

Division of Medical Services

Medicaid Director's Office

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May 4, 2021

Senator Terry Rice, Senate Co-Chair Representative Jeff Wardlaw, House Co-Chair

Arkansas Legislative Council State Capitol Building Little Rock, AR 72201

Dear Senator Rice and Representative Wardlaw:

Please find attached the Medicaid In-State and Out-Of-State Inpatient Psychiatric Placements Report as required by A.C.A Section 20-46-105. The report includes data for claims paid in April 2021 and includes state fiscal year-to-date paid claims data from July 1, 2020 to April 30, 2021.

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 Elizabeth Pitman, Director, at 501-244-3944.

Sincerely,

Director.

Division of Medical Services

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

Medicaid Totals For Paid Dates Apr 1, 2021 through Apr 30, 2021

In-State:

	Expenditures		F - FEMALE Unduplicated Recipient Count		M - MALE Unduplicated Recipient Count		Unduplicated Recipient Count
patient Psychiatric \$2,266 rogram		,826.68		283		160	44
Monthly In-State Total:	onthly In-State Total: \$2,266,8			283		160	443
		Expe	enditures	Unduplicated Re	cipient Count		
In-State YTD Total:		\$14,893,820.02		2,673			

Outside Arkansas:

		F-F	EMALE	M - MALE		Hadrolizated Desirient
	Expenditures	Unduplicated Recipient Count		Unduplicated Recipient Count		Unduplicated Recipient Count
Inpatient Psychiatric Program	\$8,638.64		1		3	
Monthly Outside AR Total	\$8,638.64		1		3	4
	Expend		Unduplicated Recipient Count			
OutSide AR YTD Total:		\$132,706.84	27			

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

Monthly: 4
YTD: 27
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