



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



September 11, 2019

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 August 2019 and includes state fiscal year-to-date paid claims data from July 1, 2018 to August 31, 2019.

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

Sincerely,

A handwritten signature in cursive script that reads "Janet Mann".

Director
Division of Medical Services

**Number of Medicaid Recipients
With Out-of-State Inpatient Psychiatric Placements**
Medicaid Totals For Paid Dates Aug 1, 2019 and Aug 31, 2019

Version:1.0

In-State:

Facility Type	Expenditures	F - FEMALE	M - MALE	Total
		Unduplicated Recipient Count	Unduplicated Recipient Count	
Inpatient Psychiatric Program	\$1,595,731.64	620	638	1,258
Residential Program	\$79,019.00	105	155	260
Sexual Offender Program	0.00	0	0	0
Monthly In-State Total:	\$1,674,750.64	725	793	1,518

	Expenditures	Unduplicated Recipient Count
In-State YTD Total:	\$3,070,981.35	2,380

Outside Arkansas:

	Expenditures	F - FEMALE	M - MALE	M - Male	Total
		Unduplicated Recipient Count	Unduplicated Recipient Count	Unduplicated Recipient Count	
Inpatient Psychiatric Program	\$32,355.30	13	15	0	28
Residential Program	\$0.00	4	8	0	12
Sexual Offender Program	0.00	0	0	0	0
Monthly Outside AR Total:	\$32,355.30	17	23	0	40

	Expenditures	Unduplicated Recipient Count
OutSide AR YTD Total:	\$50,686.70	51

Number Outside Arkansas within Medicaid's fifty (50) mile trade area	Monthly: 40
	YTD: 51
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.