Nevada Division of Health Care Financing and Policy Medicaid -Behavioral Health Out-of-State Fee for Service RTC Placements for Children February 2017

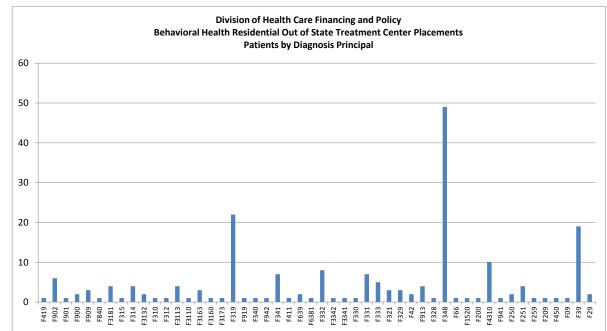
Top 3 Diagnosis:

--Other persistent mood [affective] disorders (F348): 49 children
--Bipolar disorder, unspecified (F319): 22 children
--Unspecified mood [affective] disorder (F39): 19 children

Patient Count

-- A total of 203 children were in Out-of-State placement during the month of February

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.

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.

Diagnosis	
Code Principal	Diagnosis Principal
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
F840	Autistic disorder
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
F3132	Bipolar disorder, current episode depressed, moderate
F310	Bipolar disorder, current episode hypomanic
F312	Bipolar disorder, current episode manic severe with psychotic features
F3113	Bipolar disorder, current episode manic w/o psychotic features, severe
F3110	Bipolar disorder, current episode manic w/o psychotic features, unspec
F3163	Bipolar disorder, current episode mixed, severe, w/o psychotic features
F3160	Bipolar disorder, current episode mixed, unspecified
F3173	Bipolar disorder, in partial remission, most recent episode manic
F319	Bipolar disorder, unspecified
F919	Conduct disorder, unspecified
F340	Cyclothymic disorder
F942	Disinhibited attachment disorder of childhood
F341	Dysthymic disorder
F411	Generalized anxiety disorder
F639	Impulse disorder, unspecified
F6381	Intermittent explosive disorder
F332	Major depressive disorder, recurrent severe without psychotic features
F3342	Major depressive disorder, recurrent, in full remission
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
F321	Major depressive disorder, single episode, moderate
F329	Major depressive disorder, single episode, unspecified
F42	Obsessive-compulsive disorder
F913	Oppositional defiant disorder
F328	Other depressive episodes
F348	Other persistent mood [affective] disorders
F66	Other sexual disorders
F1520	Other stimulant dependence, uncomplicated
F200	Paranoid schizophrenia
F4310	Post-traumatic stress disorder, unspecified
F941	Reactive attachment disorder of childhood
F250	Schizoaffective disorder, bipolar type
F250 F251	Schizoaffective disorder, bipolar type Schizoaffective disorder, depressive type
F251 F259	Schizoaffective disorder, depressive type Schizoaffective disorder, unspecified
F209	Schizophrenia, unspecified
F450	Somatization disorder
F09	Unspecified mental disorder due to known physiological condition
F39	Unspecified mood [affective] disorder
F29	Unspecified psychosis not due to substance or known physio condition
	Supposition payerious for date to substance of known physic condition

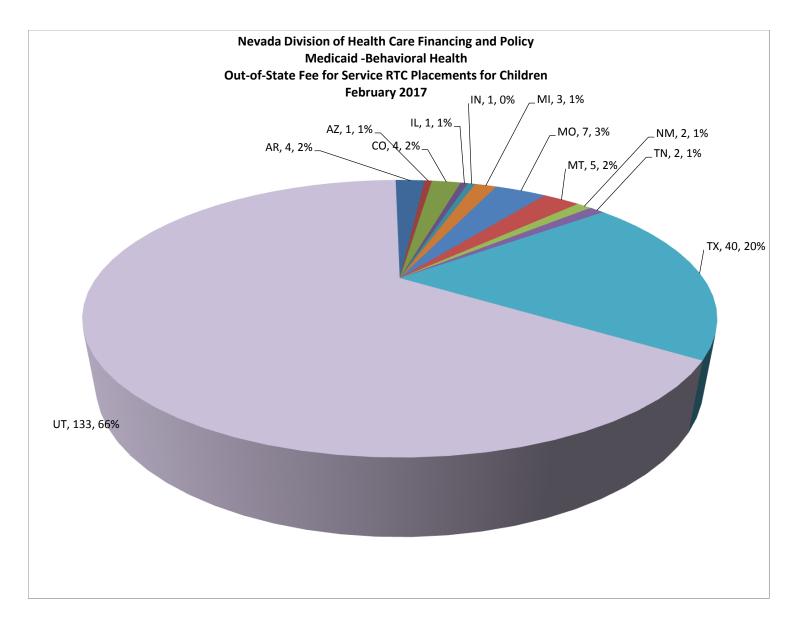
Subsets				161004 OOS RTC Enrollees											
								Patients	5						
Time Period: Incurred Month								eb 201		2124	TN	T 1/			
Provider State Code Diagnosis Principal	Diagnosis	AR	AZ	со	IL	IN	MI	МО	MT	NM	IN	TX	UT	Total	
Diagnosis i incipal	Code Principal														
Anxiety disorder, unspecified	F419	0	0	0	0	0	0	0	0	0	0	1	0	1	
Attention-deficit hyperactivity disorder, combined type	F902	0	0	0					0	0	0	0	5	6	
Attention-deficit hyperactivity disorder, predominantly hyperactive type	F901	0	0	0	0	0	0	0	0	0	0	0	1	1	
Attention-deficit hyperactivity disorder, predominantly inattentive type	F900	0	0	0					0	0		0		2	
Attention-deficit hyperactivity disorder, unspecified type	F909	0	0	1	0				0	0	-	0		3	
Autistic disorder	F840	0	0	0		_			0	0		0		1	
Bipolar II disorder	F3181	0	0	0					0	0		0		4	
Bipolar disord, current episode depressed, severe, w psychotic features	F315	0	0	0	0	0			0	0		0		1	
Bipolar disord, current episode depressed, severe, w/o psychotic feature	F314	0	0	0					0	0		0		4	
Bipolar disorder, current episode depressed, moderate	F3132	0	0	0					0	0		0		2	
Bipolar disorder, current episode hypomanic	F310	0	0	0	-				0	0	-	0		1	
Bipolar disorder, current episode manic severe with psychotic features	F312	0	0	0					1	0		0		1	
Bipolar disorder, current episode manic w/o psychotic features, severe	F3113	0	0	0					0	0	_	0		4	
Bipolar disorder, current episode manic w/o psychotic features, unspec	F3110	0	0	0	-			-	0	0	-	0		1	
Bipolar disorder, current episode mixed, severe, w/o psychotic features	F3163	0	0	0					0	0		0		3	
Bipolar disorder, current episode mixed, unspecified	F3160	0	0	0	0				0	0		1	0	1	
Bipolar disorder, current episode mixed, dispectined Bipolar disorder, in partial remission, most recent episode manic	F3173	0	0	0					0	0	-	0		1	
Bipolar disorder, unspecified	F3173	0	0	0					0	0	_	4		22	
Conduct disorder, unspecified	F919	1	0	0	-				0	0		0		1	
Cyclothymic disorder	F340	0	0	0					0	0		0		1	
Disinhibited attachment disorder of childhood	F942	0	0	0				_	1	0		0		1	
Dysthymic disorder Dysthymic disorder	F341	0	0	0	-				0	0		0			
Generalized anxiety disorder	F411	0	0	0					0	0		0		1	
Impulse disorder, unspecified	F639	0	0	1	0				0	0	_	0		2	
Intermittent explosive disorder	F6381	0	0	0	0				1	0		0	0	1	
Major depressive disorder, recurrent severe without psychotic features	F332	0	0	0					0	0		1		8	
Major depressive disorder, recurrent, in full remission	F3342	0	0	0	0				0	0	-	0		1	
Major depressive disorder, recurrent, in partial remission	F3341	0	0	0	0				0	0		0		1	
Major depressive disorder, recurrent, in partial remission	F3341	0	0	0					0	0		0		1	
Major depressive disorder, recurrent, mild	F331	0	0	0				_	0	0	_	1	5	7	
Major depressive disorder, recurrent, moderate Major depressive disorder, recurrent, severe with psychotic symptoms	F333	0	0	1	0				0	0	-	0		5	
Major depressive disorder, recurrent, severe with psychotic symptoms Major depressive disorder, single episode, moderate	F321	0	0	0					0	0		0		3	
Major depressive disorder, single episode, moderate Major depressive disorder, single episode, unspecified	F321	0	0	0				-	0	0	-	2		3	
Obsessive-compulsive disorder	F42	0	0	0		0			0	0		0		2	
Oppositional defiant disorder	F913	0	0	0					0	0		0		4	
Other depressive episodes	F328	0	0	0					0	0	_	0		1	
Other persistent mood [affective] disorders	F348	2	0	0	0				1	0		19	27	49	
Other sexual disorders	F66	0	0	0					0	0	-	15	0	1	
Other stimulant dependence, uncomplicated	F1520	0	1	0	0				0	0	-	0		1	
	F200	0	0	0			_		0	0	_	0		1	
Paranoid schizophrenia Post traumatic stress disorder unspecified	F4310	1	0	0					1	1	0				
Post-traumatic stress disorder, unspecified	F941	0	0	1	0				0	0		0		10 1	
Reactive attachment disorder of childhood	F250	0	0	0					0	0		0		2	
Schizoaffective disorder, bipolar type	F250 F251	0	0	0	0				0	0		0		4	
Schizoaffective disorder, upgreeified	F251 F259	0	0	0				0	0	0		0		1	
Schizoaffective disorder, unspecified	-	0	0	0					0	0	_	0		1	
Schizophrenia, unspecified	F209														
Somatization disorder	F450	0	0	0					0	0	-	0	0	1	
Unspecified mental disorder due to known physiological condition	F09	0	0	0					0	0 1	-	7	11	10	
Unspecified mood [affective] disorder	F39		0	0	0				0		0		11	19	
Unspecified psychosis not due to substance or known physio condition	F29	0	0	0	0				0 5	0		2		202	
	Total	4	1	4	1	1	3	7	5	2	2	40	133	203	

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

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.

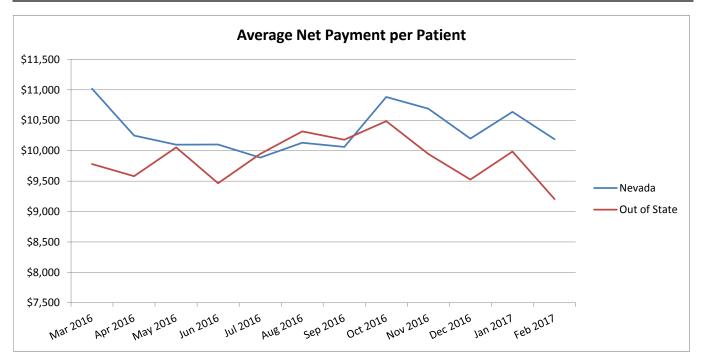
Total Patient Count may contain duplications (i.e. patients may have more than one primary diagnosis within the timeframe specified)



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 F	RTC Patients		Out of State RTC Patients						
			Patients	Service	Net Payment	Net Pay Per					
		Count Paid		Pat		Count Paid		Pat			
Time Period: Incurred Month											
Mar 2016	103	2,621	\$1,134,949.75	\$11,018.93	242	6,854	\$2,366,914.58	\$9,780.64			
Apr 2016	99	2,351	\$1,014,674.92	\$10,249.24	253	6,836	\$2,423,746.91	\$9,580.03			
May 2016	95	2,240	\$959,391.62	\$10,098.86	255	7,370	\$2,563,990.16	\$10,054.86			
Jun 2016	86	2,043	\$868,733.72	\$10,101.55	259	6,885	\$2,451,766.54	\$9,466.28			
Jul 2016	78	1,837	\$771,197.51	\$9,887.15	259	7,345	\$2,576,456.14	\$9,947.71			
Aug 2016	78	1,889	\$790,244.96	\$10,131.35	255	7,380	\$2,630,916.62	\$10,317.32			
Sep 2016	93	2,188	\$935,700.84	\$10,061.30	249	7,052	\$2,534,936.01	\$10,180.47			
Oct 2016	111	2,843	\$1,208,023.86	\$10,883.10	241	7,049	\$2,526,982.04	\$10,485.40			
Nov 2016	117	2,889	\$1,250,859.62	\$10,691.11	230	6,363	\$2,287,482.98	\$9,945.58			
Dec 2016	118	2,804	\$1,203,379.04	\$10,198.13	221	5,942	\$2,105,152.62	\$9,525.58			
Jan 2017	104	2,596	\$1,106,447.40	\$10,638.92	206	5,816	\$2,056,840.97	\$9,984.66			
Feb 2017	98	2,336	\$998,532.92	\$10,189.11	203	5,304	\$1,868,800.60	\$9,205.91			

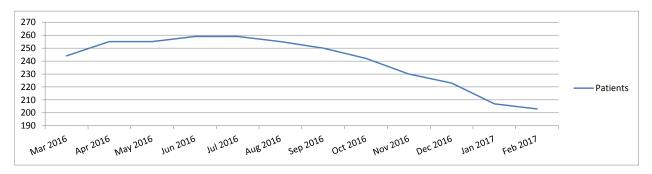


The report indicates the number of in-state and out-of-state fee for service RTC patients. Patient counts are based upon when the service occurred and not when the service was paid.

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	161004 OOS RTC Enrollees															
		Patients														
Provider State Code	AL	AR	ΑZ	СО	FL	GA	IL	IN	MI	МО	MT	NM	TN	TX	UT	Total
Time Period: Incurred Month																
Mar 2016	1	0	3	18	1	1	1	5	4	11	4	4	9	45	137	244
Apr 2016	1	1	4	19	0	1	1	5	3	11	3	3	9	47	147	255
May 2016	1	1	5	11	0	1	1	4	4	9	3	2	9	53	151	255
Jun 2016	1	1	4	12	0	2	1	3	4	9	4	2	9	52	155	259
Jul 2016	0	2	4	12	0	2	1	3	5	9	5	2	7	55	152	259
Aug 2016	0	3	4	14	0	2	1	3	5	8	4	1	4	55	151	255
Sep 2016	0	2	3	13	0	2	1	3	3	8	5	2	3	55	150	250
Oct 2016	0	3	1	12	0	2	1	2	3	8	5	2	4	50	149	242
Nov 2016	0	4	1	12	0	1	0	1	4	7	5	2	4	49	140	230
Dec 2016	1	4	1	11	0	1	1	1	4	6	5	2	2	47	137	223
Jan 2017	1	4	1	6	0	0	1	1	3	9	4	2	2	42	131	207
Feb 2017	0	4	1	4	0	0	1	1	3	7	5	2	2	40	133	203



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.

<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;
161004 OOS RTC Enrollees	excludes voided claims
Diagnosis Principal	The principal diagnosis description for a service, claim, or lab result.
	The average net amount paid, per patient, for all claims. It represents the amount after all pricing guidelines have been applied, and all
Net Pay Per Pat	third party, copayment, coinsurance, and deductible amounts have been subtracted.
	The net amount paid for all claims. It represents the amount after all pricing guidelines have been applied, and all third party, copayment,
Net Payment	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.