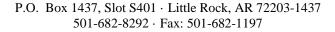


### **Division of Medical Services**

Medicaid Director's Office





August 4, 2014

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 July 2014 and includes state fiscal year-to-date paid claims data from July 1, 2014, to July 31, 2014.

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

Jehle

Sincerely,

Dawn Stehle Interim Director

AA/DW/paw

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

#### Medicaid Totals For Paid Dates 07/01/2014 - 07/31/2014

#### In-state:

		F - Female	M - Male	
Facility Type	Expenditures	Unduplicated Recipient Count	Unduplicated Recipient Count	Total
*Inpatient Psychiatric Program	\$0.00	0	0	0
**Residential Program	\$12,282,488.97	543	803	1,346
Monthly In-State Total:	\$12,282,488.97	543	803	1,346

	Expenditures	Unduplicated Recipient Count
In-State YTD Total:	\$12,282,488.97	1,346

## **Outside Arkansas:**

		F - Female	M - Male		
Facility Type	Expenditures	Unduplicated Recipient Count	Unduplicated Recipient Count	Total	
*Inpatient Psychiatric Program	\$0.00	0	0	0	
**Residential Program	\$2,097,267.89	66	109	175	
Sexual Offender Program	\$0.00	0	0	0	
Monthly Outside AR Total:	\$2,097,267.89	66	109	175	**

	Expenditures	Unduplicated Recipient Count
Outside AR YTD Total:	\$2,097,267.89	175

Number Outside Arkansas within Medicaid's fifty (50) mile trade area: Monthly: 175

YTD: 175

Number Outside Arkansas beyond Medicaid's fifty (50) mile trade area: Monthly: 0

YTD: 0

<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.