

## **Division of Medical Services**

Medicaid Director's Office

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January 10, 2013

Representative John Charles Edwards, House Co-Chair Senator Bill Sample, Senate Co-Chair

Arkansas Legislative Council State Capitol Building Little Rock, AR 72201

Dear Representative Edwards and Senator Sample:

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 December 2013 and includes state fiscal year-to-date paid claims data from July 1 to December 31, 2013.

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

Sincerely,

Andrew Allison, PhD

Director

AA/DW/paw

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

#### Medicaid Totals For Paid Dates 12/01/2013 - 12/31/2013

### In-state:

		F - Female	M - Male	
Facility Type	Expenditures	Unduplicated Recipient Count	Unduplicated Recipient Count	Total
*Inpatient Psychiatric Program	\$2,833,191.97	75	80	155
**Residential Program	\$6,878,289.80	568	845	1,413
Monthly In-State Total:	\$9,711,481.77	643	925	1,568

	Expenditures	Unduplicated Recipient Count
In-State YTD Total:	\$64,084,958.68	3,594

## **Outside Arkansas:**

		F - Female	M - Male		]
Facility Type	Expenditures	Unduplicated Recipient Count	Unduplicated Recipient Count	Total	
*Inpatient Psychiatric Program	\$520.00	0	1	1	]
**Residential Program	\$2,523,285.00	59	166	225	]
Sexual Offender Program	\$8,040.00	0	1	1	
Monthly Outside AR Total:	\$2,531,845.00	59	168	227	***

	Expenditures	Unduplicated Recipient Count
Outside AR YTD Total:	\$12,047,513.93	463

Number Outside Arkansas within Medicaid's fifty (50) mile trade area: Monthly: 223

YTD: 461

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

YTD: 2

<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.