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

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TABLE ND.2
CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a, b}
NONDUAL BENEFICIARIES, ARKANSAS, 2007

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown
All	645,632	1,979	73,410	133,033	436,510	700	6,331,559	19,433	768,533	1,146,271	4,391,803	5,519
Age												
5 and younger	163,187	0	6,934	56	156,197	0	1,596,153	0	73,391	481	1,522,281	0
6-14	201,564	0	14,438	143	186,983	0	2,133,230	0	161,871	1,205	1,970,154	0
15-20	110,477	0	9,222	8,471	92,774	10	1,063,180	0	100,483	65,572	897,055	70
21-44	138,881	0	19,634	118,433	554	260	1,240,950	0	205,573	1,031,039	2,302	2,036
45-64	29,466	0	23,118	5,922	0	426	278,357	0	227,026	47,929	0	3,402
65-74	846	772	64	6	0	4	8,186	7,959	189	27	0	11
75-84	525	523	0	2	0	0	5,153	5,135	0	18	0	0
85 and older	684	684	0	0	0	0	6,339	6,339	0	0	0	0
Unknown	2	0	0	0	2	0	11	0	0	0	11	0
Gender												
Female	389,026	1,290	35,693	129,955	221,388	700	3,753,969	12,707	377,976	1,126,014	2,231,753	5,519
Male	256,413	680	37,711	3,068	214,954	0	2,575,458	6,618	390,491	20,166	2,158,183	0
Unknown	193	9	6	10	168	0	2,132	108	66	91	1,867	0
Race												
White	346,242	897	31,716	76,518	236,689	422	3,501,596	8,553	340,719	680,467	2,468,243	3,614
African American	175,712	675	19,119	39,014	116,789	115	1,808,071	7,146	209,978	358,744	1,231,220	983
Other/unknown	123,678	407	22,575	17,501	83,032	163	1,021,892	3,734	217,836	107,060	692,340	922
Use of Nursing Facilities^c												
Entire year	779	205	574	0	0	0	7,656	1,999	5,657	0	0	0
Part year	574	127	445	1	0	1	5,959	1,294	4,649	10	0	6
None	644,279	1,647	72,391	133,032	436,510	699	6,317,944	16,140	758,227	1,146,261	4,391,803	5,513
Maintenance Assistance Status												
Cash	105,934	1,042	66,789	17,500	20,603	0	1,077,379	11,797	712,458	149,836	203,288	0
Medically needy	6,959	75	1,907	3,957	1,020	0	43,220	427	7,513	25,797	9,483	0
Poverty-related	324,937	132	13	22,734	301,358	700	3,184,813	1,248	111	143,014	3,034,921	5,519
Other/unknown	207,802	730	4,701	88,842	113,529	0	2,026,147	5,961	48,451	827,624	1,144,111	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	645,632	1,979	73,410	133,033	436,510	700	6,331,559	19,433	768,533	1,146,271	4,391,803	5,519
FFS part year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
FFS part year, no Rx claims	0	0	0	0	0	0	0	0	0	0	0	0

Source: Data for this table are from the MAX 2007 file for Arkansas, released by CMS in 3/2010. This table was produced on 10/06/2010.

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.

TABLE ND.3
ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC^{a, b}
NONDUAL BENEFICIARIES, ARKANSAS, 2007

Beneficiary Characteristics	Percentage with at Least One Rx	Mean Number of Rx	Mean Rx \$	\$ per Rx	Mean \$, All Medicaid FFS \$ ^c	Rx \$ as a Percentage of All Medicaid FFS \$ ^d	Number of Beneficiaries
All	62.5	6.3	\$458	\$73	\$2,924	15.6	645,632
Age							
5 and younger	74.6	5.5	263	48	2,997	8.8	163,187
6-14	65.7	5.4	438	81	2,194	20.0	201,564
15-20	59.5	5.3	424	80	2,852	14.9	110,477
21-44	43.8	5.4	427	79	2,613	16.3	138,881
45-64	74.0	24.6	1,919	78	8,802	21.8	29,466
65-74	53.4	18.7	1,273	68	10,928	11.6	846
75-84	21.0	6.7	377	57	9,879	3.8	525
85 and older	11.3	3.3	152	46	7,299	2.1	684
Unknown	50.0	4.0	115	29	218	52.8	2
Basis of Eligibility^e							
Aged	30.0	10.6	675	64	9,473	7.1	1,979
Disabled	81.3	20.8	2,112	102	11,764	18.0	73,410
Adults	37.7	3.1	151	48	1,177	12.8	133,033
Children	67.0	4.8	270	56	1,923	14.1	436,510
Unknown	86.9	14.3	1,199	84	14,131	8.5	700
Gender							
Female	59.0	6.0	387	64	2,478	15.6	389,026
Male	67.8	6.7	565	84	3,603	15.7	256,413
Unknown	35.2	1.8	87	47	1,848	4.7	193
Race							
White	65.9	7.2	522	72	2,837	18.4	346,242
African American	58.8	5.4	365	68	2,619	13.9	175,712
Other/unknown	58.2	5.1	408	81	3,602	11.3	123,678
Use of Nursing Facilities^f							
Entire year	85.1	70.4	5,044	72	54,696	9.2	779
Part year	88.3	59.6	4,616	77	44,595	10.4	574
None	62.4	6.2	448	73	2,825	15.9	644,279
Maintenance Assistance Status							
Cash	76.8	16.1	1,499	93	8,037	18.6	105,934
Medically needy	64.9	7.5	538	72	5,478	9.8	6,959
Poverty related	68.0	4.8	255	53	2,082	12.2	324,937
Other/unknown	46.5	3.6	241	68	1,550	15.6	207,802

Source: Data for this table are from the MAX 2007 file for Arkansas, released by CMS in 3/2010. This table was produced on 10/06/2010.

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

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

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

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

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

TABLE ND.4
MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a, b}
NONDUAL BENEFICIARIES, ARKANSAS, 2007

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	\$47	15.6	37.5	50.9	5.9	4.8	0.9	0.1	\$298	645,632	6,331,559
Age												
5 and younger	0.6	27	8.8	25.4	66.2	6.2	2.0	0.2	0.0	306	163,187	1,596,153
6-14	0.5	41	20.0	34.3	57.0	5.1	3.2	0.4	0.0	207	201,564	2,133,230
15-20	0.6	44	14.9	40.5	50.1	5.4	3.4	0.5	0.0	296	110,477	1,063,180
21-44	0.6	48	16.3	56.2	32.0	5.3	5.6	0.8	0.1	292	138,881	1,240,950
45-64	2.6	203	21.8	26.0	18.3	13.3	31.7	10.0	0.7	932	29,466	278,357
65-74	1.9	132	11.6	46.6	15.7	7.7	21.0	7.7	1.3	1,129	846	8,186
75-84	0.7	38	3.8	79.0	9.5	2.5	4.4	3.8	0.8	1,007	525	5,153
85 and older	0.4	16	2.1	88.7	6.0	0.7	1.6	2.5	0.4	788	684	6,339
Unknown	0.7	21	52.8	50.0	50.0	0.0	0.0	0.0	0.0	40	2	11
Basis of Eligibility^e												
Aged	1.1	69	7.1	70.0	10.8	3.8	9.7	4.8	0.9	965	1,979	19,433
Disabled	2.0	202	18.0	18.7	35.9	14.2	24.2	6.5	0.5	1,124	73,410	768,533
Adults	0.4	18	12.8	62.3	31.0	3.8	2.8	0.2	0.0	137	133,033	1,146,271
Children	0.5	27	14.1	33.0	59.6	5.1	2.1	0.2	0.0	191	436,510	4,391,803
Unknown	1.8	152	8.5	13.1	39.9	21.6	23.3	2.1	0.0	1,792	700	5,519
Gender												
Female	0.6	40	15.6	41.0	48.0	5.4	4.7	0.9	0.1	257	389,026	3,753,969
Male	0.7	56	15.7	32.2	55.3	6.6	5.0	0.8	0.1	359	256,413	2,575,458
Unknown	0.2	8	4.7	64.8	33.7	1.6	0.0	0.0	0.0	167	193	2,132
Race												
White	0.7	52	18.4	34.1	52.6	6.5	5.6	1.1	0.1	281	346,242	3,501,596
African American	0.5	36	13.9	41.2	49.7	4.9	3.6	0.6	0.0	255	175,712	1,808,071
Other/unknown	0.6	49	11.3	41.8	47.6	5.4	4.3	0.8	0.1	436	123,678	1,021,892
Use of Nursing Facilities^f												
Entire year	7.2	513	9.2	14.9	6.2	3.7	17.2	36.1	22.0	5,565	779	7,656
Part year	5.7	445	10.4	11.7	10.8	6.1	24.9	33.3	13.2	4,296	574	5,959
None	0.6	46	15.9	37.6	50.9	5.9	4.8	0.8	0.0	288	644,279	6,317,944
Maintenance Assistance Status												
Cash	1.6	147	18.6	23.2	41.5	12.3	18.3	4.4	0.3	790	105,934	1,077,379
Medically needy	1.2	87	9.8	35.1	33.1	14.3	16.1	1.4	0.0	882	6,959	43,220
Poverty related	0.5	26	12.2	32.0	60.4	5.4	2.1	0.1	0.0	212	324,937	3,184,813
Other/unknown	0.4	25	15.6	53.5	41.4	3.0	1.8	0.3	0.0	159	207,802	2,026,147

Source: Data for this table are from the MAX 2007 file for Arkansas, released by CMS in 3/2010. This table was produced on 10/06/2010.

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

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

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

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

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

TABLE ND.5
AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC^{a, b, c}
NONDUAL BENEFICIARIES, ARKANSAS, 2007

Beneficiary Characteristics	All Rx			Patented Brand-Name Drugs			Off-Patent Brand-Name Drugs			Generic Drugs		
	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx
All	0.6	\$47	\$73	0.2	\$35	\$161	0.0	\$2	\$69	0.4	\$10	\$24
Age												
5 and younger	0.6	27	48	0.1	16	117	0.0	2	45	0.4	8	22
6-14	0.5	41	81	0.2	33	148	0.0	2	78	0.3	7	25
15-20	0.6	44	80	0.2	35	180	0.0	2	92	0.3	8	23
21-44	0.6	48	79	0.2	36	190	0.0	2	99	0.4	10	25
45-64	2.6	203	78	0.8	150	183	0.1	9	77	1.7	45	27
65-74	1.9	132	68	0.6	96	164	0.1	7	69	1.2	28	23
75-84	0.7	38	57	0.2	28	131	0.0	2	57	0.4	8	19
85 and older	0.4	16	46	0.1	11	111	0.0	1	73	0.2	5	20
Unknown	0.7	21	29	0.0	0	0	0.2	3	19	0.5	18	32
Basis of Eligibility^d												
Aged	1.1	69	64	0.3	50	153	0.1	4	67	0.7	15	22
Disabled	2.0	202	102	0.7	162	223	0.1	8	92	1.2	32	28
Adults	0.4	18	48	0.1	12	109	0.0	1	75	0.2	5	22
Children	0.5	27	56	0.2	19	120	0.0	2	55	0.3	7	22
Unknown	1.8	152	84	0.6	116	204	0.1	3	67	1.2	33	28
Gender												
Female	0.6	40	64	0.2	29	147	0.0	2	68	0.4	9	24
Male	0.7	56	84	0.2	44	177	0.0	2	69	0.4	10	25
Unknown	0.2	8	47	0.1	5	92	0.0	0	34	0.1	3	24
Race												
White	0.7	52	72	0.2	39	156	0.0	2	71	0.4	11	25
African American	0.5	36	68	0.2	27	155	0.0	2	63	0.3	7	23
Other/unknown	0.6	49	81	0.2	38	189	0.0	2	67	0.4	9	24
Use of Nursing Facilities^e												
Entire year	7.2	513	72	2.1	380	177	0.2	17	74	4.8	117	24
Part year	5.7	445	77	1.7	332	193	0.2	18	89	3.8	94	25
None	0.6	46	73	0.2	34	160	0.0	2	68	0.4	9	24
Maintenance Assistance Status												
Cash	1.6	147	93	0.5	116	212	0.1	6	88	1.0	25	26
Medically needy	1.2	87	72	0.3	64	194	0.0	3	74	0.8	20	24
Poverty related	0.5	26	53	0.2	18	116	0.0	2	53	0.3	7	22
Other/unknown	0.4	25	68	0.1	19	131	0.0	1	69	0.2	5	24

Source: Data for this table are from the MAX 2007 file for Arkansas, released by CMS in 3/2010. This table was produced on 10/06/2010.

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, 2007

Therapeutic Category	Number of Rx per Benefit Month Among Users			\$ per Benefit Month Among Users				\$ per Rx				Users ^e					
	Total	Patented	Off-Patent	Total	Patented	Off-Patent	Total	Patented	Off-Patent	Total	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		Brand-Name	Brand-Name							Generic	Generic
Anti-infective Agents	0.2	0.0	0.0	0.2	\$11	\$4	\$1	\$6	\$45	\$182	\$95	\$28	744,025	\$33,637,938	288,756	44.7	3,110,017
Biologicals	0.4	0.4	0.0	0.0	519	519	0	0	1404	1,404	0	0	5,128	7,200,801	1,504	0.2	13,883
Antineoplastic Agents	0.5	0.2	0.0	0.3	164	148	2	14	323	845	812	43	7,625	2,465,089	1,471	0.2	15,022
Endocrine/Metabolic Drugs	0.3	0.1	0.0	0.2	21	15	1	6	63	113	60	30	343,138	21,568,050	93,843	14.5	1,010,493
Cardiovascular Agents	0.8	0.1	0.1	0.6	27	11	5	11	35	92	65	19	311,573	10,804,516	37,825	5.9	403,632
Respiratory Agents	0.3	0.2	0.0	0.1	19	15	1	2	56	93	33	18	713,465	40,095,858	198,140	30.7	2,151,982
Gastrointestinal Agents	0.3	0.2	0.0	0.1	35	30	1	5	103	159	93	31	193,119	19,824,653	53,261	8.2	563,565
Genitourinary Agents	0.2	0.1	0.0	0.1	12	8	1	4	55	97	100	28	36,593	2,028,954	16,860	2.6	172,575
CNS Drugs	0.6	0.3	0.0	0.3	75	66	0	8	126	261	118	24	502,506	63,358,864	79,144	12.3	849,290
Stimulants/Anti-obesity/Anorexia	0.6	0.5	0.0	0.1	68	65	1	3	116	129	54	39	213,505	24,778,511	32,675	5.1	362,680
Miscellaneous Psychological/Neurological Agents	0.3	0.2	0.0	0.0	74	71	0	3	288	304	76	120	8,122	2,340,538	2,987	0.5	31,747
Analgesics and Anesthetics	0.3	0.0	0.0	0.3	8	3	0	5	29	176	46	20	358,888	10,274,901	124,875	19.3	1,317,523
Neuromuscular Agents	0.6	0.3	0.0	0.3	76	59	7	11	123	203	170	37	237,493	29,285,738	35,632	5.5	383,215
Nutritional Products	0.3	0.0	0.0	0.2	3	0	0	3	13	10	10	14	57,232	757,723	22,333	3.5	223,147
Hematological Agents	0.5	0.2	0.0	0.3	209	204	1	5	403	916	53	18	30,190	12,181,483	5,600	0.9	58,178
Topical Products	0.2	0.1	0.0	0.1	7	5	0	2	41	90	62	19	284,743	11,573,209	142,526	22.1	1,550,516
Miscellaneous Products	0.1	0.1	0.0	0.0	16	14	0	1	129	140	323	60	24,418	3,144,840	18,472	2.9	200,031
Unknown Therapeutic Category	0.1	0.0	0.0	0.0	4	0	0	0	32	0	0	0	1,717	55,405	1,136	0.2	12,616
TOTAL NO. OF RX AND RX \$	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	4,073,480	295,377,071	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2007 file for Arkansas, released by CMS in 3/2010. This table was produced on 10/06/2010.

- 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 2007.
- Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; CNS = Central Nervous System; MAX = Medicaid Analytic Extract; n.a. = not applicable; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE ND.7
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP^{a, b, c}
 NONDUAL BENEFICIARIES, ARKANSAS, 2007

Top 10 Drug Groups	Total Medicaid Rx \$	Users		Among Users			
		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	\$48,649,289	28,709	4.4	317,493	0.5	\$310	\$153
ANTICONVULSANT	27,012,591	28,829	4.5	314,117	0.6	144	86
ANTIASTHMATIC	26,856,221	122,939	19.0	1,355,899	0.2	81	20
STIMULANTS/ANTI-OBESITY/ANOREXIANTS	24,778,535	38,100	5.9	426,523	0.5	116	58
ULCER DRUGS	16,170,374	42,012	6.5	443,166	0.3	116	36
ANTIDEPRESSANTS	10,479,586	47,813	7.4	512,737	0.4	53	20
MISC. HEMATOLOGICAL	10,131,579	2,149	0.3	22,776	0.6	784	445
CEPHALOSPORINS	8,621,795	114,690	17.8	1,266,667	0.1	56	7
PASSIVE IMMUNIZING AGENTS	7,200,801	1,472	0.2	13,579	0.4	1,404	530
MISC. ENDOCRINE	7,110,124	4,118	0.6	46,471	0.4	357	153
Total	187,010,895	430,831	n.a.	4,719,428	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2007 file for Arkansas, released by CMS in 3/2010. This table was produced on 10/06/2010.

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 2007. A beneficiary who used drugs from two or more groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2007. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

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

TABLE 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, 2007

Beneficiary Characteristics	All Top 10 Drug Groups			ANTIPSYCHOTICS				ANTICONVULSANT				
	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
All	1,420,688	\$187,010,895	28,709	4.4	317,493	0.5	\$153	28,829	4.5	314,117	0.6	\$86
Female												
All Females	702,920	83,728,790	13,271	3.4	145,710	0.5	143	16,857	4.3	182,563	0.6	79
Female, Disabled												
All Ages	326,465	47,071,662	7,922	22.2	89,240	0.5	172	10,257	28.7	114,738	0.7	94
5 and younger	12,794	2,433,884	62	2.3	701	0.4	88	261	9.6	2,968	0.9	137
6-14	38,676	5,740,281	879	18.6	10,062	0.5	143	969	20.6	11,195	0.8	128
15-20	28,930	4,561,187	942	27.2	10,678	0.5	151	976	28.2	11,051	0.7	127
21-44	94,527	14,575,177	3,148	29.3	35,066	0.5	169	3,876	36.0	43,193	0.6	97
45-64	151,456	19,754,890	2,890	20.6	32,728	0.6	192	4,171	29.8	46,325	0.6	72
65-74	82	6,243	1	2.7	5	0.2	3	4	10.8	6	1.0	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	376,454	36,657,041	5,349	1.5	56,470	0.4	96	6,600	1.9	67,825	0.4	55
5 and younger	82,281	7,393,038	171	0.2	1,929	0.3	75	281	0.4	3,121	0.4	52
6-14	148,743	15,185,818	1,938	2.1	21,771	0.4	107	1,270	1.4	14,363	0.5	72
15-20	71,671	7,089,220	1,582	2.6	16,878	0.3	94	1,742	2.9	18,520	0.4	63
21-44	60,692	5,553,496	1,404	1.2	13,372	0.3	76	2,880	2.5	27,741	0.4	41
45-64	9,225	929,983	175	3.1	1,613	0.3	92	356	6.3	3,252	0.4	41
65-74	2,937	419,085	61	12.6	716	0.8	248	59	12.2	690	0.7	94
75-84	568	59,841	13	4.2	136	0.8	153	10	3.2	114	0.8	75
85 and older	337	26,560	5	1.0	55	1.2	80	2	0.4	24	1.1	129
Male												
All Males	717,644	103,272,874	15,438	6.0	171,783	0.5	162	11,971	4.7	131,542	0.6	96
Male, Disabled												
All Ages	299,220	56,265,156	8,998	23.9	101,205	0.6	193	8,083	21.4	90,012	0.7	111
5 and younger	20,440	3,494,284	204	4.8	2,340	0.4	112	399	9.5	4,465	0.7	97
6-14	97,635	17,585,036	2,955	30.4	33,843	0.5	154	1,841	18.9	21,180	0.7	114
15-20	49,393	11,597,069	1,758	30.5	19,879	0.6	185	1,415	24.5	16,065	0.7	128
21-44	66,777	14,331,098	2,522	28.4	27,924	0.6	230	2,568	28.9	28,255	0.8	125
45-64	64,946	9,255,444	1,559	17.1	17,219	0.7	228	1,860	20.4	20,047	0.7	75
65-74	29	2,225	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	418,424	47,007,718	6,440	2.9	70,578	0.4	119	3,888	1.8	41,530	0.5	63
5 and younger	109,237	10,650,804	395	0.5	4,537	0.3	96	418	0.5	4,579	0.4	45
6-14	237,327	26,896,149	4,040	4.3	45,020	0.4	122	1,829	2.0	20,348	0.5	68
15-20	64,296	8,582,005	1,822	4.4	19,312	0.4	114	1,263	3.1	13,314	0.4	64
21-44	4,008	476,736	118	5.1	1,049	0.4	120	277	12.1	2,298	0.4	51
45-64	1,560	181,068	27	3.7	238	0.4	156	68	9.3	612	0.5	48
65-74	1,488	177,662	27	9.2	321	0.8	208	24	8.2	283	0.8	77
75-84	321	25,741	7	3.3	63	1.0	169	6	2.8	60	0.9	34
85 and older	187	17,553	4	2.3	38	0.4	131	3	1.7	36	0.7	22
Unknown	125	9,318	0	0.0	0	0.0	0	1	0.5	12	0.2	4

Source: Data for this table are from the MAX 2007 file for Arkansas, released by CMS in 3/2010. This table was produced on 10/06/2010.
 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 2007. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
 b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
 c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2007. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.
 Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare &

TABLE 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, 2007

Beneficiary Characteristics	ANTIASTHMATIC					STIMULANTS/ANTI-OBESITY/ANOREXIANTS					ULCER DRUGS				
	Number of Users	Users as % of All Benes Among Users	Number of Benefit Months Among Users	Mean	Mean Rx	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean	Mean Rx	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean	Mean Rx
				Rx per Benefit Month	\$ per Benefit Month				Rx per Benefit Month	\$ per Benefit Month					
All	122,939	19.0	1,355,899	0.2	\$20	38,100	5.9	426,523	0.5	\$58	42,012	6.5	443,166	0.3	\$37
Female															
All Females	57,914	14.9	637,263	0.2	19	11,689	3.0	131,008	0.5	55	26,079	6.7	276,062	0.3	38
Female, Disabled															
All Ages	11,801	33.1	133,121	0.3	29	2,436	6.8	27,750	0.5	59	9,581	26.8	107,953	0.5	60
5 and younger	1,501	55.3	17,134	0.3	21	107	3.9	1,158	0.3	46	464	17.1	5,010	0.4	34
6-14	1,685	35.7	19,594	0.3	29	1,418	30.1	16,309	0.5	58	514	10.9	5,958	0.4	51
15-20	858	24.8	9,899	0.3	28	471	13.6	5,374	0.5	62	612	17.7	7,094	0.4	42
21-44	2,575	23.9	28,995	0.3	22	286	2.7	3,127	0.5	64	2,749	25.6	31,225	0.4	51
45-64	5,169	36.9	57,458	0.4	36	154	1.1	1,782	0.5	62	5,235	37.4	58,627	0.5	70
65-74	13	35.1	41	0.5	42	0	0.0	0	0.0	0	7	18.9	39	0.5	41
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	46,113	13.1	504,142	0.2	17	9,253	2.6	103,258	0.5	55	16,498	4.7	168,109	0.2	23
5 and younger	17,875	23.4	194,160	0.2	14	341	0.4	3,647	0.3	36	4,303	5.6	40,240	0.2	14
6-14	18,112	19.4	204,873	0.2	20	7,017	7.5	79,100	0.5	56	3,675	3.9	41,575	0.2	22
15-20	6,176	10.3	67,298	0.2	16	1,529	2.6	16,930	0.4	54	3,713	6.2	40,020	0.2	21
21-44	3,456	3.0	32,924	0.2	12	338	0.3	3,298	0.4	45	4,207	3.6	40,369	0.2	30
45-64	388	6.9	3,692	0.3	26	28	0.5	283	0.5	80	480	8.6	4,556	0.4	55
65-74	89	18.4	1,017	0.4	39	0	0.0	0	0.0	0	91	18.8	1,054	0.6	77
75-84	13	4.2	145	0.2	18	0	0.0	0	0.0	0	18	5.8	180	0.6	63
85 and older	4	0.8	33	0.3	21	0	0.0	0	0.0	0	11	2.2	115	0.6	77
Male															
All Males	65,008	25.4	718,432	0.2	20	26,402	10.3	295,417	0.5	59	15,932	6.2	167,092	0.3	35
Male, Disabled															
All Ages	11,203	29.7	126,000	0.3	30	6,554	17.4	75,000	0.6	64	5,613	14.9	61,439	0.5	57
5 and younger	2,648	62.8	30,002	0.3	23	285	6.8	3,233	0.3	36	683	16.2	7,329	0.4	34
6-14	4,000	41.1	46,257	0.3	29	4,695	48.3	53,910	0.6	65	766	7.9	8,890	0.4	51
15-20	1,354	23.5	15,507	0.3	33	1,325	23.0	15,072	0.5	67	657	11.4	7,460	0.4	49
21-44	1,093	12.3	12,304	0.3	26	200	2.3	2,269	0.6	71	1,384	15.6	15,236	0.5	62
45-64	2,099	23.1	21,912	0.4	42	49	0.5	516	0.6	65	2,120	23.3	22,512	0.5	67
65-74	9	33.3	18	0.9	55	0	0.0	0	0.0	0	3	11.1	12	0.4	26
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	53,805	24.6	592,432	0.2	18	19,848	9.1	220,417	0.5	58	10,319	4.7	105,653	0.2	22
5 and younger	24,805	31.1	268,398	0.2	15	873	1.1	9,777	0.3	31	4,919	6.2	46,291	0.2	15
6-14	23,390	24.9	263,446	0.3	21	15,884	16.9	176,949	0.5	59	3,089	3.3	35,007	0.2	24
15-20	5,283	12.8	57,645	0.2	19	3,061	7.4	33,415	0.4	58	1,935	4.7	21,124	0.2	26
21-44	168	7.3	1,457	0.3	20	23	1.0	207	0.4	48	227	9.9	1,862	0.4	57
45-64	77	10.5	622	0.4	30	6	0.8	57	0.5	87	82	11.2	688	0.4	63
65-74	51	17.3	575	0.7	53	1	0.3	12	1.0	249	44	15.0	477	0.5	69
75-84	18	8.5	165	0.5	44	0	0.0	0	0.0	0	18	8.5	164	0.5	23
85 and older	13	7.4	124	0.5	47	0	0.0	0	0.0	0	5	2.8	40	0.7	62
Unknown	17	8.7	204	0.2	15	9	4.6	98	0.4	44	1	0.5	12	0.3	50

Source: Data for this table are from the MAX 2007 file for Arkansas, released by CMS in 3/2010. This table was produced on 10/06/2010.
 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 2007. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
 b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
 c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2007. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

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

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, 2007

Beneficiary Characteristics	ANTIDEPRESSANTS					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	47,813	7.4	512,737	0.4	\$20	2,149	0.3	22,776	0.6	\$445	114,690	17.8	1,266,667	0.1	\$7
Female															
All Females	32,470	8.3	345,205	0.4	21	1,292	0.3	13,949	0.6	80	61,180	15.7	672,024	0.1	6
Female, Disabled															
All Ages	14,107	39.5	157,871	0.5	28	1,113	3.1	12,209	0.6	74	7,105	19.9	81,915	0.1	6
5 and younger	27	1.0	309	0.4	10	2	0.1	24	0.1	8	1,250	46.1	14,384	0.1	9
6-14	700	14.8	8,033	0.4	15	1	0.0	12	0.5	49	1,362	28.9	15,897	0.1	9
15-20	1,231	35.6	13,910	0.4	23	3	0.1	36	0.2	17	768	22.2	8,938	0.1	5
21-44	5,229	48.6	58,617	0.4	27	111	1.0	1,193	0.5	79	1,800	16.7	20,714	0.1	4
45-64	6,908	49.3	76,965	0.5	32	993	7.1	10,933	0.6	74	1,923	13.7	21,972	0.1	4
65-74	12	32.4	37	0.6	38	3	8.1	11	0.9	65	2	5.4	10	0.2	3
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	18,363	5.2	187,334	0.3	15	179	0.1	1,740	0.4	123	54,074	15.3	590,101	0.1	7
5 and younger	116	0.2	1,273	0.3	6	2	0.0	24	0.1	175	23,194	30.4	254,675	0.1	8
6-14	3,295	3.5	37,128	0.4	11	5	0.0	57	0.3	201	17,135	18.4	194,752	0.1	7
15-20	5,920	9.9	63,010	0.3	14	3	0.0	30	0.2	1,348	7,804	13.0	84,418	0.1	4
21-44	8,003	6.8	76,200	0.3	17	66	0.1	663	0.4	151	5,603	4.8	52,816	0.1	3
45-64	927	16.5	8,587	0.4	25	80	1.4	714	0.5	56	273	4.9	2,672	0.1	3
65-74	74	15.3	852	0.6	30	15	3.1	168	0.5	58	52	10.8	612	0.1	3
75-84	14	4.5	156	0.6	27	6	1.9	66	0.8	99	9	2.9	108	0.1	2
85 and older	14	2.8	128	0.9	45	2	0.4	18	1.0	132	4	0.8	48	0.4	6
Male															
All Males	15,339	6.0	167,484	0.4	19	857	0.3	8,827	0.6	1,022	53,496	20.9	594,488	0.1	7
Male, Disabled															
All Ages	7,532	20.0	83,307	0.5	24	758	2.0	7,912	0.6	1,015	6,814	18.1	77,979	0.1	7
5 and younger	48	1.1	549	0.3	7	4	0.1	45	0.4	1,481	1,844	43.7	21,062	0.1	9
6-14	1,596	16.4	18,374	0.5	15	13	0.1	147	0.8	18,681	2,267	23.3	26,338	0.1	8
15-20	1,418	24.6	16,055	0.5	21	17	0.3	193	0.5	15,072	897	15.6	10,371	0.1	7
21-44	2,116	23.8	23,186	0.5	29	64	0.7	659	0.5	2,624	967	10.9	11,016	0.1	5
45-64	2,353	25.9	25,142	0.5	28	659	7.2	6,863	0.6	85	839	9.2	9,192	0.1	5
65-74	1	3.7	1	1.0	81	1	3.7	5	1.4	168	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	7,807	3.6	84,177	0.4	14	99	0.0	915	0.4	1,076	46,682	21.3	516,509	0.1	7
5 and younger	142	0.2	1,609	0.2	5	11	0.0	127	0.4	3,102	25,861	32.4	282,350	0.1	8
6-14	3,904	4.2	43,825	0.4	12	11	0.0	132	0.2	567	16,021	17.1	181,779	0.1	7
15-20	3,146	7.6	33,426	0.3	16	13	0.0	125	0.3	3,871	4,615	11.2	50,697	0.1	4
21-44	435	19.0	3,681	0.3	21	19	0.8	139	0.4	49	129	5.6	1,143	0.1	4
45-64	139	18.9	1,207	0.4	24	28	3.8	235	0.5	66	38	5.2	359	0.1	10
65-74	30	10.2	335	0.7	38	11	3.7	116	0.5	64	6	2.0	69	0.1	4
75-84	6	2.8	46	0.8	30	3	1.4	19	0.3	30	4	1.9	38	0.2	5
85 and older	5	2.8	48	0.6	25	3	1.7	22	0.6	81	8	4.5	74	0.2	4
Unknown	4	2.1	48	0.5	8	0	0.0	0	0.0	0	15	7.7	163	0.1	6

Source: Data for this table are from the MAX 2007 file for Arkansas, released by CMS in 3/2010. This table was produced on 10/06/2010.
 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 2007. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
 b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
 c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2007. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

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

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, 2007

Beneficiary Characteristics	PASSIVE IMMUNIZING AGENTS					MISC. ENDOCRINE					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	1,472	0.2	13,579	0.4	\$530	4,118	0.6	46,471	0.4	\$153	645,632	6,331,559
Female												
All Females	700	0.2	6,387	0.4	488	2,088	0.5	23,625	0.4	119	389,025	3,753,961
Female, Disabled												
All Ages	271	0.8	2,786	0.4	512	1,149	3.2	13,177	0.5	134	35,693	377,976
5 and younger	252	9.3	2,566	0.4	472	36	1.3	408	0.5	131	2,714	28,791
6-14	12	0.3	139	0.6	896	191	4.1	2,235	0.5	306	4,714	53,014
15-20	5	0.1	57	0.4	965	85	2.5	991	0.6	232	3,458	37,927
21-44	2	0.0	24	0.5	1,498	181	1.7	2,091	0.6	132	10,754	114,812
45-64	0	0.0	0	0.0	0	655	4.7	7,450	0.5	71	14,016	143,323
65-74	0	0.0	0	0.0	0	1	2.7	2	1.0	109	37	109
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	429	0.1	3,601	0.4	470	939	0.3	10,448	0.3	99	353,332	3,375,985
5 and younger	410	0.5	3,422	0.4	485	80	0.1	887	0.2	74	76,381	746,582
6-14	5	0.0	58	0.2	431	659	0.7	7,466	0.3	83	93,237	985,066
15-20	5	0.0	50	0.1	127	77	0.1	823	0.4	253	59,856	564,628
21-44	9	0.0	71	0.1	10	42	0.0	422	0.3	231	116,945	1,020,518
45-64	0	0.0	0	0.0	0	48	0.9	484	0.5	40	5,613	46,435
65-74	0	0.0	0	0.0	0	21	4.3	252	0.5	75	483	5,021
75-84	0	0.0	0	0.0	0	9	2.9	96	0.7	59	310	3,059
85 and older	0	0.0	0	0.0	0	3	0.6	18	0.8	69	507	4,676
Male												
All Males	772	0.3	7,192	0.4	568	2,030	0.8	22,846	0.4	188	256,412	2,575,455
Male, Disabled												
All Ages	301	0.8	3,097	0.4	611	808	2.1	9,220	0.6	245	37,711	390,491
5 and younger	273	6.5	2,773	0.4	516	37	0.9	408	0.5	158	4,218	44,576
6-14	19	0.2	218	0.7	1,161	432	4.4	4,997	0.5	239	9,722	108,833
15-20	5	0.1	58	0.5	1,195	151	2.6	1,715	0.7	343	5,764	62,556
21-44	4	0.0	48	0.8	2,890	118	1.3	1,341	0.7	266	8,880	90,761
45-64	0	0.0	0	0.0	0	70	0.8	759	0.6	72	9,100	83,685
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	27	80
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	471	0.2	4,095	0.4	536	1,222	0.6	13,626	0.3	150	218,701	2,184,964
5 and younger	464	0.6	4,014	0.4	517	69	0.1	769	0.2	158	79,837	775,796
6-14	7	0.0	81	0.8	1,472	1,033	1.1	11,586	0.3	101	93,790	985,142
15-20	0	0.0	0	0.0	0	111	0.3	1,183	0.4	635	41,363	397,713
21-44	0	0.0	0	0.0	0	3	0.1	32	0.3	32	2,294	14,792
45-64	0	0.0	0	0.0	0	0	0.0	0	0.0	0	735	4,896
65-74	0	0.0	0	0.0	0	2	0.7	24	0.4	104	294	2,916
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	212	2,058
85 and older	0	0.0	0	0.0	0	4	2.3	32	0.2	5	176	1,651
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	195	2,143

Source: Data for this table are from the MAX 2007 file for Arkansas, released by CMS in 3/2010. This table was produced on 10/06/2010.
 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 2007. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
 b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
 c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2007. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy; \$ = 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, 2007

Beneficiary Characteristics	Rx \$ per Benefit Month	Number of Rx per Benefit Month	Number of All-Year Nursing Facility Residents	Benefit Months Among All-Year Nursing Facility Residents
All	\$513	7.2	779	7,656
Age				
0-64	626	8.6	571	5,651
65-74	365	5.3	64	651
75-84	139	2.5	64	626
85 and older	90	1.8	80	728
Unknown	0	0.0	0	0
Gender				
Female	520	7.5	413	4,226
Male	505	6.8	366	3,430
Unknown	0	0.0	0	0
Race				
White	525	7.3	409	4,391
African American	486	6.6	205	2,247
Other/unknown	523	8	165	1,018
Basis of Eligibility^c				
Aged	194	3.1	205	1,999
Disabled	626	8.6	574	5,657
Adults	0	0.0	0	0
Children	0	0.0	0	0
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 2007 file for Arkansas, released by CMS in 3/2010. This table was produced on 10/06/2010.

a. Table ND.8 includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their 2007 Medicaid enrollment. A total of 574 beneficiaries who were in nursing facilities for part of their enrollment and their 5,959 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, 2007

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				\$ per Rx				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 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	0.0	0.4	\$45	\$34	\$1	\$9	\$89	\$253	\$161	\$26	2,329	\$206,598	446	57.3	4,638
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	0.6	0.1	0.0	0.5	85	52	0	33	146	839	0	63	189	27,513	32	4.1	325
Endocrine/Metabolic Drugs	1.4	0.6	0.0	0.8	88	70	1	18	63	118	56	22	4,372	273,340	296	38.0	3,099
Cardiovascular Agents	2.2	0.2	0.2	1.7	63	20	13	30	29	86	59	17	9,603	276,017	436	56.0	4,407
Respiratory Agents	0.8	0.3	0.1	0.4	53	40	5	9	68	125	77	21	2,385	161,164	297	38.1	3,018
Gastrointestinal Agents	1.3	0.5	0.0	0.8	83	67	2	15	67	138	127	20	4,874	324,437	390	50.1	3,887
Genitourinary Agents	0.7	0.4	0.0	0.3	55	43	1	11	75	108	58	34	1,178	88,695	157	20.2	1,614
CNS Drugs	2.1	0.9	0.0	1.2	231	201	0	29	112	225	26	25	11,180	1,246,898	521	66.9	5,394
Stimulants/Anti-obesity/Anorexia	0.9	0.5	0.0	0.4	129	118	0	11	141	240	0	26	52	7,346	7	0.9	57
Miscellaneous Psychological/Neurological Agents	1.1	1.1	0.0	0.0	227	227	0	0	208	208	0	43	660	137,008	62	8.0	604
Analgesics and Anesthetics	1.1	0.0	0.0	1.1	34	2	0	32	30	193	17	29	3,868	116,619	337	43.3	3,395
Neuromuscular Agents	1.8	0.6	0.0	1.1	159	109	7	44	90	186	141	38	7,582	679,589	404	51.9	4,267
Nutritional Products	0.8	0.0	0.0	0.8	17	0	0	17	20	24	14	20	1,945	39,419	229	29.4	2,312
Hematological Agents	1.1	0.3	0.0	0.7	87	77	0	10	80	223	12	13	2,580	206,571	245	31.5	2,386
Topical Products	0.5	0.1	0.0	0.3	21	12	3	7	46	88	84	23	1,724	78,466	348	44.7	3,726
Miscellaneous Products	0.9	0.1	0.0	0.8	186	154	0	31	206	1,957	0	38	286	58,818	30	3.9	317
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	4	0	0	0	17	0	0	0	30	500	11	1.4	114
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.	54,837	3,928,998	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2007 file for Arkansas, released by CMS in 3/2010. This table was produced on 10/06/2010.

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 2007. A total of 574 beneficiaries who were in nursing facilities for part of their enrollment and their 5,959 benefit months were excluded from the analysis.

b. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 2007. A beneficiary who used drugs from two or more categories was counted as a user for each category. Therefore, the sum of users across categories may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

c. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state. 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. 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, 2007

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	Number of Rx per Benefit Month	\$ per Rx	Rx \$ per Benefit Month	
ANTIPSYCHOTICS	\$987,092	417	53.5	4,746	0.9	\$223	\$208	
ANTICONVULSANT	608,632	459	58.9	5,055	1.1	106	120	
ULCER DRUGS	251,407	328	42.1	3,536	0.8	85	71	
ANTIDIABETIC	200,246	247	31.7	2,758	1.0	74	73	
ANTIDEPRESSANTS	184,748	390	50.1	4,217	0.9	49	44	
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	137,008	66	8.5	708	0.9	208	194	
ANTIASTHMATIC	126,701	263	33.8	2,698	0.6	73	47	
ANTIHYPERTENSIVE	111,888	239	30.7	2,557	0.9	50	44	
ANALGESICS - Narcotic	105,246	367	47.1	3,839	0.8	34	27	
ANTIVIRAL	86,889	32	4.1	364	0.6	430	239	
Total	2,799,857	2,808	n.a.	30,478	n.a.	n.a.	n.a.	

Source: Data for this table are from the MAX 2007 file for Arkansas, released by CMS in 3/2010. This table was produced on 10/06/2010.

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 2007. A total of 574 beneficiaries who were in nursing facilities for part of their enrollment and their 5,959 benefit months were excluded from the analysis.

b. A user is a beneficiary who had at least one prescription filled in a given drug group during 2007. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

d. The top 10 drug groups were determined based on total 2007 Medicaid reimbursement for all-year nursing facility residents in this state.

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

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

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, 2007

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	27,462	\$2,799,857	417	53.5	4,746	0.9	\$208	459	58.9	5,055	1.1	\$120
Female												
All Females	15,730	1,581,552	236	57.1	2,741	1.0	209	232	56.2	2,618	1.1	122
Female, Disabled												
All Ages	13,875	1,391,006	211	70.6	2,443	1.0	214	204	68.2	2,286	1.1	120
64 or younger	13,863	1,390,104	211	71.0	2,443	1.0	214	203	68.4	2,285	1.1	120
65-74	12	902	0	0.0	0	0.0	0	1	50.0	1	1.0	53
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	1,855	190,546	25	21.9	298	0.8	168	28	24.6	332	0.9	136
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	1,127	124,640	18	52.9	214	0.7	175	23	67.6	272	0.9	132
75-84	355	40,320	5	15.6	60	0.8	182	3	9.4	36	1.2	174
85 and older	373	25,586	2	4.2	24	1.6	71	2	4.2	24	1.1	129
Male												
All Males	11,732	1,218,305	181	49.5	2,005	0.9	206	227	62.0	2,437	1.1	118
Male, Disabled												
All Ages	10,551	1,123,878	163	59.3	1,796	0.9	211	215	78.2	2,300	1.2	123
64 or younger	10,538	1,123,383	163	59.5	1,796	0.9	211	215	78.5	2,300	1.2	123
65-74	13	495	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	1,181	94,427	18	19.8	209	0.8	163	12	13.2	137	1.0	45
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	728	60,698	13	48.1	156	0.8	162	7	25.9	84	0.9	51
75-84	309	20,077	3	9.4	29	1.1	158	4	12.5	41	0.9	30
85 and older	144	13,652	2	6.3	24	0.5	174	1	3.1	12	1.8	58
Unknown	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2007 file for Arkansas, released by CMS in 3/2010. This table was produced on 10/06/2010.

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 2007. A total of 574 beneficiaries who were in nursing facilities for part of their enrollment and their 5,959 benefit months were excluded from the analysis.

b. A user is a beneficiary who had at least one prescription filled in a given drug group during 2007. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

d. The top 10 drug groups were determined based on total 2007 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

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

TABLE 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, 2007

Beneficiary Characteristics	ULCER DRUGS					ANTIDIABETIC					ANTIDEPRESSANTS				
	Users as % of All-Year Nursing Facility Residents		Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Users as % of All-Year Nursing Facility Residents		Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Users as % of All-Year Nursing Facility Residents		Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
	Number of Users	Facility Residents			Number of Users	Facility Residents					Number of Users	Facility Residents			
All	328	42.1	3,536	0.8	\$71	247	31.7	2,758	1.0	\$73	390	50.1	4,217	0.9	\$44
Female															
All Females	170	41.2	1,890	0.8	72	157	38.0	1,783	1.0	75	223	54.0	2,414	0.9	44
Female, Disabled															
All Ages	155	51.8	1,718	0.8	70	131	43.8	1,498	1.0	78	202	67.6	2,193	0.9	43
64 or younger	154	51.9	1,717	0.8	70	131	44.1	1,498	1.0	78	200	67.3	2,189	0.9	43
65-74	1	50.0	1	1.0	14	0	0.0	0	0.0	0	2	100.0	4	0.8	58
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	13.2	172	0.9	86	26	22.8	285	0.8	58	21	18.4	221	1.0	46
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	17.6	70	1.0	82	20	58.8	222	0.8	54	13	38.2	154	0.9	41
75-84	4	12.5	42	1.1	105	4	12.5	48	1.1	80	2	6.3	24	1.0	57
85 and older	5	10.4	60	0.7	77	2	4.2	15	0.8	48	6	12.5	43	1.2	61
Male															
All Males	158	43.2	1,646	0.8	70	90	24.6	975	0.9	69	167	45.6	1,803	0.9	44
Male, Disabled															
All Ages	142	51.6	1,454	0.9	74	84	30.5	903	0.9	72	151	54.9	1,633	0.9	43
64 or younger	141	51.5	1,452	0.9	74	84	30.7	903	0.9	72	151	55.1	1,633	0.9	43
65-74	1	100.0	2	1.0	9	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	16	17.6	192	0.6	44	6	6.6	72	1.0	30	16	17.6	170	1.0	50
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	10	37.0	120	0.6	54	5	18.5	60	0.8	26	10	37.0	120	1.0	54
75-84	5	15.6	60	0.7	22	1	3.1	12	2.3	45	4	12.5	26	1.2	48
85 and older	1	3.1	12	0.9	48	0	0.0	0	0.0	0	2	6.3	24	0.8	31
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2007 file for Arkansas, released by CMS in 3/2010. This table was produced on 10/06/2010.

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 2007. A total of 574 beneficiaries who were in nursing facilities for part of their enrollment and their 5,959 benefit months were excluded from the analysis.

b. A user is a beneficiary who had at least one prescription filled in a given drug group during 2007. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

d. The top 10 drug groups were determined based on total 2007 Medicaid reimbursement for all-year nursing facility residents in this state.

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

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

Nondual Medicaid Beneficiaries

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, 2007

Beneficiary Characteristics	MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL					ANTIASTHMATIC					ANTIHYPERTENSIVE				
	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	66	8.5	708	0.9	\$194	263	33.8	2,698	0.6	\$47	239	30.7	2,557	0.9	\$44
Female															
All Females	38	9.2	414	1.0	215	156	37.8	1,650	0.7	50	148	35.8	1,589	0.9	46
Female, Disabled															
All Ages	22	7.4	252	1.0	257	137	45.8	1,428	0.7	47	124	41.5	1,329	0.9	48
64 or younger	22	7.4	252	1.0	257	134	45.1	1,423	0.7	47	122	41.1	1,325	0.9	48
65-74	0	0.0	0	0.0	0	3	150.0	5	0.6	87	2	100.0	4	1.0	42
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	16	14.0	162	1.0	150	19	16.7	222	0.7	68	24	21.1	260	0.8	33
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	17.6	70	0.7	112	14	41.2	162	0.8	82	11	32.4	128	0.8	26
75-84	4	12.5	42	1.3	218	4	12.5	48	0.4	29	5	15.6	60	1.0	47
85 and older	6	12.5	50	1.2	144	1	2.1	12	0.5	25	8	16.7	72	0.7	32
Male															
All Males	28	7.7	294	0.9	163	107	29.2	1,048	0.6	42	91	24.9	968	0.9	41
Male, Disabled															
All Ages	19	6.9	204	0.8	187	80	29.1	746	0.5	37	78	28.4	828	0.9	38
64 or younger	19	6.9	204	0.8	187	76	27.7	738	0.5	37	78	28.5	828	0.9	38
65-74	0	0.0	0	0.0	0	4	400.0	8	1.4	60	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	9	9.9	90	0.9	110	27	29.7	302	0.8	55	13	14.3	140	1.0	56
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	4	14.8	48	0.8	93	13	48.1	156	1.1	53	5	18.5	60	1.0	56
75-84	5	15.6	42	1.1	131	5	15.6	47	0.7	60	5	15.6	44	1.2	61
85 and older	0	0.0	0	0.0	0	9	28.1	99	0.5	57	3	9.4	36	0.7	51
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2007 file for Arkansas, released by CMS in 3/2010. This table was produced on 10/06/2010.

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 2007. A total of 574 beneficiaries who were in nursing facilities for part of their enrollment and their 5,959 benefit months were excluded from the analysis.

b. A user is a beneficiary who had at least one prescription filled in a given drug group during 2007. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

d. The top 10 drug groups were determined based on total 2007 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

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

TABLE 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, 2007

Beneficiary Characteristics	ANALGESICS - Narcotic						ANTIVIRAL					
	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	367	47.1	3,839	0.8	\$27	32	4.1	364	0.6	\$239	779	7,656
Female												
All Females	211	51.1	2,218	0.8	25	15	3.6	168	0.2	81	413	4,226
Female, Disabled												
All Ages	189	63.2	1,994	0.8	25	15	5.0	168	0.2	81	299	3,137
64 or younger	189	63.6	1,994	0.8	25	15	5.1	168	0.2	81	297	3,133
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	4
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	22	19.3	224	0.8	26	0	0.0	0	0.0	0	114	1,089
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	9	26.5	106	0.6	25	0	0.0	0	0.0	0	34	360
75-84	4	12.5	36	0.3	3	0	0.0	0	0.0	0	32	306
85 and older	9	18.8	82	1.1	37	0	0.0	0	0.0	0	48	423
Male												
All Males	156	42.6	1,621	0.8	31	17	4.6	196	0.8	374	366	3,430
Male, Disabled												
All Ages	142	51.6	1,484	0.9	33	17	6.2	196	0.8	374	275	2,520
64 or younger	142	51.8	1,484	0.9	33	17	6.2	196	0.8	374	274	2,518
65-74	0	0.0	0	0.0	0	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
Male, Other Eligibles												
All Ages	14	15.4	137	0.3	5	0	0.0	0	0.0	0	91	910
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	6	22.2	72	0.3	6	0	0.0	0	0.0	0	27	285
75-84	6	18.8	50	0.2	2	0	0.0	0	0.0	0	32	320
85 and older	2	6.3	15	0.3	2	0	0.0	0	0.0	0	32	305
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0

Source: Data for this table are from the MAX 2007 file for Arkansas, released by CMS in 3/2010. This table was produced on 10/06/2010.
 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 2007. A total of 574 beneficiaries who were in nursing facilities for part of their enrollment and their 5,959 benefit months were excluded from the analysis.
 b. A user is a beneficiary who had at least one prescription filled in a given drug group during 2007. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
 c. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
 d. The top 10 drug groups were determined based on total 2007 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.
 Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

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

Beneficiary Characteristics	Number of Beneficiaries with at Least One Part D Excluded Rx	Percentage of Beneficiaries with at Least One Part D Excluded Rx	Number of Part D Excluded Rx per Beneficiary	Total Number Part D Excluded Rx	Part D Excluded Rx \$ per Beneficiary	Total Part D Excluded Rx \$	Part D Excluded Rx \$ per Part D Excluded Rx of All Nondual Rx \$	Part D Excluded Rx \$ as a Percentage of All Nondual Rx \$	Total Number of Beneficiaries
All	142,084	22.0	0.6	366,608	\$10	\$6,172,290	\$17	2.1	645,632
Age									
5 and younger	45,730	28.0	0.6	97,100	8	1,339,572	14	3.1	163,187
6-14	51,203	25.4	0.5	109,023	9	1,827,422	17	2.1	201,564
15-20	20,403	18.5	0.4	43,591	6	714,744	16	1.5	110,477
21-44	15,247	11.0	0.4	59,712	8	1,175,817	20	2.0	138,881
45-64	9,216	31.3	1.9	55,345	37	1,079,852	20	1.9	29,466
65-74	192	22.7	1.5	1,236	28	23,893	19	2.2	846
75-84	53	10.1	0.6	333	13	6,783	20	3.4	525
85 and older	39	5.7	0.4	267	6	4,189	16	4.0	684
Unknown	1	50.0	0.5	1	9	18	18	7.8	2
Basis of Eligibility^c									
Aged	264	13.3	0.9	1,793	17	34,174	19	2.6	1,979
Disabled	24,328	33.1	1.6	117,902	36	2,636,876	22	1.7	73,410
Adults	10,634	8.0	0.2	30,541	3	446,676	15	2.2	133,033
Children	106,651	24.4	0.5	215,603	7	3,041,936	14	2.6	436,510
Unknown	207	29.6	1.1	769	18	12,628	16	1.5	700
Gender									
Female	79,890	20.5	0.6	214,494	9	3,543,922	17	2.4	389,026
Male	62,174	24.2	0.6	152,082	10	2,627,890	17	1.8	256,413
Unknown	20	10.4	0.2	32	2	478	15	2.9	193
Race									
White	85,284	24.6	0.7	231,667	12	3,992,599	17	2.2	346,242
African American	35,994	20.5	0.5	83,348	7	1,220,729	15	1.9	175,712
Other/unknown	20,806	16.8	0.4	51,593	8	958,962	19	1.9	123,678
Use of Nursing Facilities^d									
Entire year	437	56.1	6.1	4,786	114	88,843	19	2.3	779
Part year	351	61.1	5.3	3,022	110	63,410	21	2.4	574
None	141,296	21.9	0.6	358,800	9	6,020,037	17	2.1	644,279
Maintenance Assistance Status									
Cash	33,023	31.2	1.3	141,431	27	2,876,430	20	1.8	105,934
Medically needy	1,603	23.0	0.8	5,219	13	92,005	18	2.5	6,959
Poverty related	79,748	24.5	0.5	163,540	7	2,274,470	14	2.7	324,937
Other/unknown	27,710	13.3	0.3	56,418	4	929,385	16	1.9	207,802

Source: Data for this table are from the MAX 2007 file for Arkansas, released by CMS in 3/2010. This table was produced on 10/06/2010.

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 2007.

b. The statute establishing the Medicare Part D prescription program that started in 2007 excludes several types of drugs from coverage. State Medicaid programs have been allowed to exclude these drugs since 1990, but many states have chosen to cover them, and if states cover them for any Medicaid beneficiaries they must also cover them for dual eligibles, who as of 2007 receive the remainder of their prescription drug coverage through Part D. Excluded drugs include benzodiazepines; barbiturates; nonprescription (OTC) medications; prescription vitamins and minerals (not including prenatal vitamins and fluoride preparations); and drugs used for anorexia, weight loss, or weight gain. Other excluded drugs include those that promote fertility; those used for cosmetic purposes or hair growth, for symptomatic relief of coughs and colds; or drugs for which the manufacturer requires that associated tests or monitoring services be purchased exclusively from the manufacturer.

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

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

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

TABLE 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, 2007

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	\$17	\$0	\$0	6,331,559
Age						
5 and younger	0.1	1	14	0	0	1,596,153
6-14	0.1	1	17	0	0	2,133,230
15-20	0.0	1	16	0	0	1,063,180
21-44	0.0	1	20	0	1	1,240,950
45-64	0.2	4	20	0	3	278,357
65-74	0.2	3	19	0	2	8,186
75-84	0.1	1	20	0	1	5,153
85 and older	0.0	1	16	0	0	6,339
Unknown	0.1	2	18	0	0	11
Basis of Eligibility^c						
Aged	0.1	2	19	0	1	19,433
Disabled	0.2	3	22	0	2	768,533
Adults	0.0	0	15	0	0	1,146,271
Children	0.0	1	14	0	0	4,391,803
Unknown	0.1	2	16	0	2	5,519
Gender						
Female	0.1	1	17	0	0	3,753,969
Male	0.1	1	17	0	0	2,575,458
Unknown	0.0	0	15	0	0	2,132
Race						
White	0.1	1	17	0	0	3,501,596
African American	0.0	1	15	0	0	1,808,071
Other/unknown	0.1	1	19	0	0	1,021,892
Use of Nursing Facilities^d						
Entire year	0.6	12	19	0	6	7,656
Part year	0.5	11	21	0	6	5,959
None	0.1	1	17	0	0	6,317,944
Maintenance Assistance Status						
Cash	0.1	3	20	0	1	1,077,379
Medically needy	0.1	2	18	0	1	43,220
Poverty related	0.1	1	14	0	0	3,184,813
Other/unknown	0.0	0	16	0	0	2,026,147

Source: Data for this table are from the MAX 2007 file for Arkansas, released by CMS in 3/2010. This table was produced on 10/06/2010.

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 2007.

b. The statute establishing the Medicare Part D prescription program that started in 2007 excludes several types of drugs from coverage. State Medicaid programs have been allowed to exclude these drugs since 1990, but many states have chosen to cover them, and if states cover them for any Medicaid beneficiaries they must also cover them for dual eligibles, who as of 2007 receive the remainder of their prescription drug coverage through Part D. Excluded drugs include benzodiazepines; barbiturates; nonprescription (OTC) medications; prescription vitamins and minerals (not including prenatal vitamins and fluoride preparations); and drugs used for anorexia, weight loss, or weight gain. Other excluded drugs include those that promote fertility; those used for cosmetic purposes or hair growth, for symptomatic relief of coughs and colds; or drugs for which the manufacturer requires that associated tests or monitoring services be purchased exclusively from the manufacturer.

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

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

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, 2007

Drug Category	Number of Users	Rx \$ per User	Total Rx \$	Rx \$ as a Percentage of All Part D		Number Rx as a Percentage of All Part D Excluded Rx	
				Excluded Rx \$	Total Number Rx.	\$ per Rx	Excluded Rx
All	166,113	\$37	\$6,172,290	100.0	366,608	\$17	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	70	17	1,158	0.0	89	13	0.0
Cough and cold medications	83,114	26	2,195,180	35.6	139,918	16	38.2
Vitamins and minerals	4,431	94	417,959	6.8	17,908	23	4.9
Non-prescription drugs	56,867	20	1,159,025	18.8	105,284	11	28.7
Barbiturates	783	59	46,176	0.7	6,030	8	1.6
Benzodiazepines	18,584	94	1,742,241	28.2	92,643	19	25.3
Other Part D Excl Rx Drugs	2,264	270	610,551	9.9	4,736	129	1.3

Source: Data for this table are from the MAX 2007 file for Arkansas, released by CMS in 3/2010. This table was produced on 10/06/2010.

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 2007. A user is a beneficiary who had at least one prescription filled for a Part D excluded drug in 2007. A beneficiary who used drugs from two or more Part D excluded categories was counted as a user for each category. Therefore, the sum of users across drug categories may exceed the total number of individual users as noted on Table ND11.

b. Includes OTC drugs as well as prescription drugs.

c. The statute establishing the Medicare Part D prescription program that started in 2007 excludes several types of drugs from coverage. State Medicaid programs have been allowed to exclude these drugs since 1990, but many states have chosen to cover them, and if states cover them for any Medicaid beneficiaries they must also cover them for dual eligibles, who as of 2007 receive the remainder of their prescription drug coverage through Part D. Excluded drugs include benzodiazepines; barbiturates; nonprescription (OTC) medications; prescription vitamins and minerals (not including prenatal vitamins and fluoride preparations); and drugs used for anorexia, weight loss, or weight gain. Other excluded drugs include those that promote fertility; those used for cosmetic purposes or hair growth, for symptomatic relief of coughs and colds; or drugs for which the manufacturer requires that associated tests or monitoring services be purchased exclusively from the manufacturer.

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

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, 2007

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Blind/ Disabled	Adults	Children	Other/ Unknown	All	Aged	Blind/ Disabled	Adults	Children	Other/ Unknown
All	645,632	1,979	73,410	133,033	436,510	700	6,331,559	19,433	768,533	1,146,271	4,391,803	5,519
Age												
5 and younger	163,187	0	6,934	56	156,197	0	1,596,153	0	73,391	481	1,522,281	0
6-14	201,564	0	14,438	143	186,983	0	2,133,230	0	161,871	1,205	1,970,154	0
15-20	110,477	0	9,222	8,471	92,774	10	1,063,180	0	100,483	65,572	897,055	70
21-44	138,881	0	19,634	118,433	554	260	1,240,950	0	205,573	1,031,039	2,302	2,036
45-64	29,466	0	23,118	5,922	0	426	278,357	0	227,026	47,929	0	3,402
65-74	846	772	64	6	0	4	8,186	7,959	189	27	0	11
75-84	525	523	0	2	0	0	5,153	5,135	0	18	0	0
85 and older	684	684	0	0	0	0	6,339	6,339	0	0	0	0
Unknown	2	0	0	0	2	0	11	0	0	0	11	0
Gender												
Female	389,026	1,290	35,693	129,955	221,388	700	3,753,969	12,707	377,976	1,126,014	2,231,753	5,519
Male	256,413	680	37,711	3,068	214,954	0	2,575,458	6,618	390,491	20,166	2,158,183	0
Unknown	193	9	6	10	168	0	2,132	108	66	91	1,867	0
Race												
White	346,242	897	31,716	76,518	236,689	422	3,501,596	8,553	340,719	680,467	2,468,243	3,614
African American	175,712	675	19,119	39,014	116,789	115	1,808,071	7,146	209,978	358,744	1,231,220	983
Other/unknown	123,678	407	22,575	17,501	83,032	163	1,021,892	3,734	217,836	107,060	692,340	922
Use of Nursing Facilities^c												
Entire year	779	205	574	0	0	0	7,656	1,999	5,657	0	0	0
Part year	574	127	445	1	0	1	5,959	1,294	4,649	10	0	6
None	644,279	1,647	72,391	133,032	436,510	699	6,317,944	16,140	758,227	1,146,261	4,391,803	5,513
Maintenance Assistance Status												
Cash	105,934	1,042	66,789	17,500	20,603	0	1,077,379	11,797	712,458	149,836	203,288	0
Medically needy	6,959	75	1,907	3,957	1,020	0	43,220	427	7,513	25,797	9,483	0
Poverty related	324,937	132	13	22,734	301,358	700	3,184,813	1,248	111	143,014	3,034,921	5,519
Other/unknown	207,802	730	4,701	88,842	113,529	0	2,026,147	5,961	48,451	827,624	1,144,111	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	645,632	1,979	73,410	133,033	436,510	700	6,331,559	19,433	768,533	1,146,271	4,391,803	5,519
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 2007 file for Arkansas, released by CMS in 3/2010. This table was produced on 10/06/2010.

- 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, 2007

	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	645,632	6,331,559	645,632	6,331,559	0	0
Fee-for-service (FFS) all year	645,632	6,331,559	645,632	6,331,559	0	0
FFS part year, with Rx claims	0	0	0	0	0	0
FFS part year, with no Rx claims	0	0	0	0	0	0
Managed care (MC) all year, with Rx claims	0	0	0	0	0	0
MC all year, with no Rx claims	0	0	0	0	0	0

Source: Data for this table are from the MAX 2007 file for Arkansas, released by CMS in 3/2010. This table was produced on 10/06/2010.

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

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

Nondual Medicaid Beneficiaries