

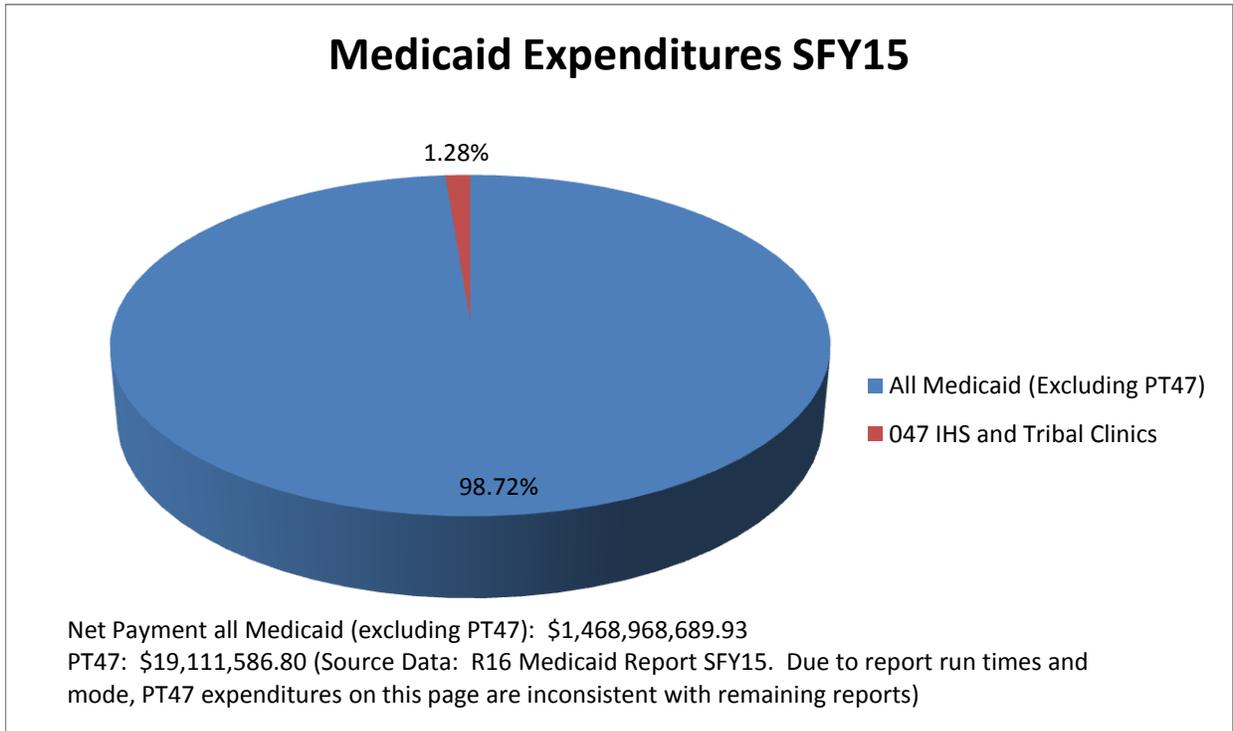
Indian Health Program

Fee for Service Reports

SFY15

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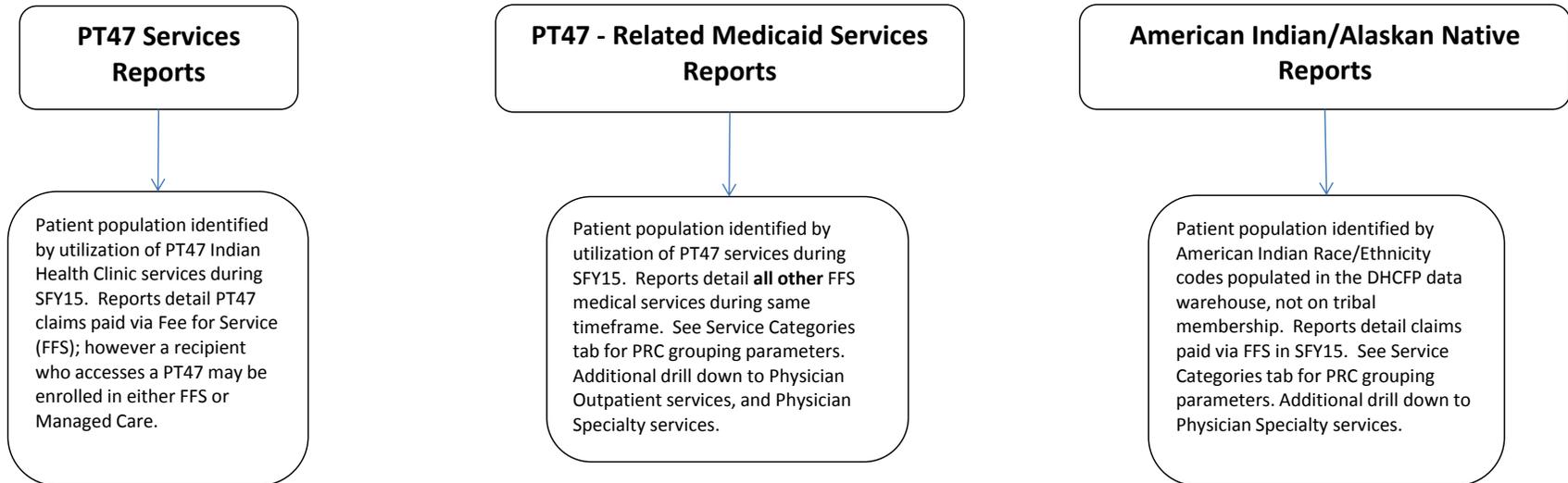
Indian Health Program Reports SFY15



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 SFY15



Indian Health Program Reports SFY15

Time Period: Incurred Fiscal Year	FY 2015				
	Patients	Claims Paid	Charge Submitted	Allowed Amount	Net Payment
Provider Type Claim NV w Code					
047 IHS And Tribal Clinics	5,365	41,198	\$19,425,885.86	\$19,557,454.00	\$19,501,699.22

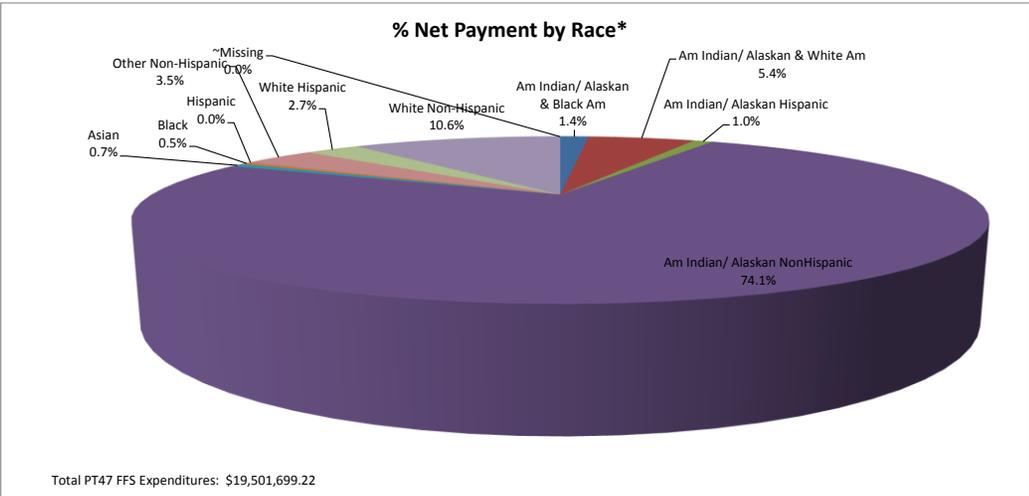
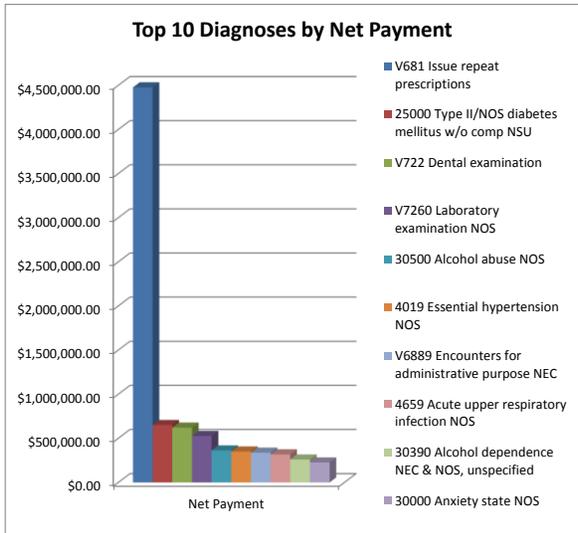
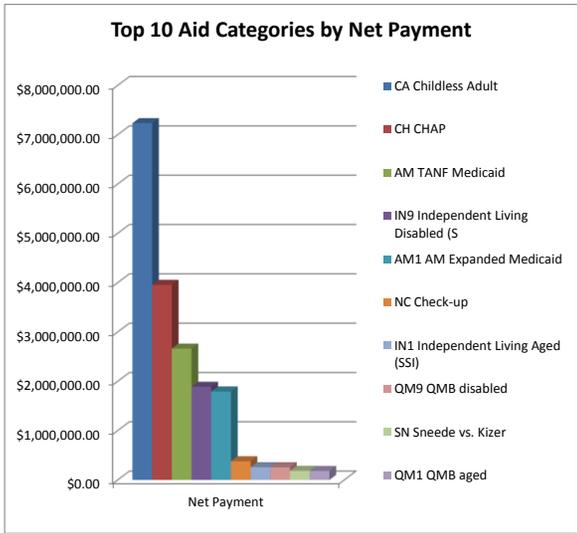
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Indian Health Program Reports SFY15

Time Period: Incurred Fiscal Year			FY 2015	
			Claims Paid	Net Payment
Provider Type Claim NV w Code	Procedure Code	Procedure		
047 IHS And Tribal Clinics	T1015	Clinic visit/encounter, all-inclusive	41,198	\$19,501,699.22

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Indian Health Program Reports SFY15



*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 SFY15

Indian Health Program Reports SFY15

PT47 Patients FY15				
FY 2015				
	Claims Paid	Charge Submitted	Allowed Amount	Net Payment
Service Category				
Dental	8,352	\$1,072,797.17	\$539,385.00	\$539,385.00
Dialysis	3,616	\$10,937,160.63	\$239,850.30	\$87,783.26
Hospital Care	47,968	\$43,680,043.24	\$4,760,847.58	\$4,699,733.01
Other	9,187	\$2,029,941.24	\$1,513,589.25	\$1,380,034.97
Other/BH/Inpatient	74	\$723,114.33	\$456,059.47	\$437,715.87
Other/BH/Outpatient	5,240	\$575,809.90	\$515,116.57	\$510,579.36
Other/Lab	5,619	\$523,285.84	\$84,477.88	\$75,571.72
Other/Pharmacy	20,218	\$3,699,064.15	\$2,176,654.64	\$2,102,038.77
Physician Inpatient	6,035	\$3,138,785.01	\$834,250.82	\$733,780.22
Physician Outpatient	29,933	\$8,603,931.06	\$2,392,606.90	\$2,060,816.27
Travel	1,549	\$2,838,524.73	\$409,617.68	\$374,964.07
Grand Total	137,791	\$77,822,457.30	\$13,922,456.09	\$13,002,402.52

Patient population identified by utilization of PT47 services during SFY15. Report details **all other** services during same timeframe. See Service Categories tab for grouping parameters.

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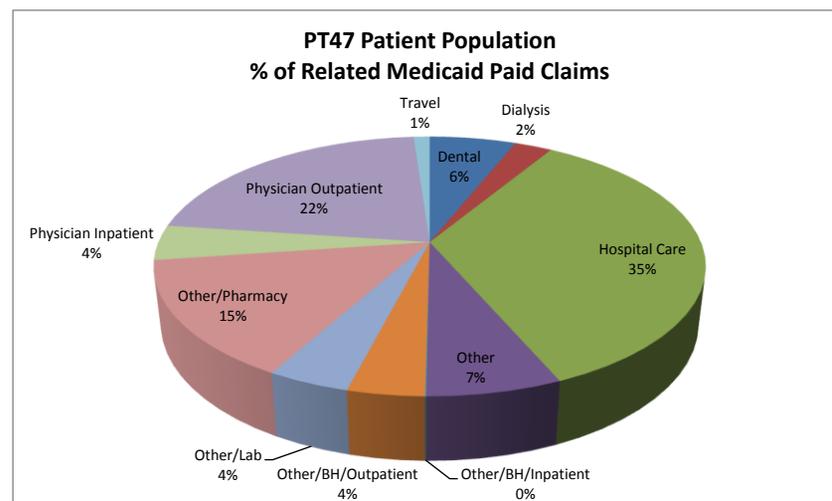
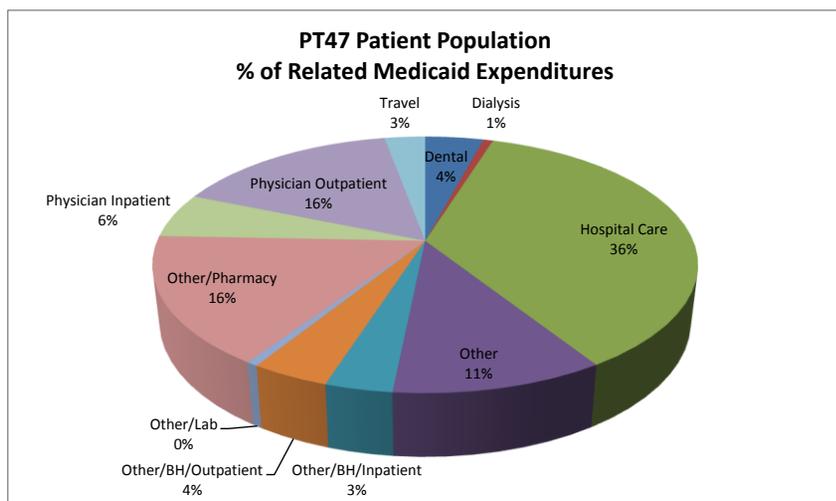
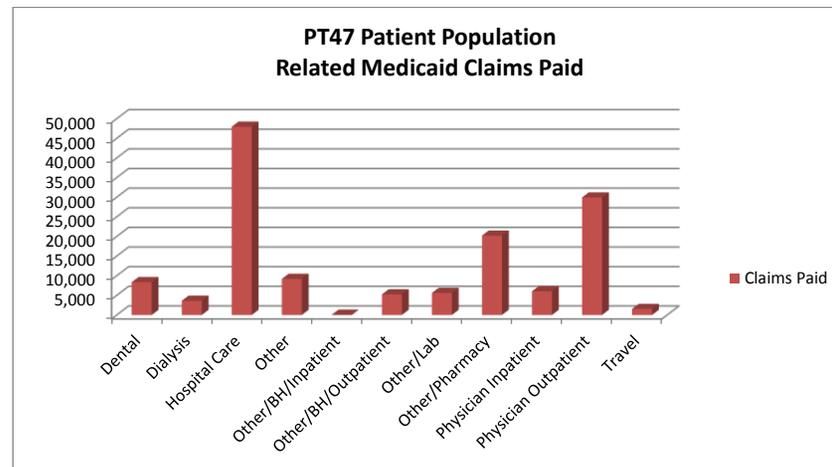
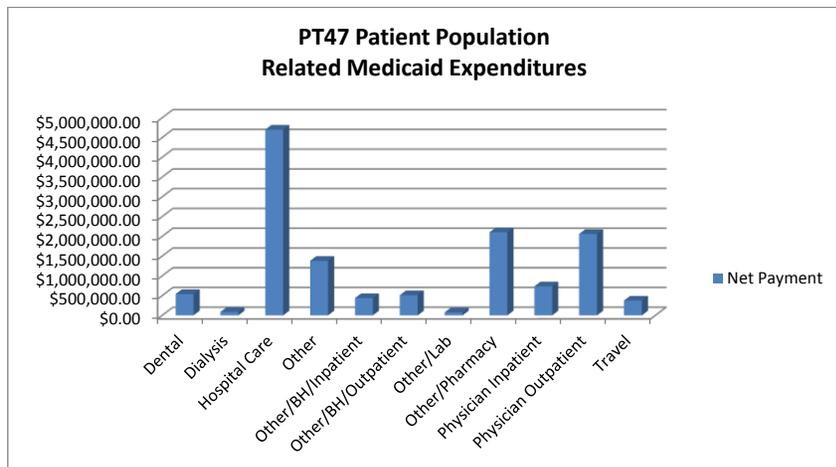
Indian Health Program Reports SFY15

Service Categories (grouped by Provider Types)

Hospital Care	Physician Outpatient	Physician Inpatient	Travel	Dental	Dialysis	Other				
						Pharmacy	Laboratory	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								PT68 ICF-MR	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 SFY15



Patient population identified by utilization of PT47 services during SFY15. Charts detail **all other** services utilized during same timeframe (by Net Payment or Claims Paid).

Total related SFY15 Net Payment expenditures (excluding PT47): **\$13,002,402.52**

FFS Data Only

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.

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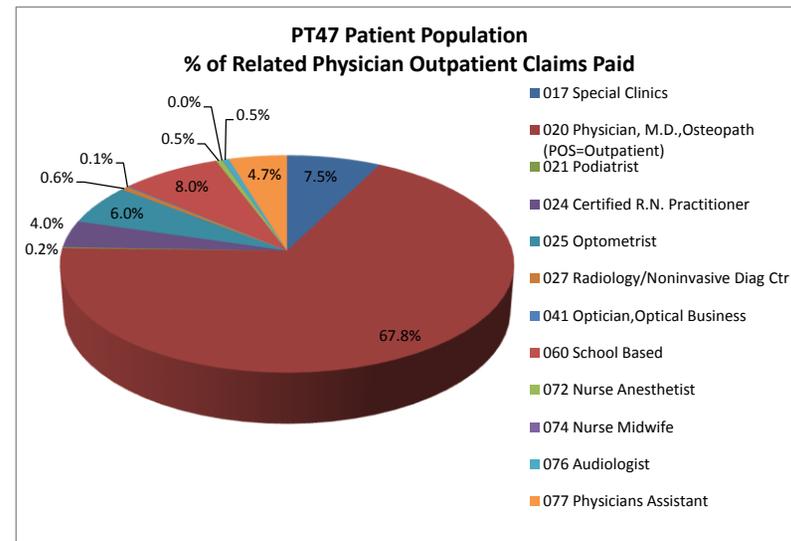
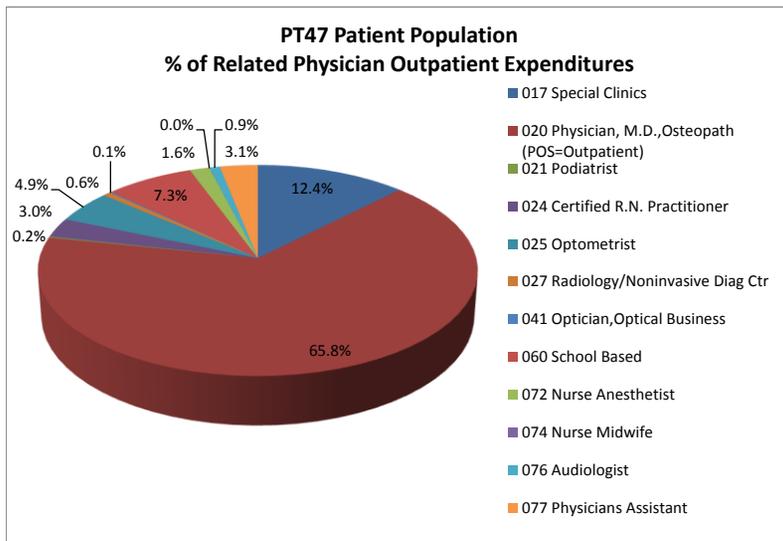
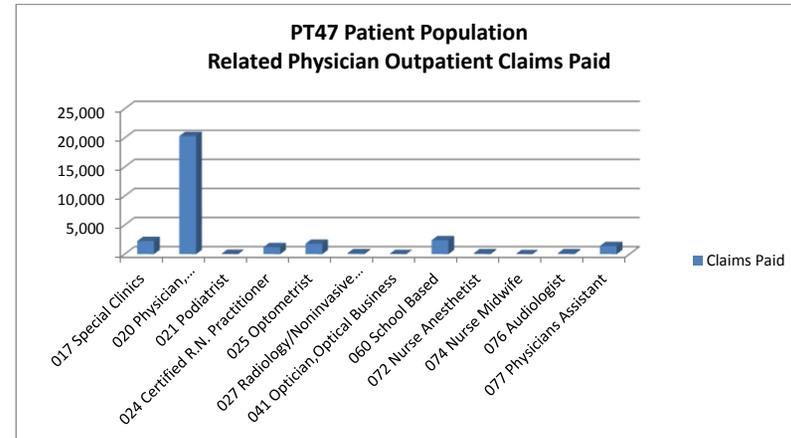
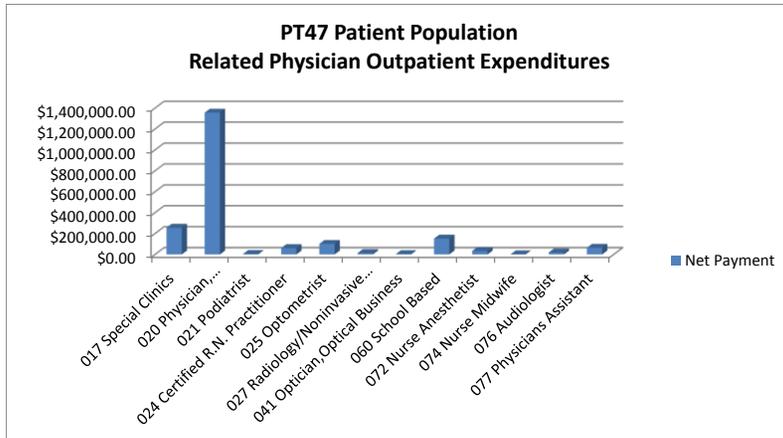
Indian Health Program Reports SFY15

Subsets Time Period: Incurred Fiscal Year	PT47 Patients FY15			
	FY 2015			
	Claims Paid	Charge Submitted	Allowed Amount	Net Payment
Provider Type Claim NV w Code				
017 Special Clinics	2,255	\$265,778.21	\$260,870.21	\$255,777.38
020 Physician, M.D.,Osteopath (POS=Outpatient)	20,308	\$7,054,599.22	\$1,652,623.09	\$1,356,703.35
021 Podiatrist	46	\$14,600.50	\$3,497.07	\$3,187.05
024 Certified R.N. Practitioner	1,202	\$279,104.36	\$71,598.92	\$60,854.42
025 Optometrist	1,794	\$131,476.10	\$105,304.17	\$101,053.06
027 Radiology/Noninvasive Diag Ctr	172	\$32,441.05	\$15,648.22	\$13,008.70
041 Optician,Optical Business	41	\$5,088.47	\$3,083.52	\$3,083.52
060 School Based	2,403	\$151,296.82	\$151,296.82	\$151,296.82
072 Nurse Anesthetist	147	\$128,571.00	\$35,909.87	\$33,268.33
074 Nurse Midwife	10	\$983.00	\$265.00	\$265.00
076 Audiologist	152	\$28,068.40	\$18,168.78	\$18,052.10
077 Physicians Assistant	1,403	\$511,923.93	\$74,341.23	\$64,266.54
Total	29,933	\$8,603,931.06	\$2,392,606.90	\$2,060,816.27

Patient population identified by utilization of PT47 services during SFY15. Report details **physician outpatient** services during same timeframe.

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Indian Health Program Reports SFY15



Patient population identified by utilization of PT47 services during SFY15. Charts detail all physician outpatient services (by PT) utilized during same timeframe (by Net Payment or Claims Paid).

Total related SFY15 physician outpatient Net Payment expenditures: **\$2,060,816.27**

FFS Data Only

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.

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Indian Health Program Reports SFY15

Subsets Time Period: Incurred Fiscal Year			PT47 Patients FY15			
			FY 2015			
			Claims Paid	Charge Submitted	Allowed Amount	Net Payment
Provider Type Claim NV w Code	Provider Specialty Claim NV Code	Provider Specialty Claim NV				
020 Physician, M.D.,Osteopath	111	EMERGENCY MEDICINE	3,125	\$1,874,114.24	\$262,851.02	\$237,909.25
	218	DIAGNOSTIC RADIOLOGY	2,500	\$441,661.41	\$120,487.44	\$110,108.64
	072	RADIOLOGY	2,792	\$476,684.56	\$127,387.36	\$111,082.06
	053	FAMILY PRACTICE	1,950	\$394,951.40	\$102,042.43	\$69,667.66
	060	INTERNAL MEDICINE	2,528	\$581,603.62	\$175,645.63	\$133,608.99
	057	ANESTHESIOLOGY	629	\$742,492.26	\$154,213.19	\$134,734.20
	062	OBSTETRICS AND GYNECOLOGY	977	\$700,492.77	\$283,020.30	\$271,198.81
	139	PEDIATRICS	941	\$202,235.34	\$50,536.61	\$50,340.86
	106	CARDIO-VASCULAR	1,080	\$365,705.67	\$93,100.63	\$72,434.92
	066	PATHOLOGY	405	\$106,467.38	\$45,098.31	\$38,651.12
	064	ORTHOPEDIC SURGERY	888	\$619,589.00	\$140,661.18	\$123,015.91
	073	GENERAL SURGERY	611	\$431,715.12	\$104,595.50	\$90,820.99
	065	OTOLARYNGOLOGY	365	\$156,173.32	\$41,338.59	\$36,498.80
	114	GASTROENTEROLOGY	445	\$187,419.94	\$47,323.52	\$43,067.61
	063	OPHTHALMOLOGY	735	\$293,372.93	\$87,633.98	\$62,883.15
	000	NO SPECIALTY	348	\$136,626.10	\$50,419.28	\$47,260.18
	126	NEUROLOGY	376	\$135,586.73	\$46,367.59	\$40,115.25
	134	PAIN MANAGEMENT	1,056	\$335,176.10	\$62,769.45	\$47,039.74
	146	PSYCHIATRY	716	\$115,667.59	\$53,545.45	\$47,804.36
	149	PULMONARY DISEASES	290	\$140,300.57	\$36,453.43	\$29,510.62
	125	NEPHROLOGY	675	\$347,937.74	\$83,925.93	\$24,598.45
	152	RHEUMATOLOGY	167	\$35,505.05	\$11,731.24	\$8,130.27
	068	PHYS MED/REHAB	393	\$119,896.85	\$25,889.77	\$21,249.63
	128	NUCLEAR MEDICINE	86	\$11,522.78	\$3,014.41	\$2,655.28
	156	UROLOGIC SURGERY	221	\$76,111.06	\$28,900.93	\$14,627.51
Total			24,299	\$9,029,009.53	\$2,238,953.17	\$1,869,014.26

Patient population identified by utilization of PT47 services during SFY15. Report details all other Provider Type 20 (Physician) services by Specialty during same timeframe. Only the top 25 (by patient count) PT20 Specialties are listed.

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Fee-for-Service Indian Health Program
American Indian/Alaskan Native Expenditures SFY15

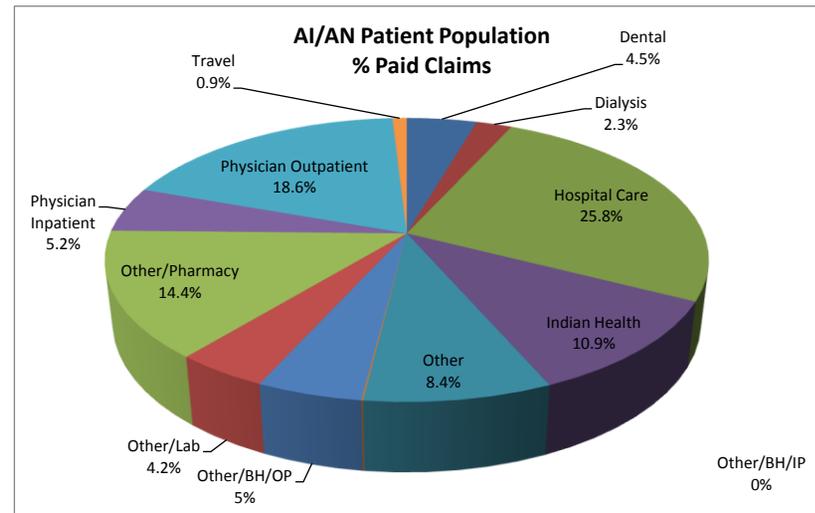
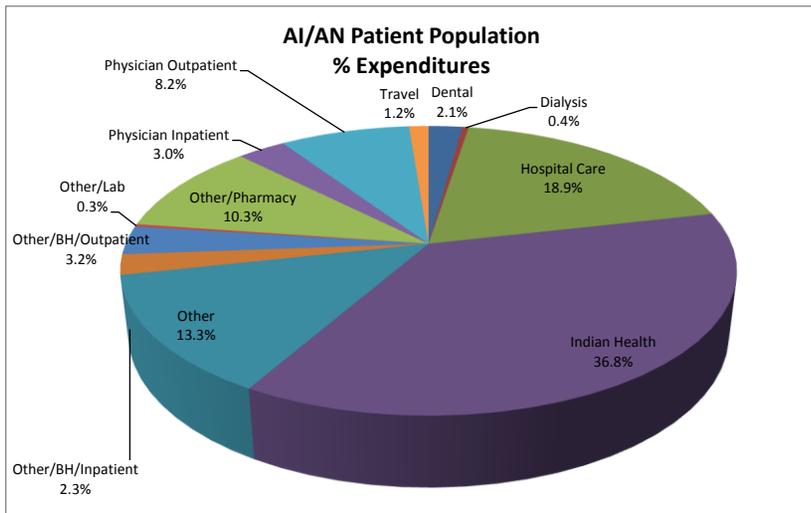
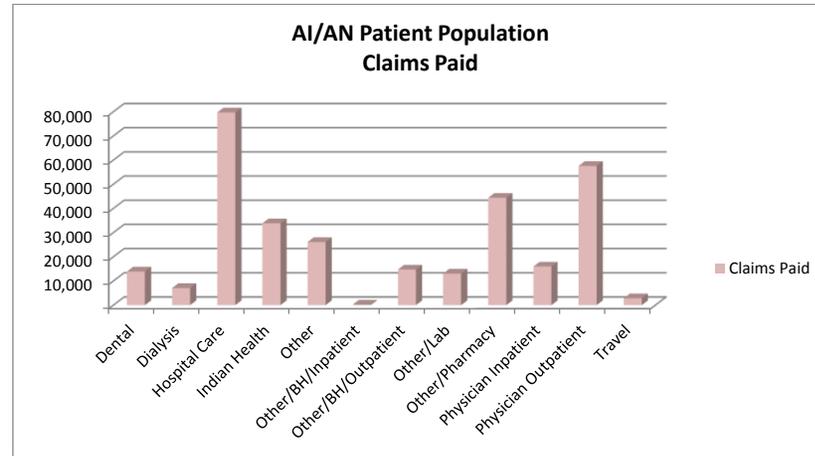
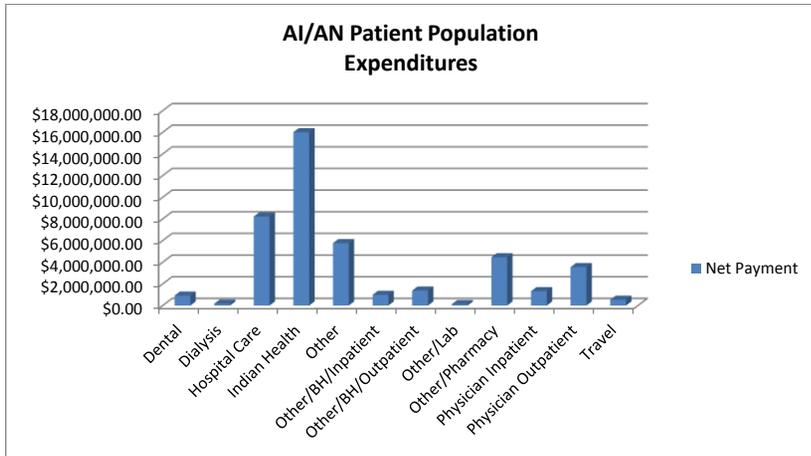
Indian Health Program Reports SFY15

Subsets Time Period: Incurred Fiscal Year	American Indian Race Codes_ Claim Id no Void			
	FY 2015			
	Claims Paid	Charge Submitted	Allowed Amount	Net Payment
Service Category				
Dental	13,903	\$1,780,008.82	\$922,800.13	\$922,211.75
Dialysis	7,079	\$19,913,940.59	\$474,055.08	\$168,709.64
Hospital Care	79,709	\$94,070,882.64	\$9,691,071.84	\$8,223,912.01
Indian Health	33,863	\$15,956,784.44	\$16,059,910.00	\$16,013,424.36
Other	26,102	\$8,202,330.00	\$6,544,944.20	\$5,766,028.68
Other/BH/Inpatient	231	\$1,787,141.51	\$1,184,911.79	\$990,224.21
Other/BH/Outpatient	14,720	\$1,630,370.71	\$1,409,514.04	\$1,386,102.06
Other/Lab	13,054	\$1,184,319.67	\$163,594.12	\$127,800.98
Other/Pharmacy	44,424	\$8,708,530.58	\$4,717,097.68	\$4,459,004.27
Physician Inpatient	15,971	\$6,508,089.19	\$1,742,015.89	\$1,324,019.23
Physician Outpatient	57,578	\$16,222,562.73	\$4,514,272.03	\$3,552,483.72
Travel	2,838	\$4,217,733.30	\$644,647.26	\$531,677.30
Grand Total	309,472	\$180,182,694.18	\$48,068,834.06	\$43,465,598.21

Patients are identified by American Indian Race/Ethnicity codes populated in the DHCFP data warehouse, and not on tribal membership. See Service Categories tab for grouping parameters.

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Indian Health Program Reports SFY15



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Total American Indian/Alaskan Native SFY15 Net Payment expenditures: **\$43,465,598.21**

FFS Data Only

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Indian Health Program Reports SFY15

Subsets Time Period: Incurred Fiscal Year			American Indian Race Codes_Claim Id no Void			
			FY 2015			
Provider Type Claim NV w Code	Provider Specialty Claim NV Code	Provider Specialty Claim NV	Claims Paid	Charge Submitted	Allowed Amount	Net Payment
020 Physician, M.D.,Osteopath	111	EMERGENCY MEDICINE	5,190	\$3,480,121.26	\$446,178.83	\$362,280.65
	218	DIAGNOSTIC RADIOLOGY	5,017	\$902,172.82	\$262,464.05	\$204,558.65
	072	RADIOLOGY	4,008	\$674,920.59	\$181,418.35	\$148,175.94
	053	FAMILY PRACTICE	4,166	\$798,496.23	\$224,530.38	\$148,747.38
	060	INTERNAL MEDICINE	6,952	\$1,541,709.97	\$455,781.16	\$276,473.18
	057	ANESTHESIOLOGY	1,078	\$1,232,405.27	\$258,083.15	\$212,219.84
	139	PEDIATRICS	2,668	\$571,497.19	\$137,291.40	\$134,842.43
	106	CARDIO-VASCULAR	2,359	\$672,857.19	\$182,377.53	\$114,619.68
	062	OBSTRETICS AND GYNECOLOGY	1,710	\$1,108,796.39	\$447,245.13	\$410,396.64
	066	PATHOLOGY	681	\$181,477.42	\$72,190.34	\$54,759.35
	064	ORTHOPEDIC SURGERY	1,352	\$1,018,751.31	\$225,982.99	\$178,637.60
	000	NO SPECIALTY	965	\$371,133.42	\$139,205.91	\$98,832.26
	073	GENERAL SURGERY	1,280	\$737,061.42	\$183,260.95	\$142,782.03
	063	OPHTHALMOLOGY	1,187	\$454,219.66	\$133,694.01	\$86,030.93
	114	GASTROENTEROLOGY	685	\$287,988.49	\$72,562.69	\$55,694.72
	146	PSYCHIATRY	2,014	\$350,912.19	\$151,828.26	\$119,289.96
	126	NEUROLOGY	704	\$249,480.53	\$81,936.10	\$62,633.99
	065	OTOLARYNGOLOGY	524	\$199,636.91	\$56,079.70	\$44,229.39
	134	PAIN MANAGEMENT	2,131	\$1,041,291.74	\$134,932.29	\$99,624.14
	125	NEPHROLOGY	1,589	\$837,830.74	\$183,678.77	\$50,537.12
	149	PULMONARY DISEASES	719	\$241,215.79	\$66,176.12	\$47,757.67
	068	PHYS MED/REHAB	752	\$165,561.22	\$45,892.70	\$32,244.16
	156	UROLOGIC SURGERY	353	\$121,289.06	\$40,634.61	\$20,249.73
	128	NUCLEAR MEDICINE	119	\$14,944.64	\$3,950.63	\$3,284.55
	152	RHEUMATOLOGY	185	\$51,729.49	\$25,638.08	\$9,420.76
	Total		48,388	\$17,307,500.94	\$4,213,014.13	\$3,118,322.75

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