



Division of Medical Services

P.O. Box 1437, Slot S-401 · Little Rock, AR 72203-1437
501-682-8292 · Fax: 501-682-1197 · TDD: 501-682-6789



July 10, 2009

Senator Hank Wilkins, IV, Chair
Representative Allen Maxwell, Chair
Arkansas Legislative Council
State Capitol Building
Little Rock, AR 72201

Dear Senator Wilkins and Representative Maxwell,

Attached is the report of Medicaid In-State and Out-of-State Inpatient Psychiatric Placements as required by A.C.A. Section 20-46-105. This report includes data for claims paid in June 2009 and includes state fiscal year-to-date paid claims data for July 2008 through June 2009.

If you have any questions regarding the attached report, please contact Marilyn Strickland, Assistant Director, at 682-8330.

Sincerely,

A handwritten signature in black ink, appearing to read "Roy Jeffus".

Roy Jeffus,
Director

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

Medicaid Totals For Paid Dates 6/01/2009 - 6/30/2009

In-state:

Facility Type	Expenditures	F - Female	M - Male	Total
		Unduplicated Recipient Count	Unduplicated Recipient Count	
*Inpatient Psychiatric Program	-\$20,720.00	1		1
**Residential Program	\$9,753,248.51	444	844	1,288
Monthly In-State Total:	\$9,732,528.51	445	844	1,289

	Expenditures	Unduplicated Recipient Count
In-State YTD Total:	\$116,771,718.49	4,831

Outside Arkansas:

Facility Type	Expenditures	F - Female	M - Male	Total
		Unduplicated Recipient Count	Unduplicated Recipient Count	
*Inpatient Psychiatric Program	\$17,797.00	1	2	3
**Residential Program	\$1,866,281.00	61	155	216
Sexual Offender Program	\$39,664.00		6	6
Monthly Outside AR Total:	\$1,923,742.00	62	163	225 ***

	Expenditures	Unduplicated Recipient Count
Outside AR YTD Total:	\$22,073,963.17	672

Number Outside Arkansas within Medicaid's fifty (50) mile trade area: Monthly: 224

YTD: 668

Number Outside Arkansas beyond Medicaid's fifty (50) mile trade area: Monthly: 1

YTD: 4

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

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

***Monthly Outside AR Total may include duplicated recipients due to multiple admissions to different Facility Types.



Division of Medical Services

P.O. Box 1437, Slot S-401 · Little Rock, AR 72203-1437
501-682-8292 · Fax: 501-682-1197 · TDD: 501-682-6789



August 10, 2009

Senator Hank Wilkins, IV, Chair
Representative Allen Maxwell, Chair
Arkansas Legislative Council
State Capitol Building
Little Rock, AR 72201

Dear Senator Wilkins and Representative Maxwell,

Attached is the report of Medicaid In-State and Out-of-State Inpatient Psychiatric Placements as required by A.C.A. Section 20-46-105. This report includes data for claims paid in July 2009 and includes state fiscal year-to-date paid claims data for July 2009.

If you have any questions regarding the attached report, please contact Marilyn Strickland, Assistant Director, at 682-8330.

Sincerely,

A handwritten signature in black ink, appearing to read "Roy Jeffus".

Roy Jeffus,
Director

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

Medicaid Totals For Paid Dates 7/01/2009 - 7/31/2009

In-state:

Facility Type	Expenditures	F - Female	M - Male	Total
		Unduplicated Recipient Count	Unduplicated Recipient Count	
*Inpatient Psychiatric Program	\$6,296,585.15	208	374	582
**Residential Program	\$5,010,184.96	633	1,116	1,749
Monthly In-State Total:	\$11,306,770.11	841	1,490	2,331

	Expenditures	Unduplicated Recipient Count
In-State YTD Total:	\$11,306,770.11	1,698

Outside Arkansas:

Facility Type	Expenditures	F - Female	M - Male	Total
		Unduplicated Recipient Count	Unduplicated Recipient Count	
*Inpatient Psychiatric Program	\$9,139.00		2	2
**Residential Program	\$2,083,791.00	57	160	217
Sexual Offender Program	\$40,200.00		5	5
Monthly Outside AR Total:	\$2,133,130.00	57	167	224 ***

	Expenditures	Unduplicated Recipient Count
Outside AR YTD Total:	\$2,133,130.00	222

Number Outside Arkansas within Medicaid's fifty (50) mile trade area: Monthly: 222

YTD: 222

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

YTD: 0

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

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

***Monthly Outside AR Total may include duplicated recipients due to multiple admissions to different Facility Types.