

Exhibit I.2



Division of Medical Services

P.O. Box 1437, Slot S-401 · Little Rock, AR 72203-1437
501-682-8292 · Fax 501-682-1197 · TDD 501-682-6789



November 10, 2012

Senator Missy Irvin, Chair
Senate Committee on Children and Youth

Representative Stephanie Malone, Chair
House Committee on Aging, Children and Youth

Legislative & Military Affairs
State Capitol Building
Little Rock, AR 72201

Dear Senator Irvin and Representative Malone:

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 October, 2012 and includes state fiscal year-to-date paid claims data from July 2012 to October 31, 2012.

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

Sincerely,

A handwritten signature in cursive script that reads "Andrew Allison".

Andrew Allison, PhD
Director

AA/DW/jmoore

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

Medicaid Totals For Paid Dates 7/01/2012 - 7/31/2012

In-state:

Facility Type	Expenditures	F - Female	M - Male	Total
		Unduplicated Recipient Count	Unduplicated Recipient Count	
*Inpatient Psychiatric Program	\$44,252.00	3	3	3
**Residential Program	\$9,289,885.74	482	770	1,252
Monthly In-State Total:	\$9,334,137.74	482	773	1,255

	Expenditures	Unduplicated Recipient Count
In-State YTD Total:	\$9,334,137.74	1,223

Outside Arkansas:

Facility Type	Expenditures	F - Female	M - Male	Total
		Unduplicated Recipient Count	Unduplicated Recipient Count	
*Inpatient Psychiatric Program	\$3,633.00	2	2	2
**Residential Program	\$2,314,611.94	71	176	247
Sexual Offender Program	\$41,272.00	3	3	3
Monthly Outside AR Total:	\$2,359,516.94	71	181	252 ***

	Expenditures	Unduplicated Recipient Count
Outside AR YTD Total:	\$2,359,516.94	251

Number Outside Arkansas within Medicaid's fifty (50) mile trade area: Monthly: 248

YTD: 248

Number Outside Arkansas beyond Medicaid's fifty (50) mile trade area: Monthly: 3

YTD: 3

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

**This represents recipients for whom residential inpatient psych claims were billed, which may include recipients who received both acute and residential services.

***Monthly Outside AR Total may include duplicated recipients due to multiple admissions to different Facility Types.

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

Medicaid Totals For Paid Dates 8/01/2012 - 8/31/2012

In-state:

Facility Type	Expenditures	F - Female	M - Male	Total
		Unduplicated Recipient Count	Unduplicated Recipient Count	
*Inpatient Psychiatric Program	\$22,374.00	1	1	2
**Residential Program	\$11,539,961.64	543	839	1,382
Monthly In-State Total:	\$11,562,335.64	544	840	1,384

	Expenditures	Unduplicated Recipient Count
In-State YTD Total:	\$20,896,473.38	1,750

Outside Arkansas:

Facility Type	Expenditures	F - Female	M - Male	Total
		Unduplicated Recipient Count	Unduplicated Recipient Count	
*Inpatient Psychiatric Program	\$7,785.00		2	2
**Residential Program	\$2,223,020.00	73	162	235
Sexual Offender Program	\$26,532.00		3	3
Monthly Outside AR Total:	\$2,257,337.00	73	167	240 ***

	Expenditures	Unduplicated Recipient Count
Outside AR YTD Total:	\$4,616,853.84	299

Number Outside Arkansas within Medicaid's fifty (50) mile trade area: Monthly: 233

YTD: 295

Number Outside Arkansas beyond Medicaid's fifty (50) mile trade area: Monthly: 3

YTD: 4

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

Medicaid Totals For Paid Dates 09/01/2012 - 09/30/2012

In-state:

Facility Type	Expenditures	F - Female	M - Male	Total
		Unduplicated Recipient Count	Unduplicated Recipient Count	
*Inpatient Psychiatric Program	\$37,076.00		2	2
**Residential Program	\$9,766,023.83	534	825	1,359
Monthly In-State Total:	\$9,803,099.83	534	827	1,361

	Expenditures	Unduplicated Recipient Count
In-State YTD Total:	\$30,699,573.21	2,208

Outside Arkansas:

Facility Type	Expenditures	F - Female	M - Male	Total
		Unduplicated Recipient Count	Unduplicated Recipient Count	
*Inpatient Psychiatric Program	\$12,383.00		1	1
**Residential Program	\$1,963,122.00	74	162	236
Sexual Offender Program	\$16,616.00		2	2
Monthly Outside AR Total:	\$1,992,121.00	74	165	239 ***

	Expenditures	Unduplicated Recipient Count
Outside AR YTD Total:	\$6,608,974.94	337

Number Outside Arkansas within Medicaid's fifty (50) mile trade area: Monthly: 233
 YTD: 333

Number Outside Arkansas beyond Medicaid's fifty (50) mile trade area: Monthly: 3
 YTD: 4

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

Medicaid Totals For Paid Dates 10/01/2012 - 10/30/2012

In-state:

Facility Type	Expenditures	F - Female	M - Male	Total
		Unduplicated Recipient Count	Unduplicated Recipient Count	
*Inpatient Psychiatric Program	\$18,538.00		1	1
**Residential Program	\$9,990,903.58	548	905	1,453
Monthly In-State Total:	\$10,009,441.58	548	906	1,454

	Expenditures	Unduplicated Recipient Count
In-State YTD Total:	\$40,709,014.79	2,689

Outside Arkansas:

Facility Type	Expenditures	F - Female	M - Male	Total
		Unduplicated Recipient Count	Unduplicated Recipient Count	
*Inpatient Psychiatric Program				0
**Residential Program	\$1,793,486.00	67	149	216
Sexual Offender Program	\$6,700.00		1	1
Monthly Outside AR Total:	\$1,800,186.00	67	150	217***

	Expenditures	Unduplicated Recipient Count
Outside AR YTD Total:	\$8,409,160.94	373

Number Outside Arkansas within Medicaid's fifty (50) mile trade area: Monthly: 215

YTD: 369

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

YTD: 4

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