



Division of Medical Services
Medicaid Director's Office

P.O. Box 1437, Slot S401 · Little Rock, AR 72203-1437
501-682-8292 · Fax: 501-682-1197



March 1, 2018

Senator Bill Sample, Senate Co-Chair
Representative Jim Dotson, House Co-Chair

Arkansas Legislative Council
State Capitol Building
Little Rock, AR 72201

Dear Senator Sample and Representative Dotson:

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 February 2018 and includes state fiscal year-to-date paid claims data from July 1, 2017 to February 28, 2018.

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

Sincerely,

A handwritten signature in cursive script that reads "Dawn Stehle".

Dawn Stehle
Director

AA/DW/dab

**Number of Medicaid Recipients
With Out-of-State Inpatient Psychiatric Placements**
Medicaid Totals For Paid Dates Feb 1, 2018 and Feb 28, 2018

Version:1.0

In-State:

Facility Type	Expenditures	F - FEMALE	M - MALE	Total
		Unduplicated Recipient Count	Unduplicated Recipient Count	
Inpatient Psychiatric Program	\$5,007,486.90	448	426	874
Residential Program	\$3,686,360.44	228	256	484
Sexual Offender Program	0.00	0	0	0
Monthly In-State Total:	\$8,693,847.34	676	682	1,358

	Expenditures	Unduplicated Recipient Count
In-State YTD Total:	\$72,039,562.31	6,255

Outside Arkansas:

	Expenditures	F - FEMALE	M - MALE	M - Male	Total
		Unduplicated Recipient Count	Unduplicated Recipient Count	Unduplicated Recipient Count	
Inpatient Psychiatric Program	\$78,477.70	9	9	0	18
Residential Program	\$381,117.89	17	31	0	48
Sexual Offender Program	0.00	0	0	0	0
Monthly Outside AR Total:	\$459,595.59	26	40	0	66

	Expenditures	Unduplicated Recipient Count
OutSide AR YTD Total:	\$5,209,446.40	446

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

Monthly: 63
YTD: 442

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

Monthly: 0
YTD: 4

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