

Indian Health Program

Fee for Service Reports

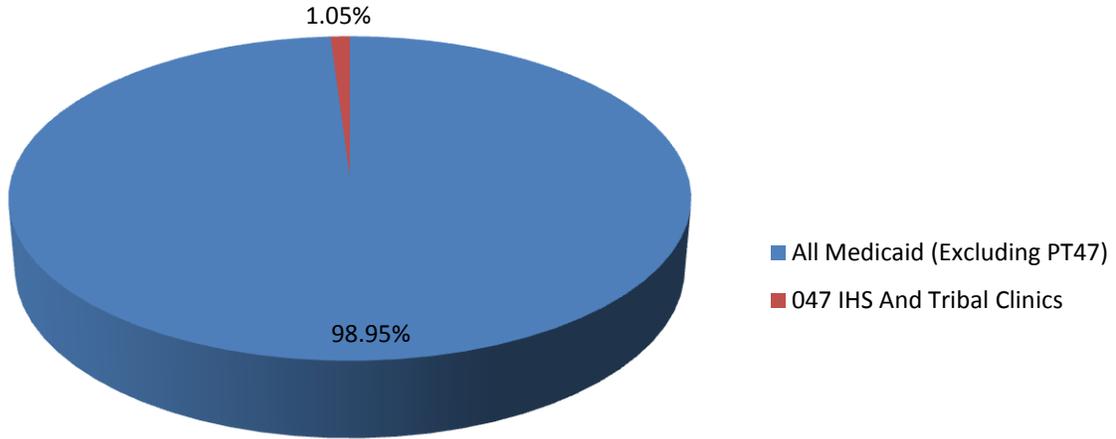
SFY14

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Indian Health Program Reports SFY14

Medicaid Expenditures SFY14

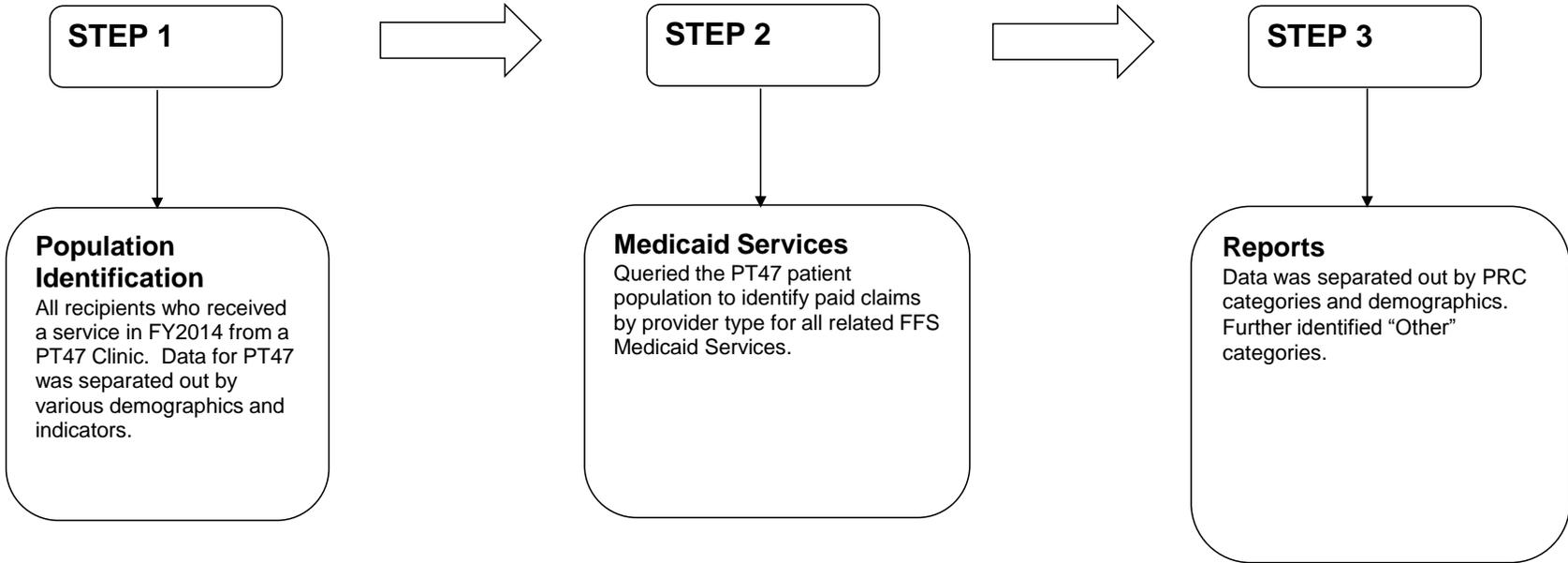


Net Payment all Medicaid (excluding PT47): \$1,241,122,927.46
PT47: \$13,119,361.46 (Source data: R16 Medicaid Report SFY14. Due to report run times, PT47 expenditures on this page are inconsistent with remaining reports)

Net Payment is 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.

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.

Indian Health Program Reports SFY14



Indian Health Program Reports SFY14

Time Period: Incurred Fiscal Year	FY 2014				
	Patients	Claims Paid	Charge Submitted	Allowed Amount	Net Payment
Provider Type Claim NV w Code					
047 IHS And Tribal Clinics	4,458	41,063	\$13,581,949.00	\$13,783,855.67	\$13,734,667.09

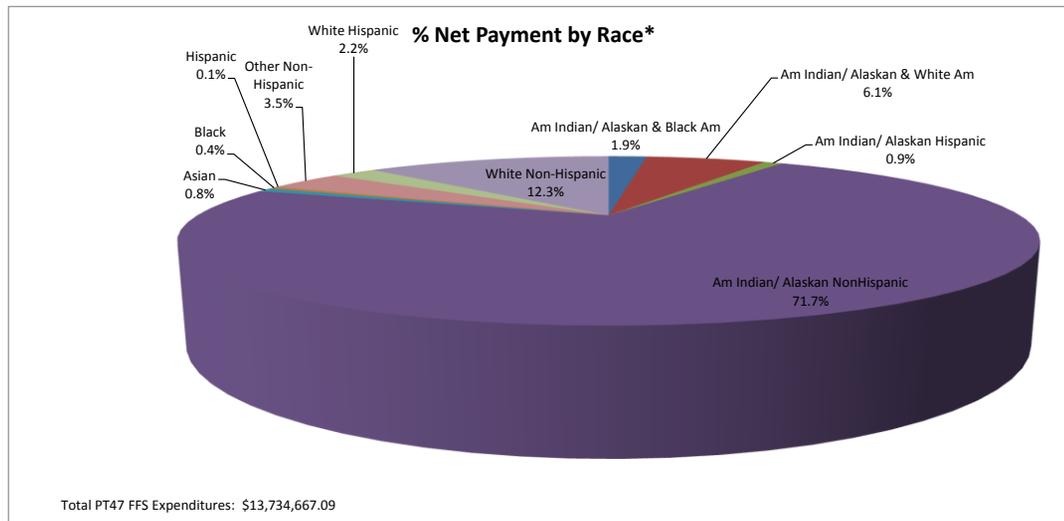
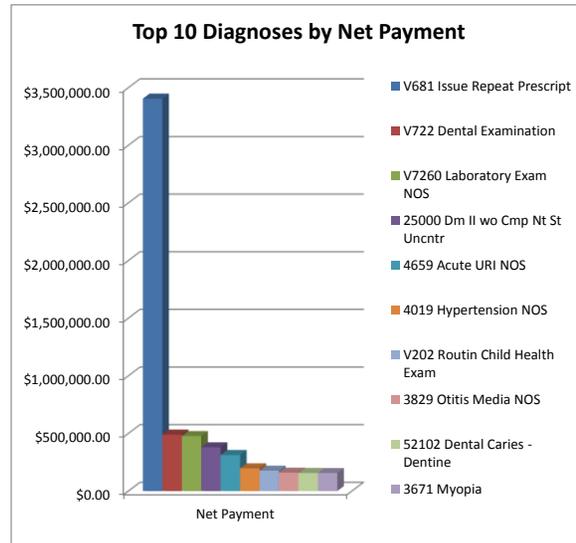
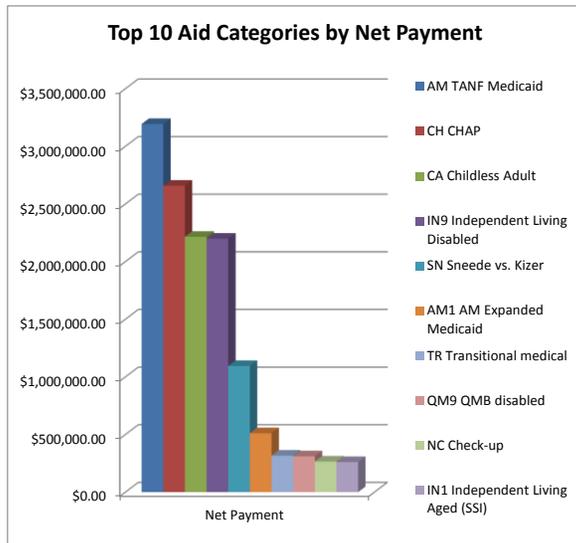
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Indian Health Program Reports SFY14

Time Period: Incurred Fiscal Year			FY 2014	
			Claims Paid	Net Payment
Provider Type Claim NV w Code	Procedure Code	Procedure		
047 IHS And Tribal Clinics	T1015	Clinic Service	41,060	\$13,733,735.42
	99392	Prev Visit Est Age 1-4	1	\$330.00
	99393	Prev Visit Est Age 5-11	1	\$330.00
	T1016	Case Management	1	\$271.67
		Total	41,063	\$13,734,667.09

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*Because of the small number of patients in the Asian and Black race categories, numbers were rolled up into more general categories (i.e. patients in Black/African Am White, and Black Non-Hispanic were grouped as Black; and Asian/White, Asian or Pacific Islander Hispanic, and Asian or Pacific Islander Non-Hispanic were grouped as Asian).

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Fee-for-Service Indian Health Program
Related Medicaid Expenditures SFY14

Indian Health Program Reports SFY14

PT47 Patients FY14				
FY 2014 - Incurred				
	Claims Paid	Charge Submitted	Allowed Amount	Net Payment
Service Category				
Dental	7,246	\$736,098.27	\$396,172.86	\$395,870.98
Dialysis	10,142	\$13,420,090.79	\$502,174.74	\$78,368.12
Hospital Care	40,354	\$24,920,739.92	\$2,795,949.91	\$2,300,207.36
Other	9,707	\$2,119,727.66	\$1,530,746.37	\$1,382,794.73
Other/BH/Inpatient	56	\$672,150.56	\$265,168.00	\$179,181.41
Other/BH/Outpatient	5,947	\$726,842.08	\$603,155.08	\$596,482.68
Other/Lab	3,188	\$276,903.21	\$42,924.04	\$34,122.06
Other/Pharmacy	14,564	\$2,159,652.00	\$1,231,711.64	\$1,135,011.83
Physician Inpatient	3,560	\$1,981,299.90	\$603,737.83	\$498,956.65
Physician Outpatient	21,349	\$5,768,343.24	\$1,719,735.36	\$1,370,926.76
Travel	1,002	\$1,503,407.39	\$244,896.27	\$217,879.96
Grand Total	117,115	\$54,285,255.02	\$9,936,372.10	\$8,189,802.54

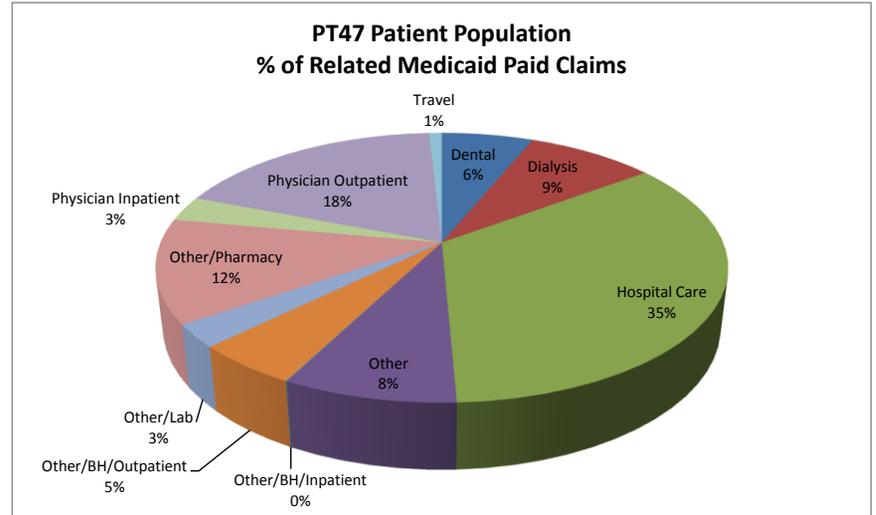
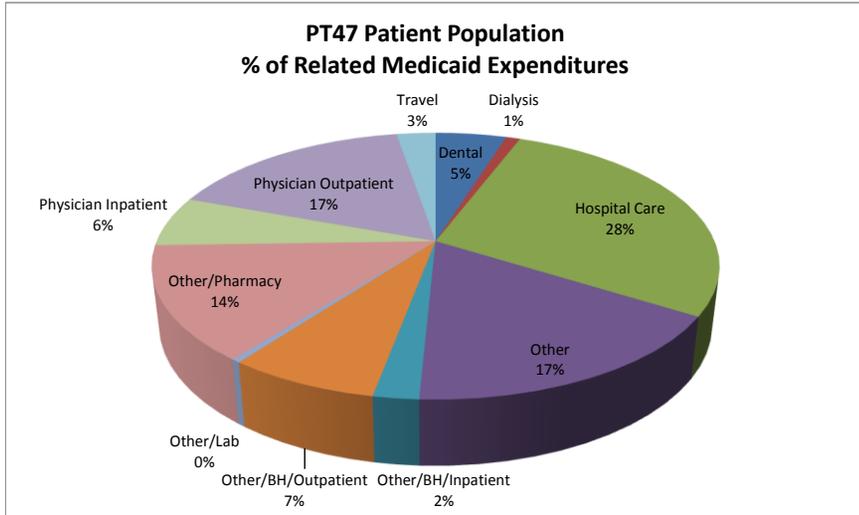
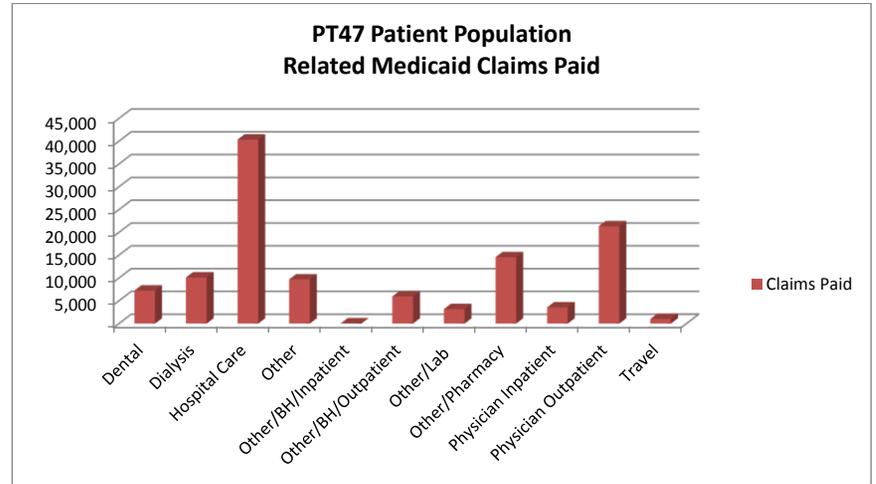
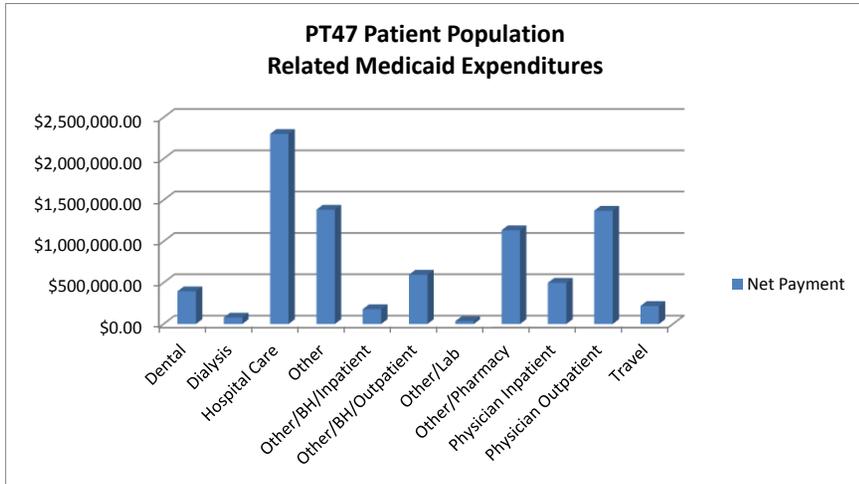
Patient population identified by utilization of PT47 services during SFY14. Report details **all other** services during same timeframe. See Service Categories tab for grouping parameters.

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.

Indian Health Program Reports SFY14

Service Categories (grouped by Provider Types)										
Hospital Care	Physician Outpatient	Physician Inpatient	Travel	Dental	Dialysis	Pharmacy	Laboratory	Other		
								Behavioral Health		Other
								Outpatient	Inpatient	
PT10 Outpatient Surgery	PT17 Special Clinics	PT20* Physician	PT32 Ambulance, Air/Ground	PT22 Dentist	PT45 ESRD Facility	PT28 Pharmacy	PT43 Laboratory	PT14 Mental Health, OP	PT13 Psychiatric, IP	PT19 Nursing Facility
PT11 Hospital, IP	PT20* Physician					PT37 IV Therapy		PT26 Psychologist	PT16 ICF-MR	PT23 Hearing Aid Dispenser
PT12 Hospital, OP	PT21 Podiatrist							PT82 Mental Hlth Rehab	PT42 OP Psych Hosp	PT29 Home Health Agency
PT44 Swing Bed, Acute Hosp	PT24 Cert RN Practitioner								PT63 RTC	PT30 PCA
PT46 Ambulatory Surg Centers	PT25 Optometrist									PT33 DME
PT55 Trans Rehab, OP	PT27 Radiology									PT34 Therapy
PT56 MH Rehab, IP	PT36 Chiropractor									PT38 Home/Comm Based Waiver
PT75 Critical Access Hosp, IP	PT41 Optician									PT39 Adult Day Hlth Center
	PT60 School Based									PT48 Senior Waiver
	PT72 Nurse Anesthetist									PT54 TCM
	PT74 Nurse Midwife									PT57 Adult Group Care Waiver
	PT76 Audiology									PT58 Physically Disabled Waiver
	PT77 Physician's Asst									PT59 Fac Based Assisted Living
										PT64 Hospice
										PT65 Hospice, LTC
										PT83 PCA
										PT84 PCA
*Inpatient/Outpatient for PT20 defined by Place of Service										

Indian Health Program Reports SFY14



Patient population identified by utilization of PT47 services during SFY14. Charts detail **all other** services utilized during same timeframe (by Net Payment or Claims Paid).

Total related SFY14 Net Payment expenditures (excluding PT47): **\$8,189,802.54**

FFS Data Only - PT35/62 - NET/HMO capitation payments not included in expenditures

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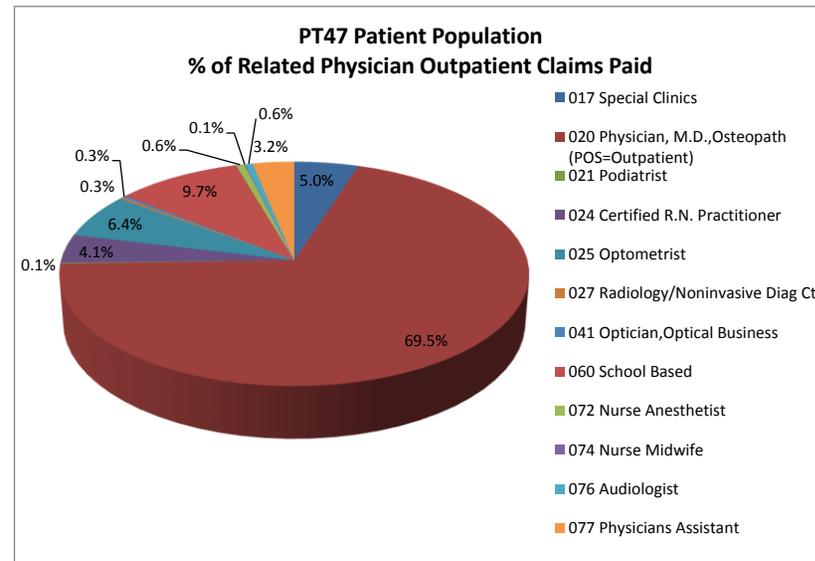
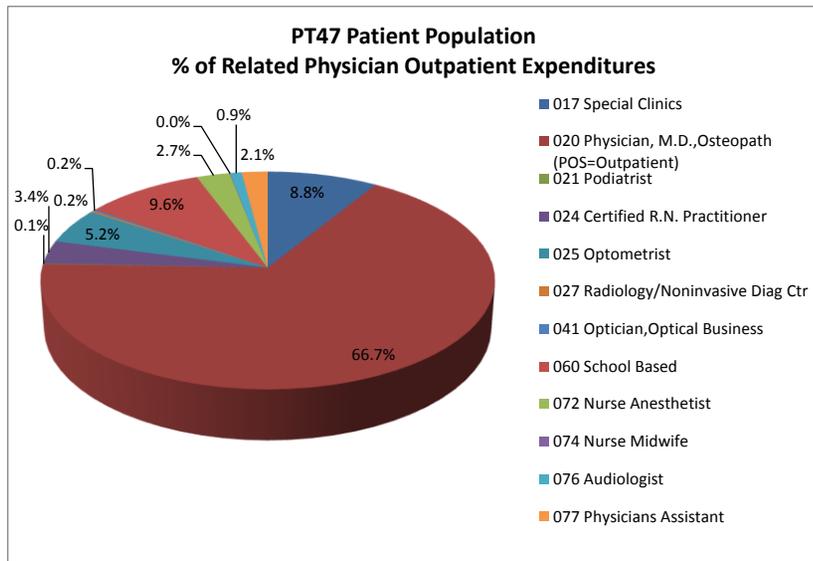
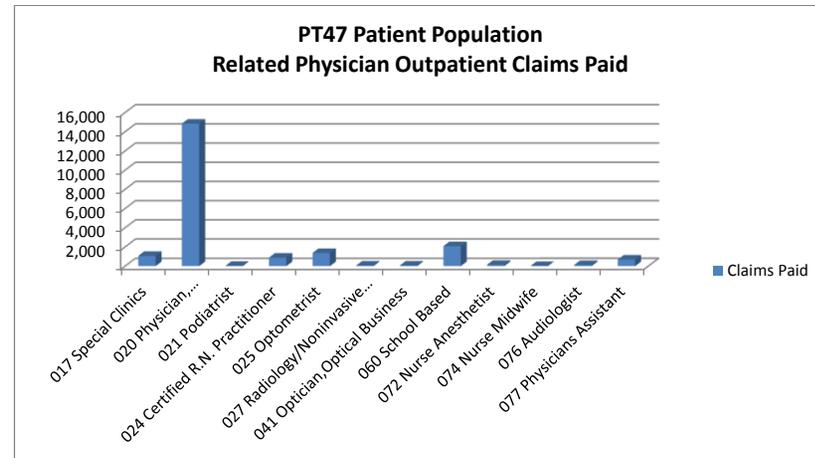
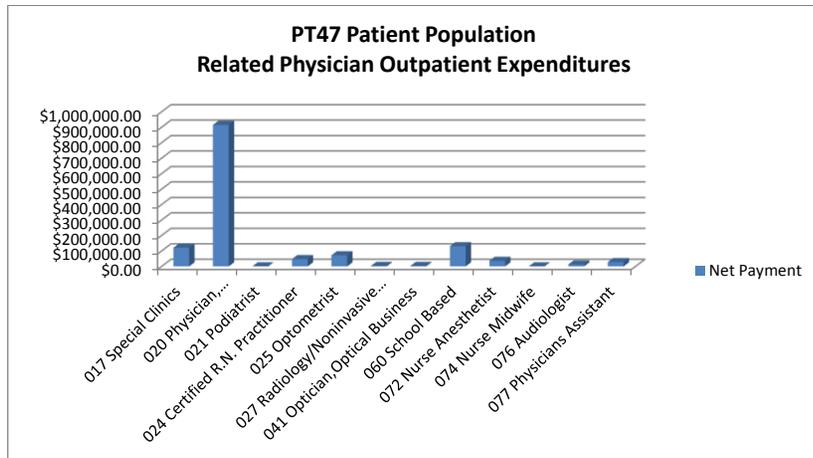
Indian Health Program Reports SFY14

Subsets Time Period: Incurred Fiscal Year	PT47 Patients FY14			
	FY 2014			
	Claims Paid	Charge Submitted	Allowed Amount	Net Payment
Provider Type Claim NV w Code				
017 Special Clinics	1,065	\$120,028.57	\$124,727.19	\$120,831.55
020 Physician, M.D.,Osteopath (POS=Outpatient)	14,839	\$4,873,994.26	\$1,233,465.07	\$915,029.58
021 Podiatrist	25	\$4,270.00	\$1,057.91	\$844.30
024 Certified R.N. Practitioner	885	\$165,116.68	\$59,205.79	\$47,183.56
025 Optometrist	1,373	\$98,430.10	\$76,841.40	\$71,948.00
027 Radiology/Noninvasive Diag Ctr	59	\$10,760.25	\$4,477.90	\$3,161.86
041 Optician,Optical Business	63	\$3,436.48	\$3,161.10	\$3,161.10
060 School Based	2,078	\$130,945.65	\$130,945.65	\$130,945.65
072 Nurse Anesthetist	137	\$125,039.00	\$38,482.74	\$36,331.09
074 Nurse Midwife	17	\$1,418.89	\$627.63	\$627.63
076 Audiologist	121	\$17,183.31	\$12,826.37	\$12,592.04
077 Physicians Assistant	687	\$217,720.05	\$33,916.61	\$28,270.40
Total	21,349	\$5,768,343.24	\$1,719,735.36	\$1,370,926.76

Patient population identified by utilization of PT47 services during SFY14. Report details **physician outpatient** services during same timeframe.

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Indian Health Program Reports SFY14



Patient population identified by utilization of PT47 services during SFY14. Charts detail **all physician outpatient** services (by PT) utilized during same timeframe (by Net Payment or Claims Paid).

Total related SFY14 physician outpatient Net Payment expenditures: **\$1,370,926.76**

FFS Data Only

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