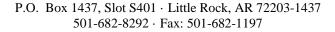


## **Division of Medical Services**

Medicaid Director's Office





July 9, 2014

Representative John Charles Edwards, House Co-Chair Senator Bill Sample, Senate Co-Chair

Arkansas Legislative Council State Capitol Building Little Rock, AR 72201

Dear Representative Edwards and Senator Sample:

Attached are the reports of Medicaid In-State and Out-Of-State Inpatient Psychiatric Placements as required by A.C.A. Section 20-46-105. The report includes data for claims paid in June 2014 and includes state fiscal year-to-date paid claims data from July 1, 2013, to June 30, 2014.

If you have any questions regarding the attached report, please contact Marilyn Strickland, Chief Operating Officer, at 682-8330.

Sincerely,

Dawn Zekis Interim Director

AA/DW/paw

# Number of Medicaid Recipients With In-State and Out-of-State Inpatient Psychiatric Placements

#### Medicaid Totals For Paid Dates 06/01/2014 - 06/30/2014

#### In-state:

		F - Female	M - Male	
Facility Type	Expenditures	Unduplicated Recipient Count	Unduplicated Recipient Count	Total
*Inpatient Psychiatric Program	\$0.00	0	0	0
**Residential Program	\$9,752,414.19	551	832	1,383
Monthly In-State Total:	\$9,752,414.19	551	832	1,383

	Expenditures	Unduplicated Recipient Count
In-State YTD Total:	\$128,849,442.74	5,825

### **Outside Arkansas:**

		F - Female	M - Male		
Facility Type	Expenditures	Unduplicated Recipient Count	Unduplicated Recipient Count	Total	
*Inpatient Psychiatric Program	\$40,375.00	1	2	3	
**Residential Program	\$940,347.00	50	76	126	
Sexual Offender Program	\$5,773.00	0	2	2	
Monthly Outside AR Total:	\$986,495.00	51	80	131	***

	Expenditures	Unduplicated Recipient Count
Outside AR YTD Total:	\$21,480,228.79	624

Number Outside Arkansas within Medicaid's fifty (50) mile trade area: Monthly: 126

YTD: 622

Number Outside Arkansas beyond Medicaid's fifty (50) mile trade area: Monthly: 0

YTD: 2

<sup>\*</sup>This represents recipients for whom only acute inpatient psych claims were billed.

<sup>\*\*</sup>This represents recipients for whom residential inpatient psych claims were billed, which may include recipients who received both acute and residential services.

<sup>\*\*\*</sup>Monthly Outside AR Total may include duplicated recipients due to multiple admissions to different Facility Types.