



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



February 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 January 2018 and includes state fiscal year-to-date paid claims data from July 1, 2017 to January 31, 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 Jan 1, 2018 and Jan 31, 2018

Version:1.0

In-State:

Facility Type	Expenditures	F - FEMALE	M - MALE	Total
		Unduplicated Recipient Count	Unduplicated Recipient Count	
Inpatient Psychiatric Program	\$4,248,709.05	377	347	724
Residential Program	\$4,217,389.00	399	425	824
Sexual Offender Program	0.00	0	0	0
Monthly In-State Total:	\$8,466,098.05	776	772	1,548

	Expenditures	Unduplicated Recipient Count
In-State YTD Total:	\$63,321,418.97	5,820

Outside Arkansas:

	Expenditures	F - FEMALE	M - MALE	M - Male	Total
		Unduplicated Recipient Count	Unduplicated Recipient Count	Unduplicated Recipient Count	
Inpatient Psychiatric Program	\$22,714.90	4	7	0	11
Residential Program	\$323,050.00	33	47	0	80
Sexual Offender Program	0.00	0	0	0	0
Monthly Outside AR Total:	\$345,764.90	37	54	0	91

	Expenditures	Unduplicated Recipient Count
OutSide AR YTD Total:	\$4,746,343.81	425

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

Monthly: 88
YTD: 421

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.