

Division of Medical Services

Medicaid Director's Office

P.O. Box 1437, Slot S401· Little Rock , AR 72203-1437 501-682-8292 · Fax: 501-682 -11 97



March 5, 2020

Senator Cecile Bledsoe, Senate Co-Chair Representative Jeff Wardlaw, House Co-Chair

Arkansas Legislative Council State Capitol Building Little Rock, AR 72201

Dear Senator Bledsoe and Representative Wardlaw:

Please find attached the Medicaid In-State and Out-Of-State Inpatient Psychiatric Placements Report as required by AC.A Section 20-46-105. The report includes data for claims paid in February 2020 and includes state fiscal year-to-date paid claims data from July 1, 2019 to February 29, 2020.

If you have any questions regarding the attached report, please contact Janet Mann, Director, at 682-8330.

Sincerely

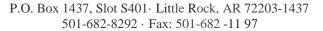
Director

Division of Medical Services



Division of Medical Services

Medicaid Director's Office





February 12, 2020

Senator Cecile Bledsoe, Senate Co-Chair Representative Jeff Wardlaw, House Co-Chair

Arkansas Legislative Council State Capitol Building Little Rock, AR 72201

Dear Senator Bledsoe and Representative Wardlaw:

Please find attached the Medicaid In-State and Out-Of-State Inpatient Psychiatric Placements Report as required by AC.A Section 20-46-105. The report includes data for claims paid in January 2020 and includes state fiscal year-to-date paid claims data from July 1, 2019 to January 31, 2020.

This report includes only acute inpatient services for Medicaid beneficiaries who are not members of a PASSE. Psychiatric acute inpatient services are provided in freestanding psychiatric hospitals and a typical length of stay is 5 days. The out of state providers are all located in border states.

If you have any questions regarding the attached report, please contact Janet Mann, Director, at 682-8330.

Sincerely

Director

Division of Medical Services

Number of Medicaid Recipients With Out-of-State Inpatient Psychiatric Placements

Medicaid Totals For Paid Dates Feb 1, 2020 and Feb 29, 2020

In-State:

			F - FEMALE		M - MALE		Underplicated Decimient
	Expenditures		Unduplicated Recipient Count		Unduplicated Recipient Count		Unduplicated Recipient Count
Inpatient Psychiatric Program	\$1,791,853.33		234		188		422
Monthly In-State Total:	\$1,791,853.33		234		188		422
		Evne	enditures	Unduplicated Re	cinient Count		
In-State YTD Total:			.888,345.60		2,623		
III-State I ID Total.		φι	5,000,545.00		2,023		

Outside Arkansas:

		F-F	EMALE	M - MALE Unduplicated Recipient Count		Unduplicated Recipient Count
	Expenditure	Ondupilea	ted Recipient ount			
Inpatient Psychiatric Program	\$30,039.	00	6		3	,
Monthly Outside AR Total	\$30,039.0	0	6		3	9
	Expenditures		Unduplicated Recipient Count			
OutSide AR YTD Total:		\$203,141.68	48			

Number Outside Arkansas within Medicaids fifty (50) mile trade area

Monthly: 9
YTD: 48
Number Outside Arkansas beyond Medicaids fifty (50) mile trade area:

Monthly: 0
YTD: 0

Version:1.0

^{**}This represents recipients for whom only acute inpatient psych claims were billed.

^{**}This report excludes encounters