ARKANSAS MEDICAID DRUG SPENDING (JANUARY - DECEMBER 2014)									
Rank	Common Label Name	Paid Amount	"Unit" of Measure Qty Dispensed	Unique Recipients	Claim Counts	Days of Supply	AR Medicaid Reimbursement Rate Per "Unit" as of 01/01/2015		
1	VENTOLIN HFA 90 MCG INHALER	\$8,348,283.39	3,166,369.5	74,402	154,894	3,730,718	\$2.59338		
2	ABILIFY 5 MG TABLET	\$6,758,310.17	258,475.5	2,646	8,757	259,242	\$30.68366		
3	ABILIFY 10 MG TABLET	\$6,157,531.81	233,805	2,160	7,686	226,845	\$30.68366		
4	FLOVENT HFA 110 MCG INHALER	\$5,652,591.39	364,044	11,810	30,271	883,310	\$16.57936		
5	VYVANSE 30 MG CAPSULE	\$4,732,131.13	696,737	6,238	23,441	696,802	\$7.46256		
6	FOCALIN XR 10 MG CAPSULE	\$4,554,460.50	615,161	6,076	20,703	615,298	\$8.69271		
7	LANTUS 100 UNITS/ML VIAL	\$4,528,177.32	205,615	2,977	11,814	327,357	\$25.64606		
8	FOCALIN XR 20 MG CAPSULE	\$3,873,477.01	506,868	4,009	17,008	506,966	\$8.93953		
9	FOCALIN XR 15 MG CAPSULE	\$3,708,571.19	497,289	4,266	16,706	497,403	\$8.93953		
10	VYVANSE 40 MG CAPSULE	\$3,586,448.22	530,133	4,181	17,774	530,270	\$7.46256		
11	ABILIFY 20 MG TABLET	\$3,504,617.65	95,945	724	3,157	93,461	\$43.39044		
12	INVEGA SUSTENNA 234 MG PREF SY	\$3,440,233.53	2,721	269	1,814	50,913	\$1,330.65474		
13	ADDERALL XR 20 MG CAPSULE	\$3,389,306.78	458,037	3,112	13,798	412,610	\$7.35085		
14	ABILIFY 15 MG TABLET	\$3,337,499.04	128,297	1,156	4,550	134,288	\$30.68366		
15	SOVALDI 400 MG TABLET	\$3,236,633.12	3,136	38	112	3,136	\$1,032.00000		
16	ADVATE 2,401-3,600 UNITS VIAL	\$3,233,547.76	3,194,129	11	45	995	\$1.14000		
17	SYNAGIS 100 MG/1 ML VIAL	\$3,202,827.46	1,336	594	1,235	30,230	\$2,468.68000		
18	LANTUS SOLOSTAR 100 UNITS/ML	\$3,192,030.23	149,076	1,924	7,977	229,226	\$25.64578		
19	VYVANSE 20 MG CAPSULE	\$2,955,908.66	436,042	4,673	14,747	436,142	\$7.46256		
20	ADDERALL XR 30 MG CAPSULE	\$2,871,371.07	387,715	2,100	12,069	361,442	\$7.35085		
21	TAMIFLU 6 MG/ML SUSPENSION	\$2,837,900.96	1,431,240	14,972	15,620	96,983	\$2.07432		
22	ABILIFY 2 MG TABLET	\$2,694,634.32	104,078.5	920	3,267	95,708	\$30.68366		
23	ABILIFY 30 MG TABLET	\$2,616,219.30	72,381	423	2,381	70,882	\$43.39044		
24	VYVANSE 50 MG CAPSULE	\$2,602,057.89	386,934	2,807	12,971	386,961	\$7.46256		
25	FLOVENT HFA 44 MCG INHALER	\$2,492,090.89	186,931	7,833	17,582	505,065	\$14.01881		
		\$97,506,860.79	14,112,495.5	160,321	420,379	11,182,253			

ARANSAS MEDICAID RANKING AND DATA ON OTHER HCV DRUGS (JANUARY - DECEMBER 2014)										
Rank	Common Label Name	Paid Amount	Qty Dispensed	Unique Recipients	Claim Counts	Days of Supply	AR Medicaid Reimbursement Rate Per "Unit" as of 01/01/2015			
191	VICTRELIS 200 MG CAPSULE	\$397,899.12	19,488	19	58	1,624	\$20.53777			
225	OLYSIO 150 MG CAPSULE	\$342,455.25	420	5	15	420	\$815.28000			
N/A	HARVONI 90-400 MG TABLET	0	0	0	0	0	\$1,161.00000			
N/A	VIEKIRA PAK	0	0	0	0	0	\$255.90840			

## HCV Diagnosis in history between 01/01/2013 - 01/23/2015: # Beneficiaries who had HCV Diagnosis Codes Submitted

1,381 Unique Beneficiaries had Hep C diagnosis on a medical claim in time period reviewed:

- •1,339 Beneficiaries had Acute Hep C diagnosis on a claim
- •2 Beneficiariess had Chronic Hep C diagnosis on a claim
- •40 Beneficiaries had Unspecified Hep C diagnosis on a claim

Of those 1,381 who had a diagnosis of HCV, 232 unique beneficiaries received medication(s) for treating chronic Hepatitis C virus during that time period.