# Exhibit G



## **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



April10, 2012

Senator Missy Irvin, Chair Senate Committee on Children and Youth

Representative Stephanie Malone, Chair House Committee on Aging, Children and Youth

Legislative & Military Affairs State Capitol Building Little Rock, AR 72201

Dear Senator Irvin and Representative Malone:

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 March, 2012, and includes state fiscal year-to-date paid claims data from July, 2011 thru March, 2012.

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

Sincerely,

Andrew Allison, PHD

Director

Arkansas Department of Human Services

Division of Medical Services

AA/dw/jm

DSS Run Date: 3/26/2012

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

## Medicaid Totals For Paid Dates 3/01/2012 - 3/31/2012

#### In-state:

		F - Female	M - Male	
Facility Type	Expenditures	Unduplicated Recipient Count	Unduplicated Recipient Count	Total
*Inpatient Psychiatric Program	\$6,484,201.99	103	171	274
**Residential Program	\$6,274,881.43	685	1,081	1,766
Monthly In-State Total:	\$12,759,083.42	788	1,252	2,040

	Expenditures	Unduplicated Recipient Count
In-State YTD Total:	\$97,060,091.69	4,541

### **Outside Arkansas:**

		F - Female	M - Male	
Facility Type	Expenditures	Unduplicated Recipient Count	Unduplicated Recipient Count	Total
**Residential Program	\$1,772,160.25	60	143	203
Sexual Offender Program	\$26;800.00		4	4
Monthly Outside AR Total:	\$1,798,960.25	60	147	207

	Expenditures	Unduplicated Recipient Count
Outside AR YTD Total:	\$18,197,783.93	552

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

Monthly: 200

YTD: 544

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

Monthly: 7

<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.



# **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



May 10, 2012

Senator Missy Irvin, Chair Senate Committee on Children and Youth

Representative Stephanie Malone, Chair House Committee on Aging, Children and Youth

Legislative & Military Affairs State Capitol Building Little Rock, AR 12201

Dear Senator Irvin and Representative Malone:

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 April, 2012 and includes state fiscal year-to-date paid claims data for July 2011 through April, 2012.

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

Sincerely,

Andrew Allison, PhD

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Director

DSS Run Date: 4/30/2012

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

### Medicaid Totals For Paid Dates 4/01/2012 - 4/30/2012

### In-state:

		F - Female	M - Male	
Facility Type	Expenditures	Unduplicated Recipient Count	Unduplicated Recipient Count	Total
*Inpatient Psychiatric Program	\$5,194.00		1	1
**Residential Program	\$10,260,963.19	542	891	1,433
Monthly In-State Total:	\$10,266,157.19	542	892	1,434

	Expenditures	Unduplicated Recipient Count
In-State YTD Tot	al: \$107,326,248.88	4,847

## **Outside Arkansas:**

		F - Female	M - Male		
Facility Type	Expenditures	Unduplicated Recipient Count	Unduplicated Recipient Count	Total	
*Inpatient Psychiatric Program	\$7,308.00		1	. 1	1
**Residential Program	\$2,559,394.29	79	176	255	
Sexual Offender Program	\$25,996.00		3	3	1
Monthly Outside AR Total:	\$2,592,698.29	79	180	259	***

	Expenditures	Unduplicated Recipient Count
Outside AR YTD Total:	\$20,790,482.22	589

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

Monthly: 254

YTD: 581

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

Monthly: 4

<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.

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



# **Exhibit G**

# **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



June 10, 2012

Senator Missy Irvin, Chair Senate Committee on Children and Youth

Representative Stephanie Malone, Chair House Committee on Aging, Children and Youth

Legislative & Military Affairs State Capitol Building Little Rock, AR 72201

Dear Senator Irvin and Representative Malone:

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 May, 2012 and includes state fiscal year-to-date paid claims data from July 2011 to May 31, 2012.

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

Sincerely,

Andrew Allison, PhD

Director

Arkansas Department of Human Services

Division of Medical Services

AA/DW/jmoore

DSS Run Date: 6/1/2012

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

## Medicaid Totals For Paid Dates 5/01/2012 - 5/31/2012

### In-state:

		F - Female	M - Male	
Facility Type	Expenditures	Unduplicated Recipient Count	Unduplicated Recipient Count	Total
*Inpatient Psychiatric Program	\$43,724.00	3.1.1	1	2
**Residential Program	\$12,901,559.24	612	995	1,607
Monthly In-State Total:	\$12,945,283.24	613	996	1,609

2	Expenditures	Unduplicated Recipient Count
In-State YTD Total:	\$120,271,532.12	5,287

## **Outside Arkansas:**

		F - Female	M - Male		
Facility Type	Expenditures	Unduplicated Recipient Count	Unduplicated Recipient Count	Total	
*Inpatient Psychiatric Program	\$6,293.00		1	1	
**Residential Program	\$2,298,132.00	77	176	253	1
Sexual Offender Program	\$18,760.00		3	3	l
Monthly Outside AR Total:	\$2,323,185.00	77	180	257	*

	Expenditures	Unduplicated Recipient Count
Outside AR YTD Total:	\$23,113,667.22	625

Number Outside Arkansas within Medicaid's fifty (50) mile trade area: Monthly: 252

YTD: 616

Number Outside Arkansas beyond Medicaid's fifty (50) mile trade area: Monthly: 4

<sup>\*</sup>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.

<sup>\*\*\*</sup>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



July 10, 2012

Senator Missy Irvin, Chair Senate Committee on Children and Youth

Representative Stephanie Malone, Chair House Committee on Aging, Children and Youth

Legislative & Military Affairs State Capitol Building Little Rock, AR 72201

Dear Senator Irvin and Representative Malone:

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, 2012 and includes state fiscal year-to-date paid claims data from July 2011 to June 30, 2012.

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

Sincerely,

Andrew Allison, PhD

Director

Arkansas Department of Human Services

Division of Medical Services

AA/AC/jmoore

DSS Run Date: 6/27/2012

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

## Medicaid Totals For Paid Dates 6/01/2012 - 6/30/2012

### In-state:

		F - Female	M - Male	
Facility Type	Expenditures	Unduplicated Recipient Count	Unduplicated Recipient Count	Total
*Inpatient Psychiatric Program	\$3,824,957.00	. 14	47	61
**Residential Program	\$5,972,843.08	560		1,451
Monthly In-State Total:	\$9,797,800.08	574	938	1,512

	Expenditures	Unduplicated Recipient Count
In-State YTD Total:	\$130,069,332,20	5,601

## **Outside Arkansas:**

		F - Female	M - Male		
Facility Type	Expenditures	Unduplicated Reciplent Count	Unduplicated Recipient Count	Total	
**Residential Program	\$1,973,607.39	77	177	254	
Sexual Offender Program	\$16,616.00	Perse perse	2	2	
Monthly Outside AR Total:	\$1,990,223.39	77	179	256	**

·	Expenditures	Unduplicated Recipient Count
Outside AR YTD Total:	\$25,103,890,61	667

Number Outside Arkansas within Medicaid's fifty (50) mile trade area: Monthly: 253

YTD: 658

Number Outside Arkansas beyond Medicaid's fifty (50) mile trade area: Monthly: 3

<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.