

Subsets Time Period: Incurred Month Provider State Code Diagnosis Principal		081001 OS RTC Enrollees														Total
		Patients														
		May 2016														
		AL	AR	AZ	CO	GA	IL	IN	MI	MO	MT	NM	TN	TX	UT	
Diagnosis Code Principal	AL	AR	AZ	CO	GA	IL	IN	MI	MO	MT	NM	TN	TX	UT	Total	
Adjustment disorder with mixed disturbance of emotions and conduct	F4325	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1
Anxiety disorder, unspecified	F419	0	0	0	0	0	0	0	0	0	0	0	0	1	1	2
Attention-deficit hyperactivity disorder, combined type	F902	0	2	0	0	0	0	0	1	0	0	0	0	0	2	5
Attention-deficit hyperactivity disorder, predominantly hyperactive type	F901	0	0	0	0	0	0	0	0	0	0	0	0	0	2	2
Attention-deficit hyperactivity disorder, predominantly inattentive type	F900	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1
Attention-deficit hyperactivity disorder, unspecified type	F909	0	0	1	1	0	0	0	0	0	0	0	0	0	5	7
Bipolar II disorder	F3181	0	0	0	3	0	0	0	0	3	0	0	0	0	7	13
Bipolar disorder, current episode depressed, severe, w psychotic features	F315	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1
Bipolar disorder, current episode depressed, severe, w/o psychotic feature	F314	0	0	0	0	0	0	0	0	0	0	0	0	0	2	2
Bipolar disorder, current episode depressed, mild or moderate, unspec	F3130	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1
Bipolar disorder, current episode depressed, moderate	F3132	1	0	0	0	0	0	0	0	0	0	0	0	0	2	3
Bipolar disorder, current episode hypomanic	F310	0	0	0	0	0	0	0	0	0	0	0	0	0	2	2
Bipolar disorder, current episode manic w/o psychotic features, moderate	F3112	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1
Bipolar disorder, current episode manic w/o psychotic features, severe	F3113	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1
Bipolar disorder, current episode manic without psychotic features, mild	F3111	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1
Bipolar disorder, current episode mixed, severe, w/o psychotic features	F3163	0	0	0	0	0	0	0	0	0	0	0	0	0	2	2
Bipolar disorder, current episode mixed, severe, with psychotic features	F3164	0	0	0	0	0	0	0	0	1	0	0	0	0	1	2
Bipolar disorder, current episode mixed, unspecified	F3160	0	0	0	0	0	0	0	0	0	0	1	0	0	1	2
Bipolar disorder, currently in remission, most recent episode unspec	F3170	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1
Bipolar disorder, in partial remission, most recent episode manic	F3173	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1
Bipolar disorder, unspecified	F319	0	0	0	2	0	0	0	0	0	0	2	6	13	23	23
Cannabis abuse, uncomplicated	F1210	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1
Child sexual abuse, confirmed, subsequent encounter	T7422XD	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1
Conduct disorder, adolescent-onset type	F912	0	0	1	0	0	0	1	0	0	0	0	0	0	0	2
Cyclothymic disorder	F340	0	0	0	0	0	0	0	0	0	0	0	0	0	3	3
Dysthymic disorder	F341	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1
Generalized anxiety disorder	F411	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1
Intermittent explosive disorder	F6381	0	0	0	0	0	0	0	1	2	0	0	0	0	0	3
Major depressive disorder, recurrent severe without psychotic features	F332	0	0	0	0	0	0	0	0	0	0	1	0	11	12	12
Major depressive disorder, recurrent, in partial remission	F3341	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1
Major depressive disorder, recurrent, mild	F330	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1
Major depressive disorder, recurrent, moderate	F331	0	0	0	0	0	0	0	0	0	0	1	0	3	4	4
Major depressive disorder, recurrent, severe with psychotic symptoms	F333	0	0	0	1	0	0	0	0	0	0	0	0	0	4	5
Major depressive disorder, recurrent, unspecified	F339	0	0	0	0	0	0	1	0	0	0	0	0	0	1	2
Major depressive disorder, single episode, mild	F320	0	0	0	0	0	0	0	1	0	0	0	0	0	1	2
Major depressive disorder, single episode, moderate	F321	0	0	0	0	0	0	0	0	0	0	0	0	0	3	3
Major depressive disorder, single episode, severe w/o psychotic features	F322	0	0	0	0	0	0	0	1	0	0	0	0	0	1	2
Major depressive disorder, single episode, unspecified	F329	0	0	0	1	0	0	0	0	0	0	0	3	3	7	7
Obsessive-compulsive disorder	F42	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1
Oppositional defiant disorder	F913	0	0	0	0	0	0	1	0	0	0	1	0	1	3	3
Other bipolar disorder	F3189	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1
Other persistent mood [affective] disorders	F348	1	0	1	2	0	0	1	0	1	0	0	0	17	40	63
Other reactions to severe stress	F438	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Other recurrent depressive disorders	F338	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1
Other stimulant dependence, uncomplicated	F1520	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Persistent mood [affective] disorder, unspecified	F349	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1
Post-traumatic stress disorder, unspecified	F4310	0	0	0	0	0	0	0	1	1	0	1	0	6	9	9
Pyromania	F631	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1
Schizoaffective disorder, bipolar type	F250	0	0	0	0	0	0	0	0	0	0	0	0	0	2	2
Schizoaffective disorder, depressive type	F251	0	0	0	0	0	0	0	0	0	0	0	0	0	4	4
Schizophrenia, unspecified	F209	0	0	0	0	0	0	0	1	0	0	0	0	0	2	3
Unspecified disorder of psychological development	F89	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1
Unspecified mood [affective] disorder	F39	0	0	0	0	1	0	0	0	0	0	1	21	7	30	30
Unspecified psychosis not due to substance or known physio condition	F29	0	0	0	0	0	0	0	0	0	0	0	2	1	3	3
<b>Total</b>		<b>2</b>	<b>2</b>	<b>5</b>	<b>10</b>	<b>1</b>	<b>1</b>	<b>4</b>	<b>3</b>	<b>9</b>	<b>4</b>	<b>1</b>	<b>9</b>	<b>51</b>	<b>148</b>	<b>250</b>

ICD-10-CM diagnosis codes became effective on October 1, 2015

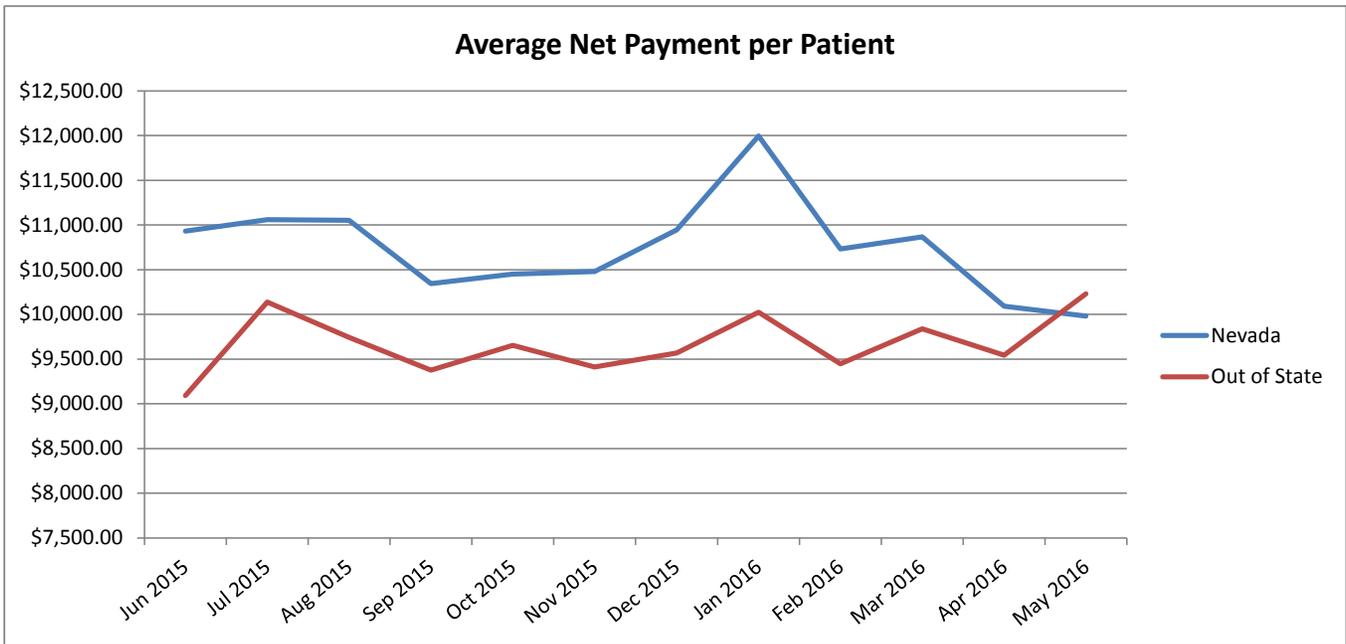
The report indicates the number of out-of-state Fee for Service RTC patients. Patients appear on this report only if the billing and/or servicing provider indicated a principle diagnosis on the submitted claim form. Diagnosis information may or may not appear on claim forms for patients with long-term medical conditions (e.g., diabetes). Patient counts are based upon when the service occurred and not when the service was paid.

The DHCFP data warehouse is comprised of claims data submitted by over 21,000 Medicaid providers from within Nevada and across the country. While DHCFP staff conscientiously make their best efforts to validate this data through continuous provider education and the use of a highly experienced audit staff, the Division heavily relies on its providers to submit accurate and complete information on our Medicaid patients.

It should therefore be understood by the users of DHCFP reports on disease morbidity and patient health that the data source for these reports is based solely on patient claims data and may not be a complete and comprehensive health record.

## Residential Treatment Center Financial Report

Subsets	NV RTC Patients				Out of State RTC Patients			
	Patients	Service Count Paid	Net Payment	Net Pay Per Pat	Patients	Service Count Paid	Net Payment	Net Pay Per Pat
<b>Time Period: Incurred Month</b>								
Jun 2015	117	2,923	\$1,278,957.68	\$10,931.26	242	6,326	\$2,199,915.69	\$9,090.56
Jul 2015	121	3,064	\$1,338,339.06	\$11,060.65	227	6,693	\$2,301,085.53	\$10,136.94
Aug 2015	115	2,907	\$1,271,054.46	\$11,052.65	243	6,919	\$2,367,249.16	\$9,741.77
Sep 2015	108	2,539	\$1,116,984.68	\$10,342.45	247	6,849	\$2,315,722.10	\$9,375.39
Oct 2015	116	2,806	\$1,212,220.02	\$10,450.17	256	7,321	\$2,471,358.96	\$9,653.75
Nov 2015	107	2,567	\$1,121,279.22	\$10,479.25	257	7,077	\$2,418,330.40	\$9,409.85
Dec 2015	109	2,734	\$1,193,027.29	\$10,945.20	262	7,250	\$2,506,778.90	\$9,567.86
Jan 2016	102	2,816	\$1,223,429.22	\$11,994.40	246	7,132	\$2,465,619.01	\$10,022.84
Feb 2016	109	2,729	\$1,169,837.68	\$10,732.46	240	6,579	\$2,267,244.66	\$9,446.85
Mar 2016	102	2,564	\$1,108,552.56	\$10,868.16	245	6,959	\$2,410,484.80	\$9,838.71
Apr 2016	97	2,271	\$978,840.30	\$10,091.14	250	6,733	\$2,385,707.07	\$9,542.83
May 2016	94	2,185	\$938,269.80	\$9,981.59	249	7,277	\$2,547,542.72	\$10,231.10



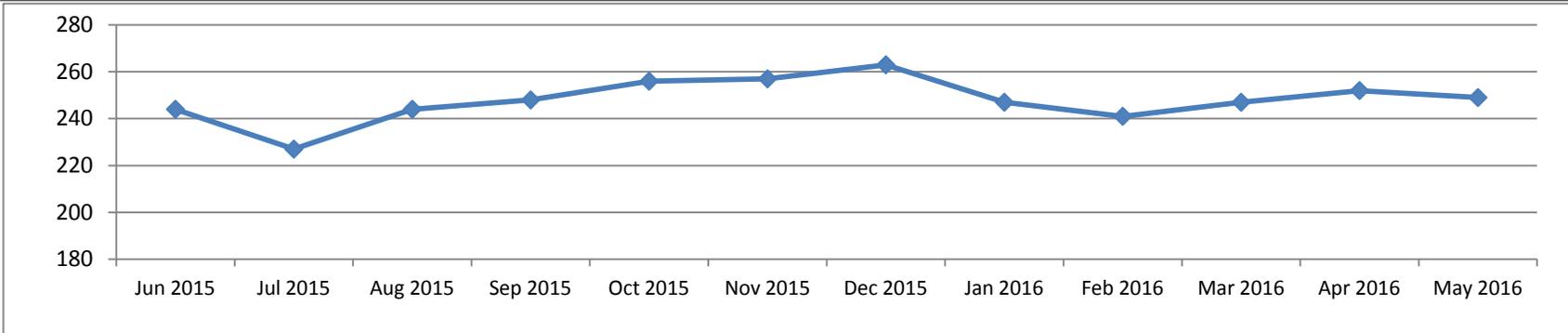
The report indicates the number of in-state and out-of-state fee for service RTC patients.

Patient counts are based upon when the service occurred and not when the service was paid.

The DHCFP data warehouse is comprised of claims data submitted by over 21,000 Medicaid providers from within Nevada and across the country. While DHCFP staff conscientiously make their best efforts to validate this data through continuous provider education and the use of a highly experienced audit staff, the Division heavily relies on its providers to submit accurate and complete information on our Medicaid patients. It should therefore be understood by the users of DHCFP reports on disease morbidity and patient health that the data source for these reports is based solely on patient claims and may not be a complete and comprehensive health record.

Nevada Division of Health Care Financing and Policy  
 Medicaid-Behavioral Health  
 Out-of-State Fee for Service RTC Placements for Children

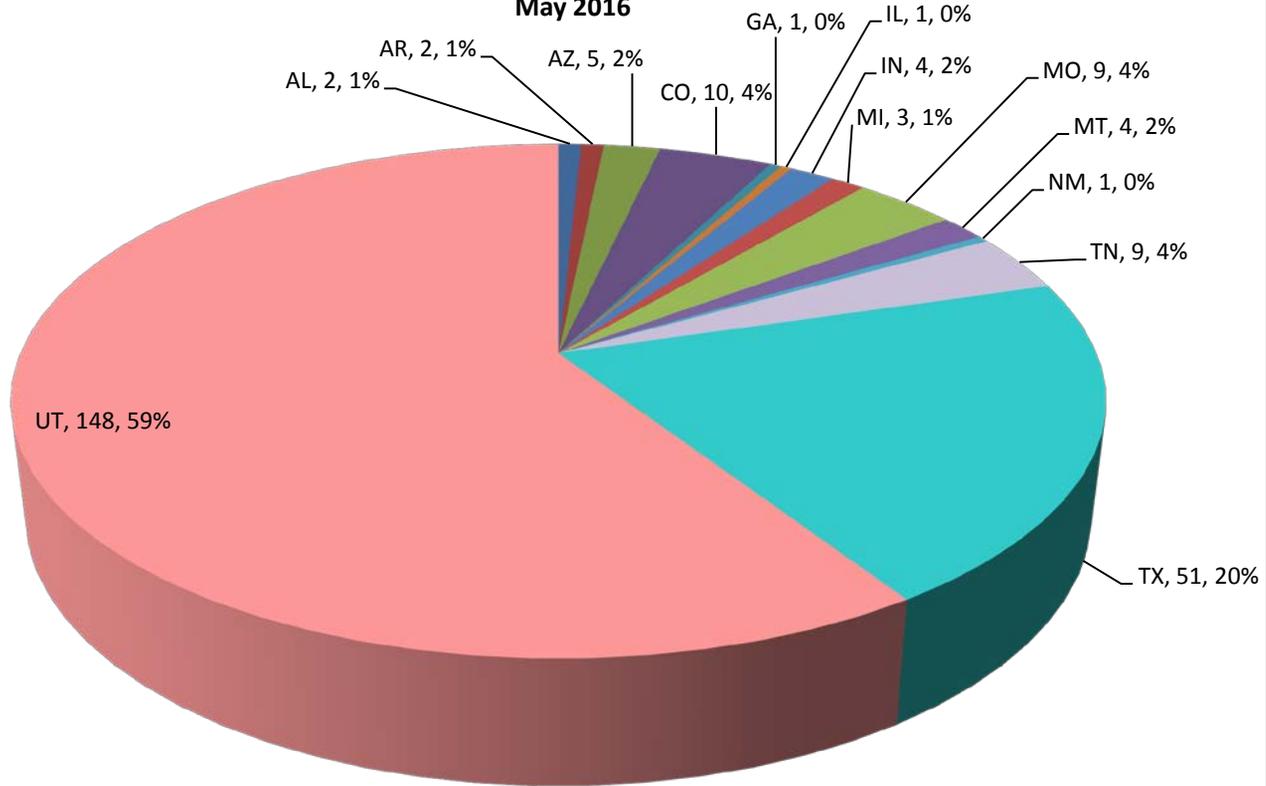
Subsets	081001 OS RTC Enrollees																
	Patients																
Provider State Code	AL	AR	AZ	CO	FL	GA	IL	IN	MI	MO	MT	NM	OR	TN	TX	UT	Total
Time Period: Incurred Month																	
Jun 2015	1	0	4	8	0	0	1	5	2	7	5	3	1	9	47	151	<b>244</b>
Jul 2015	1	1	3	10	0	0	1	4	2	8	3	4	1	7	41	141	<b>227</b>
Aug 2015	1	1	4	14	1	1	1	4	4	10	5	4	1	6	44	143	<b>244</b>
Sep 2015	1	1	4	14	1	2	2	5	5	9	5	2	1	9	41	146	<b>248</b>
Oct 2015	1	1	3	15	2	2	1	8	6	9	6	2	0	11	41	148	<b>256</b>
Nov 2015	1	2	3	14	2	1	1	8	6	10	6	2	0	10	45	146	<b>257</b>
Dec 2015	1	2	3	13	2	1	1	9	5	10	5	5	0	10	48	148	<b>263</b>
Jan 2016	1	2	3	14	1	1	1	8	6	10	5	5	0	11	43	136	<b>247</b>
Feb 2016	1	1	2	14	1	1	1	7	5	12	5	5	0	11	40	135	<b>241</b>
Mar 2016	1	1	3	18	1	1	1	5	4	11	5	4	0	9	45	138	<b>247</b>
Apr 2016	1	1	4	19	0	1	1	5	3	10	4	3	0	9	46	145	<b>252</b>
May 2016	1	2	5	10	0	1	1	4	3	9	4	1	0	9	51	148	<b>249</b>



The DHCFP data warehouse is comprised of claims data submitted by over 21,000 Medicaid providers from within Nevada and across the country. While DHCFP staff conscientiously makes their best efforts to validate this data through continuous provider education and the use of a highly experienced audit staff, the Division heavily relies on its providers to submit accurate and complete information on our Medicaid patients.

It should therefore be understood by the users of DHCFP reports on disease morbidity and patient health that the data source for these reports is based solely on patient claims data and may not be a complete and comprehensive health record.

**Nevada Division of Health Care Financing and Policy  
Medicaid -Behavioral Health  
Out-of-State Fee for Service RTC Placements for Children  
May 2016**



The report indicates the number of out-of-state Fee for Service RTC patients. Patients appear on this report only if the billing and/or servicing provider indicated a principle diagnosis on the submitted claim form. Diagnosis information may or may not appear on claim forms for patients with long-term medical conditions (e.g., diabetes). Patient counts are based upon when the service occurred and not when the service was paid.

The DHCFP data warehouse is comprised of claims data submitted by over 21,000 Medicaid providers from within Nevada and across the country. While DHCFP staff conscientiously make their best efforts to validate this data through continuous provider education and the use of a highly experienced audit staff, the Division heavily relies on its providers to submit accurate and complete information on our Medicaid patients.

It should therefore be understood by the users of DHCFP reports on disease morbidity and patient health that the data source for these reports is based solely on patient claims data and may not be a complete and comprehensive health record.

Nevada Division of Health Care Financing and Policy  
 Medicaid -Behavioral Health  
 Out-of-State Fee for Service RTC Placements for Children  
 May 2016

**Top 3 Diagnosis:**

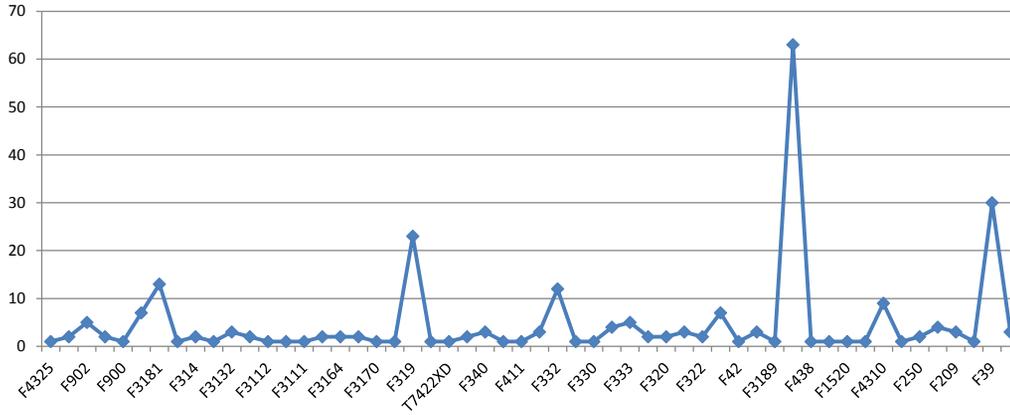
--Other persistent mood [affective] disorders (F348): 63 children  
 --Unspecified mood [affective] disorder (F39): 30 children  
 --Bipolar disorder, unspecified (F319): 23 children

**Patient Count:**

--A total of 249 children were in Out-of-State placement during the month of May

For additional information, contact Alexis Tucey 775-684-3611 or at [alexis.tucey@DHCNP.nv.gov](mailto:alexis.tucey@DHCNP.nv.gov)

Division of Health Care Financing and Policy  
 Behavioral Health Out-of-State Residential Treatment Center Placements  
 Patients by Diagnosis Principal



The report indicates the number of out-of-state Fee for Service RTC patients.

Patients appear on this report only if the billing and/or servicing provider indicated a principle diagnosis on the submitted claim form.

Diagnosis information may or may not appear on claim forms for patients with long-term medical conditions (e.g., diabetes).

Patient counts are based upon when the service occurred and not when the service was paid.

The DHCNP data warehouse is comprised of claims data submitted by over 21,000 Medicaid providers from within Nevada and across the country. While DHCNP staff conscientiously make their best efforts to validate this data through continuous provider education and the use of a highly experienced audit staff, the Division heavily relies on its providers to submit accurate and complete information on our Medicaid patients.

It should therefore be understood by the users of DHCNP reports on disease morbidity and patient health that the data source for these reports is based solely on patient claims data and may not be a complete and comprehensive health record.

Diagnosis Code Principal	Diagnosis Principal
F4325	Adjustment disorder with mixed disturbance of emotions and conduct
F419	Anxiety disorder, unspecified
F902	Attention-deficit hyperactivity disorder, combined type
F901	Attention-deficit hyperactivity disorder, predominantly hyperactive type
F900	Attention-deficit hyperactivity disorder, predominantly inattentive type
F909	Attention-deficit hyperactivity disorder, unspecified type
F3181	Bipolar II disorder
F315	Bipolar disord, current episode depressed, severe, w psychotic features
F314	Bipolar disord, current episode depressed, severe, w/o psychotic feature
F3130	Bipolar disorder, current episode depressed, mild or moderate, unspec
F3132	Bipolar disorder, current episode depressed, moderate
F310	Bipolar disorder, current episode hypomanic
F3112	Bipolar disorder, current episode manic w/o psychotic features, moderate
F3113	Bipolar disorder, current episode manic w/o psychotic features, severe
F3111	Bipolar disorder, current episode manic without psychotic features, mild
F3163	Bipolar disorder, current episode mixed, severe, w/o psychotic features
F3164	Bipolar disorder, current episode mixed, severe, with psychotic features
F3160	Bipolar disorder, current episode mixed, unspecified
F3170	Bipolar disorder, currently in remission, most recent episode unspec
F3173	Bipolar disorder, in partial remission, most recent episode manic
F319	Bipolar disorder, unspecified
F1210	Cannabis abuse, uncomplicated
T7422XD	Child sexual abuse, confirmed, subsequent encounter
F912	Conduct disorder, adolescent-onset type
F340	Cyclothymic disorder
F341	Dysthymic disorder
F411	Generalized anxiety disorder
F6381	Intermittent explosive disorder
F332	Major depressive disorder, recurrent severe without psychotic features
F3341	Major depressive disorder, recurrent, in partial remission
F330	Major depressive disorder, recurrent, mild
F331	Major depressive disorder, recurrent, moderate
F333	Major depressive disorder, recurrent, severe with psychotic symptoms
F339	Major depressive disorder, recurrent, unspecified
F320	Major depressive disorder, single episode, mild
F321	Major depressive disorder, single episode, moderate
F322	Major depressive disorder, single episode, severe w/o psychotic features
F329	Major depressive disorder, single episode, unspecified
F42	Obsessive-compulsive disorder
F913	Oppositional defiant disorder
F3189	Other bipolar disorder
F348	Other persistent mood [affective] disorders
F438	Other reactions to severe stress
F338	Other recurrent depressive disorders
F1520	Other stimulant dependence, uncomplicated
F349	Persistent mood [affective] disorder, unspecified
F4310	Post-traumatic stress disorder, unspecified
F631	Pyromania
F250	Schizoaffective disorder, bipolar type
F251	Schizoaffective disorder, depressive type
F209	Schizophrenia, unspecified
F89	Unspecified disorder of psychological development
F39	Unspecified mood [affective] disorder
F29	Unspecified psychosis not due to substance or known physio condition

Dimension/Measure	Definition
081001 OS RTC Enrollees	Custom built subset that combines <b>Provider Type Claim NV Code = 63</b> (Residential Treatment Center), and <b>Provider State Code &lt;&gt; NV</b>
Diagnosis Principal	The principal diagnosis description for a service, claim, or lab result.
Net Pay Per Pat	The average net amount paid, per patient, for all claims. It represents the amount after all pricing guidelines have been applied, and all third party, copayment, coinsurance, and deductible amounts have been subtracted.
Net Payment	The net amount paid for all claims. It represents the amount after all pricing guidelines have been applied, and all third party, copayment, coinsurance, and deductible amounts have been subtracted.
Patients	The unique count of members who received facility, professional, or pharmacy services.
Provider State Code	The current state abbreviation for the provider of service.
Provider Type Claim NV Code	The Nevada specific code for the servicing provider type on the claim record.
Service Count Paid	The sum of the units paid across professional and facility claims.