

Behavioral Health Informational Report Overview



Report Release: 2018 JAN

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Introduction

The following is a new informational report which subtotals the behavioral health Medicaid reimbursements for your practice, grouped by primary behavioral health diagnosis found on claims. This report will enable your practice to profile their Medicaid reimbursements and compare their reimbursements to the average of all BH providers. Reimbursements are graphically displayed based on claims frequency, group cost and patient age. Reimbursements are also detailed by beneficiary across diagnosis groupings. This report will be published quarterly, and future iterations will add quality measures.

Transitional Report

The Behavioral Health Informational Report is currently a transitional report. It will evolve over time as Arkansas Medicaid's Behavioral Health Transformation efforts come to full fruition. Behavioral Health Transformation has implemented a new procedure coding system that categorizes behavioral health cases into three tiers of service based on their severity. Tiers 2 & 3 are the more severe cases, and will ultimately become the financial responsibility of a provider led managed care hybrid system. Over time, Tier 2 & 3 services will drop from this report leaving only Tier 1 services. Therefore, the reports created during 2018 may contain a combination of all three tiers.

Sections in this Report

- **Behavioral Health Summary** - a cost summary by diagnosis grouping which lists the number of claims, number of patients, total amount reimbursed, average cost per beneficiary, and the average cost comparison across all providers.
- **Distribution of Claims by Primary Diagnosis Category** - a chart displaying the frequency of your claims based on primary diagnosis by diagnosis grouping.
- **Average Cost Per Patient** – a chart displaying your average cost per beneficiary by diagnosis grouping.
- **Distribution of Unique Beneficiaries by Age Category** - a chart displaying the distribution of your behavioral health beneficiaries by their age.
- **Behavioral Health Detailed Cost Information by Provider** - a detailed listing for each performing provider which lists each beneficiary under their care, displaying the frequency of claims and cost by diagnosis grouping.

Where to Find More Information

More information about this report, including diagnosis code grouping details and claims inclusion/exclusion parameters, can be found at www.paymentinitiative.org.