



Out of State Residential Treatment Centers

Reporting Period October 2018

Nevada Division of Health Care Financing and Policy (DHCFP)
Medicaid Fee for Service -Behavioral Health
Out-of-State (OOS) Residential Treatment Center (RTC) Placements for Children
October 2018

Top 3 Diagnosis:

--Disruptive mood dysregulation disorder (F3481):	34 children	31.5% of total
--Unspecified mood [affective] disorder (F39):	12 children	11.1% of total
--Major Depressive Disorder (F332):	7 children	6.5% of total

Patient Count:

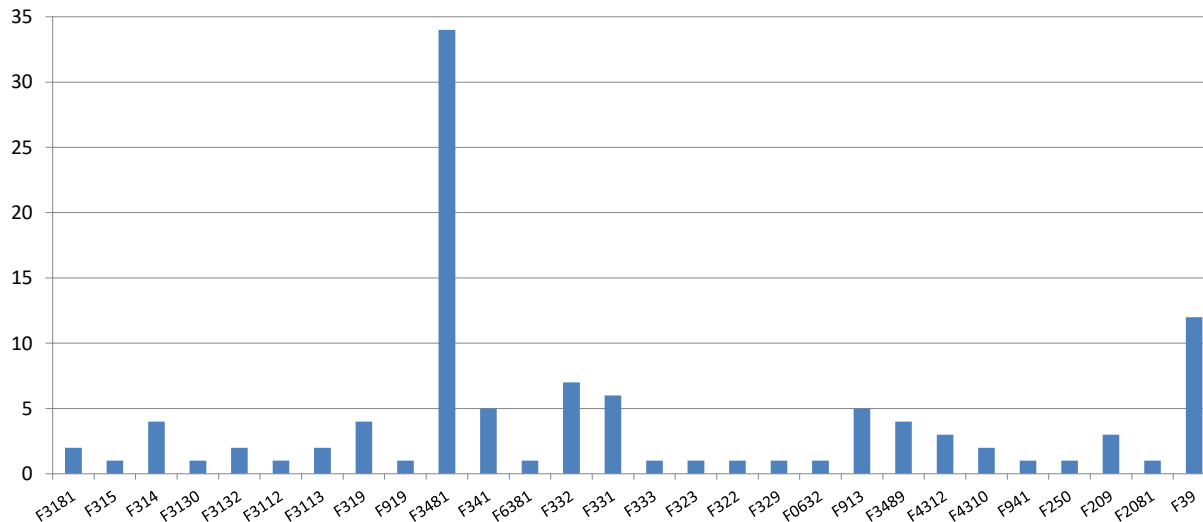
--A total of 108 children were in Out-of-State RTC placement during the month of October
 --The average monthly OOS patient count for the previous 11 months is 158; **31.7%** reduction in October

Net Payment:

--DHCFP paid \$1,123,983.99 for Out-of-State RTC placements in October
 --The average monthly OOS spend for the previous 11 months is \$1,625,699; **30.9%** reduction in October

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

Nevada Division of Health Care Financing and Policy
Behavioral Health Residential Out of State Treatment Center Placements
Patients by Diagnosis Principal
October 2018



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.

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DHCFP Fiscal Services

Diagnosis Code Principal	Diagnosis Principal
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
F3112	Bipolar disorder, current episode manic w/o psychotic features, moderate
F3113	Bipolar disorder, current episode manic w/o psychotic features, severe
F319	Bipolar disorder, unspecified
F919	Conduct disorder, unspecified
F3481	Disruptive mood dysregulation disorder
F341	Dysthymic disorder
F6381	Intermittent explosive disorder
F332	Major depressive disorder, recurrent severe without psychotic features
F331	Major depressive disorder, recurrent, moderate
F333	Major depressive disorder, recurrent, severe with psychotic symptoms
F323	Major depressive disorder, single episode, severe w psychotic features
F322	Major depressive disorder, single episode, severe w/o psychotic features
F329	Major depressive disorder, single episode, unspecified
F0632	Mood disorder D/T known physio condition w major depressive-like episode
F913	Oppositional defiant disorder
F3489	Other specified persistent mood disorders
F4312	Post-traumatic stress disorder, chronic
F4310	Post-traumatic stress disorder, unspecified
F941	Reactive attachment disorder of childhood
F250	Schizoaffective disorder, bipolar type
F209	Schizophrenia, unspecified
F2081	Schizophreniform disorder
F39	Unspecified mood [affective] disorder

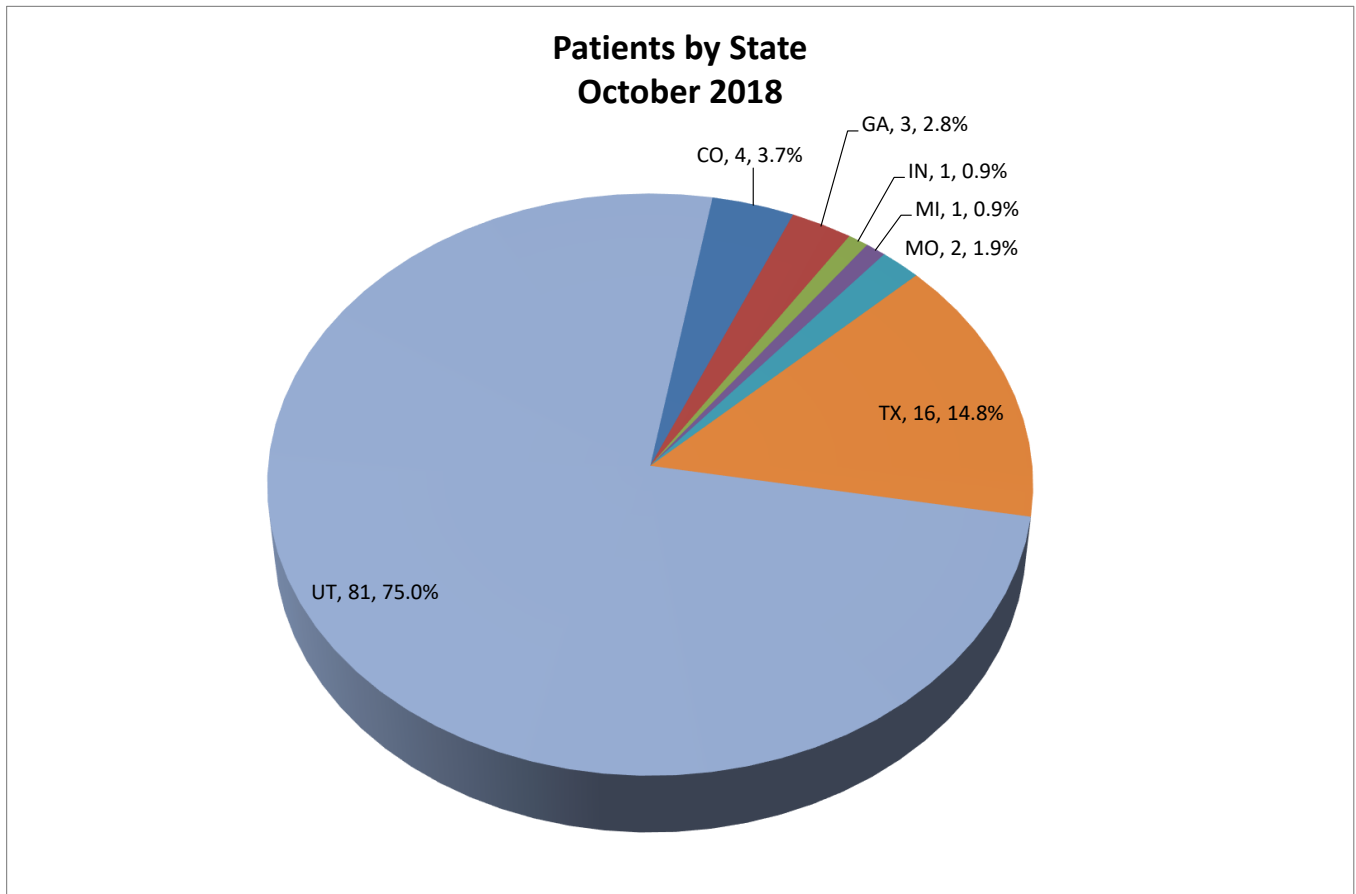
Nevada Division of Health Care Financing and Policy
Medicaid Fee for Service - Behavioral Health
Out-of-State Residential Treatment Center Placements for Children

Subsets Time Period: Incurred Month Provider State Code		161004 OOS RTC Enrollees							
		Patients							
		Oct 2018							
Diagnosis Principal	Diagnosis Code Principal	CO	GA	IN	MI	MO	TX	UT	Total
Bipolar II disorder	F3181							2	2
Bipolar disorder, current episode depressed, severe, w psychotic features	F315							1	1
Bipolar disorder, current episode depressed, severe, w/o psychotic feature	F314							4	4
Bipolar disorder, current episode depressed, mild or moderate, unspec	F3130							1	1
Bipolar disorder, current episode depressed, moderate	F3132							2	2
Bipolar disorder, current episode manic w/o psychotic features, moderate	F3112							1	1
Bipolar disorder, current episode manic w/o psychotic features, severe	F3113		1					1	2
Bipolar disorder, unspecified	F319							4	4
Conduct disorder, unspecified	F919							1	1
Disruptive mood dysregulation disorder	F3481					1	16	17	34
Dysthymic disorder	F341							5	5
Intermittent explosive disorder	F6381							1	1
Major depressive disorder, recurrent severe without psychotic features	F332		1					6	7
Major depressive disorder, recurrent, moderate	F331							6	6
Major depressive disorder, recurrent, severe with psychotic symptoms	F333							1	1
Major depressive disorder, single episode, severe w psychotic features	F323							1	1
Major depressive disorder, single episode, severe w/o psychotic features	F322			1					1
Major depressive disorder, single episode, unspecified	F329							1	1
Mood disorder D/T known physio condition w major depressive-like episode	F0632							1	1
Oppositional defiant disorder	F913		1		1			3	5
Other specified persistent mood disorders	F3489	4							4
Post-traumatic stress disorder, chronic	F4312							3	3
Post-traumatic stress disorder, unspecified	F4310							2	2
Reactive attachment disorder of childhood	F941					1			1
Schizoaffective disorder, bipolar type	F250							1	1
Schizophrenia, unspecified	F209							3	3
Schizophreniform disorder	F2081							1	1
Unspecified mood [affective] disorder	F39							12	12
Total		4	3	1	1	2	16	81	108

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.

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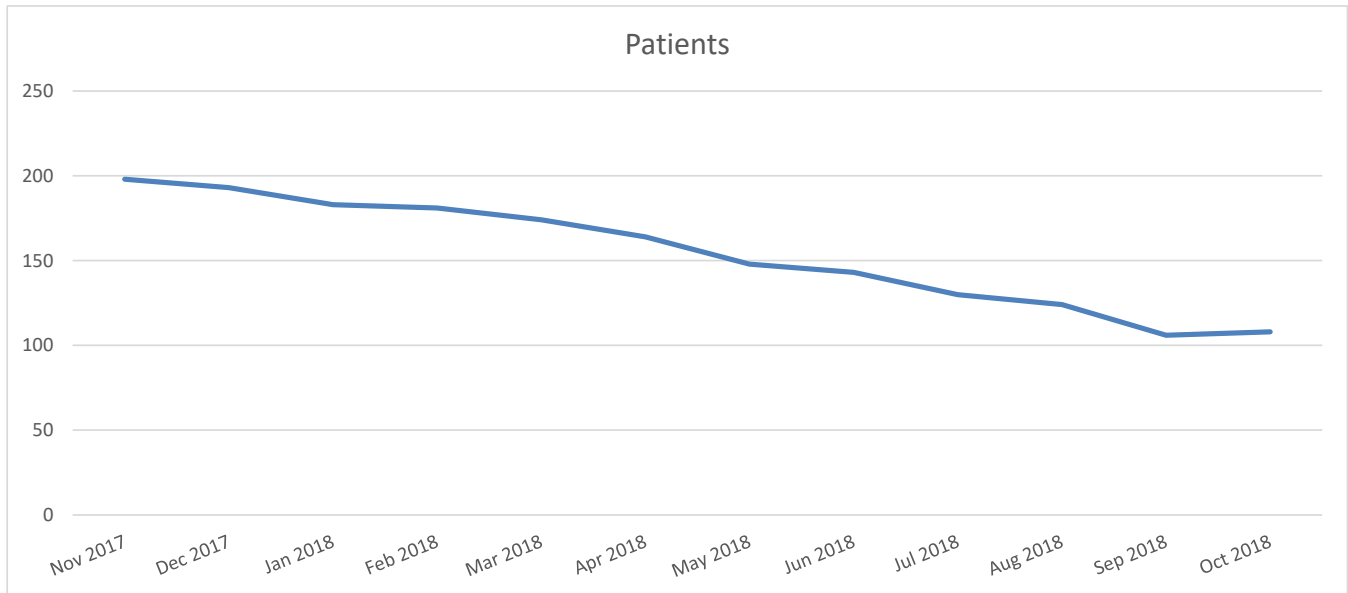
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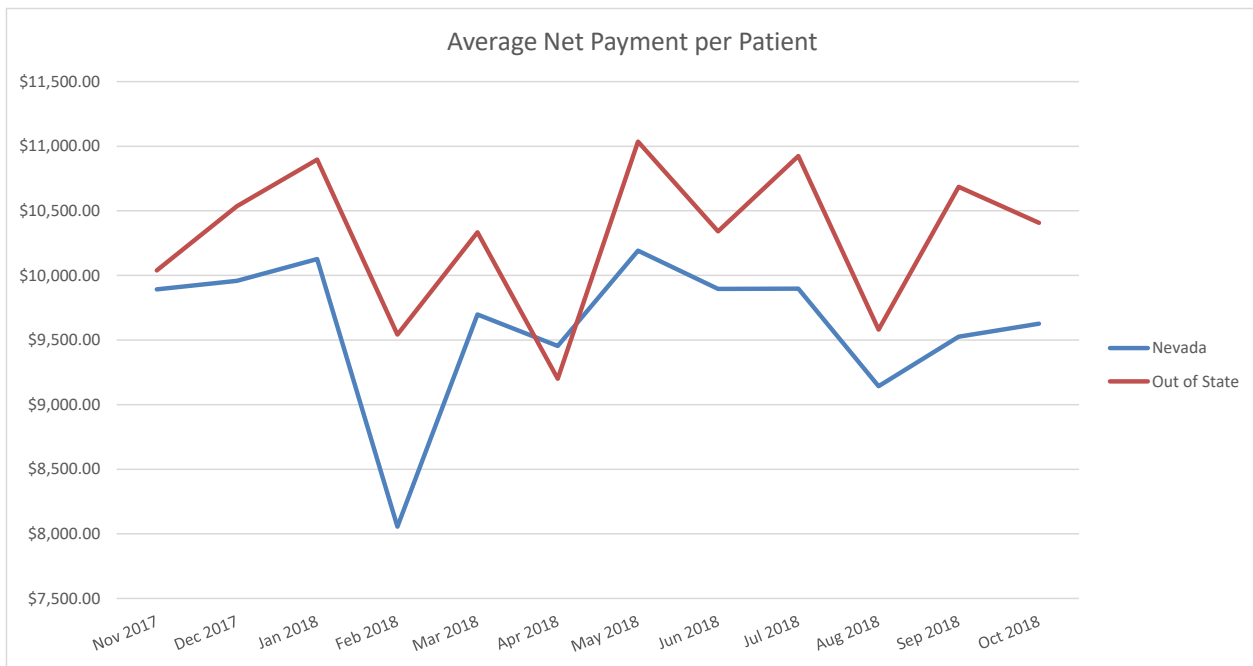
Subsets	161004 OOS RTC Enrollees													
	Patients													
Provider State Code	AR	AZ	CO	GA	IN	MI	MO	MT	NM	PA	TN	TX	UT	Total
Time Period: Incurred Month														
Nov 2017	2	1	2	5		1	9	4	5		2	30	137	198
Dec 2017	2	1	2	3		1	8	4	5		2	25	140	193
Jan 2018	3	1	2	2		2	7	4	2		2	26	132	183
Feb 2018	3	2	1	3		2	6	2	2		1	23	136	181
Mar 2018	3	2	2	3		1	6	1	1		1	20	134	174
Apr 2018	2	2	3	3		1	7	1			1	17	127	164
May 2018	2	1	3	3	1		6	1			1	17	113	148
Jun 2018	1	1	5	3	1	1	7	1			1	17	105	143
Jul 2018			3	2	1	1	5	1			1	17	99	130
Aug 2018			5	2	1	1	3	1			1	17	93	124
Sep 2018			5	2	1	1	2					13	82	106
Oct 2018			4	3	1	1	2					16	81	108



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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
Time Period: Incurred Month								
Nov 2017	100	2,350	\$989,296.18	\$9,892.96	198	5,531	\$1,987,861.97	\$10,039.71
Dec 2017	109	2,582	\$1,085,538.06	\$9,959.06	193	5,602	\$2,033,384.40	\$10,535.67
Jan 2018	108	2,627	\$1,093,669.16	\$10,126.57	183	5,399	\$1,994,008.28	\$10,896.22
Feb 2018	97	1,957	\$781,402.00	\$8,055.69	181	4,707	\$1,727,154.36	\$9,542.29
Mar 2018	106	2,573	\$1,027,939.00	\$9,697.54	174	5,394	\$1,798,130.90	\$10,334.09
Apr 2018	115	2,729	\$1,087,304.00	\$9,454.82	163	4,719	\$1,499,680.09	\$9,200.49
May 2018	120	3,062	\$1,223,017.00	\$10,191.81	148	4,497	\$1,633,305.40	\$11,035.85
Jun 2018	106	2,617	\$1,049,032.00	\$9,896.53	142	3,954	\$1,468,463.19	\$10,341.29
Jul 2018	99	2,446	\$979,956.00	\$9,898.55	130	3,888	\$1,420,056.89	\$10,923.51
Aug 2018	94	2,157	\$859,432.00	\$9,142.89	124	3,173	\$1,187,903.89	\$9,579.87
Sep 2018	88	2,108	\$838,273.00	\$9,525.83	106	3,062	\$1,132,737.53	\$10,686.20
Oct 2018	97	2,352	\$933,790.00	\$9,626.70	108	2,967	\$1,123,983.99	\$10,407.26



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

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Subsets			161004 OOS RTC Enrollees				
Time Period: Incurred Month			Oct 2018				
Age Group			Patients				
Provider NPI Code	Provider Name	Provider State Code	Ages 5-9	Ages 10-14	Ages 15-17	Ages 18-19	Total
1205095569	LAKELAND BEHAVIORAL HEALTH SYSTEM	MO	1	1			2
1245324755	RTC RESOURCE ACQUISITION CORPORATION	IN		1			1
1356511372	CAPSTONE ACADEMY	MI			1		1
1376689042	SOUTHERN PEAKS REGIONAL TREATMENT CENTER	CO		1	3		4
1437604329	SEQUEL YOUTH SERVICES OF RED ROCK CANYON	UT		4	1		5
1528116746	HAVENWOOD ACADEMY INC	UT			1		1
1558499103	TURNING POINT FAMILY CARE INC	UT		3	9	1	13
1598772618	BENCHMARK BEHAVIORAL HEALTH SYSTEMS INC	UT		3	8	1	12
1609843523	PROVO CANYON SCHOOL	UT	1	14	13		28
1649380593	COPPER HILLS YOUTH CENTER	UT		5	17		22
1679543672	COASTAL HARBOR TREATMENT CENTER	GA	1	1	1		3
1760482939	TEXAS NEUROREHAB CENTER	TX	6	7	3		16
		Total	9	40	57	2	108

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<u>Dimension/Measure</u>	<u>Definition</u>
161004 OOS RTC Enrollees	Custom built subset that combines Provider Type Claim NV Code = 63 (Residential Treatment Center), and Provider State Code <> NV ; excludes voided 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.
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.