

Out of State Residential Treatment Centers

Reporting Period April 2020

DHHS Office of Analytics

Nevada DHHS Office of Analytics Nevada Medicaid Fee for Service -Behavioral Health Out-of-State (OOS) Residential Treatment Center (RTC) Placements for Children April 2020

Top 3 Diagnosis:

--Distruptive mood dysregulation disorder (F3481): 37 children 31.9% of total --Post-traumatic stress disorder, unspecified (F4310): 21 children 18.1% of total --Major depressive disorder, single episode, severe w/o psychotic features (F332): 13 children 11.2% of total

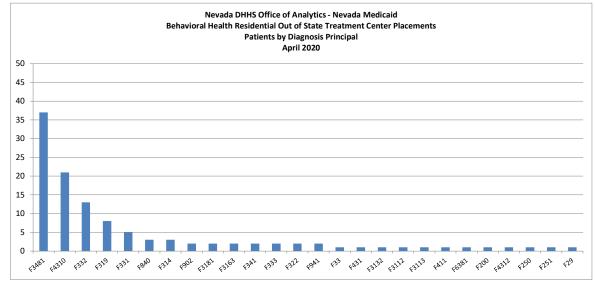
Patient Count:

- --A total of 116 children were in Out-of-State RTC placement during the month of April 2020.
- --The average monthly OOS patient count for the previous 11 months is 121; 6.6% decrease compared to last month's report.

Net Payment:

- --DHCFP paid \$1,253,465.84 for Out-of-State RTC placements in April 2020.
- --The average monthly OOS spend for the previous 11 months is \$1,337,516.29; a 6.71% decrease compared to last month's report.

For additional information, contact the BH Program Specialist at: BehavioralHealth@DHCFP.nv.gov



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.

Diagnosis Code Principal	Diagnosis Principal
F200	Paranoid schizophrenia
F250	Schizoaffective disorder, bipolar type
F251	Schizoaffective disorder, depressive type
F29	Unspecified psychosis not due to substance or known physio condition
F3112	Bipolar disorder, current episode manic w/o psychotic features, moderate
F3113	Bipolar disorder, current episode manic w/o psychotic features, severe
F3132	Bipolar disorder, current episode depressed, moderate
F314	Bipolar disord, current episode depressed, severe, w/o psychotic feature
F3163	Bipolar disorder, current episode mixed, severe, w/o psychotic features
F3181	Bipolar II disorder
F319	Bipolar disorder, unspecified
F322	Major depressive disorder, single episode, severe w/o psychotic features
F33	(Non-Billable Dx) Major depressive disorder recurrent
F331	Major depressive disorder, recurrent, moderate
F332	Major depressive disorder, recurrent severe without psychotic features
F333	Major depressive disorder, recurrent, severe with psychotic symptoms
F341	Dysthymic disorder
F3481	Disruptive mood dysregulation disorder
F411	Generalized anxiety disorder
F431	(Non-Billable Dx) Post-traumatic stress disorder
F4310	Post-traumatic stress disorder, unspecified
F4312	Post-traumatic stress disorder, chronic
F6381	Intermittent explosive disorder
F840	Autistic disorder
F902	Attention-deficit hyperactivity disorder, combined type
F941	Reactive attachment disorder of childhood

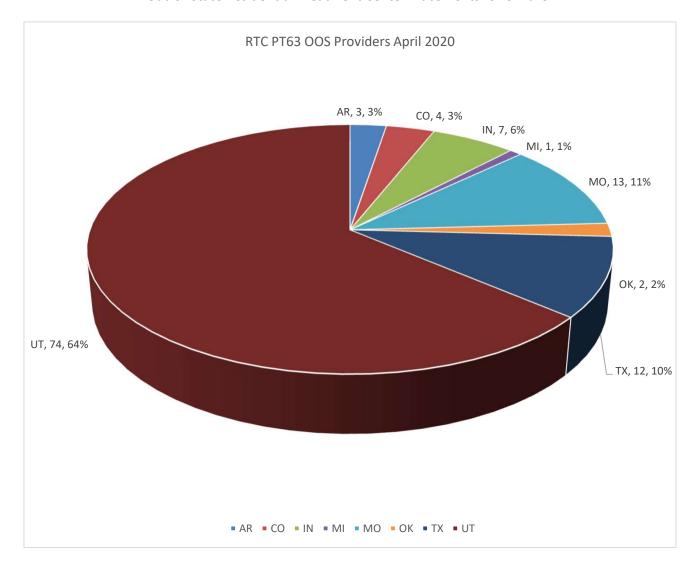
NV Medicaid Fee for Service Data Warehouse (DSS)

Department of Health and Human Services

Nevada Medicaid Fee for Service - Behavioral Health Out-of-State Residential Treatment Center Placements for Children

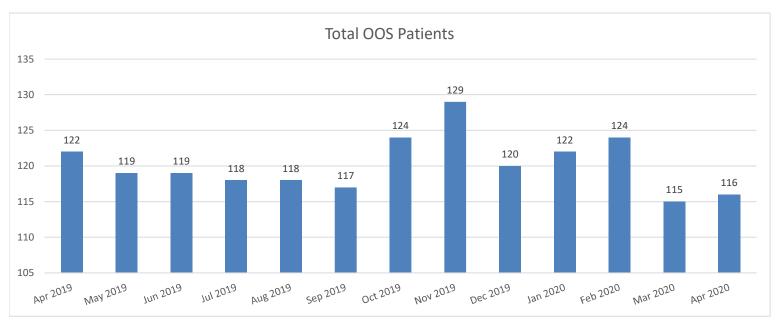
								Pati	ents					
Time Period: Incurred Month								April	2020					
Diagnosis Principal	Diagnosis Code Principal	AR	CC)	IN		MI	МО	OK		TX	UT	Total	Percent
Disruptive mood dysregulation disorder	F3481		1			3		7	7	П	9	17	37	31.9%
Post-traumatic stress disorder, unspecified	F4310		T	1			1	1		П		18	21	18.1%
Major depressive disorder, recurrent severe without psychotic features	F332		Т	1	П	П		3	3	П		9	13	11.2%
Bipolar disorder, unspecified	F319		Т		П	1				1		6	8	6.9%
Major depressive disorder, recurrent, moderate	F331		1	1	П	П				П		3	5	4.3%
Autistic disorder	F840		Т		П	П				П	1	2	3	2.6%
Bipolar disord, current episode depressed, severe, w/o psychotic feature	F314		Т		П	П				П		3	3	2.6%
Attention-deficit hyperactivity disorder, combined type	F902		Т	1	L	T				1			2	1.7%
Bipolar II disorder	F3181		Т			T				П		2	2	1.7%
Bipolar disorder, current episode mixed, severe, w/o psychotic features	F3163		Т			T				П		2	2	1.7%
Dysthymic disorder	F341		Т			T				П		2	2	1.7%
Major depressive disorder, recurrent, severe with psychotic symptoms	F333		Т			T				П		2	2	1.7%
Major depressive disorder, single episode, severe w/o psychotic features	F322		Т			T				П		2	2	1.7%
Reactive attachment disorder of childhood	F941		1			T				П		1	2	1.7%
(Non-Billable Dx) Major depressive disorder recurrent	F33		Т			T				П		1	1	0.9%
(Non-Billable Dx) Post-traumatic stress disorder	F431		Т			1				П			1	0.9%
Bipolar disorder, current episode depressed, moderate	F3132		Ť			T			Ì	T		1	1	0.9%
Bipolar disorder, current episode manic w/o psychotic features, moderate	F3112		Т			T				П		1	1	0.9%
Bipolar disorder, current episode manic w/o psychotic features, severe	F3113		Т			T				П		1	1	0.9%
Generalized anxiety disorder	F411		Ť			T			Ì	T	1		1	0.9%
Intermittent explosive disorder	F6381		Ť			T		1		T			1	0.9%
Paranoid schizophrenia	F200		Ť			1			Ì	T			1	0.9%
Post-traumatic stress disorder, chronic	F4312		Ť			1			Ì	T			1	0.9%
Schizoaffective disorder, bipolar type	F250		Ť			T				T			1	0.9%
Schizoaffective disorder, depressive type	F251	i	Ť			\exists				T		1	1	0.9%
Unspecified psychosis not due to substance or known physio condition	F29		十			╗				T	1		1	0.9%
Aggregate(Diagnosis Principal)			3	4		7	1	13		2	12	74	116	100%

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.



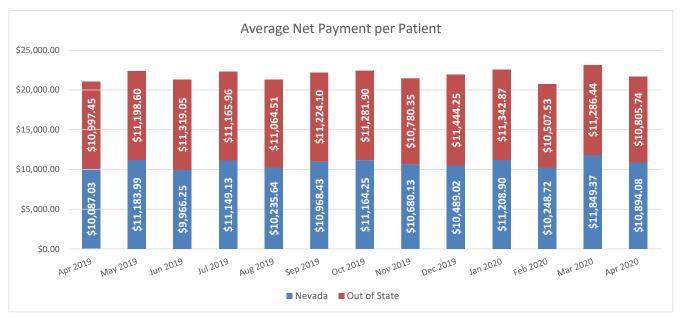
Patents Apr 20	020							
AR	CO	IN	MI	МО	OK	TX	UT	Total
3	4	7	1	13	2	12	74	116

							April	2020						
							Pat	tients						
Provider State Code	AR	AZ	СО	GA	IN	MI	МО	MT	OK	SC	TN	TX	UT	Total
Time Period: Incurred Month														
Apr 2019		1	1	2		1	4	1			1	23	88	122
May 2019			1	2	1	1	6	1			1	21	85	119
Jun 2019			1	2	1	2	6	1			1	22	83	119
Jul 2019			1	2	1	3	6	1				23	81	118
Aug 2019			3	2	2	3	8					23	77	118
Sep 2019			5	1	3	3	10					22	73	117
Oct 2019			5	1	3	2	12					19	82	124
Nov 2019			4	1	3	1	14			1		21	84	129
Dec 2019	1		4	1	3	2	13			1		18	77	120
Jan 2020	1		4		6	2	15		1	1		21	71	122
Feb 2020	1		5		6	1	14		2	1		21	73	124
Mar 2020	1		3		7	1	13		2	1		15	72	115
Apr 2020	3		4		7	1	13		2			12	74	116



Nevada Medicaid Fee for Service - Behavioral Health Out-of-State Residential Treatment Center Placements for Children

Subsets		N	IV RTC Patients			Out	of State RTC Pat	tients
	Patients	Service Count Paid	Net Payment	Net Pay Per Pat	Patients	Service Count Paid	Net Payment	Net Pay Per Pat
Time Period: Incurred Month								
Apr 2019	133	3,153	\$1,341,575.20	\$10,087.03	122	3,324	\$1,341,689.00	\$10,997.45
May 2019	138	3,611	\$1,543,390.08	\$11,183.99	118	3,340	\$1,321,434.76	\$11,198.60
Jun 2019	150	3,472	\$1,494,936.84	\$9,966.25	118	3,326	\$1,335,647.60	\$11,319.05
Jul 2019	146	3,820	\$1,627,773.56	\$11,149.13	118	3,260	\$1,317,583.12	\$11,165.96
Aug 2019	124	2,978	\$1,269,218.96	\$10,235.64	117	3,161	\$1,294,547.16	\$11,064.51
Sep 2019	107	2,798	\$1,173,622.00	\$10,968.43	117	3,239	\$1,313,219.60	\$11,224.10
Oct 2019	124	3,293	\$1,384,366.44	\$11,164.25	124	3,532	\$1,398,955.36	\$11,281.90
Nov 2019	132	3,366	\$1,409,776.92	\$10,680.13	127	3,427	\$1,369,104.80	\$10,780.35
Dec 2019	122	3,041	\$1,279,659.96	\$10,489.02	120	3,464	\$1,373,309.86	\$11,444.25
Jan 2020	113	3,003	\$1,266,605.84	\$11,208.90	122	3,433	\$1,383,829.78	\$11,342.87
Feb 2020	125	3,035	\$1,281,090.56	\$10,248.72	124	3,233	\$1,302,933.82	\$10,507.53
Mar 2020	130	3,644	\$1,540,418.24	\$11,849.37	115	3,295	\$1,297,940.58	\$11,286.44
Apr 2020	128	3,340	\$1,394,442.64	\$10,894.08	116	3,229	\$1,253,465.84	\$10,805.74



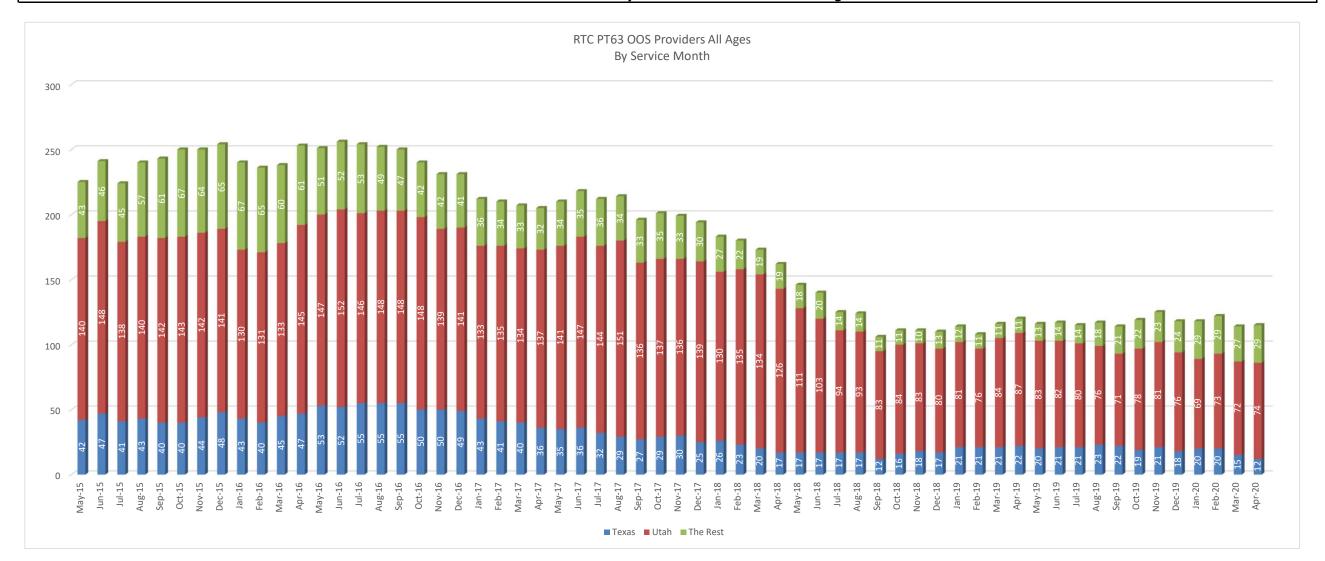
The report indicates the number of in-state and out-of-state fee for service RTC patients. Patient counts are based upon when the service occurred and not when the service was paid.

Nevada Medicaid Fee for Service - Behavioral Health Out-of-State Residential Treatment Center Placements for Children

Time Period: Incurred Month			April 2020								
			Patients								
Age Group Medstat		Ages 5-9	Ages 10-14	Ages 15-17	Ages 18-19	Total					
Provider NPI Code	Provider Name	Provider State Code									
1205095569	LAKELAND HOSPITAL ACQUISITION	MO	1	5	7		13				
1245324755	RTC RESOURCE ACQUISITION CORPORATION	IN		2	3		5				
1356511372	DETROIT BEHAVIORAL INSTITUTE, LLC	MI		1			1				
1376689042	SOUTHERN PEAKS REGIONAL TREATMENT CENTER	CO		1	1		2				
1447380423	PINEY RIDGE TREATMENT CENTER, LLC	AR		1			1				
1528116746	HAVENWOOD ACADEMY INC	UT			4		4				
1558499103	TURNING POINT FAMILY CARE, INC.	UT		5	10		15				
1598772618	BENCHMARK BEHAVIORAL HEALTH SYSTEMS INC	UT		3	6		9				
1609843523	PROVO CANYON SCHOOL	UT	1	12	23		36				
1649380593	COPPER HILLS YOUTH CENTER	UT		4	6		10				
1720085178	ROLLING HILLS HOSPITAL, LLC	OK			2		2				
1740373323	OPTIONS TREATMENT CENTER ACQUISITION CORPORATION	IN			2		2				
1760482939	NEURO INSTITUTE OF AUSTIN, L.P.	TX	1	8	3		12				
1801900238	MOUNT ST VINCENT HOME INC	СО	1	1			2				
1952482036	HABILITATION CENTER, LLC	AR			2		2				
Aggregate(Provider NPI Code)			4	43	69	0	116				

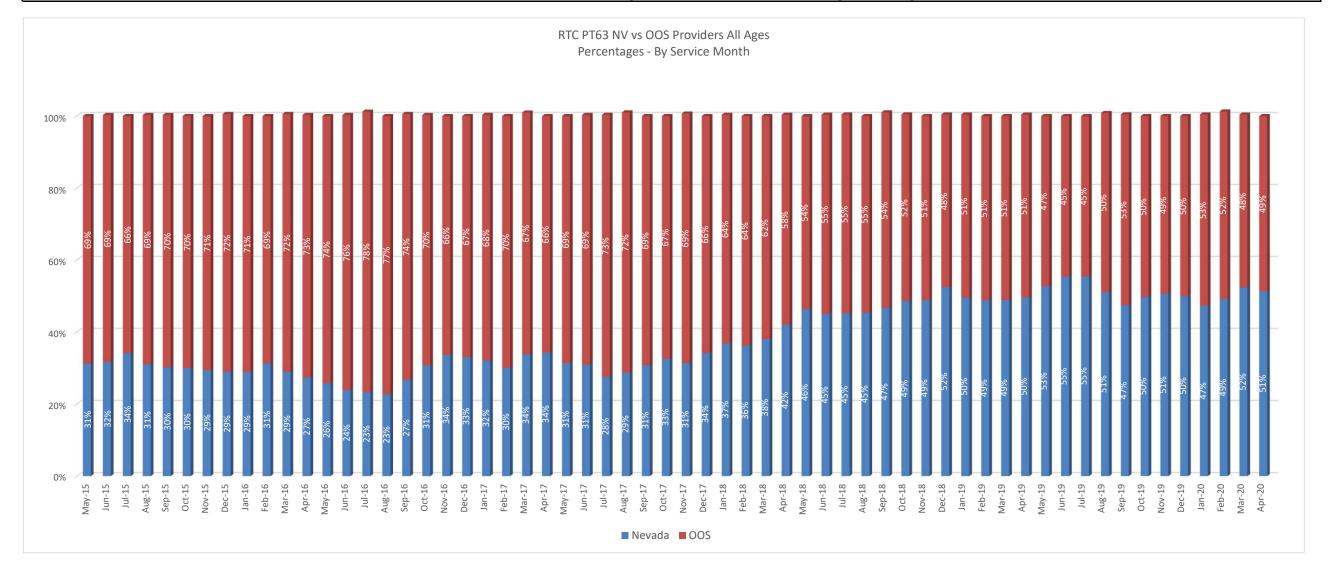
Patient counts are unduplicated in each age group.

RTC OOS Provider by Service Month - 5 Year Rolling



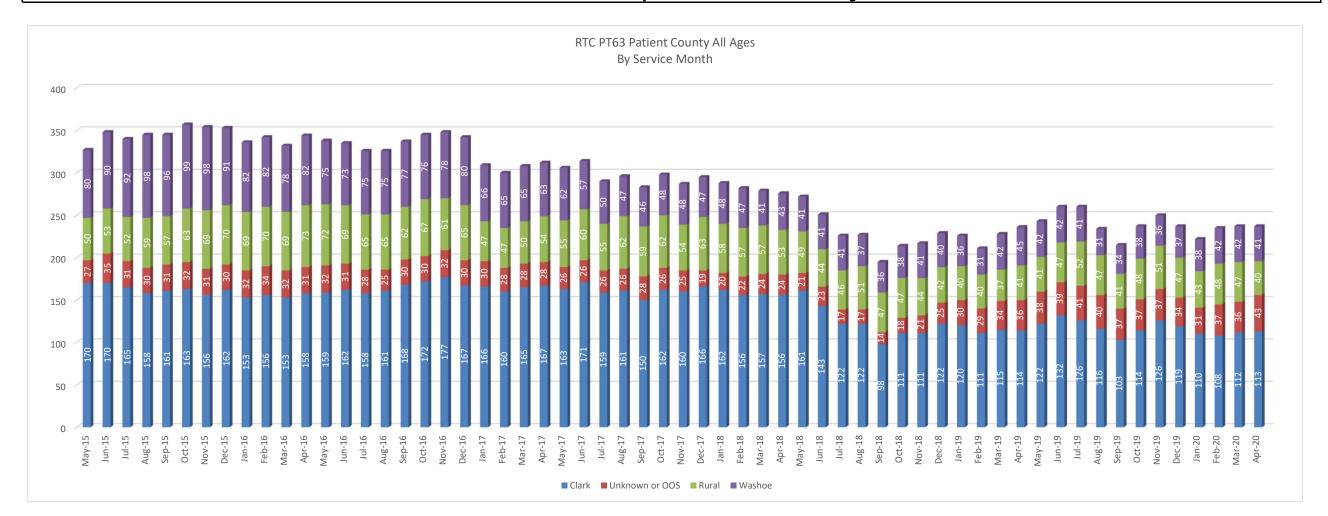
Out-of-State Residential Treatment Center Placements for Children All Ages							
Incurred With Runoff Month	Texas	Utah	The Rest	All States			
May-15	42	140	43	225			
Jun-15	47	148	46	239			
Jul-15	41	138	45	224			
Aug-15	43	140	57	239			
Sep-15	40	142	61	242			
Oct-15	40	143	67	250			
Nov-15	44	142	64	250			
Dec-15	48	141	65	253			
Jan-16	43	130	67	239			
Feb-16	40	131	65	235			
Mar-16	45	133	60	238			
Apr-16	47	145	61	251			
May-16	53	147	51	251			
Jun-16	52	152	52	256			
Jul-16	55	146	53	254			
Aug-16	55	148	49	252			
Sep-16	55	148	47	249			
Oct-16	50	148	42	240			
Nov-16	50	139	42	231			
Dec-16	49	141	41	229			
Jan-17	43	133	36	211			
Feb-17	41	135	34	210			
Mar-17	40	134	33	207			
Apr-17	36	137	32	205			
May-17	35	141	34	210			
Jun-17	36	147	35	218			
Jul-17	32	144	36	211			
Aug-17	29	151	34	214			
Sep-17	27	136	33	196			
Oct-17	29	137	35	201			
Nov-17	30	136	33	199			
Dec-17	25	139	30	194			
Jan-18	26	130	27	183			
Feb-18	23	135	22	180			
Mar-18	20	134	19	173			
Apr-18		126	19	161			
May-18	17	111	18	146			
Jun-18	17	103	20	139			
Jul-18	17	94	14	125			
Aug-18	17	93	14	124			
Sep-18		83	11	106			
Oct-18		84	11	111			
Nov-18		83	10	111			
Dec-18		80	13	110			
Jan-19		81	12	114			
Feb-19		76	11	108			
Mar-19		84	11	116			
Apr-19		87	11	120			
May-19		83	13	115			
Jun-19		82	14	116			
Jul-19		80	14	115			
Aug-19		76	18	116			
Sep-19		71	21	114			
Oct-19		78	22	119			
Nov-19		81	23	123			
Dec-19		76	24	118			
Jan-20	20	69	29	118			
Feb-20	20	73	29	122			
Mar-20		72	27	114			
Apr-20		74	29	115			

RTC: NV versus OOS Providers by Service Month - 5 Year Rolling Percentages



		ı	All Ages		T
Incurred With Runoff Month	Nevada	oos	All States	NV %	00S %
May-15		225	327	31%	69%
Jun-15		239	348	32%	69%
Jul-15		224	340	34%	66%
Aug-15		239	345	31%	69%
Sep-15		242	345	30%	70%
Oct-15	107	250	357	30%	70%
Nov-15		250	354	29%	71%
Dec-15		253	353	29%	72%
Jan-16		239	336	29%	71%
Feb-16		235	342	31%	69%
Mar-16		238	332	29%	72%
Apr-16		251	344	27%	73%
May-16		251	338	26%	74%
Jun-16		256	335	24%	76%
Jul-16		254	326	23%	78%
Aug-16		252	326	23%	77%
Sep-16		249	337	27%	74%
Oct-16		240	345	31%	70%
Nov-16		231	348	34%	66%
Dec-16	113	229	342	33%	67%
Jan-17	99	211	309	32%	68%
Feb-17	90	210	300	30%	70%
Mar-17	104	207	308	34%	67%
Apr-17	107	205	312	34%	66%
May-17	96	210	306	31%	69%
Jun-17	97	218	314	31%	69%
Jul-17	80	211	290	28%	73%
Aug-17	85 87	214 196	296 283	29% 31%	69%
Sep-17					
Oct-17 Nov-17	97 90	201 199	298 287	33%	67% 69%
	101	194	295	31% 34%	66%
Dec-17		183	288	37%	64%
Jan-18 Feb-18		180	282	36%	64%
Mar-18	106	173	279	38%	62%
Apr-18	116	161	276	42%	58%
May-18		146	272	46%	54%
				45%	55%
Jun-18 Jul-18		139 125	251 226	45%	55%
Aug-18		124	227	45%	55%
Sep-18		106	195	47%	54%
Oct-18		111	214	49%	52%
Nov-18		111	217	49%	51%
Dec-18		110	229	52%	48%
Jan-19		114	224	50%	51%
Feb-19		108	211	49%	51%
Mar-19		116	227	49%	51%
Apr-19		120	236	50%	51%
May-19		115	243	53%	47%
Jun-19		116	260	55%	45%
Jul-19		115	258	55%	45%
Aug-19		116	233	51%	50%
Sep-19		114	215	47%	53%
Oct-19		119	237	50%	50%
Nov-19		123	249	51%	49%
Dec-19		118	236	50%	50%
Jan-20		118	222	47%	53%
Feb-20		122	234	49%	52%
Mar-20		114	237	52%	48%
Apr-20		115	236	51%	49%

RTC Patient Counties by Service Month - 5 Year Rolling



PT63 OOS Patients Age Gp			All Ages		
Incurred With Runoff Month	Clark	Unknown or OOS	Rural	Washoe	All Counties
May-15	170	27	50		
Jun-15		35	53		
Jul-15	165	31	52	92	340
Aug-15	158	30	59		345
Sep-15	161	31	57		345
Oct-15	163	32	63		
Nov-15		31	69		
Dec-15	162	30	70		
Jan-16		32	69		
Feb-16		34	70		
Mar-16		32	69		
Apr-16		31 32	73 72		
May-16 Jun-16		32	69		
Jul-16		28	65		
Aug-16	161	25	65		
Sep-16		30	62		
Oct-16		30	67		
Nov-16		32	61		
Dec-16		30	65		
Jan-17	166	30	47		
Feb-17	160	28	47		
Mar-17	165	28	50		
Apr-17	167	28	54	63	312
May-17	163	26	55	62	306
Jun-17	171	26	60		
Jul-17	159	26	55		
Aug-17	161	26	62		
Sep-17	150	28	59		
Oct-17	162	26	62		
Nov-17	160	25	54		
Dec-17		19	63		
Jan-18		20	58		
Feb-18		22	57		
Mar-18 Apr-18	157 156	24 24	57 53		
May-18		21	49		
Jun-18		23	49		
Jul-18		17	46		
Aug-18		17	51		
Sep-18		14	47		
Oct-18		18	47		
Nov-18		21	44		
Dec-18		25	42		
Jan-19		30	40		
Feb-19		29	40		
Mar-19	115	34	37	42	227
Apr-19	114	36	41	45	236
May-19	122	38	41		
Jun-19		39	47		
Jul-19		41	52		
Aug-19		40	47		
Sep-19		37	41		
Oct-19	114	37	48		
Nov-19		37	51		
Dec-19	119	34	47		
Jan-20	110	31	43		
Feb-20	108	37	48		
Mar-20	112 113	36 43	47		
Apr-20	113	43	40	41	236

<u>Dimension/Measure</u>	<u>Definition</u>
	Custom built subset that combines Provider Type Claim NV Code = 63 (Residential Treatment Center), and Provider State Code <> NV; excludes voided
161004 OOS RTC Enrollees	claims
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.
I	The net amount paid for all claims. It represents the amount after all pricing guidelines have been applied, and all third party, copayment, coinsurance,
Net Payment	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.
	curred Mode (by the date of when services were provided). The Nevada Medicaid Fee for Service (FFS) Data Warehouse (DSS) has a three-month block on the insure there is near to 100% processing of all FFS claims. Out-of-State providers have 12 months to submit claims (in-state providers have six months).

The DHCFP data warehouse is comprised of claims data submitted by over 35,000 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.