	n.a.	n.a.	

Source: Data for this table are from the MAX 2006 file for Arkansas, released by CMS in 9/2009. This table was produced on 02/09/2010.

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 2006. 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 2006. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

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

Nondual Medicaid 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, 2006

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 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	1,475,288	\$166,172,658	26,538	4.1	293,333	0.5	\$138	37,343	5.7	416,500	0.5	\$57					
Female																	
All Females	814,534	78,780,138	12,427	3.2	136,725	0.5	127	11,257	2.9	126,056	0.5	54					
Female, Disabled																	
All Ages	317,627	41,037,216	7,591	21.8	85,973	0.5	155	2,244	6.4	25,713	0.5	60					
5 and younger	10,802	1,095,955	64	2.6	703	0.5	103	91	3.6	984	0.4	47					
6-14	35,670	4,965,559	773	17.5	8,877	0.6	130	1,247	28.3	14,397	0.5	59					
15-20	29,613	4,192,789	891	27.5	10,300	0.5	149	480	14.8	5,535	0.5	61					
21-44	96,995	13,276,648	3,026	28.3	34,034	0.5	151	276	2.6	3,108	0.5	61					
45-64	144,316	17,481,874	2,834	20.3	32,031	0.6	168	150	1.1	1,689	0.5	64					
65-74	231	24,391	3	6.4	28	1.1	304	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	496,907	37,742,922	4,836	1.3	50,752	0.3	81	9,013	2.5	100,343	0.5	53					
5 and younger	72,438	4,892,212	135	0.2	1,509	0.3	61	335	0.4	3,643	0.3	33					
6-14	142,058	13,691,439	1,713	1.8	19,197	0.4	94	6,817	7.3	76,614	0.5	54					
15-20	117,699	8,414,422	1,342	2.2	14,264	0.3	81	1,479	2.4	16,249	0.4	50					
21-44	151,650	9,526,768	1,385	1.1	13,222	0.3	64	345	0.3	3,443	0.4	49					
45-64	10,044	911,985	171	3.1	1,551	0.3	65	36	0.6	382	0.4	56					
65-74	1,905	213,410	47	7.7	553	0.6	155	1	0.2	12	0.5	43					
75-84	653	57,405	23	3.6	230	0.3	64	0	0.0	0	0.0	0					
85 and older	460	35,281	20	1.7	226	0.4	39	0	0.0	0	0.0	0					
Male																	
All Males	660,307	87,349,040	14,103	5.5	156,539	0.5	147	26,066	10.2	290,244	0.5	58					
Male, Disabled																	
All Ages	272,983	47,731,038	8,385	23.3	94,183	0.6	174	6,199	17.3	70,765	0.6	64					
5 and younger	18,264	2,058,527	205	5.2	2,307	0.4	95	299	7.6	3,306	0.3	39					
6-14	89,082	16,336,406	2,655	29.7	30,368	0.5	138	4,427	49.5	50,653	0.6	64					
15-20	44,368	9,741,504	1,572	29.2	17,907	0.6	168	1,244	23.1	14,264	0.5	68					
21-44	61,775	11,862,143	2,483	28.2	27,324	0.6	209	176	2.0	1,969	0.6	77					
45-64	59,353	7,719,543	1,470	16.7	16,277	0.6	202	52	0.6	563	0.5	54					
65-74	141	12,915	0	0.0	0	0.0	0	1	2.6	10	0.3	14					
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 Medicaid 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, 2006

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 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	387,324	39,618,002	5,718	2.6	62,356	0.4	105	19,867	9.0	219,479	0.5	56
5 and younger	97,515	7,076,283	324	0.4	3,634	0.3	74	902	1.1	10,001	0.3	32
6-14	222,938	24,212,557	3,619	3.8	40,124	0.4	109	15,826	16.7	175,593	0.5	57
15-20	59,117	7,458,571	1,540	3.7	16,436	0.4	101	3,097	7.5	33,527	0.4	56
21-44	4,388	524,859	147	5.4	1,243	0.3	103	32	1.2	276	0.4	52
45-64	1,606	162,272	23	2.9	221	0.3	88	8	1.0	66	0.5	59
65-74	981	112,827	31	7.9	358	0.6	125	1	0.3	12	0.7	158
75-84	521	51,111	18	4.4	193	0.5	103	1	0.2	4	0.8	181
85 and older	258	19,522	16	3.6	147	0.2	33	0	0.0	0	0.0	0
Unknown	447	43,480	8	1.0	69	0.4	108	20	2.5	200	0.5	63

Source: Data for this table are from the MAX 2006 file for Arkansas, released by CMS in 9/2009. This table was produced on 02/09/2010.

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 2006. 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 2006. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

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

Nondual Medicaid 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, 2006

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	111,675	17.1	1,229,264	0.2	\$18	24,863	3.8	272,030	0.6	\$76	49,399	7.6	528,829	0.4	\$26
Female															
All Females	52,775	13.4	579,429	0.2	18	14,878	3.8	161,874	0.5	70	33,992	8.6	361,144	0.4	26
Female, Disabled															
All Ages	10,970	31.5	123,925	0.3	28	8,835	25.3	99,600	0.6	83	14,522	41.7	162,113	0.5	34
5 and younger	1,321	52.9	15,030	0.3	20	262	10.5	2,990	0.8	108	32	1.3	336	0.4	11
6-14	1,476	33.5	17,197	0.3	27	856	19.4	9,940	0.8	123	651	14.8	7,479	0.5	23
15-20	782	24.2	8,931	0.3	25	743	23.0	8,548	0.7	124	1,188	36.7	13,554	0.4	27
21-44	2,382	22.3	27,102	0.3	21	3,360	31.4	37,685	0.6	86	5,452	51.0	61,189	0.4	33
45-64	4,996	35.8	55,536	0.4	33	3,612	25.9	40,413	0.6	61	7,191	51.5	79,482	0.5	37
65-74	13	27.7	129	0.5	44	2	4.3	24	0.3	28	8	17.0	73	0.5	14
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	41,805	11.6	455,504	0.2	15	6,043	1.7	62,274	0.4	48	19,470	5.4	199,031	0.3	20
5 and younger	15,481	20.5	167,577	0.2	13	297	0.4	3,301	0.4	47	130	0.2	1,477	0.2	7
6-14	16,370	17.4	184,558	0.2	18	1,197	1.3	13,546	0.5	65	3,425	3.6	38,530	0.4	16
15-20	5,963	9.7	65,209	0.2	15	1,467	2.4	15,664	0.4	55	5,930	9.7	63,017	0.3	19
21-44	3,485	2.9	33,162	0.2	12	2,700	2.2	25,974	0.4	37	8,949	7.4	86,016	0.3	22
45-64	411	7.4	3,992	0.3	24	310	5.5	2,954	0.5	42	926	16.6	8,758	0.4	30
65-74	62	10.2	705	0.5	38	40	6.6	480	0.6	56	52	8.6	605	0.6	30
75-84	20	3.2	172	0.3	15	22	3.5	245	0.7	52	31	4.9	323	0.4	19
85 and older	13	1.1	129	0.1	12	10	0.8	110	0.5	20	27	2.2	305	0.5	31
Male															
All Males	58,829	23.0	649,149	0.2	19	9,977	3.9	110,076	0.6	85	15,390	6.0	167,523	0.4	24
Male, Disabled															
All Ages	10,146	28.2	114,287	0.3	28	6,705	18.7	75,158	0.7	98	7,557	21.0	83,301	0.5	30
5 and younger	2,440	62.4	27,683	0.3	22	337	8.6	3,811	0.7	99	54	1.4	621	0.4	9
6-14	3,520	39.4	40,564	0.3	27	1,583	17.7	18,152	0.7	102	1,579	17.7	18,092	0.5	22
15-20	1,290	23.9	14,800	0.3	27	1,110	20.6	12,755	0.8	125	1,312	24.3	14,884	0.5	28
21-44	1,000	11.3	11,139	0.3	24	2,122	24.1	23,532	0.8	106	2,230	25.3	24,073	0.5	33
45-64	1,884	21.4	20,040	0.4	39	1,545	17.5	16,843	0.7	59	2,377	26.9	25,599	0.5	33
65-74	12	30.8	61	0.3	33	8	20.5	65	0.9	46	5	12.8	32	0.7	112
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 Medicaid 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, 2006

Beneficiary Characteristics	ANTIASTHMATIC						ANTICONVULSANT					ANTIDEPRESSANTS				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean		Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean		Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean		
				Rx per Benefit Month	Mean Rx \$ per Benefit Month				Rx per Benefit Month	Mean Rx \$ per Benefit Month				Rx per Benefit Month	Mean Rx \$ per Benefit Month	
Male, Other Eligibles																
All Ages	48,683	22.1	534,862	0.2	17	3,272	1.5	34,918	0.4	58	7,833	3.6	84,222	0.4	18	
5 and younger	22,104	28.0	238,447	0.2	14	417	0.5	4,585	0.4	48	155	0.2	1,745	0.2	6	
6-14	21,144	22.2	237,449	0.2	19	1,620	1.7	17,979	0.5	62	4,017	4.2	44,825	0.4	17	
15-20	5,106	12.3	55,907	0.2	17	890	2.1	9,288	0.4	62	2,959	7.1	31,368	0.3	19	
21-44	183	6.7	1,600	0.3	20	240	8.8	2,067	0.4	50	487	17.8	4,244	0.3	28	
45-64	69	8.6	648	0.3	30	68	8.5	611	0.3	28	148	18.4	1,337	0.4	30	
65-74	42	10.7	464	0.5	45	20	5.1	230	0.6	41	29	7.4	333	0.6	38	
75-84	24	5.9	235	0.4	37	9	2.2	92	0.5	19	24	5.9	242	0.3	16	
85 and older	11	2.5	112	0.5	59	8	1.8	66	0.4	14	14	3.2	128	0.5	30	
Unknown	71	8.9	686	0.2	12	8	1.0	80	0.4	27	17	2.1	162	0.2	12	

Source: Data for this table are from the MAX 2006 file for Arkansas, released by CMS in 9/2009. This table was produced on 02/09/2010.

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 2006. 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 2006. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

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

Nondual Medicaid 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, 2006

Beneficiary Characteristics	ULCER DRUGS					MISC. HEMATOLOGICAL					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
All	39,541	6.1	417,505	0.3	\$32	2,161	0.3	22,554	0.5	\$449	108,872	16.7	1,201,302	0.1	\$7
Female															
All Females	24,885	6.3	263,928	0.3	33	1,299	0.3	13,944	0.5	70	58,708	14.9	643,682	0.1	6
Female, Disabled															
All Ages	9,102	26.1	103,120	0.4	53	1,122	3.2	12,204	0.6	72	7,050	20.2	81,224	0.1	5
5 and younger	427	17.1	4,650	0.4	30	1	0.0	12	0.8	18	1,174	47.0	13,475	0.1	9
6-14	482	10.9	5,607	0.4	42	1	0.0	12	0.4	51	1,224	27.7	14,309	0.1	8
15-20	533	16.5	6,196	0.4	36	0	0.0	0	0.0	0	703	21.7	8,216	0.1	5
21-44	2,697	25.2	30,695	0.4	45	108	1.0	1,161	0.5	98	1,935	18.1	22,276	0.1	4
45-64	4,956	35.5	55,906	0.5	62	1,009	7.2	10,988	0.6	69	2,011	14.4	22,922	0.1	4
65-74	7	14.9	66	0.7	67	3	6.4	31	0.6	76	3	6.4	26	0.3	11
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	15,783	4.4	160,808	0.2	21	177	0.0	1,740	0.4	58	51,658	14.4	562,458	0.1	6
5 and younger	3,729	4.9	34,311	0.2	12	3	0.0	36	0.2	299	21,922	29.1	240,650	0.1	8
6-14	3,529	3.8	40,025	0.2	19	3	0.0	31	0.1	286	15,930	16.9	181,084	0.1	7
15-20	3,589	5.9	38,638	0.2	18	3	0.0	31	0.1	239	7,320	11.9	78,714	0.1	4
21-44	4,348	3.6	42,161	0.2	28	73	0.1	750	0.4	43	6,109	5.1	58,189	0.1	3
45-64	470	8.4	4,360	0.4	50	63	1.1	522	0.4	46	327	5.9	3,280	0.1	3
65-74	65	10.7	737	0.5	52	19	3.1	218	0.4	39	22	3.6	252	0.1	8
75-84	30	4.8	320	0.3	28	8	1.3	94	0.6	67	16	2.5	164	0.2	8
85 and older	23	1.9	256	0.3	33	5	0.4	58	0.3	43	12	1.0	125	0.1	6
Male															
All Males	14,642	5.7	153,453	0.3	30	861	0.3	8,598	0.6	1,063	50,110	19.6	557,075	0.1	7
Male, Disabled															
All Ages	5,160	14.4	57,114	0.5	49	752	2.1	7,611	0.6	1,064	6,588	18.3	75,662	0.1	7
5 and younger	587	15.0	6,432	0.4	32	3	0.1	35	0.8	4,829	1,746	44.6	20,070	0.1	9
6-14	706	7.9	8,137	0.4	40	16	0.2	188	1.0	20,768	2,018	22.6	23,591	0.1	8
15-20	551	10.2	6,337	0.4	42	11	0.2	123	0.5	18,723	896	16.6	10,420	0.1	6
21-44	1,316	14.9	14,759	0.5	54	62	0.7	660	0.5	1,924	1,068	12.1	12,176	0.1	4
45-64	1,989	22.5	21,386	0.5	57	658	7.5	6,601	0.6	69	860	9.7	9,405	0.1	5
65-74	11	28.2	63	0.4	52	2	5.1	4	1.3	163	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 Medicaid 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, 2006

Beneficiary Characteristics	ULCER DRUGS					MISC. HEMATOLOGICAL					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	9,482	4.3	96,339	0.2	19	109	0.0	987	0.4	1,057	43,522	19.8	481,413	0.1	7
5 and younger	4,514	5.7	41,598	0.2	14	9	0.0	104	0.4	1,686	24,209	30.7	264,835	0.1	8
6-14	2,839	3.0	32,178	0.2	20	13	0.0	154	0.3	2,839	14,679	15.4	166,224	0.1	7
15-20	1,705	4.1	18,698	0.2	23	8	0.0	91	0.3	4,376	4,376	10.5	47,987	0.1	4
21-44	243	8.9	2,119	0.4	53	22	0.8	183	0.5	54	180	6.6	1,603	0.1	4
45-64	103	12.8	918	0.4	54	32	4.0	188	0.5	58	39	4.9	372	0.1	4
65-74	34	8.7	386	0.4	42	12	3.1	124	0.4	46	15	3.8	165	0.1	3
75-84	29	7.1	302	0.5	34	8	2.0	92	0.4	51	12	2.9	105	0.2	11
85 and older	15	3.4	140	0.3	12	5	1.1	51	0.1	16	12	2.7	122	0.1	5
Unknown	14	1.8	124	0.2	11	1	0.1	12	0.8	110	54	6.8	545	0.1	7

Source: Data for this table are from the MAX 2006 file for Arkansas, released by CMS in 9/2009. This table was produced on 02/09/2010.

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 2006. 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 2006. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

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

Nondual Medicaid 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, 2006

Beneficiary Characteristics	MISC. ENDOCRINE					CONTRACEPTIVES					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	4,168	0.6	47,122	0.4	\$157	35,755	5.5	377,461	0.4	\$18	651,412	6,423,033
Female												
All Females	2,072	0.5	23,461	0.4	124	35,726	9.1	377,165	0.4	18	394,441	3,854,728
Female, Disabled												
All Ages	1,132	3.2	12,931	0.5	140	2,317	6.6	26,938	0.4	17	34,854	370,327
5 and younger	29	1.2	332	0.6	255	0	0.0	0	0.0	0	2,497	26,379
6-14	197	4.5	2,275	0.6	322	121	2.7	1,400	0.3	14	4,411	49,301
15-20	83	2.6	950	0.6	281	797	24.6	9,206	0.3	15	3,235	35,585
21-44	182	1.7	2,105	0.5	141	1,300	12.2	15,163	0.4	18	10,696	114,727
45-64	639	4.6	7,247	0.5	59	99	0.7	1,169	0.5	20	13,968	144,021
65-74	2	4.3	22	0.9	67	0	0.0	0	0.0	0	47	314
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	940	0.3	10,530	0.3	104	33,409	9.3	350,227	0.4	18	359,587	3,484,401
5 and younger	73	0.1	844	0.2	79	4	0.0	44	0.2	6	75,402	731,240
6-14	667	0.7	7,542	0.3	105	844	0.9	9,532	0.3	13	93,983	987,803
15-20	68	0.1	775	0.4	242	13,090	21.3	136,887	0.4	16	61,327	578,036
21-44	46	0.0	470	0.3	49	19,327	16.0	202,240	0.4	19	120,843	1,110,971
45-64	47	0.8	463	0.4	33	144	2.6	1,524	0.6	24	5,587	49,716
65-74	19	3.1	221	0.4	31	0	0.0	0	0.0	0	608	6,673
75-84	14	2.2	144	0.4	34	0	0.0	0	0.0	0	631	6,724
85 and older	6	0.5	71	0.3	24	0	0.0	0	0.0	0	1,206	13,238
Male												
All Males	2,094	0.8	23,640	0.4	190	26	0.0	270	0.3	13	256,174	2,561,285
Male, Disabled												
All Ages	783	2.2	8,977	0.6	266	12	0.0	137	0.3	15	35,917	372,372
5 and younger	46	1.2	510	0.6	311	0	0.0	0	0.0	0	3,911	41,721
6-14	398	4.5	4,578	0.5	242	0	0.0	0	0.0	0	8,942	99,262
15-20	144	2.7	1,640	0.7	451	0	0.0	0	0.0	0	5,389	58,716
21-44	123	1.4	1,442	0.5	225	2	0.0	23	0.1	7	8,814	90,111
45-64	71	0.8	797	0.5	73	10	0.1	114	0.3	16	8,822	82,336
65-74	1	2.6	10	0.4	30	0	0.0	0	0.0	0	39	226
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 Medicaid 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, 2006

Beneficiary Characteristics	MISC. ENDOCRINE						CONTRACEPTIVES					
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Mean Rx \$ Benefit per Benefit Month		Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Mean Rx \$ Benefit per Benefit Month		Number of Beneficiaries	Number of Benefit Months
				Month	Month				Month	Month		
Male, Other Eligibles												
All Ages	1,311	0.6	14,663	0.3	143	14	0.0	133	0.2	11	220,257	2,188,913
5 and younger	87	0.1	992	0.2	50	4	0.0	42	0.2	8	78,871	761,800
6-14	1,112	1.2	12,473	0.3	102	2	0.0	22	0.1	4	95,043	990,463
15-20	106	0.3	1,136	0.5	678	6	0.0	53	0.4	16	41,557	397,973
21-44	1	0.0	6	0.3	26	0	0.0	0	0.0	0	2,739	19,924
45-64	0	0.0	0	0.0	0	0	0.0	0	0.0	0	803	5,617
65-74	1	0.3	12	0.2	44	1	0.3	4	0.3	13	393	4,152
75-84	2	0.5	20	0.1	8	0	0.0	0	0.0	0	407	4,209
85 and older	2	0.5	24	0.1	6	1	0.2	12	0.2	12	444	4,775
Unknown	2	0.3	21	0.6	195	3	0.4	26	0.5	20	797	7,020

Source: Data for this table are from the MAX 2006 file for Arkansas, released by CMS in 9/2009. This table was produced on 02/09/2010.

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 2006. 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 2006. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

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

Nondual Medicaid Beneficiaries

TABLE ND.8
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BENEFICIARY CHARACTERISTIC^{a, b}
 NONDUAL BENEFICIARIES, ARKANSAS, 2006

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	\$459	6.4	749	7,316
Age				
0-64	603	8.1	504	4,970
65-74	292	4.3	62	652
75-84	136	2.3	88	836
85 and older	70	1.6	95	858
Unknown	0	0.0	0	0
Gender				
Female	482	6.7	400	4,008
Male	434	6.0	346	3,287
Unknown	47	0.9	3	21
Race				
White	448	6.4	469	4,579
African American	452	6.1	223	2,214
Other/unknown	584	7.5	57	523
Basis of Eligibility^c				
Aged	155	2.6	242	2,331
Disabled	601	8.1	506	4,983
Adults	0	0.0	0	0
Children	0	0.0	0	0
Unknown	1,160	6.0	1	2

Source: Data for this table are from the MAX 2006 file for Arkansas, released by CMS in 9/2009. This table was produced on 02/09/2010.

a. Table ND.8 includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their 2006 Medicaid enrollment. A total of 609 beneficiaries who were in nursing facilities for part of their enrollment and their 6,263 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.

Nondual Medicaid Beneficiaries

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, 2006

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users								Users				
	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Number of Users	As a Percentage of All-Year Nursing Facility Residents	Number of Benefit Months	
Anti-infective Agents	0.4	0.1	0.0	0.3	\$39	\$29	\$1	\$8	\$90	\$231	\$98	\$29	1,854	\$167,136	414	55.3	4,319
Biologicals	0.0	0.0	0.0	0.0	0	0	0	0	0	0	0	0	0	0	0.0	0	
Antineoplastic Agents	0.4	0.1	0.0	0.4	49	22	0	27	112	321	0	73	177	19,869	39	5.2	402
Endocrine/Metabolic Drugs	1.3	0.4	0.1	0.8	67	48	7	13	54	107	127	17	3,948	212,178	293	39.1	3,147
Cardiovascular Agents	2.0	0.5	0.1	1.4	77	31	15	32	39	65	127	23	8,654	340,946	427	57.0	4,403
Respiratory Agents	0.6	0.3	0.0	0.3	44	35	1	8	72	111	44	30	1,639	117,565	258	34.4	2,701
Gastrointestinal Agents	1.2	0.4	0.0	0.8	71	55	1	15	61	141	125	19	4,154	254,473	341	45.5	3,577
Genitourinary Agents	0.7	0.3	0.1	0.2	46	32	7	8	69	92	89	32	1,004	69,723	141	18.8	1,503
CNS Drugs	1.9	0.8	0.1	0.9	211	175	10	26	112	208	92	27	9,976	1,115,275	507	67.7	5,298
Stimulants/Anti-obesity/Anorexia	0.6	0.3	0.0	0.4	75	65	0	10	117	238	0	27	35	4,110	7	0.9	55
Miscellaneous Psychological/Neurological Agents	0.7	0.7	0.0	0.0	189	188	0	0	279	279	0	168	464	129,411	72	9.6	686
Analgesics and Anesthetics	1.0	0.2	0.0	0.8	49	27	1	21	48	161	33	25	3,305	160,144	326	43.5	3,294
Neuromuscular Agents	1.6	0.5	0.0	1.1	118	77	2	39	75	170	53	36	5,860	437,509	349	46.6	3,712
Nutritional Products	0.8	0.0	0.0	0.8	16	1	0	15	21	76	7	20	1,615	33,139	206	27.5	2,086
Hematological Agents	1.0	0.3	0.0	0.7	80	64	0	15	81	245	11	21	2,134	171,908	212	28.3	2,154
Topical Products	0.4	0.1	0.1	0.2	22	8	8	6	50	76	71	27	1,582	78,679	330	44.1	3,528
Miscellaneous Products	0.3	0.1	0.0	0.3	135	131	0	4	406	1,762	0	16	112	45,419	32	4.3	336
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	11	0	0	0	37	0	0	0	45	1,653	15	2.0	150
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.	46,558	3,359,137	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2006 file for Arkansas, released by CMS in 9/2009. This table was produced on 02/09/2010.
 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 2006. A total of 609 beneficiaries who were in nursing facilities for part of their enrollment and their 6,263 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 2006. A beneficiary who used drugs from two or more categories was counted as a user for each category. Therefore, the sum of users across categories may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
 c. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
 d. For information about these therapeutic categories, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.
 e. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. For information about this classification method, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.
 In 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.

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, 2006

Top 10 Drug Groups in Nursing Facilities	Users			Among Users			
	Total Medicaid Rx \$	Number of Users	As a Percentage of All-Year Nursing Facility Residents	Number of Benefit Months	Number of Rx per Benefit Month	\$ per Rx	Rx \$ per Benefit Month
ANTIPSYCHOTICS	\$832,383	383	51.1	4,267	0.9	\$218	\$195
ANTICONVULSANT	385,679	368	49.1	4,103	1.1	88	94
ANTIDEPRESSANTS	215,559	377	50.3	4,123	0.9	61	52
ULCER DRUGS	186,662	307	41.0	3,390	0.8	71	55
ANTIDIABETIC	141,932	245	32.7	2,745	0.8	65	52
ANTIHYPERLIPIDEMIC	138,406	136	18.2	1,554	0.8	112	89
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	129,411	73	9.7	764	0.6	279	169
ANTIASTHMATIC	96,866	207	27.6	2,231	0.5	89	43
ANTIHYPERTENSIVE	98,314	239	31.9	2,561	0.8	48	38
MIGRAINE PRODUCTS	86,565	50	6.7	559	0.9	167	155
Total	2,311,777	2,385	n.a.	26,297	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2006 file for Arkansas, released by CMS in 9/2009. This table was produced on 02/09/2010.

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 2006. A total of 609 beneficiaries who were in nursing facilities for part of their enrollment and their 6,263 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 2006. 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 2006 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement; n.a. = not applicable.

Nondual Medicaid 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, 2006

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	21,888	\$2,311,777	383	51.1	4,267	0.9	\$195	368	49.1	4,103	1.1	\$94
Female												
All Females	12,738	1,393,112	221	55.3	2,468	1.0	218	208	52.0	2,334	1.0	96
Female, Disabled												
All Ages	11,158	1,242,862	184	68.9	2,078	1.0	236	181	67.8	2,016	1.1	99
64 or younger	11,149	1,242,412	184	69.2	2,078	1.0	236	181	68.0	2,016	1.1	99
65-74	9	450	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles												
All Ages	1,580	150,250	37	27.8	390	0.6	122	27	20.3	318	0.8	77
64 or younger	4	789	1	100.0	2	2.0	395	0	0.0	0	0.0	0
65-74	895	93,667	20	64.5	240	0.7	156	16	51.6	192	0.8	78
75-84	486	41,927	11	22.0	93	0.3	78	10	20.0	114	0.8	84
85 and older	195	13,867	5	9.8	55	0.4	36	1	2.0	12	0.3	7
Male												
All Males	9,144	917,897	161	46.5	1,793	0.8	164	160	46.2	1,769	1.1	92
Male, Disabled												
All Ages	7,978	810,614	131	55.0	1,471	0.9	175	142	59.7	1,586	1.1	99
64 or younger	7,951	809,945	131	55.5	1,471	0.9	175	141	59.7	1,574	1.1	100
65-74	27	669	0	0.0	0	0.0	0	1	50.0	12	2.3	56
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male, Other Eligibles												
All Ages	1,166	107,283	30	27.8	322	0.6	112	18	16.7	183	0.6	28
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	535	51,225	14	50.0	168	0.6	105	10	35.7	118	0.6	33
75-84	357	36,537	10	26.3	101	0.7	162	4	10.5	37	0.7	19
85 and older	274	19,521	6	14.3	53	0.2	41	4	9.5	28	0.6	20
Unknown	6	768	1	33.3	6	0.2	57	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2006 file for Arkansas, released by CMS in 9/2009. This table was produced on 02/09/2010.
 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 2006. A total of 609 beneficiaries who were in nursing facilities for part of their enrollment and their 6,263 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 2006. 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 2006 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.
 Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE 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, 2006

Beneficiary Characteristics	ANTIDEPRESSANTS					ULCER DRUGS					ANTIDIABETIC				
	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	377	50.3	4,123	0.9	\$52	307	41.0	3,390	0.8	\$55	245	32.7	2,745	0.8	\$52
Female															
All Females	211	52.8	2,342	0.9	53	168	42.0	1,901	0.7	52	152	38.0	1,725	0.8	50
Female, Disabled															
All Ages	176	65.9	1,943	0.9	58	144	53.9	1,624	0.8	55	123	46.1	1,392	0.8	52
64 or younger	175	65.8	1,941	0.9	58	143	53.8	1,622	0.8	55	122	45.9	1,390	0.8	52
65-74	1	100.0	2	1.0	72	1	100.0	2	1.0	15	1	100.0	2	1.0	29
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	35	26.3	399	0.6	30	24	18.0	277	0.5	36	29	21.8	333	0.6	41
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	15	48.4	180	0.7	36	8	25.8	91	0.8	57	13	41.9	150	0.6	44
75-84	13	26.0	147	0.5	24	10	20.0	120	0.4	20	13	26.0	147	0.6	40
85 and older	7	13.7	72	0.7	26	6	11.8	66	0.4	39	3	5.9	36	0.5	28
Male															
All Males	165	47.7	1,769	0.8	52	139	40.2	1,489	0.8	59	93	26.9	1,020	0.8	55
Male, Disabled															
All Ages	132	55.5	1,412	0.9	55	113	47.5	1,206	0.9	67	81	34.0	886	0.9	62
64 or younger	132	55.9	1,412	0.9	55	113	47.9	1,206	0.9	67	81	34.3	886	0.9	62
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	33	30.6	357	0.6	38	26	24.1	283	0.6	22	12	11.1	134	0.5	12
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	14	50.0	166	0.7	45	7	25.0	83	0.6	26	5	17.9	60	0.6	11
75-84	10	26.3	101	0.4	27	12	31.6	133	0.6	27	3	7.9	36	0.4	8
85 and older	9	21.4	90	0.6	37	7	16.7	67	0.4	7	4	9.5	38	0.4	17
Unknown	1	33.3	12	0.1	6	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2006 file for Arkansas, released by CMS in 9/2009. This table was produced on 02/09/2010.
 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 2006. A total of 609 beneficiaries who were in nursing facilities for part of their enrollment and their 6,263 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 2006. 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 2006 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/master-drug-database.aspx>.
 Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE 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, 2006

Beneficiary Characteristics	ANTIHYPERLIPIDEMIC						MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL						ANTIASTHMATIC					
	Number of Users	Users as % of All-Year		Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year		Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year		Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
		Nursing Facility Residents	Benefit Months					Nursing Facility Residents	Benefit Months					Nursing Facility Residents	Benefit Months			
All	136	18.2	1,554	0.8	\$89	73	9.7	764	0.6	\$169	207	27.6	2,231	0.5	\$43			
Female																		
All Females	74	18.5	839	0.8	93	37	9.3	370	0.7	239	115	28.8	1,245	0.5	45			
Female, Disabled																		
All Ages	66	24.7	749	0.9	96	17	6.4	166	1.1	469	85	31.8	932	0.5	46			
64 or younger	66	24.8	749	0.9	96	17	6.4	166	1.1	469	84	31.6	930	0.5	46			
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	100.0	2	0.5	61			
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	8	6.0	90	0.7	71	20	15.0	204	0.4	52	30	22.6	313	0.6	44			
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	9.7	36	0.7	77	3	9.7	36	0.5	76	17	54.8	189	0.8	62			
75-84	5	10.0	54	0.7	66	10	20.0	87	0.4	44	7	14.0	58	0.5	19			
85 and older	0	0.0	0	0.0	0	7	13.7	81	0.4	49	6	11.8	66	0.1	14			
Male																		
All Males	62	17.9	715	0.7	84	35	10.1	391	0.5	105	90	26.0	962	0.4	42			
Male, Disabled																		
All Ages	47	19.7	539	0.8	90	16	6.7	177	0.7	172	70	29.4	728	0.4	40			
64 or younger	47	19.9	539	0.8	90	16	6.8	177	0.7	172	70	29.7	728	0.4	40			
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	15	13.9	176	0.6	66	19	17.6	214	0.3	49	20	18.5	234	0.4	48			
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	6	21.4	71	0.4	55	5	17.9	60	0.3	48	7	25.0	81	0.4	59			
75-84	7	18.4	84	0.7	73	8	21.1	93	0.3	51	5	13.2	60	0.2	14			
85 and older	2	4.8	21	0.5	75	6	14.3	61	0.3	48	8	19.0	93	0.6	60			
Unknown	0	0.0	0	0.0	0	1	33.3	3	0.3	58	2	66.7	24	0.1	5			

Source: Data for this table are from the MAX 2006 file for Arkansas, released by CMS in 9/2009. This table was produced on 02/09/2010.
 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 2006. A total of 609 beneficiaries who were in nursing facilities for part of their enrollment and their 6,263 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 2006. 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 2006 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.
 Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE 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, 2006

Beneficiary Characteristics	ANTIHYPERTENSIVE					MIGRAINE PRODUCTS						
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	All-Year Nursing Facility Residents	Benefit Months Among All-Year Nursing Facility Residents
All	239	31.9	2,561	0.8	\$38	50	6.7	559	0.9	\$155	749	7,316
Female												
All Females	143	35.8	1,555	0.8	39	27	6.7	288	0.9	134	400	4,008
Female, Disabled												
All Ages	120	44.9	1,294	0.8	41	24	9.0	258	0.9	135	267	2,768
64 or younger	119	44.7	1,292	0.8	41	24	9.0	258	0.9	135	266	2,766
65-74	1	100.0	2	1.0	50	0	0.0	0	0.0	0	1	2
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	23	17.3	261	0.6	31	3	2.3	30	1.2	130	133	1,240
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	2
65-74	9	29.0	102	0.6	20	2	6.5	24	1.4	162	31	334
75-84	10	20.0	111	0.6	43	0	0.0	0	0.0	0	50	445
85 and older	4	7.8	48	0.6	30	1	2.0	6	0.5	2	51	459
Male												
All Males	95	27.5	994	0.8	38	23	6.6	271	0.9	177	346	3,287
Male, Disabled												
All Ages	76	31.9	792	0.9	40	21	8.8	247	0.9	171	238	2,209
64 or younger	76	32.2	792	0.9	40	21	8.9	247	0.9	171	236	2,196
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	13
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
Male, Other Eligibles												
All Ages	19	17.6	202	0.7	29	2	1.9	24	1.5	232	108	1,078
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	4	14.3	48	1.0	46	2	7.1	24	1.5	232	28	303
75-84	5	13.2	60	0.5	22	0	0.0	0	0.0	0	38	391
85 and older	10	23.8	94	0.6	24	0	0.0	0	0.0	0	42	384
Unknown	1	33.3	12	0.1	4	0	0.0	0	0.0	0	3	21

Source: Data for this table are from the MAX 2006 file for Arkansas, released by CMS in 9/2009. This table was produced on 02/09/2010.
 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 2006. A total of 609 beneficiaries who were in nursing facilities for part of their enrollment and their 6,263 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 2006. 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 2006 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.
 Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE ND.11
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
 AMONG NONDUALS, BY BENEFICIARY CHARACTERISTIC^{a,b}
 ARKANSAS, 2006

Beneficiary Characteristics	Number of Beneficiaries with at Least One Part D Excluded Rx	Percentage of Beneficiaries with at Least One Part D Excluded Rx	Number of Part D Excluded Rx per Beneficiary	Total Number Part D Excluded Rx	Part D Excluded Rx \$ per Beneficiary	Total Part D Excluded Rx \$	\$ per Part D Excluded Rx	Part D Excluded Rx as a Percentage of All Nondual Rx \$	Total Number of Beneficiaries	
All	148,608	22.8	0.6	386,417	\$10	\$6,791,054	\$18	2.5	651,412	
Age										
5 and younger	54,400	33.8	0.7	119,515	11	1,700,698	14	4.5	160,846	
6-14	48,358	23.9	0.5	105,468	10	1,966,474	19	2.5	202,718	
15-20	19,910	17.8	0.4	43,622	7	759,645	17	1.8	111,700	
21-44	16,523	11.5	0.4	61,943	8	1,212,589	20	2.1	143,147	
45-64	9,074	31.1	1.8	53,915	38	1,115,936	21	2.0	29,205	
65-74	174	15.9	0.9	1,015	15	16,869	17	2.2	1,096	
75-84	93	8.9	0.5	529	11	11,073	21	3.9	1,042	
85 and older	76	4.6	0.2	410	5	7,770	19	5.5	1,657	
Unknown	0	0.0	0.0	0	0	0	0	0.0	1	
Basis of Eligibility^c										
Aged	315	8.5	0.5	1,813	9	33,568	19	3.0	3,699	
Disabled	23,845	33.7	1.7	116,841	38	2,709,255	23	1.9	70,800	
Adults	13,012	8.7	0.2	34,802	3	521,320	15	2.4	149,618	
Children	111,239	26.1	0.5	232,228	8	3,512,691	15	3.4	426,724	
Unknown	197	34.5	1.3	733	25	14,220	19	1.6	571	
Gender										
Female	83,698	21.2	0.6	224,141	10	3,927,218	18	2.8	394,441	
Male	64,826	25.3	0.6	162,135	11	2,861,339	18	2.2	256,174	
Unknown	84	10.5	0.2	141	3	2,497	18	3.4	797	
Race										
White	91,695	23.9	0.6	247,966	12	4,520,100	18	2.6	383,326	
African American	40,193	21.1	0.5	93,392	7	1,419,323	15	2.4	190,789	
Other/unknown	16,720	21.6	0.6	45,059	11	851,631	19	2.1	77,297	
Use of Nursing Facilities^d										
Entire year	400	53.4	5.7	4,260	110	82,069	19	2.4	749	
Part year	371	60.9	5.2	3,145	107	65,451	21	2.3	609	
None	147,837	22.7	0.6	379,012	10	6,643,534	18	2.5	650,054	
Maintenance Assistance Status										
Cash	34,463	31.1	1.3	144,332	27	2,988,153	21	2.0	110,667	
Medically needy	1,991	24.8	0.8	6,073	15	117,708	19	2.8	8,035	
Poverty related	84,036	26.5	0.6	176,589	8	2,590,653	15	3.5	317,258	
Other/unknown	28,118	13.1	0.3	59,423	5	1,094,540	18	2.4	215,452	

Source: Data for this table are from the MAX 2006 file for Arkansas, released by CMS in 9/2009. This table was produced on 02/09/2010.

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 2006.

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 1 on Table 1 for methodology used to determine use of nursing facilities.

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.

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, 2006

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	\$18	\$0	\$0	6,423,033
Age						
5 and younger	0.1	1	14	0	0	1,562,775
6-14	0.0	1	19	0	0	2,130,036
15-20	0.0	1	17	0	0	1,071,743
21-44	0.0	1	20	0	1	1,336,106
45-64	0.2	4	21	0	2	281,876
65-74	0.1	1	17	0	1	11,466
75-84	0.0	1	21	0	1	10,970
85 and older	0.0	0	19	0	0	18,059
Unknown	0.0	0	0	0	0	2
Basis of Eligibility^c						
Aged	0.0	1	19	0	1	39,886
Disabled	0.2	4	23	0	2	742,933
Adults	0.0	0	15	0	0	1,331,650
Children	0.1	1	15	0	0	4,304,026
Unknown	0.2	3	19	0	2	4,538
Gender						
Female	0.1	1	18	0	0	3,854,728
Male	0.1	1	18	0	0	2,561,285
Unknown	0.0	0	18	0	0	7,020
Race						
White	0.1	1	18	0	0	3,752,321
African American	0.0	1	15	0	0	1,910,821
Other/unknown	0.1	1	19	0	0	759,891
Use of Nursing Facilities^d						
Entire year	0.6	11	19	0	6	7,316
Part year	0.5	10	21	0	5	6,263
None	0.1	1	18	0	0	6,409,454
Maintenance Assistance Status						
Cash	0.1	3	21	0	1	1,131,270
Medically needy	0.1	2	19	0	1	52,043
Poverty related	0.1	1	15	0	0	3,101,850
Other/unknown	0.0	1	18	0	0	2,137,870

Source: Data for this table are from the MAX 2006 file for Arkansas, released by CMS in 9/2009. This table was produced on 02/09/2010.

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 2006.

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, 2006

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	Excluded Rx
All	174,266	\$39	\$6,791,054	100.0	386,417	\$18	100.0
Anorexia or weight loss/gain	0	0	0	0.0	0	0	0.0
Fertility drugs	2	55	109	0.0	2	55	0.0
Drugs for cosmetic purposes	39	16	616	0.0	48	13	0.0
Cough and cold medications	92,130	28	2,576,557	37.9	163,077	16	42.2
Vitamins and minerals	4,565	94	429,253	6.3	18,297	23	4.7
Non-prescription drugs	55,586	24	1,319,626	19.4	103,025	13	26.7
Barbiturates	837	60	50,409	0.7	6,386	8	1.7
Benzodiazepines	18,422	95	1,754,039	25.8	90,278	19	23.4
Other Part D Excl Rx Drugs	2,685	246	660,445	9.7	5,304	125	1.4

Source: Data for this table are from the MAX 2006 file for Arkansas, released by CMS in 9/2009. This table was produced on 02/09/2010.

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 2006. A user is a beneficiary who had at least one prescription filled for a Part D excluded drug in 2006. 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 ND.11.

b. Includes OTC drugs as well as prescription drugs.

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

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

Nondual Medicaid 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, 2006

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	651,412	3,699	70,800	149,618	426,724	571	6,423,033	39,886	742,933	1,331,650	4,304,026	4,538
Age												
5 and younger	160,846	0	6,410	54	154,382	0	1,562,775	0	68,121	493	1,494,161	0
6-14	202,718	0	13,356	89	189,273	0	2,130,036	0	148,599	892	1,980,545	0
15-20	111,700	0	8,624	20,048	83,025	3	1,071,743	0	94,301	148,535	828,881	26
21-44	143,147	0	19,515	123,391	44	197	1,336,106	0	204,874	1,129,312	439	1,481
45-64	29,205	0	22,809	6,028	0	368	281,876	0	226,498	52,368	0	3,010
65-74	1,096	1,004	86	3	0	3	11,466	10,895	540	10	0	21
75-84	1,042	1,038	0	4	0	0	10,970	10,941	0	29	0	0
85 and older	1,657	1,656	0	1	0	0	18,059	18,048	0	11	0	0
Unknown	1	1	0	0	0	0	2	2	0	0	0	0
Gender												
Female	394,441	2,436	34,854	142,506	214,074	571	3,854,728	26,569	370,327	1,287,950	2,165,344	4,538
Male	256,174	1,242	35,917	7,026	211,989	0	2,561,285	13,131	372,372	43,162	2,132,620	0
Unknown	797	21	29	86	661	0	7,020	186	234	538	6,062	0
Race												
White	383,326	1,935	33,247	93,236	254,461	447	3,752,321	20,416	342,163	831,773	2,554,401	3,568
African American	190,789	1,242	19,419	46,080	123,947	101	1,910,821	13,735	206,221	424,638	1,265,447	780
Other/unknown	77,297	522	18,134	10,302	48,316	23	759,891	5,735	194,549	75,239	484,178	190
Use of Nursing Facilities^c												
Entire year	749	242	506	0	0	1	7,316	2,331	4,983	0	0	2
Part year	609	148	455	5	1	0	6,263	1,510	4,708	33	12	0
None	650,054	3,309	69,839	149,613	426,723	570	6,409,454	36,045	733,242	1,331,617	4,304,014	4,536
Maintenance Assistance Status												
Cash	110,667	2,377	64,292	19,512	24,486	0	1,131,270	27,839	688,936	168,544	245,951	0
Medically needy	8,035	80	2,077	4,519	1,359	0	52,043	433	8,308	30,117	13,185	0
Poverty related	317,258	95	7	29,371	287,214	571	3,101,850	980	45	185,656	2,910,631	4,538
Other/unknown	215,452	1,147	4,424	96,216	113,665	0	2,137,870	10,634	45,644	947,333	1,134,259	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	651,412	3,699	70,800	149,618	426,724	571	6,423,033	39,886	742,933	1,331,650	4,304,026	4,538
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 2006 file for Arkansas, released by CMS in 9/2009. This table was produced on 02/09/2010.

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, 2006

	Beneficiaries and		Included in Cell K of Table 1		Excluded from Cell K of Table 1	
	Benefit Months in Cell J 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	651,412	6,423,033	651,412	6,423,033	0	0
Fee-for-service (FFS) all year	651,412	6,423,033	651,412	6,423,033	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 2006 file for Arkansas, released by CMS in 9/2009. This table was produced on 02/09/2010.

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

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

Nondual Medicaid Beneficiaries