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## **APPENDIX A: DATA SOURCE DESCRIPTIONS**

Data Source (Sponsor)	Description
American Hospital Association Annual Survey (American Hospital Association)	The American Hospital Association Annual Survey is completed online by most U.S. hospitals and profiles more than 6,500 hospitals throughout the United States. The overall response rate for fiscal year 2007 was 78 percent, but this rate varied among subgroups of hospitals depending on size, ownership, service, geographical location, and membership status. The survey covers hospital organization structure, service lines, staffing, expenses, physician organization structures, beds, and utilization.
Annual Census of Admission and Resident Patient Characteristics (Substance Abuse and Mental Health Services Administration)	The Annual Census of Admission and Resident Patient Characteristics, State and County Mental Hospital 24-Hour Services, collects annual aggregate data from each State on age, sex, race, and ethnicity, by diagnosis, for annual admissions and year-end residents.
Area Resource File (ARF) (Health Resources and Services Administration)	The Area Resource File (ARF) contains more than 6,000 variables for each of the Nation's counties. ARF includes information on health facilities, health professions, measures of resource scarcity, health status, economic activity, health training programs, and socioeconomic and environmental characteristics.
Brandeis Health Plan Survey on Alcohol, Drug Abuse, and Mental Health Services (Brandeis University)	The Brandeis Health Plan Survey on Alcohol, Drug Abuse, and Mental Health Services is a nationally representative survey that tracks trends in how alcohol, drug abuse, and mental health services are provided for the more than 200 million privately insured individuals in 1999 ( $n = 434$ ; 92 percent response) and 2003 ( $n = 368$ ; 83 percent response).
Census of State and Federal Adult Correctional Facilities (Bureau of Justice Statistics)	The 2005 Census of State and Federal Adult Correctional Facilities provides information on facilities, inmates, programs, and staff of State and Federal correctional facilities throughout the Nation, and of private correctional facilities housing State or Federal inmates. Data were gathered from 1,821 separate institutions (prisons; prison boot camps; reception, diagnostic, and classification centers; prison forestry camps and farms; prison hospitals; youthful offender facilities [except in California]; facilities for alcohol and drug treatment; work release and prerelease; and State-operated local detention facilities in Alaska, Connecticut, Delaware, Hawaii, Rhode Island, and Vermont).
Decision Support System (Veterans Health Administration)	The Veterans Health Administration (VHA) Decision Support System is a managerial cost accounting system that interacts with Department of Veterans Affairs' national databases to provide data elements on VHA costs to VHA products (goods and services provided during patient care).
Department of Defense Survey of Health Related Behaviors Among Active Duty Personnel (Department of Defense)	The 2008 Department of Defense Survey of Health Related Behaviors Among Active Duty Personnel provides representative estimates on substance use and abuse, mental well-being, stress and coping, combat exposure experience, deployment experience, and selected general health topics for all active duty personnel. The final sample consisted of 28,546 military personnel (5,927 Army; 6,637 Navy; 5,117 Marine Corps; 7,009 Air Force; and 3,856 Coast Guard) who completed self-administered questionnaires anonymously.

(continued)

Data Source (Sponsor)	Description
Department of Defense Survey of Health Related Behaviors Among the Guard and Reserve Force (Department of Defense)	The 2006 Department of Defense Survey of Health Related Behaviors Among the Guard and Reserve Force provides representative estimates on substance use; stress and mental health; healthy behaviors and lifestyles; and other specific issues, such as injuries and injury prevention, sleep habits, and risk taking for all Reserve component personnel. The final sample consisted of 18,342 military personnel (2,796 Army National Guard; 1,665 Army Reserve; 3,215 Navy Reserve; 1,159 Marine Corps Reserve; 6,656 Air Force Reserve; and 2,851 Air National Guard) who completed self-administered questionnaires anonymously.
Employer Health Benefits Survey (Henry J. Kaiser Family Foundation and Health Research & Educational Trust)	The Henry J. Kaiser Family Foundation and Health Research & Educational Trust Employer Health Benefits Survey is an annual survey of employers that provides a detailed look at trends in employer-sponsored health coverage, including changes in premiums, employee contributions, cost-sharing policies, and other relevant information. The 2008 survey included 2,832 randomly selected public and private firms with three or more employees, and the 2000 survey included 1,887 randomly selected public and private firms with three or more employees.
International Survey of Clubhouses (International Center for Clubhouse Development)	The International Survey of Clubhouses was conducted in 2010 by the International Center for Clubhouse Development (ICCD). The survey contains information about clubhouse characteristics, governance and administration, membership, staffing and staff credentials, unit structure, employment, housing activities, services, and participation in clubhouse training. In 2010, there were 197 ICCD clubhouses in the United States; however, data were only available for 114 of them.
Medicaid Analytic eXtract (MAX) (Centers for Medicare & Medicaid Services)	The Medicaid Analytic eXtract (MAX) is a set of person-level data files on Medicaid eligibility, service utilization, and payments. The data are extracted from the Medicaid Statistical Information System (MSIS). The MAX development process combines MSIS initial claims, interim claims, voids, and adjustments for a given service into final action events.
Medical Expenditure Panel Survey (MEPS) (Agency for Healthcare Research and Quality)	The Medical Expenditure Panel Survey (MEPS) is a set of large-scale surveys of families and individuals, their medical providers (e.g., doctors, hospitals, pharmacies), and employers across the United States. Since 1996, MEPS has collected data on the specific health services that Americans use, how frequently they use them, the cost of these services, and how they are paid for, as well as data on the cost, scope, and breadth of health insurance held by and available to U.S. workers.
Medicare Cost Report (Centers for Medicare & Medicaid Services)	The Medicare Cost Report is based on annual financial information reported to the Centers for Medicare & Medicaid Services. The Cost Report contains provider information such as facility characteristics, utilization data, cost and charges by cost center (in total and for Medicare), Medicare settlement data, and financial statement data.
Medicare Standard Analytical Files (SAF) <i>(Centers for Medicare</i> & <i>Medicaid Services)</i>	The Medicare Standard Analytical Files (SAF) is a nationally representative claims database that consists of a randomly selected 5 percent sample of U.S. Medicare beneficiaries. The database includes claims across various care settings, including inpatient, outpatient, skilled nursing, home health, and hospice, as well as for durable medical equipment.
Mercer National Survey of Employer-Sponsored Health Plans (Mercer)	Established in 1986, the Mercer National Survey of Employer-Sponsored Health Plans is an annual survey that collects information on a wide range of health care issues regarding employer health plans, including costs, strategic planning, and the scope and limitations of coverage. Nearly 3,000 employers participated in the 2003 survey.
National Vital Statistics Report (Centers for Disease Control and Prevention)	The National Vital Statistics Report presents detailed data on U.S. deaths and death rates according to a number of social, demographic, and medical characteristics. In 2007, 2,423,712 deaths were reported in the United States.

(continued)

Data Source (Sponsor)	Description
National Ambulatory Medical Care Survey (NAMCS) (Centers for Disease Control and Prevention)	The National Ambulatory Medical Care Survey is a national probability sample survey of visits to office-based physicians.
National Comorbidity Survey Replication (NCS-R) (National Institute of Mental Health)	The National Comorbidity Survey Replication (NCS-R) is a nationally representative household survey of 9,282 English speakers in 2001 aged 18 or older in the United States. The survey collected diagnostic and other information on people with mental illness.
National Compensation Survey (Bureau of Labor Statistics)	The Bureau of Labor Statistics National Compensation Survey provides comprehensive measures of occupational wages, employment cost trends, benefit incidence, and detailed plan provisions from more than 361 metropolitan statistical areas and 573 micropolitan statistical areas in the United States, as defined by the Office of Management and Budget. A component of the survey in 1997 reports on benefits provided to employees in establishments with 100 or more workers in all private nonfarm industries. The survey included a national sample of 1,945 U.S. employers with more than 100 workers. Because smaller employers generally offer less generous health benefits packages, the estimates likely represent the upper limits on rates of mental health coverage by employer-based health insurance in the United States. Between 1979 and 1986, the survey provided benefits data on full-time employees in medium and large establishments, those with either 100 or 250 employees or more, depending on the industry; coverage in the service industries was limited.
National Expenditures for Mental Health Services and Substance Abuse Treatment (Substance Abuse and Mental Health Services Administration)	National Expenditures for Mental Health Services and Substance Abuse Treatment (otherwise known as the Spending Estimates Project) presents a broad overview of spending on mental health services and substance abuse treatment. The project is modeled on the National Health Expenditures published by the Centers for Medicare & Medicaid Services and uses data from 15 national sources to produce estimates.
National Health and Nutrition Examination Survey (NHANES) (Centers for Disease Control and Prevention)	The National Health and Nutrition Examination Survey (NHANES) is a nationally representative probability sample of noninstitutionalized U.S. civilians. The survey contains detailed information on the health and nutritional status of adults and children.
National Health Interview Survey (NHIS) (Centers for Disease Control and Prevention)	The National Health Interview Survey (NHIS) provides national estimates for a broad range of health measures for the U.S. civilian noninstitutionalized population. It is an annual, ongoing survey. The interviewed sample for 2009 consisted of 33,856 households, which yielded 88,446 persons in 34,640 families.
National Home and Hospice Care Survey (Centers for Disease Control and Prevention)	The National Home and Hospice Care Survey is a continuing series of nationally representative sample surveys of U.S. home health and hospice agencies. It is designed to provide descriptive information on home health and hospice agencies, their staffs, their services, and their patients. The survey was first conducted in 1992 and was repeated in 1993, 1994, 1996, 1998, and 2000, and most recently in 2007.
National Nursing Home Survey (Centers for Disease Control and Prevention)	The National Nursing Home Survey is a nationally representative probability sample of 1,500 nursing homes, their residents, and their staff. The survey is continuing, and data are available for 1995, 1997, 1999, and 2004.
National Survey of Child and Adolescent Well-Being II (NSCAW II) (Administration for Children and Families)	The National Survey of Child and Adolescent Well-Being II (NSCAW II) includes a longitudinal, national probability sample of 5,873 children from birth to 17 years of age who became involved with the child welfare system in 2008 when reported for child maltreatment.
National Survey of Children's Health <i>(Centers for Disease Control and Prevention)</i>	The National Survey of Children's Health is a nationally representative survey of 91,642 noninstitutionalized children aged 0 to 17 and provides a range of children's health and well-being information.

(continued)

Data Source (Sponsor)	Description	
National Survey of Mental Health Treatment Facilities (Substance Abuse and Mental Health Services Administration)	The National Survey of Mental Health Treatment Facilities includes approximately 15,000 point-of-contact facilities nationwide representing approximately 4,400 mental health organizations nationwide. Data are available for 2008.	
National Survey on Drug Use and Health (NSDUH) (Substance Abuse and Mental Health Services Administration)	The National Survey on Drug Use and Health (NSDUH) is a nationally representative survey of the civilian, noninstitutionalized population of the United States aged 12 or older. The survey interviews approximately 67,500 persons each year.	
Nationwide Emergency Department Sample (NEDS) (Agency for Healthcare Research and Quality)	The Nationwide Emergency Department Sample (NEDS) database provides national estimates of emergency department visits.	
Revenues and Expenditures Study (NRI Inc.)	NRI's Revenues and Expenditures Study describes the major expenditures and funding sources of State mental health agencies. NRI has conducted this survey every year since 1981.	
School Health Policies and Programs Study (SHPPS) (Centers for Disease Control and Prevention)	The School Health Policies and Programs Study (SHPPS) is a nationally representative survey of State education agency personnel in all 50 States plus the District of Columbia; school districts ( $n = 538$ ); elementary, middle, and high schools ( $n = 1,103$ ); teachers of classes covering required health instruction in elementary schools and required health education courses in middle and high schools ( $n = 912$ ); and teachers of required physical education classes and courses ( $n = 1,194$ ).	
State Inpatient Databases (Agency for Healthcare Research and Quality)	The State Inpatient Databases consist of data from 43 States on the number of community hospitals as well as discharges from those hospitals, accounting for approximately 90 percent of all community hospital discharges.	
State Mental Health Agency Budget Reductions Survey (NRI Inc.)	The State Mental Health Agency (SMHA) Budget Reductions Survey is conducted by the National Association of State Mental Health Program Directors (NASMHPD) and NRI Inc. The survey is a semiannual series on the impact of State budget shortages on SMHA systems.	
Survey of Inmates in State and Federal Correctional Facilities, and the Survey of Inmates in Local Jails (Bureau of Justice Statistics)	The Survey of Inmates in State and Federal Correctional Facilities, 2004, and the Survey of Inmates in Local Jails, 2002, included a modified structured clinical interview for the <i>Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition</i> (DSM-IV). The interviewed sample included 681,600 State prison inmates, 56,600 Federal prison inmates, and 398,800 local jail inmates.	
Survey of Mental Health Organizations (SMHO) (Substance Abuse and Mental Health Services Administration)	The Survey of Mental Health Organizations (SMHO) was a biennial survey with two phases. In the first phase, limited data were collected from all mental health organizations. In the second phase, more detailed data were collected from a sample of specialty mental health organizations. The survey changed names during its course, and data are available for 1986, 1990, 1992, 1994, 1998, 2000, 2002, and 2004.	
Survey of Youth in Residential Placement (SYRP) (Office of Juvenile Justice and Delinquency Placement)	The Survey of Youth in Residential Placement (SYRP) is a nationally representative survey of offender youth aged 10 to 20 in State and local facilities. The final sample consisted of 7,073 youth who were interviewed using an audio computer-assisted self-interview system.	
Uniform Data System (Health Resources and Services Administration)	The Uniform Data System is a set of electronic files compiled by the Health Resources and Services Administration from reports submitted annually by all U.S. federally funded community health centers on administration, patient population, demographic characteristics, utilization, and finances.	

### APPENDIX B: GLOSSARY

Any mental illness (AMI). Among adults aged 18 or older, defined as having a diagnosable mental, behavioral, or emotional disorder (excluding developmental and substance use disorders), regardless of functional impairment level. Estimates of AMI are provided annually in the National Survey on Drug Use and Health.

Behavioral health. A state of mental/emotional being and/or choices and actions that affect wellness. Behavioral health problems include substance abuse or misuse, alcohol and drug addiction, serious psychological distress, suicide, and mental and substance use disorders.

Children's Health Insurance Program (CHIP). A program by which States insure low-income children who are ineligible for Medicaid but whose families cannot afford private insurance. States receive Federal matching dollars to help provide for this coverage.

**Child welfare system.** The social service system that receives and investigates reports of possible child abuse and neglect; provides services to families that need assistance in the protection and care of their children; arranges for children to live with kin or with foster families when they are not safe at home; and arranges for reunification, adoption, or other permanent family connections for children leaving foster care.

**Clubhouse.** An organization hosting a specific model of care that helps people with mental illness participate in the broader community. A clubhouse provides a membership of several people an array of nonmedical services, many of which focus on education and employment. Members themselves often participate in service provision.

#### Community health center (CHC). An

organization that serves populations with limited access to health care, usually because of limited financial resources. These centers are public and private nonprofit health care organizations that meet certain criteria under the Medicare and Medicaid programs.

**Community hospital.** Any non-Federal, shortterm general or other specialty hospital, including academic medical centers or other teaching hospitals that are non-Federal shortterm hospitals. The term typically excludes hospitals not accessible by the general public, such as prison hospitals or college infirmaries. See also general hospital.

#### Complementary and alternative medicine

(CAM). A broad class of services that are not traditionally provided as billable services in the treatment system. Includes services from several types of healers, participation in an Internet support group, or participation in a self-help group. The most commonly used CAM services are those from spiritual

advisors, relaxation techniques, and use of multivitamins and herbs.

**Emergency department.** A section of an institution that is staffed and equipped to provide immediate care, particularly for sudden, acute illness and trauma.

**Emotional disturbance.** An emotional or behavioral health condition that prevents a child or adolescent from performing everyday tasks. This condition is characterized by an inability to build or maintain relationships, inappropriate behaviors or feelings under normal circumstances, a pervasive mood of unhappiness or depression, or a tendency to develop physical symptoms or fears related to personal or school problems.

Functional impairment. A level of disability or distress in daily life that is attributable to symptoms of mental illness.

**General hospital.** A community medical/ surgical or specialty hospital (other than a mental health and substance abuse specialty hospital) providing diagnostic and medical treatment to inpatients, including inpatient psychiatric care in a specialized treatment unit of a general hospital and other mental health treatment services. See also community hospital.

Health maintenance organization (HMO). A type of managed care organization that provides a variety of services. Typically, services are provided for a set flat fee per patient. In some HMOs, a primary care provider directs access to other medical services. Usually, providers agree to treat patients in accordance with the HMO's guidelines and restrictions.

**Home health care.** A set of services provided in the patient's residence by private and public freestanding agencies or home health agencies. Freestanding means that the agency is not based in a hospital, nursing home, or other type of provider whose primary mission is something other than home health services.

**Hospice.** A form of care that provides palliative and supportive care services, including physical, psychological, social, and spiritual care for dying persons, their families, and other loved ones. Hospice services are available in home and inpatient settings.

**Inpatient.** Care provided in an acute medical care unit, usually a hospital, and treatment typically requires an overnight stay.

**Insurance administration.** The set of activities used to run health care insurance programs.

Major depressive episode (MDE). A period of at least 2 weeks when a person experienced a depressed mood or loss of interest or pleasure in daily activities and had a majority of specified depression symptoms. MDE is one of the components of the diagnostic criteria for major depressive disorder (MDD). MDD is a serious mental disorder that can result in impairment and societal costs, including work disability and lost productivity. Estimates of MDE are provided annually in the National Survey on Drug Use and Health.

**Medicaid.** A program jointly funded by Federal and State governments that provides health care coverage to certain classes of persons with limited income and resources. Within Federal guidelines, State governments set eligibility standards, determine optional services provided, set reimbursement rates, and administer the program. Income and

resources are only two factors in determining eligibility, so not all persons with limited income in a State are necessarily covered by this program.

**Medicare.** A Federal government program that provides health insurance coverage to eligible adults aged 65 or older and disabled persons. It has four parts: Part A, which covers institutional services, including inpatient hospital services, nursing home care, initial home health visits, and hospice care; Part B, which covers physicians and other professional services, outpatient clinic or hospital services, laboratory services, rehabilitation therapy, and home health visits not covered by Part A, among other services; Part C, the Medicare Advantage program, which is managed by private companies for a flat fee per patient per month; and Part D, which began in 2006 and covers medication.

**Mood disorder.** A collection of disorders where a disturbance of mood is the main underlying feature. Includes depressive or bipolar disorders as defined in the Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition (DSM-IV).

**Nursing home care.** A set of services provided in private and public freestanding nursing home facilities. Freestanding means that the nursing home is not based in a hospital, nursing home, or other type of provider whose primary mission is something other than nursing home care. The facility includes nursing and rehabilitative services, generally for an extended period of time by staff of registered or licensed practical nurses with physician consultation or oversight.

**Out-of-pocket payment.** Direct expenditure by consumers for health care goods and services, including coinsurance, deductibles, and any amounts paid for health care services that are not covered by insurance. Depending on the data source, health insurance premiums may or may not be included.

**Outpatient.** Care provided in an ambulatory setting and treatment does not require an overnight stay. Unless otherwise specified, this setting may include a hospital outpatient department; an emergency room; physician's or other medical professional's (private therapist, psychologist, psychiatrist, social worker, or counselor) office or clinic; mental health clinic or center; partial day hospital or day treatment program; and in-home therapist, counselor, or family preservation worker.

#### **Prescription drug or prescription medication.**

A medication available through primary or specialty providers; retail outlets, such as community pharmacies; pharmacies in mass merchandise stores, grocery stores, and department stores; mail order pharmacies; hospitals; exclusive-to-patient health maintenance organizations; and nursing home pharmacies.

**Primary diagnosis.** The main or principal diagnosis that most typically has led to the admission of an individual to a hospital or to receive outpatient treatment. In an outpatient care setting, the condition may be referred to as the first-listed diagnosis. In an inpatient setting, the condition may be the most serious and/or resource intensive during that hospitalization.

**Private health insurance.** Third-party coverage not provided by government sources.

**Psychiatric hospitals.** Facilities that typically specialize in treating people with serious

mental illness and vary widely in their size and function. Many specialize in the temporary or permanent care of residents who require routine assistance, treatment, or a controlled environment.

**Psychiatrist.** Independently billing private or group practice of health practitioners having the degree of M.D. or D.O. who are primarily engaged in the practice of psychiatry or psychoanalysis.

Psychotropic medication. Medication used to treat mental health symptoms and disorders. Although there are several ways to categorize such medications, this report includes the following categories: antianxiety, antidepressant, antimanic, antipsychotic, anticonvulsant, and stimulant.

**Residential services.** Services provided in a 24-hour care setting that provide therapeutic care to patients using licensed behavioral health professionals.

Retail prescription drug or retail prescription **medication.** Prescription medication that excludes prescription medication sold through hospitals, exclusive-to-patient health maintenance organizations, or nursing home pharmacies.

**Scatter bed.** A general medical bed in a hospital dedicated to providing inpatient psychiatric care. Psychiatric care in scatter beds may occur even in hospitals with separate psychiatric units.

Serious mental illness (SMI). Among adults aged 18 or older, defined as having a diagnosable mental, behavioral, or emotional disorder (excluding developmental and substance use disorders) that has resulted in serious functional impairment, which

substantially interferes with or limits one or more major life activities. Estimates of SMI are provided annually in the National Survey on Drug Use and Health.

Serious psychological distress (SPD). The presence of mental health symptoms in the past 30 days that may negatively affect an adult's ability to participate in family, community, and work life. SPD is not a diagnosis and does not represent a specific mental disorder. This construct is measured annually in the National Health Interview Survey.

**State Mental Health Agency (SMHA).** A State government organization responsible for directing resources for people in need of mental health services. For example, an SMHA typically applies for and administers Federal Community Mental Health Services Block Grant funding for its State.

**Substance abuse.** A pattern of substance use that leads to clinically significant impairment and includes symptoms such as failure to fulfill major role obligations, legal problems, use in situations that are physically hazardous, and continued use despite persistent social or interpersonal problems.

**Substance dependence.** A pattern of substance use that leads to clinically significant impairment and includes symptoms such as drug taking in larger amounts than intended, inability to cut down on drug use, a great deal of time spent on activities necessary to obtain the drug, and continued use despite knowledge of health or social problems caused by the drug.

#### Substance disorder/Substance use disorder.

Disorder that is characterized by substance abuse and/or dependence.

### **APPENDIX C: MEDICATION LISTS**

This appendix lists the mental health and/or substance abuse medications for each medication class presented in Exhibits 9, 13, 19, and 20 and in Tables 30, 31, 62, 63, 95, and 96.

### **Medications for Mental Health Disorders**

Antianxiety, Sedative, Hypnotic		
Alprazolam	Diazepam	Methylprylon
Amobarbital	Droperidol	Oxazepam
Amobarbital-Secobarbital	Estazolam	Pentobarbital
Buspirone	Ethchlorvynol	Phenobarbital
Butabarbital	Flurazepam	Prazepam
Butalbital	Glutethimide	Quazepam
Chloral hydrate	Halazepam	Secobarbital
Chlordiazepoxide	Hexobarbital	Temazepam
Chlordiazepoxide-Clidinium	Hydroxyzine	Triazolam
Chlormezanone	Lorazepam	Zaleplon
Clonazepam	Mephobarbital	Zolpidem
Clorazepate	Meprobamate	

Antidepressant		
Amitriptyline	Duloxetine	Nortriptyline
Amitriptyline-Chlordiazepoxide	Escitalopram	Paroxetine
Amoxapine	Fluoxetine	Phenelzine
Bupropion	Fluvoxamine	Protriptyline
Citalopram	Imipramine	Sertraline
Clomipramine	Isocarboxazid	Tranylcypromine
Desipramine	Maprotiline	Trazodone
Desvenlafaxine	Mirtazapine	Trimipramine
Doxepin	Nefazodone	Venlafaxine

### **Medications for Mental Health Disorders** (continued)

Antimanic or Anticonvulsant		
Carbamazepine	Lithium	Topiramate
Divalproex sodium	Oxcarbazepine	Valproate
Gabapentin	Tiagabine	Valproic acid
Lamotrigine		

Antipsychotic		
Amitriptyline-Chlordiazepoxide	Mesoridazine	Quetiapine
Amitriptyline-Perphenazine	Methotrimeprazine	Risperidone
Aripiprazole	Molindone	Thioridazine
Chlorpromazine	Olanzapine	Thiothixene
Clozapine	Paliperidone	Trifluoperazine
Fluoxetine-Olanzapine	Perphenazine	Triflupromazine
Fluphenazine	Pimozide	Ziprasidone
Haloperidol	Prochlorperazine	
Loxapine	Promazine	

Stimulant		
Amphetamine	Lisdexamfetamine	Methylphenidate
Amphetamine- Dextroamphetamine	Extroamphetamine	Modafinil
Atomoxetine	Methamphetamine	Pemoline
Dexmethylphenidate		

### **Medications for Substance Use Disorders**

Acamprosate	Disulfiram	Naltrexone
Buprenorphine	Methadone	

### **Medications for Alzheimer's Disease**

Donepezil	Memantine	Rivastigmine
Galantamine	Physostigmine	Tacrine

**SOURCE**: National Institute on Mental Health. (2011). Mental health medications. Retrieved from http://www.nimh. nih.gov/health/publications/mental-health-medications/alphabetical-list-of-medications.shtml

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### MENTAL HEALTH, UNITED STATES, 2010 **EXPERT ADVISORY PANEL**

The structure and content of the report were guided by the suggestions of an Expert Advisory Panel that was convened on February 24, 2010:

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