



ALASKA MEDICAID DATA BOOK

SFY 2016 and SFY 2017

State of Alaska

Department of Health and Social Services

Prepared for:
State of Alaska, Department of Health and Social Services

Prepared by:
Robert M. Damler
FSA, MAAA
Principal and Consulting Actuary

Jeremy A. Cunningham
FSA, MAAA
Consulting Actuary

650 California Street
Suite 1700
San Francisco, CA 94108 USA

Tel +1 415 403 1333
Fax +1 415 403 1334

milliman.com

Table of Contents

I. BACKGROUND.....	2
II. EXECUTIVE SUMMARY	3
III. METHODOLOGY	5
Data Sources.....	5
Demographic Logic	6
Service Category Logic	6
Service Category Overrides.....	7
Service Category Examples	9
Utilization	9
Paid Amounts.....	9
Additional Summaries	9
CDPS+Rx Risk Scores	9
AHRQ PQI Logic.....	10
Readmission Rates Logic	10
Emergency Room Avoidable Costs	10
Prescription Drug Review	11
IV. LIMITATIONS.....	12
APPENDIX A: HIGH LEVEL SUMMARIES	
APPENDIX B: DETAILED SUMMARIES – COMPOSITE POPULATION BY REGION	
APPENDIX C: DETAILED SUMMARIES – STATEWIDE BY POPULATION AND RATE CELL	
APPENDIX D: CDPS RISK SCORE SUMMARIES	
APPENDIX E: ADDITIONAL SUMMARIES	
REFERENCE A: POPULATION LOGIC	
REFERENCE B: ZIP CODE TO REGION CROSSWALK	

I. BACKGROUND

Milliman, Inc. (Milliman) has been retained by the State of Alaska, Department of Health and Social Services (DHSS) to provide actuarial and consulting services related to the State of Alaska's Medicaid Payment Reform initiatives outlined in Senate Bill (SB) 74. To support a more widespread and current understanding of the populations and services covered under Alaska's Medicaid fee-for-service (FFS) program, we were requested to provide an update to the state fiscal year (SFY) 2015 and 2016 Data Book, which was provided to DHSS on March 7, 2017. This report provides the Data Book for SFY 2016 and SFY 2017, including summarized membership, utilization, and expenditure information as well as other key information for Medicaid enrollees. In addition, this document contains the methodology used to create the summaries included in this report.

II. EXECUTIVE SUMMARY

This Data Book uses SFY 2016 and SFY 2017 FFS claims and eligibility data to assist the State of Alaska in their Medicaid Payment Reform initiatives under SB 74. This Data Book consists of the following summaries:

- **Appendix A: High Level Summaries** – Each summary in Appendix A provides membership and per member per month (PMPM) cost information for tribal, non-tribal, and all members; and providers by population and rate cell. Tribal members and providers were identified using a seriatim listing provided by DHSS. There is one summary for each region for both SFY 2016 and SFY 2017.
- **Appendix B: Detailed Summaries – Composite by Region** – Each summary in Appendix B provides an actuarial cost model for tribal and non-tribal providers along with the total PMPM for each category of service. There is one summary for each region for both SFY 2016 and SFY 2017 for tribal members, non-tribal members, and all members. All populations and rate cells are represented in each of the summaries in Appendix B.
- **Appendix C: Detailed Summaries – Statewide by Population and Rate Cell** – Each summary in Appendix C is consistent with the layout of Appendix B. However, Appendix C provides splits for each population and rate cell for both SFY 2016 and SFY 2017 on a statewide basis.
- **Appendix D: Chronic Illness and Disability Payment System and MedicaidRX (CDPS+Rx) Risk Score Summaries** – Appendix D includes two summaries which provide results from the CDPS+Rx risk adjustment model on the SFY 2017 historical experience. The first summary illustrates the average risk score for each population, rate cell, and region combination in SFY 2017. Please note that population risk scores are not comparable between the disabled populations and the TANF populations because they utilize different weights. The remaining summaries in Appendix D consist of prevalence reports for each population on a statewide basis. The prevalence reports illustrate the frequency of members in each CDPS+Rx condition category as well as the corresponding weight each age/gender and condition category contributes to the overall risk score.
- **Appendix E: Additional Summaries** – Appendix E includes the following additional key information that may be helpful in understanding possible reductions from a managed environment. Each summary provides the information for each population, rate cell, and region.
 - Average monthly enrollment for tribal members, non-tribal members, and all members for both SFY 2016 and SFY 2017.
 - Agency for Healthcare Research and Quality (AHRQ) prevention quality indicators (PQI) on inpatient admissions.
 - Readmission rates calculated for any condition readmission and readmissions from the same DRG.
 - Emergency Room potentially avoidable costs, clinically developed using the primary diagnosis of each claim, separately identified for super utilizers (4 or more emergency room visits in year) and non-super utilizers.
 - The number of scripts per month and corresponding costs, separated by those receiving less than 10 scripts per month, 10-14 scripts per month, and 15+ scripts per month.

This Data Book is presented in both pdf and excel versions of the appendices. In addition to the appendices, Milliman has developed a web based application called the Dashboard for Research, Insight, and Validation of Experience (DRIVE™). DRIVE™ is a business intelligence tool that provides users a way to visualize and quickly manipulate their historical experience data. With access to DRIVE™, users will be able to dynamically see the information provided in Appendix A, B, and C in both tables and charts. They will also have the ability to drill into various dimensions and compare data across regions and time periods.

The remainder of this report will provide the methodology used to develop the aforementioned appendices.

III. METHODOLOGY

The following sections provide the methodology for assigning enrollees to the applicable demographic cohort and the claims to the appropriate service category. Additionally, there are sections describing the methodology used for CDPS+Rx risk scores, AHRQ PQI potentially avoidable inpatient hospital admissions, inpatient hospital readmission rates, emergency room potentially avoidable costs, and prescription drug review.

DATA SOURCES

DHSS provided the quarterly legislative audit data that included eligibility, medical, and retail pharmacy data paid from July 2015 to March 2018. We used historical eligibility and claims data incurred from July 2015 to June 2017 (i.e. SFY 2016 and SFY 2017) and paid through March 2018 for purposes of the Data Book illustrated in this report. As a result, SFY 2016 incurred claims data includes twenty-one months of claims runout, while SFY 2017 incurred claims data includes nine months of claims runout. The information illustrated in this report reflects unadjusted claims data. Table 1 below illustrates the estimated incurred-but-not-paid (IBNP) amounts from our analysis for SFY 2016 and SFY 2017 data on an aggregate basis by service category.

Table 1 State of Alaska Department of Health and Social Services Alaska Medicaid Data Book SFY 2016 and SFY 2017 Claims IBNP and Aggregate Completion Factors			
Service Category	Paid	Estimated IBNP	Estimated Completion Factor
SFY 2016			
Inpatient Hospital	\$ 256,958,837	\$ 520,000	1.002
Outpatient Hospital	189,352,553	60,000	1.000
Professional	307,074,157	20,000	1.000
Pharmacy	89,633,239	-	1.000
Ancillary	196,271,450	20,000	1.000
LTSS	464,023,803	90,000	1.000
Behavioral Health	211,184,994	120,000	1.001
Total/Composite	\$ 1,714,499,031	\$ 830,000	1.000
SFY 2017			
Inpatient Hospital	\$ 303,222,690	\$ 5,310,000	1.017
Outpatient Hospital	235,930,797	1,220,000	1.005
Professional	373,414,739	1,400,000	1.004
Pharmacy	120,926,976	60,000	1.000
Ancillary	218,827,015	780,000	1.004
LTSS	477,956,305	770,000	1.002
Behavioral Health	236,920,854	1,110,000	1.005
Total/Composite	\$ 1,967,199,376	\$ 10,650,000	1.005

Note: This illustration includes all Medicaid expenditures.

DHSS also provided the following data for this analysis:

- Tribal member list;
- Provider table; and,
- Tribal provider list.

DEMOGRAPHIC LOGIC

Summaries for the majority of the Medicaid eligible members are included in the Data Book. The eligibility categories, which are consistent with those used to develop the base experience used for the managed care capitation rate setting include:

- Excluded-Dual
- Excluded-Other
- Low-Income Family
- Medicaid Expansion
- Pregnant Women
- SSI/Disabled
- Waiver/Institutional

Each population was further split between Non-Tribal and Tribal members. We have also excluded members who were not classified into one of the categories listed above. Reference A documents the definitions used to map the Medicaid eligible members in Alaska to a population. Members were assigned to a given population and rate cell for each month of eligibility. In rare cases, members may switch from one population to another mid-month, or only have eligibility for part of the month. The applied logic captured each respective eligibility span by member.

Reference B illustrates a crosswalk from the five-digit zip codes in Alaska to the nine regions used for the Data Book. A member's region was assigned for each eligibility span included in the historical data. We have excluded members identified as "out of state" based on the eligibility file. We also used the tribal member seriatim list provided by DHSS to flag a member as either tribal or non-tribal for the entire historical data period.

We merged the claims data with the eligibility information by member and service date to summarize the historical claims data by the demographic information. Claims with service dates that do not fall within a Medicaid eligibility span for a member were excluded from the data book.

SERVICE CATEGORY LOGIC

Appendices B and C provide the detailed service categories used to group the claims provided by DHSS. Milliman used the following high level service categories to group the claims provided by DHSS:

- Inpatient Hospital
- Outpatient Hospital
- Professional
- Pharmacy
- Ancillary
- LTSS
- Behavioral Health

For the majority of the service categories, the claims data are mapped to the corresponding service category at the claim line level. We utilized crosswalks to aid in mapping claims data to the service categories for each of the following code types:

- Crosswalk from MS-DRG codes to the Milliman service category
- Crosswalk from revenue codes to the Milliman service category
- Crosswalk from procedure codes to the Milliman service category

To map the service category information onto the claims data for each claim line, we used each of the aforementioned crosswalks. Next, we assigned the detailed service category using the following priority:

- Set the service category equal to the service category from the MS-DRG crosswalk if it is populated (i.e. if there is a qualifying MS-DRG)
- Set the service category equal to the service category from the revenue code crosswalk if it is populated (i.e. if there is a qualifying revenue code)
- Set the service category equal to the service category from the procedure code crosswalk if it is populated (i.e. if there is a qualifying procedure code)

Although most service categories are assigned at the claim line level, there are a few exceptions to this; inpatient, outpatient emergency room, outpatient surgery, nursing home, and hospice service categories are assigned to the entire claim if one or more of the claim lines are mapped to these respective service categories. An inpatient service category is assigned to the entire claim if any claim line has a revenue room and board code. Inpatient service category assignment takes precedence over all other service categories. If there are both an outpatient emergency room and an outpatient surgery service category on one claim, the entire claim is assigned to the outpatient emergency room service category. Nursing home and then hospice claims take the lowest priority in the claim assignment hierarchy.

We did not use the crosswalks to assign pharmacy claims. Instead, we used Medi-Span's® Master Drug Data Base to assign each claim to a therapeutic class. Table 2 illustrates the therapeutic classes that were assigned to either psychotropic drugs or opioid drugs. All retail pharmacy claims mapped to therapeutic classes not included in Table 2 were grouped into the all other service category.

Table 2 State of Alaska Department of Health and Social Services Alaska Medicaid Data Book Pharmacy Claims Therapeutic Class Crosswalk		
Therapeutic Class	Therapeutic Class Description	Detailed Service Category
2816	Psychotherapeutic Agents	Psychotropic Drugs
2828	Antimanic Agents	Psychotropic Drugs
2810	Opiate Antagonists	Opioid Drugs
281000	Opiate Antagonists	Opioid Drugs
280808	Opiate Agonists	Opioid Drugs
280812	Opiate Partial Agonists	Opioid Drugs

Service Category Overrides

DHSS requested that we make certain exceptions to our logic to categorize claims into service categories. Table 3 illustrates all of the behavioral health provider types as well as other key provider types that are used in the service category overrides.

Table 3 State of Alaska Department of Health and Social Services Alaska Medicaid Data Book Key Provider Types		
Provider Type (Code)	Provider Type (Description)	Provider Type Group
002	Inpatient Psychiatric Hospital	Behavioral Health
003	Residential Psychiatric Treatment Center	Behavioral Health
008	Tribal Clinic	Primary Care
042	Psychologist	Behavioral Health
047	Home Community Based Agency	Long Term Supports and Services
048	Residential Supported Living Arrangement	Long Term Supports and Services
051	Federally Qualified Health Center	Primary Care
056	Rural Health Clinic	Primary Care
058	Private Duty Nursing Agency	Long Term Supports and Services
094	Personal Care Assistant	Long Term Supports and Services
095	Personal Care Agency	Long Term Supports and Services
107	Behavioral Health	Behavioral Health
108	Behavioral Rehabilitation Services Center	Behavioral Health
122	Substance Abuse Rehab Conversion	Behavioral Health

Table 4 illustrates the “override” logic that we used to assign certain claims to the appropriate detailed service categories.

Table 4 State of Alaska Department of Health and Social Services Alaska Medicaid Data Book Service Category Overrides	
Override Logic	Detailed Service Category
if p_blng_prov_ty_cd = '002' and providerid in ('1005540','5540')	Inpatient Psych Hospital - API
if p_blng_prov_ty_cd = '002' and providerid not in ('1005540','5540')	Inpatient Psych Hospital – All Other
if Service_Category = 'Behavioral Health' and (modifier in ('GT','GQ') or modifier2 in ('GT','GQ'))	BH Telemedicine
if Service_Category <> 'Behavioral Health' and (modifier in ('GT','GQ') or modifier2 in ('GT','GQ'))	Telemedicine
if p_blng_prov_ty_cd in ('008','051','056')	FQHC/RHC/Tribal Clinic
if p_blng_prov_ty_cd = '003' and provider_state = "Alaska"	RPTC – In State
if p_blng_prov_ty_cd = '003' and provider_state <> "Alaska"	RPTC – Out of State
if p_blng_prov_ty_cd in ('047','048','058','094','095') and Service_Category_Detail = "BH Case Management"	Case Management

We did not make any adjustments to the procedure or revenue codes provided on the claims data. If there are non-qualifying revenue codes represented in the data, we mapped these to the “Other Outpatient” service category. Lastly, if there are non-qualifying procedure codes represented in the data, we mapped these to the “Other Ancillary” service category.

Service Category Examples

Table 5 illustrates a few examples of the service category assignment methodology that is outlined in the previous sections.

Table 5 State of Alaska Department of Health and Social Services Alaska Medicaid Data Book Behavioral Health Service Category Overrides				
MS DRG	Revenue Code	Procedure Code	Provider Type	Detailed Service Category
886	0134			IP General Hospital - MH/SA
886	0134		003	RPTC – In State/Out of State
		90837	107	Individual Therapy OP
	0450	99283	001	OP Emergency Room

Utilization

The utilization type employed for purposes of reporting for each detailed service category are listed in Appendix B and include the following:

1. Days: Reflects the number of days on the claim, calculated as the maximum line service to date less the minimum line service from date with the exception of the residential psychiatric treatment center (RPTC) services. For RPTC service categories, we used the covered days reported on the claims.
2. Visits/Scripts/Trips/Claims: The development of visits/scripts/trips/claims depends on the service category. For outpatient emergency room and outpatient surgery service categories, the visits includes the number of unique combinations of beneficiary, claim ID, and service category. For all other service categories, the visits/scripts/trips/claims includes the number of unique combinations of beneficiary, claim ID, service date, and service category.
3. Procedures: Reflects the number of claim lines mapped to the service category.

Paid Amounts

We used the line reimbursement amount from the raw legislative audit data as the paid amount from the historical claims data and pharmacy data. We have not made any adjustments to this field in the creation of the Data Book.

Please note that tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

ADDITIONAL SUMMARIES

The following sections describe the methodology utilized to create the additional summaries in Appendix D and Appendix E.

CDPS+Rx Risk Scores

We used the combined risk adjustment model Chronic Illness & Disability Payment System and MedicaidRx (CDPS+Rx) version 6.3 to provide the average risk score by population and region for SFY 2017. We have also provided a prevalence summary illustrating the proportion of individuals by population on a statewide basis identified in the CDPS+Rx demographic, diagnostic, pharmacy, and child interaction categories.

Table 6 summarizes the data collection parameters we used when developing the CDPS+Rx risk scores for Alaska’s Medicaid population.

Table 6 State of Alaska Department of Health and Social Services Alaska Medicaid Data Book CDPS+Rx Data Collection Parameters for SFY 2016	
Parameter	SFY 2017 Assumption
Data Sources	MMIS eligibility, claims, and pharmacy data
Service dates	July 1, 2016 through June 30, 2017
Data submission deadline	September 30, 2017
Enrollment period used to assign beneficiaries	June 2017
Minimum Medicaid eligibility months	Six months
Beneficiary age calculation	Age as of January 1, 2017
Diagnosis fields used	All
Diagnosis codes excluded	Certain lab and radiology, invalid newborn
Risk Score	Concurrent

We utilized the unadjusted concurrent disease weights in the risk adjustment model. For the SSI/Disabled and Waiver/Institutional populations, we utilized the disabled adults and children (DADC) disease weights. For the Medicaid Expansion, Low-Income Family, and Pregnant Women populations, we used the TANF adults and children (ADAC) disease weights. Population risk scores are not comparable between the disabled populations and the TANF populations. The total risk score for a member was calculated by summing the weights associated with the demographic, diagnostic, and pharmaceutical categories flagged by the model.

AHRQ PQI Logic

Appendix E includes potentially avoidable inpatient hospital admissions using the AHRQ PQI algorithm. We have summarized inpatient hospital PMPM costs separately for those identified as potentially avoidable by population and rate cell.

Readmission Rates Logic

Appendix E includes the acute inpatient hospital readmission rates by population for SFY 2017. We have included readmission rates for both same DRG readmissions as well as all condition readmissions (i.e. any inpatient readmission). An acute inpatient hospital stay results in a readmission if the member had at least one additional acute inpatient hospital admission between two to thirty days after the original hospital discharge date. Admissions that occur within one day of a hospital discharge are considered transfers, not readmissions. We have excluded readmissions that occurred after being discharged against medical advice.

Emergency Room Avoidable Costs

Appendix E includes a distribution of potentially avoidable emergency room (ER) costs for all members in SFY 2017 by population and rate cell. The potentially avoidable costs were identified for particular diagnosis groups, which were clinically developed using the primary diagnosis of each claim. We separated the summaries based on the number of ER visits a member had throughout the year. Members with 4 or more ER visits were considered super users.

We also summarized the PMPM ER expenditures by population, rate cell, and region.

Prescription Drug Review

Appendix E includes a summary of pharmacy costs for all members in SFY 2017 by population and rate cell. We have summarized expenditures by the number of scripts a member receives each month, separated by those receiving less than 10 scripts per month, 10-14 scripts per month, and 15+ scripts per month. In a well-managed environment, there exists a potential for savings among targeted members with a higher number of scripts. Please note that this summary excludes the following drug classes, which we typically review separately for purposes of targeting savings:

- DEA Abusive drugs
- Antidepressants
- Antipsychotics/Antimanic Agents
- Beta Blockers
- Calcium Channel Blockers
- ACE Inhibitors
- Angiotensin II Receptor Antagonists
- Bronchodilators – Anticholinergics

IV. LIMITATIONS

The services provided for this correspondence were performed under the signed contract between Milliman and the State of Alaska Department of Health and Social Services (DHSS) approved October 27, 2016 and amended on July 1, 2017.

This report has been prepared solely for the internal business use of and is only to be relied upon by the State of Alaska Department of Health and Social Services, related Divisions, and their advisors. No portion of this report may be provided to any other party without Milliman's prior written consent. Milliman does not intend to benefit or create a legal duty to any third party recipient of its work.

In performing this analysis, we relied on data and other information provided by DHSS, related Divisions, and their advisors. We have not audited or verified this data and other information. If the underlying data or information is inaccurate or incomplete, the results of our analysis may likewise be inaccurate or incomplete.

We performed a limited review of the data used directly in our analysis for reasonableness and consistency and have not found material defects in the data. If there are material defects in the data, it is possible that they would be uncovered by a detailed, systematic review and comparison of the data to search for data values that are questionable or for relationships that are materially inconsistent. Such a review was beyond the scope of our assignment.

Differences between our projections and actual amounts depend on the extent to which future experience conforms to the assumptions made for this analysis. It is certain that actual experience will not conform exactly to the assumptions used in this analysis. Actual amounts will differ from projected amounts to the extent that actual experience deviates from expected experience.

Qualifications:

Guidelines issued by the American Academy of Actuaries require actuaries to include their professional qualifications in all actuarial communications. Rob Damler and Jeremy Cunningham are members of the American Academy of Actuaries, and they meet the qualification standards for performing the analyses in this report.

APPENDIX A: HIGH LEVEL SUMMARIES

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix A - High Level Summaries

Fiscal Year: SFY 2016
Region: Statewide

Rate Cell	Tribal Members				Non-Tribal Members				All Members			
	Member Months	PMPM			Member Months	PMPM			Member Months	PMPM		
		Tribal Providers	Non-Tribal Providers	Total		Tribal Providers	Non-Tribal Providers	Total		Tribal Providers	Non-Tribal Providers	Total
Excluded-Dual												
None	43,172	473.02	1,497.91	1,970.93	97,973	16.10	1,613.72	1,629.82	141,145	155.86	1,578.30	1,734.15
Excluded-Dual Composite	43,172	\$ 473.02	\$ 1,497.91	\$ 1,970.93	97,973	\$ 16.10	\$ 1,613.72	\$ 1,629.82	141,145	\$ 155.86	\$ 1,578.30	\$ 1,734.15
Excluded-Other												
None	22	75.49	1,467.10	1,542.59	160	2,115.15	7,006.08	9,121.23	182	1,870.94	6,342.90	8,213.85
Excluded-Other Composite	22	\$ 75.49	\$ 1,467.10	\$ 1,542.59	160	\$ 2,115.15	\$ 7,006.08	\$ 9,121.23	182	\$ 1,870.94	\$ 6,342.90	\$ 8,213.85
Low-Income Family												
0-2 Months	5,871	\$ 3,246.10	\$ 3,655.51	\$ 6,901.62	7,887	\$ 42.76	\$ 4,885.68	\$ 4,928.44	13,758	\$ 1,409.76	\$ 4,360.72	\$ 5,770.48
3-12 Months	24,826	511.04	403.82	914.86	33,659	10.99	367.79	378.78	58,484	223.25	383.08	606.33
1-4 Male and Female	97,405	240.35	226.07	466.42	121,435	4.72	190.81	195.53	218,840	109.60	206.50	316.10
5-13 Male and Female	194,174	209.46	259.19	468.65	237,672	10.25	243.07	253.32	431,847	99.82	250.32	350.14
14-18 Female	41,426	343.45	572.87	916.31	53,860	13.74	521.10	534.84	95,285	157.08	543.61	700.69
14-18 Male	43,690	307.82	484.55	792.37	54,952	16.23	442.21	458.44	98,642	145.38	460.96	606.34
19-25 Female	26,858	404.91	184.21	589.12	31,634	10.54	320.00	330.54	58,492	191.62	257.65	449.27
19-25 Male	14,853	164.49	133.66	298.15	18,174	5.13	215.97	221.10	33,027	76.80	178.95	255.75
26-39 Female	52,814	514.31	279.40	793.71	72,812	16.96	489.08	506.04	125,626	226.05	400.93	626.98
26-39 Male	27,916	250.95	149.62	400.57	41,698	8.42	363.00	371.42	69,614	105.68	277.43	383.11
40+	52,134	494.54	309.18	803.71	64,983	16.39	600.63	617.01	117,117	229.23	470.89	700.12
Low-Income Family Composite	581,967	\$ 338.12	\$ 327.72	\$ 665.84	738,766	\$ 11.40	\$ 389.90	\$ 401.31	1,320,733	\$ 155.37	\$ 362.50	\$ 517.87
Medicaid Expansion												
19-25 Female	3,889	\$ 550.99	\$ 381.92	\$ 932.90	6,531	\$ 18.70	\$ 453.56	\$ 472.26	10,420	\$ 217.35	\$ 426.82	\$ 644.17
19-25 Male	5,746	353.29	405.08	758.37	7,950	18.52	490.03	508.55	13,696	158.98	454.39	613.36
26-39 Female	5,884	1,172.54	772.64	1,945.18	12,860	49.76	835.86	885.62	18,744	402.21	816.01	1,218.23
26-39 Male	8,732	737.38	467.77	1,205.15	18,934	31.59	695.67	727.25	27,665	254.35	623.74	878.09
40-54 Female	8,911	1,241.81	767.00	2,008.81	14,756	27.60	1,146.07	1,173.67	23,667	484.79	1,003.34	1,488.13
40-54 Male	9,437	1,049.95	655.87	1,705.81	17,656	40.83	1,312.20	1,353.03	27,093	392.32	1,083.59	1,475.91
55-64 Female	5,979	1,015.53	536.58	1,552.11	11,539	27.64	1,149.45	1,177.10	17,518	364.84	940.26	1,305.10
55-64 Male	6,345	995.93	686.89	1,682.83	12,709	53.90	1,273.15	1,327.05	19,054	367.59	1,077.93	1,445.52
Medicaid Expansion Composite	54,923	\$ 926.32	\$ 601.47	\$ 1,527.79	102,934	\$ 35.36	\$ 974.43	\$ 1,009.78	157,857	\$ 345.35	\$ 844.66	\$ 1,190.01
Pregnant Women												
Pregnant Women	20,969	1,392.17	740.65	2,132.83	31,754	54.93	1,158.91	1,213.84	52,722	586.78	992.56	1,579.34
Pregnant Women Composite	20,969	\$ 1,392.17	\$ 740.65	\$ 2,132.83	31,754	\$ 54.93	\$ 1,158.91	\$ 1,213.84	52,722	\$ 586.78	\$ 992.56	\$ 1,579.34
SSI/Disabled												
Adult	31,102	1,015.67	1,010.80	2,026.47	78,153	48.78	1,452.22	1,501.00	109,255	324.03	1,326.56	1,650.59
Child	10,801	320.78	1,402.92	1,723.70	20,417	30.26	1,181.24	1,211.50	31,218	130.77	1,257.94	1,388.71
SSI/Disabled Composite	41,903	\$ 836.55	\$ 1,111.87	\$ 1,948.42	98,570	\$ 44.94	\$ 1,396.09	\$ 1,441.04	140,473	\$ 281.08	\$ 1,311.31	\$ 1,592.39
Waiver/Institutional												
Child	3,492	535.96	6,925.32	7,461.28	6,820	11.10	5,516.95	5,528.05	10,312	188.83	5,993.88	6,182.71
Adult	6,044	1,408.01	7,933.20	9,341.22	20,770	73.71	8,074.98	8,148.69	26,814	374.47	8,043.02	8,417.49
Waiver/Institutional Composite	9,536	\$ 1,088.67	\$ 7,564.12	\$ 8,652.80	27,590	\$ 58.24	\$ 7,442.66	\$ 7,500.90	37,126	\$ 322.91	\$ 7,473.86	\$ 7,796.77
All Populations Composite	752,491	\$ 455.42	\$ 561.74	\$ 1,017.17	1,097,747	\$ 19.82	\$ 844.76	\$ 864.58	1,850,238	\$ 196.98	\$ 729.66	\$ 926.64

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix A - High Level Summaries

Fiscal Year: SFY 2016
Region: Anchorage Municipality

Rate Cell	Tribal Members				Non-Tribal Members				All Members			
	Member Months	PMPM			Member Months	PMPM			Member Months	PMPM		
		Tribal Providers	Non-Tribal Providers	Total		Tribal Providers	Non-Tribal Providers	Total		Tribal Providers	Non-Tribal Providers	Total
Excluded-Dual												
None	10,834	356.55	2,100.70	2,457.25	45,807	14.42	1,696.65	1,711.06	56,641	79.86	1,773.93	1,853.79
Excluded-Dual Composite	10,834	\$ 356.55	\$ 2,100.70	\$ 2,457.25	45,807	\$ 14.42	\$ 1,696.65	\$ 1,711.06	56,641	\$ 79.86	\$ 1,773.93	\$ 1,853.79
Excluded-Other												
None	7	122.41	3,235.97	3,358.38	98	0.00	7,206.46	7,206.46	105	7.92	6,949.71	6,957.63
Excluded-Other Composite	7	\$ 122.41	\$ 3,235.97	\$ 3,358.38	98	\$ 0.00	\$ 7,206.46	\$ 7,206.46	105	\$ 7.92	\$ 6,949.71	\$ 6,957.63
Low-Income Family												
0-2 Months	1,125	\$ 3,845.51	\$ 5,641.60	\$ 9,487.11	3,593	\$ 33.43	\$ 5,201.67	\$ 5,235.10	4,718	\$ 942.75	\$ 5,306.61	\$ 6,249.36
3-12 Months	5,203	535.71	885.41	1,421.11	15,615	6.67	442.86	449.53	20,818	138.89	553.47	692.36
1-4 Male and Female	21,035	228.94	171.25	400.19	57,265	0.94	192.24	193.18	78,301	62.19	186.60	248.80
5-13 Male and Female	40,952	187.54	314.26	501.80	109,532	1.62	215.19	216.81	150,484	52.21	242.15	294.36
14-18 Female	8,944	330.47	819.21	1,149.68	25,841	8.56	472.13	480.69	34,786	91.33	561.38	652.71
14-18 Male	8,788	332.24	582.06	914.30	25,692	9.23	394.68	403.91	34,479	91.55	442.44	533.99
19-25 Female	5,619	493.61	202.45	696.06	15,441	3.91	306.07	309.98	21,060	134.57	278.42	413.00
19-25 Male	2,476	218.21	94.64	312.85	8,658	0.45	203.22	203.67	11,134	48.89	179.07	227.96
26-39 Female	12,155	567.78	290.26	858.04	31,982	8.80	469.40	478.21	44,137	162.75	420.07	582.81
26-39 Male	4,082	333.75	239.79	573.54	16,847	4.48	370.51	374.99	20,929	68.70	345.01	413.72
40+	6,947	722.99	341.24	1,064.24	27,930	2.83	580.70	583.53	34,877	146.28	533.00	679.28
Low-Income Family Composite	117,328	\$ 358.71	\$ 410.13	\$ 768.85	338,395	\$ 4.18	\$ 373.77	\$ 377.95	455,723	\$ 95.46	\$ 383.13	\$ 478.58
Medicaid Expansion												
19-25 Female	1,072	\$ 760.93	\$ 537.27	\$ 1,298.20	2,896	\$ 12.30	\$ 463.39	\$ 475.69	3,968	\$ 214.60	\$ 483.36	\$ 697.95
19-25 Male	1,175	533.53	687.98	1,221.51	3,474	19.36	553.25	572.61	4,649	149.30	587.30	736.60
26-39 Female	2,049	1,549.84	620.65	2,170.48	5,535	27.02	842.98	869.99	7,584	438.40	782.92	1,221.31
26-39 Male	2,529	835.74	513.03	1,348.77	8,490	30.52	717.94	748.46	11,019	215.33	670.91	886.23
40-54 Female	2,969	1,450.94	812.89	2,263.83	5,734	16.99	1,236.88	1,253.87	8,704	506.23	1,092.22	1,598.45
40-54 Male	3,014	1,512.97	766.06	2,279.03	7,163	32.94	1,441.87	1,474.81	10,176	471.25	1,241.73	1,712.98
55-64 Female	1,570	1,463.13	538.74	2,001.87	4,423	15.47	1,274.24	1,289.70	5,993	394.65	1,081.59	1,476.24
55-64 Male	1,601	1,470.24	1,116.20	2,586.44	4,783	51.24	1,400.72	1,451.96	6,384	407.11	1,329.37	1,736.48
Medicaid Expansion Composite	15,979	\$ 1,267.32	\$ 707.73	\$ 1,975.05	42,498	\$ 27.26	\$ 1,030.20	\$ 1,057.45	58,477	\$ 366.11	\$ 942.08	\$ 1,308.19
Pregnant Women												
Pregnant Women	4,121	1,513.73	640.31	2,154.04	13,554	28.57	1,184.07	1,212.64	17,675	374.85	1,057.29	1,432.14
Pregnant Women Composite	4,121	\$ 1,513.73	\$ 640.31	\$ 2,154.04	13,554	\$ 28.57	\$ 1,184.07	\$ 1,212.64	17,675	\$ 374.85	\$ 1,057.29	\$ 1,432.14
SSI/Disabled												
Adult	10,746	1,373.03	986.07	2,359.09	37,204	41.34	1,471.66	1,513.00	47,950	339.79	1,362.83	1,702.62
Child	3,812	285.82	1,668.88	1,954.71	10,407	2.23	1,097.48	1,099.71	14,219	78.26	1,250.67	1,328.93
SSI/Disabled Composite	14,558	\$ 1,088.35	\$ 1,164.86	\$ 2,253.21	47,611	\$ 32.79	\$ 1,389.87	\$ 1,422.66	62,169	\$ 279.97	\$ 1,337.18	\$ 1,617.15
Waiver/Institutional												
Child	1,517	644.11	7,824.65	8,468.77	3,659	6.01	5,044.52	5,050.53	5,176	193.02	5,859.33	6,052.36
Adult	2,864	1,261.71	7,188.48	8,450.19	10,032	15.28	7,411.08	7,426.37	12,896	292.09	7,361.65	7,653.74
Waiver/Institutional Composite	4,381	\$ 1,047.86	\$ 7,408.77	\$ 8,456.63	13,691	\$ 12.80	\$ 6,778.62	\$ 6,791.42	18,072	\$ 263.72	\$ 6,931.38	\$ 7,195.09
All Populations Composite	167,208	\$ 555.44	\$ 802.98	\$ 1,358.42	501,654	\$ 10.68	\$ 844.64	\$ 855.32	668,863	\$ 146.86	\$ 834.22	\$ 981.09

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix A - High Level Summaries

Fiscal Year: SFY 2016
Region: Fairbanks North Star Borough

Rate Cell	Tribal Members				Non-Tribal Members				All Members			
	Member Months	PMPM			Member Months	PMPM			Member Months	PMPM		
		Tribal Providers	Non-Tribal Providers	Total		Tribal Providers	Non-Tribal Providers	Total		Tribal Providers	Non-Tribal Providers	Total
Excluded-Dual												
None	2,931	268.48	1,737.80	2,006.27	9,107	7.16	1,579.92	1,587.08	12,038	70.79	1,618.36	1,689.14
Excluded-Dual Composite	2,931	\$ 268.48	\$ 1,737.80	\$ 2,006.27	9,107	\$ 7.16	\$ 1,579.92	\$ 1,587.08	12,038	\$ 70.79	\$ 1,618.36	\$ 1,689.14
Excluded-Other												
None	1	0.00	0.00	0.00	9	0.00	4,316.26	4,316.26	10	0.00	3,888.77	3,888.77
Excluded-Other Composite	1	\$ 0.00	\$ 0.00	\$ 0.00	9	\$ 0.00	\$ 4,316.26	\$ 4,316.26	10	\$ 0.00	\$ 3,888.77	\$ 3,888.77
Low-Income Family												
0-2 Months	471	\$ 821.06	\$ 6,748.98	\$ 7,570.05	904	\$ 54.21	\$ 5,623.52	\$ 5,677.73	1,375	\$ 316.84	\$ 6,008.97	\$ 6,325.81
3-12 Months	1,817	244.80	284.16	528.97	3,961	5.75	402.90	408.65	5,778	80.92	365.56	446.48
1-4 Male and Female	6,321	126.52	213.58	340.10	12,843	0.49	206.46	206.94	19,164	42.06	208.80	250.86
5-13 Male and Female	12,080	100.18	338.53	438.71	24,481	0.10	231.59	231.68	36,562	33.17	266.92	300.09
14-18 Female	2,412	337.22	1,106.33	1,443.55	4,729	2.10	657.48	659.58	7,141	115.30	809.11	924.41
14-18 Male	2,632	210.17	968.62	1,178.79	4,966	1.34	622.15	623.48	7,598	73.68	742.18	815.86
19-25 Female	1,656	322.04	346.35	668.39	3,124	22.95	352.19	375.14	4,780	126.59	350.16	476.75
19-25 Male	747	108.31	530.37	638.67	1,441	0.00	281.27	281.27	2,188	36.98	366.32	403.30
26-39 Female	3,175	573.55	353.76	927.31	7,776	31.92	552.34	584.26	10,950	188.94	494.77	683.71
26-39 Male	1,117	221.54	233.50	455.04	3,929	1.25	362.73	363.98	5,046	50.00	334.13	384.14
40+	1,933	574.69	482.52	1,057.21	5,008	15.21	534.35	549.56	6,941	170.99	519.92	690.91
Low-Income Family Composite	34,361	\$ 232.86	\$ 513.35	\$ 746.21	73,162	\$ 6.81	\$ 425.11	\$ 431.92	107,523	\$ 79.05	\$ 453.31	\$ 532.36
Medicaid Expansion												
19-25 Female	189	\$ 758.52	\$ 317.84	\$ 1,076.36	629	\$ 70.59	\$ 610.90	\$ 681.49	818	\$ 229.61	\$ 543.16	\$ 772.77
19-25 Male	231	746.76	545.07	1,291.83	715	0.00	631.05	631.05	946	182.58	610.03	792.60
26-39 Female	729	908.12	1,118.24	2,026.36	1,524	170.49	462.31	632.81	2,253	409.24	674.62	1,083.85
26-39 Male	632	876.41	491.96	1,368.37	2,039	31.56	667.00	698.57	2,671	231.39	625.60	856.99
40-54 Female	768	1,152.05	1,049.44	2,201.49	1,411	15.81	890.59	906.40	2,179	416.21	946.57	1,362.79
40-54 Male	646	1,192.15	1,053.45	2,245.60	1,483	27.14	1,558.92	1,586.06	2,130	380.66	1,405.54	1,786.19
55-64 Female	535	1,098.27	628.22	1,726.49	1,028	15.03	1,386.60	1,401.64	1,564	386.02	1,126.87	1,512.89
55-64 Male	351	658.31	625.68	1,283.99	1,166	106.96	1,173.88	1,280.84	1,517	234.52	1,047.05	1,281.57
Medicaid Expansion Composite	4,082	\$ 981.46	\$ 821.93	\$ 1,803.39	9,995	\$ 57.16	\$ 926.77	\$ 983.93	14,077	\$ 325.18	\$ 896.37	\$ 1,221.55
Pregnant Women												
Pregnant Women	1,885	1,029.45	1,075.93	2,105.39	3,999	72.36	1,115.39	1,187.76	5,884	378.96	1,102.75	1,481.71
Pregnant Women Composite	1,885	\$ 1,029.45	\$ 1,075.93	\$ 2,105.39	3,999	\$ 72.36	\$ 1,115.39	\$ 1,187.76	5,884	\$ 378.96	\$ 1,102.75	\$ 1,481.71
SSI/Disabled												
Adult	2,932	1,111.60	1,394.30	2,505.90	7,247	33.02	1,115.97	1,148.99	10,179	343.70	1,196.14	1,539.84
Child	1,039	76.28	1,596.25	1,672.53	2,245	1.47	1,175.68	1,177.15	3,284	25.14	1,308.74	1,333.88
SSI/Disabled Composite	3,971	\$ 840.71	\$ 1,447.14	\$ 2,287.85	9,492	\$ 25.56	\$ 1,130.09	\$ 1,155.65	13,463	\$ 265.99	\$ 1,223.61	\$ 1,489.60
Waiver/Institutional												
Child	295	85.74	7,124.06	7,209.80	703	0.00	5,079.47	5,079.47	998	25.34	5,683.83	5,709.18
Adult	452	228.95	9,827.48	10,056.43	1,339	0.00	9,109.26	9,109.26	1,791	57.78	9,290.52	9,348.30
Waiver/Institutional Composite	747	\$ 172.39	\$ 8,759.87	\$ 8,932.26	2,042	\$ 0.00	\$ 7,721.92	\$ 7,721.92	2,789	\$ 46.17	\$ 7,999.92	\$ 8,046.09
All Populations Composite	47,978	\$ 379.38	\$ 842.18	\$ 1,221.57	107,807	\$ 15.46	\$ 795.39	\$ 810.85	155,785	\$ 127.54	\$ 809.80	\$ 937.34

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix A - High Level Summaries

Fiscal Year: SFY 2016
Region: Gulf Coast/Aleutian Region

Rate Cell	Tribal Members				Non-Tribal Members				All Members			
	Member Months	PMPM			Member Months	PMPM			Member Months	PMPM		
		Tribal Providers	Non-Tribal Providers	Total		Tribal Providers	Non-Tribal Providers	Total		Tribal Providers	Non-Tribal Providers	Total
Excluded-Dual												
None	3,565	213.43	1,374.15	1,587.58	3,125	3.65	2,013.72	2,017.36	6,690	115.43	1,672.90	1,788.34
Excluded-Dual Composite	3,565	\$ 213.43	\$ 1,374.15	\$ 1,587.58	3,125	\$ 3.65	\$ 2,013.72	\$ 2,017.36	6,690	\$ 115.43	\$ 1,672.90	\$ 1,788.34
Excluded-Other												
None	1	0.00	0.00	0.00	10	0.00	16,036.85	16,036.85	11	0.00	14,578.95	14,578.95
Excluded-Other Composite	1	\$ 0.00	\$ 0.00	\$ 0.00	10	\$ 0.00	\$ 16,036.85	\$ 16,036.85	11	\$ 0.00	\$ 14,578.95	\$ 14,578.95
Low-Income Family												
0-2 Months	444	\$ 3,050.94	\$ 2,361.10	\$ 5,412.03	269	\$ 90.55	\$ 3,065.00	\$ 3,155.55	713	\$ 1,934.30	\$ 2,626.60	\$ 4,560.90
3-12 Months	1,900	372.25	172.96	545.21	1,154	26.72	245.95	272.67	3,054	241.69	200.54	442.23
1-4 Male and Female	6,421	223.54	195.41	418.95	4,111	24.04	159.30	183.33	10,532	145.67	181.31	326.99
5-13 Male and Female	12,815	207.17	149.48	356.65	8,024	18.25	207.52	225.77	20,838	134.43	171.83	306.25
14-18 Female	2,723	383.24	550.00	933.24	2,028	41.49	418.01	459.49	4,751	237.34	493.65	730.98
14-18 Male	3,050	416.54	367.20	783.74	1,721	32.75	338.94	371.70	4,771	278.09	357.01	635.10
19-25 Female	1,852	369.39	94.94	464.33	968	18.51	245.08	263.59	2,819	248.95	146.47	395.43
19-25 Male	1,230	150.09	73.38	223.47	469	7.83	42.01	48.85	1,699	110.84	64.73	175.56
26-39 Female	3,505	499.60	183.96	683.57	2,359	36.34	450.65	486.99	5,864	313.24	291.25	604.48
26-39 Male	2,315	218.14	54.71	272.85	1,443	20.61	287.73	308.34	3,758	142.29	144.19	286.48
40+	3,651	541.24	266.24	807.48	2,679	44.62	527.41	572.03	6,330	331.08	376.76	707.84
Low-Income Family Composite	39,905	\$ 339.99	\$ 229.91	\$ 569.90	25,224	\$ 27.65	\$ 317.45	\$ 345.10	65,130	\$ 219.02	\$ 263.81	\$ 482.84
Medicaid Expansion												
19-25 Female	253	\$ 553.44	\$ 172.18	\$ 725.62	203	\$ 47.45	\$ 241.80	\$ 289.25	456	\$ 328.02	\$ 203.20	\$ 531.22
19-25 Male	462	537.91	352.82	890.72	208	35.75	781.85	817.60	670	382.24	485.82	868.05
26-39 Female	379	1,361.22	471.47	1,832.69	366	46.65	686.26	732.91	745	715.22	577.02	1,292.25
26-39 Male	628	611.41	153.79	765.20	510	91.45	635.99	727.44	1,139	378.37	369.91	748.28
40-54 Female	654	1,213.12	546.59	1,759.71	397	60.52	996.91	1,057.43	1,051	777.85	716.65	1,494.50
40-54 Male	684	689.00	687.91	1,376.91	633	78.17	1,721.97	1,800.14	1,317	395.48	1,184.80	1,580.28
55-64 Female	680	719.38	992.90	1,712.29	543	58.28	863.66	921.94	1,222	425.83	935.51	1,361.35
55-64 Male	718	848.42	601.72	1,450.13	527	68.78	1,404.15	1,472.94	1,245	518.56	941.22	1,459.78
Medicaid Expansion Composite	4,458	\$ 819.01	\$ 542.11	\$ 1,361.12	3,387	\$ 65.60	\$ 1,027.88	\$ 1,093.48	7,845	\$ 493.77	\$ 751.81	\$ 1,245.58
Pregnant Women												
Pregnant Women	1,571	1,458.77	538.50	1,997.27	1,075	139.83	1,165.75	1,305.58	2,647	922.89	793.35	1,716.24
Pregnant Women Composite	1,571	\$ 1,458.77	\$ 538.50	\$ 1,997.27	1,075	\$ 139.83	\$ 1,165.75	\$ 1,305.58	2,647	\$ 922.89	\$ 793.35	\$ 1,716.24
SSI/Disabled												
Adult	1,926	765.79	1,472.76	2,238.55	2,265	54.84	1,575.35	1,630.19	4,191	381.56	1,528.20	1,909.77
Child	562	357.94	1,758.54	2,116.48	478	102.09	666.59	768.68	1,040	240.35	1,256.66	1,497.01
SSI/Disabled Composite	2,488	\$ 673.67	\$ 1,537.31	\$ 2,210.97	2,743	\$ 63.07	\$ 1,416.99	\$ 1,480.06	5,231	\$ 353.49	\$ 1,474.21	\$ 1,827.70
Waiver/Institutional												
Child	109	557.31	4,232.75	4,790.06	90	23.60	2,703.69	2,727.29	199	315.94	3,541.22	3,857.15
Adult	280	510.74	11,885.36	12,396.10	614	1.20	13,773.01	13,774.21	894	160.79	13,181.80	13,342.59
Waiver/Institutional Composite	389	\$ 523.79	\$ 9,741.06	\$ 10,264.85	704	\$ 4.07	\$ 12,357.89	\$ 12,361.96	1,093	\$ 189.04	\$ 11,426.56	\$ 11,615.59
All Populations Composite	52,378	\$ 422.92	\$ 476.36	\$ 899.28	36,268	\$ 34.67	\$ 876.31	\$ 910.97	88,646	\$ 264.07	\$ 639.99	\$ 904.06

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix A - High Level Summaries

Fiscal Year: SFY 2016
Region: Kenai Peninsula Borough

Rate Cell	Tribal Members				Non-Tribal Members				All Members			
	Member Months	PMPM			Member Months	PMPM			Member Months	PMPM		
		Tribal Providers	Non-Tribal Providers	Total		Tribal Providers	Non-Tribal Providers	Total		Tribal Providers	Non-Tribal Providers	Total
Excluded-Dual												
None	1,852	85.23	3,622.52	3,707.76	11,482	9.48	1,960.80	1,970.28	13,334	20.00	2,191.61	2,211.61
Excluded-Dual Composite	1,852	\$ 85.23	\$ 3,622.52	\$ 3,707.76	11,482	\$ 9.48	\$ 1,960.80	\$ 1,970.28	13,334	\$ 20.00	\$ 2,191.61	\$ 2,211.61
Excluded-Other												
None	1	0.00	5.30	5.30	22	0.00	2,006.89	2,006.89	23	0.00	1,919.86	1,919.86
Excluded-Other Composite	1	\$ 0.00	\$ 5.30	\$ 5.30	22	\$ 0.00	\$ 2,006.89	\$ 2,006.89	23	\$ 0.00	\$ 1,919.86	\$ 1,919.86
Low-Income Family												
0-2 Months	303	\$ 1,613.32	\$ 3,146.33	\$ 4,759.65	819	\$ 0.00	\$ 4,107.12	\$ 4,107.12	1,122	\$ 435.68	\$ 3,847.66	\$ 4,283.34
3-12 Months	1,233	152.00	160.12	312.13	3,322	7.25	376.04	383.29	4,555	46.43	317.60	364.03
1-4 Male and Female	4,337	89.50	321.28	410.77	12,639	7.71	242.27	249.99	16,977	28.61	262.46	291.07
5-13 Male and Female	8,971	171.52	347.93	519.45	24,182	48.50	326.69	375.19	33,152	81.79	332.44	414.23
14-18 Female	1,880	237.16	467.20	704.37	5,637	27.63	579.72	607.35	7,517	80.04	551.57	631.62
14-18 Male	1,789	198.78	673.95	872.73	5,645	48.82	338.31	387.14	7,434	84.92	419.10	504.01
19-25 Female	1,103	203.70	249.63	453.33	3,085	5.20	337.18	342.38	4,188	57.50	314.11	371.61
19-25 Male	506	58.84	331.63	390.47	1,980	3.62	320.82	324.44	2,486	14.86	323.02	337.88
26-39 Female	2,314	331.93	457.58	789.51	7,847	13.81	522.40	536.21	10,161	86.27	507.63	593.90
26-39 Male	1,022	340.88	245.15	586.02	5,088	7.65	420.64	428.30	6,111	63.40	391.28	454.68
40+	1,640	339.05	861.83	1,200.88	7,729	19.67	661.20	680.87	9,369	75.56	696.31	771.87
Low-Income Family Composite	25,098	\$ 212.43	\$ 434.90	\$ 647.33	77,972	\$ 26.27	\$ 433.20	\$ 459.47	103,070	\$ 71.60	\$ 433.62	\$ 505.22
Medicaid Expansion												
19-25 Female	186	\$ 423.29	\$ 201.35	\$ 624.64	692	\$ 16.57	\$ 460.46	\$ 477.03	878	\$ 102.87	\$ 405.48	\$ 508.35
19-25 Male	264	179.83	301.78	481.61	842	9.48	286.56	296.04	1,107	50.15	290.19	340.34
26-39 Female	345	588.96	690.87	1,279.83	1,568	58.66	1,236.38	1,295.04	1,913	154.38	1,137.91	1,292.29
26-39 Male	340	456.58	703.23	1,159.81	2,020	12.05	862.91	874.96	2,360	76.08	839.91	915.99
40-54 Female	491	1,178.83	1,269.67	2,448.50	2,201	20.68	1,214.19	1,234.87	2,692	231.88	1,224.31	1,456.19
40-54 Male	440	447.60	713.85	1,161.45	2,169	41.95	1,100.40	1,142.35	2,609	110.37	1,035.20	1,145.57
55-64 Female	249	612.30	1,116.44	1,728.75	1,559	23.38	1,105.44	1,128.82	1,807	104.38	1,106.95	1,211.34
55-64 Male	245	1,108.09	1,535.55	2,643.65	1,769	29.82	1,335.66	1,365.47	2,014	160.96	1,359.97	1,520.92
Medicaid Expansion Composite	2,560	\$ 657.84	\$ 853.80	\$ 1,511.63	12,820	\$ 28.19	\$ 1,044.20	\$ 1,072.40	15,380	\$ 133.01	\$ 1,012.51	\$ 1,145.51
Pregnant Women												
Pregnant Women	1,076	670.26	1,010.03	1,680.29	3,442	21.16	1,307.67	1,328.83	4,518	175.73	1,236.79	1,412.53
Pregnant Women Composite	1,076	\$ 670.26	\$ 1,010.03	\$ 1,680.29	3,442	\$ 21.16	\$ 1,307.67	\$ 1,328.83	4,518	\$ 175.73	\$ 1,236.79	\$ 1,412.53
SSI/Disabled												
Adult	1,180	680.34	2,251.41	2,931.75	8,699	38.95	1,905.31	1,944.26	9,879	115.57	1,946.65	2,062.22
Child	512	183.41	1,087.93	1,271.34	1,819	242.81	1,375.42	1,618.23	2,331	229.76	1,312.28	1,542.04
SSI/Disabled Composite	1,692	\$ 529.97	\$ 1,899.34	\$ 2,429.31	10,518	\$ 74.21	\$ 1,813.66	\$ 1,887.87	12,210	\$ 137.37	\$ 1,825.54	\$ 1,962.91
Waiver/Institutional												
Child	240	728.95	11,248.71	11,977.65	545	14.36	6,541.87	6,556.23	785	232.83	7,980.90	8,213.74
Adult	400	1,399.23	10,683.93	12,083.17	3,571	7.52	8,873.29	8,880.81	3,971	147.71	9,055.68	9,203.39
Waiver/Institutional Composite	640	\$ 1,147.88	\$ 10,895.72	\$ 12,043.60	4,116	\$ 8.43	\$ 8,564.59	\$ 8,573.01	4,756	\$ 161.76	\$ 8,878.28	\$ 9,040.04
All Populations Composite	32,920	\$ 289.38	\$ 944.24	\$ 1,233.62	120,372	\$ 28.30	\$ 1,067.95	\$ 1,096.25	153,291	\$ 84.37	\$ 1,041.38	\$ 1,125.75

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix A - High Level Summaries

Fiscal Year: SFY 2016
Region: MatSu Borough

Rate Cell	Tribal Members				Non-Tribal Members				All Members			
	Member Months	PMPM			Member Months	PMPM			Member Months	PMPM		
		Tribal Providers	Non-Tribal Providers	Total		Tribal Providers	Non-Tribal Providers	Total		Tribal Providers	Non-Tribal Providers	Total
Excluded-Dual												
None	2,181	97.99	2,291.78	2,389.77	16,512	1.43	1,224.20	1,225.63	18,693	12.70	1,348.76	1,361.46
Excluded-Dual Composite	2,181	\$ 97.99	\$ 2,291.78	\$ 2,389.77	16,512	\$ 1.43	\$ 1,224.20	\$ 1,225.63	18,693	\$ 12.70	\$ 1,348.76	\$ 1,361.46
Excluded-Other												
None	5	0.00	74.24	74.24	14	0.00	827.15	827.15	19	0.00	629.02	629.02
Excluded-Other Composite	5	\$ 0.00	\$ 74.24	\$ 74.24	14	\$ 0.00	\$ 827.15	\$ 827.15	19	\$ 0.00	\$ 629.02	\$ 629.02
Low-Income Family												
0-2 Months	412	\$ 2,153.17	\$ 2,334.82	\$ 4,487.99	1,608	\$ 6.47	\$ 5,144.48	\$ 5,150.95	2,019	\$ 444.20	\$ 4,571.57	\$ 5,015.76
3-12 Months	1,969	225.90	231.95	457.85	6,726	1.07	262.76	263.83	8,694	51.98	255.78	307.76
1-4 Male and Female	6,882	116.38	149.24	265.62	24,121	0.83	171.19	172.02	31,002	26.48	166.32	192.80
5-13 Male and Female	14,457	94.64	274.51	369.16	50,002	0.86	262.33	263.19	64,459	21.89	265.06	286.95
14-18 Female	2,951	237.98	578.45	816.43	10,772	1.79	480.57	482.36	13,723	52.58	501.62	554.20
14-18 Male	3,223	162.10	680.72	842.81	11,128	3.37	528.15	531.52	14,351	39.02	562.42	601.43
19-25 Female	1,725	270.39	258.38	528.77	6,357	3.14	302.41	305.55	8,082	60.18	293.02	353.20
19-25 Male	977	151.49	128.41	279.90	3,910	0.59	182.35	182.95	4,887	30.75	171.57	202.32
26-39 Female	3,363	338.86	346.29	685.15	15,135	2.41	501.09	503.49	18,497	63.57	472.95	536.52
26-39 Male	1,349	147.48	137.00	284.48	9,704	7.01	366.66	373.67	11,053	24.16	338.62	362.78
40+	1,879	393.27	443.93	837.20	13,392	1.91	659.23	661.14	15,271	50.07	632.74	682.80
Low-Income Family Composite	39,186	\$ 189.28	\$ 333.52	\$ 522.80	152,854	\$ 1.90	\$ 398.70	\$ 400.60	192,039	\$ 40.13	\$ 385.40	\$ 425.53
Medicaid Expansion												
19-25 Female	379	\$ 392.84	\$ 604.64	\$ 997.48	1,437	\$ 1.87	\$ 454.53	\$ 456.40	1,815	\$ 83.43	\$ 485.85	\$ 569.28
19-25 Male	367	201.02	215.05	416.07	1,734	0.70	470.88	471.59	2,101	35.73	426.14	461.88
26-39 Female	428	580.93	815.49	1,396.42	2,356	35.68	919.17	954.85	2,783	119.47	903.23	1,022.71
26-39 Male	418	727.70	369.16	1,096.87	3,312	1.05	604.27	605.32	3,730	82.55	577.90	660.45
40-54 Female	554	1,230.59	530.67	1,761.25	3,123	5.61	1,157.39	1,163.00	3,677	190.23	1,062.93	1,253.16
40-54 Male	373	441.35	516.91	958.26	3,470	12.08	1,112.79	1,124.87	3,844	53.77	1,054.91	1,108.69
55-64 Female	310	1,123.54	342.59	1,466.13	2,493	5.98	997.61	1,003.59	2,803	129.61	925.15	1,054.76
55-64 Male	247	623.03	640.70	1,263.73	2,387	4.20	1,194.70	1,198.90	2,634	62.22	1,142.76	1,204.98
Medicaid Expansion Composite	3,077	\$ 690.51	\$ 507.92	\$ 1,198.44	20,311	\$ 8.66	\$ 908.40	\$ 917.06	23,388	\$ 98.36	\$ 855.72	\$ 954.08
Pregnant Women												
Pregnant Women	1,294	1,279.12	664.14	1,943.26	6,663	24.00	1,047.51	1,071.50	7,958	228.15	985.15	1,213.30
Pregnant Women Composite	1,294	\$ 1,279.12	\$ 664.14	\$ 1,943.26	6,663	\$ 24.00	\$ 1,047.51	\$ 1,071.50	7,958	\$ 228.15	\$ 985.15	\$ 1,213.30
SSI/Disabled												
Adult	1,709	533.96	712.19	1,246.15	13,065	10.07	1,396.52	1,406.58	14,774	70.67	1,317.36	1,388.03
Child	1,412	182.02	1,262.22	1,444.24	3,728	1.37	1,282.99	1,284.35	5,140	50.99	1,277.28	1,328.27
SSI/Disabled Composite	3,121	\$ 374.73	\$ 961.03	\$ 1,335.77	16,793	\$ 8.14	\$ 1,371.31	\$ 1,379.45	19,914	\$ 65.59	\$ 1,307.01	\$ 1,372.60
Waiver/Institutional												
Child	420	321.60	6,833.28	7,154.88	1,078	2.25	7,392.77	7,395.02	1,498	91.79	7,235.90	7,327.69
Adult	613	307.53	9,502.01	9,809.54	3,522	7.47	6,471.00	6,478.47	4,135	51.95	6,920.34	6,972.29
Waiver/Institutional Composite	1,033	\$ 313.25	\$ 8,416.95	\$ 8,730.20	4,600	\$ 6.24	\$ 6,687.02	\$ 6,693.26	5,633	\$ 62.55	\$ 7,004.26	\$ 7,066.80
All Populations Composite	49,897	\$ 258.61	\$ 645.02	\$ 903.64	217,747	\$ 3.74	\$ 736.58	\$ 740.32	267,644	\$ 51.26	\$ 719.51	\$ 770.77

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix A - High Level Summaries

Fiscal Year: SFY 2016
Region: Northern Southeast Region

Rate Cell	Tribal Members				Non-Tribal Members				All Members			
	Member Months	PMPM			Member Months	PMPM			Member Months	PMPM		
		Tribal Providers	Non-Tribal Providers	Total		Tribal Providers	Non-Tribal Providers	Total		Tribal Providers	Non-Tribal Providers	Total
Excluded-Dual												
None	4,394	156.06	2,416.21	2,572.26	6,632	27.91	1,906.66	1,934.56	11,026	78.98	2,109.72	2,188.70
Excluded-Dual Composite	4,394	\$ 156.06	\$ 2,416.21	\$ 2,572.26	6,632	\$ 27.91	\$ 1,906.66	\$ 1,934.56	11,026	\$ 78.98	\$ 2,109.72	\$ 2,188.70
Excluded-Other												
None	-	0.00	0.00	0.00	7	0.00	1,507.23	1,507.23	7	0.00	1,507.23	1,507.23
Excluded-Other Composite	-	\$ 0.00	\$ 0.00	\$ 0.00	7	\$ 0.00	\$ 1,507.23	\$ 1,507.23	7	\$ 0.00	\$ 1,507.23	\$ 1,507.23
Low-Income Family												
0-2 Months	408	\$ 2,452.39	\$ 2,430.03	\$ 4,882.42	370	\$ 31.60	\$ 3,054.54	\$ 3,086.14	778	\$ 1,300.80	\$ 2,727.11	\$ 4,027.92
3-12 Months	1,549	341.27	156.56	497.83	1,465	23.36	224.96	248.32	3,014	186.75	189.81	376.55
1-4 Male and Female	6,942	216.88	209.78	426.66	5,233	40.80	141.53	182.33	12,175	141.20	180.45	321.65
5-13 Male and Female	12,680	226.42	351.44	577.86	10,483	54.94	260.59	315.53	23,163	148.81	310.32	459.13
14-18 Female	3,679	347.50	511.55	859.05	2,363	61.90	812.90	874.80	6,042	235.80	629.41	865.21
14-18 Male	3,391	261.86	410.94	672.80	2,760	58.12	547.98	606.10	6,151	170.44	472.43	642.87
19-25 Female	1,724	323.96	239.71	563.66	1,437	55.86	538.93	594.79	3,161	202.07	375.75	577.81
19-25 Male	1,042	112.28	250.53	362.80	866	72.27	229.45	301.72	1,908	94.12	240.97	335.09
26-39 Female	3,754	501.05	442.72	943.76	4,037	62.65	461.05	523.70	7,791	273.88	452.22	726.10
26-39 Male	1,742	266.86	224.91	491.77	2,336	20.34	214.95	235.29	4,078	125.63	219.21	344.83
40+	2,707	464.27	518.11	982.37	3,881	77.99	736.08	814.06	6,588	236.69	646.52	883.21
Low-Income Family Composite	39,618	\$ 311.73	\$ 367.32	\$ 679.05	35,232	\$ 53.59	\$ 413.25	\$ 466.84	74,850	\$ 190.22	\$ 388.94	\$ 579.16
Medicaid Expansion												
19-25 Female	370	\$ 588.66	\$ 531.69	\$ 1,120.35	403	\$ 14.95	\$ 187.85	\$ 202.79	773	\$ 289.33	\$ 352.30	\$ 641.63
19-25 Male	431	223.81	177.47	401.28	553	91.97	292.40	384.37	985	149.73	242.05	391.78
26-39 Female	529	1,430.84	1,579.21	3,010.05	1,081	20.81	643.55	664.36	1,610	483.85	950.82	1,434.67
26-39 Male	784	755.27	1,159.45	1,914.72	1,623	58.02	634.29	692.30	2,407	285.13	805.34	1,090.47
40-54 Female	951	935.36	604.68	1,540.03	1,034	128.05	946.27	1,074.32	1,985	514.84	782.61	1,297.45
40-54 Male	1,013	834.63	783.45	1,618.08	1,685	79.36	1,065.64	1,145.00	2,698	362.96	959.68	1,322.64
55-64 Female	436	998.75	272.89	1,271.64	839	88.78	1,042.05	1,130.83	1,275	400.16	778.85	1,179.01
55-64 Male	736	736.93	366.80	1,103.72	1,057	99.15	1,156.80	1,255.95	1,794	360.98	832.47	1,193.45
Medicaid Expansion Composite	5,251	\$ 833.47	\$ 718.97	\$ 1,552.45	8,276	\$ 74.79	\$ 825.74	\$ 900.53	13,526	\$ 369.30	\$ 784.29	\$ 1,153.59
Pregnant Women												
Pregnant Women	1,408	1,211.67	1,165.94	2,377.61	1,643	252.58	1,188.42	1,441.01	3,052	695.21	1,178.05	1,873.26
Pregnant Women Composite	1,408	\$ 1,211.67	\$ 1,165.94	\$ 2,377.61	1,643	\$ 252.58	\$ 1,188.42	\$ 1,441.01	3,052	\$ 695.21	\$ 1,178.05	\$ 1,873.26
SSI/Disabled												
Adult	3,210	641.45	1,091.66	1,733.12	4,764	88.27	1,463.35	1,551.63	7,974	310.96	1,313.73	1,624.69
Child	881	404.28	654.73	1,059.01	1,076	62.65	1,028.75	1,091.41	1,957	216.45	860.38	1,076.82
SSI/Disabled Composite	4,091	\$ 590.38	\$ 997.57	\$ 1,587.95	5,840	\$ 83.55	\$ 1,383.28	\$ 1,466.83	9,931	\$ 292.34	\$ 1,224.39	\$ 1,516.72
Waiver/Institutional												
Child	322	98.44	7,189.55	7,287.99	491	33.40	5,645.04	5,678.43	813	59.16	6,256.76	6,315.92
Adult	458	171.70	9,258.81	9,430.51	1,188	84.80	11,814.21	11,899.01	1,646	108.98	11,103.17	11,212.15
Waiver/Institutional Composite	780	\$ 141.45	\$ 8,404.58	\$ 8,546.03	1,679	\$ 69.77	\$ 10,010.12	\$ 10,079.89	2,459	\$ 92.51	\$ 9,500.84	\$ 9,593.35
All Populations Composite	55,541	\$ 389.69	\$ 742.20	\$ 1,131.89	59,309	\$ 62.59	\$ 1,026.60	\$ 1,089.19	114,851	\$ 220.78	\$ 889.07	\$ 1,109.84

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix A - High Level Summaries

Fiscal Year: SFY 2016
Region: Northern and Interior Region

Rate Cell	Tribal Members				Non-Tribal Members				All Members			
	Member Months	PMPM			Member Months	PMPM			Member Months	PMPM		
		Tribal Providers	Non-Tribal Providers	Total		Tribal Providers	Non-Tribal Providers	Total		Tribal Providers	Non-Tribal Providers	Total
Excluded-Dual												
None	3,235	228.33	592.36	820.69	1,725	11.53	686.92	698.45	4,960	152.93	625.25	778.18
Excluded-Dual Composite	3,235	\$ 228.33	\$ 592.36	\$ 820.69	1,725	\$ 11.53	\$ 686.92	\$ 698.45	4,960	\$ 152.93	\$ 625.25	\$ 778.18
Excluded-Other												
None	1	696.90	9,645.50	10,342.40	-	0.00	0.00	0.00	1	696.90	9,645.50	10,342.40
Excluded-Other Composite	1	\$ 696.90	\$ 9,645.50	\$ 10,342.40	-	\$ 0.00	\$ 0.00	\$ 0.00	1	\$ 696.90	\$ 9,645.50	\$ 10,342.40
Low-Income Family												
0-2 Months	423	\$ 2,939.21	\$ 3,447.05	\$ 6,386.27	127	\$ 14.26	\$ 3,755.06	\$ 3,769.32	550	\$ 2,261.67	\$ 3,518.40	\$ 5,780.07
3-12 Months	1,738	383.06	341.38	724.44	624	10.73	68.10	78.83	2,362	284.70	269.18	553.88
1-4 Male and Female	6,415	177.53	222.10	399.63	2,207	17.84	134.98	152.82	8,622	136.65	199.80	336.46
5-13 Male and Female	12,650	168.53	200.42	368.95	4,976	18.51	124.90	143.41	17,626	126.18	179.10	305.27
14-18 Female	2,782	322.79	513.04	835.83	1,227	29.93	408.56	438.49	4,009	233.15	481.07	714.22
14-18 Male	2,796	200.58	282.95	483.52	1,433	16.28	146.02	162.30	4,229	138.12	236.55	374.67
19-25 Female	1,394	302.68	195.54	498.22	381	37.78	200.60	238.38	1,775	245.81	196.63	442.44
19-25 Male	759	118.30	144.13	262.43	342	6.37	137.61	143.98	1,101	83.54	142.10	225.64
26-39 Female	3,582	420.59	382.25	802.85	1,092	28.46	322.02	350.48	4,674	329.01	368.19	697.20
26-39 Male	2,145	193.86	156.77	350.63	838	5.91	125.01	130.92	2,984	141.05	147.85	288.90
40+	3,467	596.02	400.16	996.18	1,907	79.94	377.62	457.57	5,374	412.89	392.16	805.05
Low-Income Family Composite	38,151	\$ 291.95	\$ 306.77	\$ 598.72	15,154	\$ 26.73	\$ 227.71	\$ 254.44	53,305	\$ 216.55	\$ 284.29	\$ 500.84
Medicaid Expansion												
19-25 Female	130	\$ 504.77	\$ 359.30	\$ 864.07	75	\$ 33.78	\$ 181.42	\$ 215.20	205	\$ 332.43	\$ 294.21	\$ 626.64
19-25 Male	293	286.03	443.18	729.21	55	0.00	249.14	249.14	348	240.78	412.48	653.26
26-39 Female	267	468.26	1,014.20	1,482.46	115	5.35	178.20	183.54	382	328.76	762.27	1,091.03
26-39 Male	549	500.50	534.98	1,035.48	178	45.56	685.41	730.97	727	389.00	571.85	960.85
40-54 Female	687	796.38	947.22	1,743.61	182	55.99	214.74	270.74	869	641.23	793.73	1,434.97
40-54 Male	718	548.69	765.61	1,314.30	154	55.06	677.27	732.33	872	461.57	750.02	1,211.59
55-64 Female	639	848.50	636.42	1,484.92	216	106.78	620.77	727.55	855	661.04	632.46	1,293.50
55-64 Male	738	541.57	488.22	1,029.79	313	65.12	580.51	645.63	1,051	399.50	515.74	915.24
Medicaid Expansion Composite	4,019	\$ 604.87	\$ 673.57	\$ 1,278.44	1,289	\$ 56.97	\$ 488.39	\$ 545.36	5,308	\$ 471.86	\$ 628.61	\$ 1,100.47
Pregnant Women												
Pregnant Women	1,637	1,180.10	911.66	2,091.76	536	116.36	922.01	1,038.37	2,173	917.66	914.22	1,831.88
Pregnant Women Composite	1,637	\$ 1,180.10	\$ 911.66	\$ 2,091.76	536	\$ 116.36	\$ 922.01	\$ 1,038.37	2,173	\$ 917.66	\$ 914.22	\$ 1,831.88
SSI/Disabled												
Adult	1,850	687.91	897.53	1,585.44	1,552	130.49	936.32	1,066.81	3,402	433.62	915.22	1,348.84
Child	455	221.37	646.32	867.69	283	10.24	255.26	265.50	738	140.41	496.36	636.77
SSI/Disabled Composite	2,305	\$ 595.82	\$ 847.94	\$ 1,443.76	1,835	\$ 111.95	\$ 831.28	\$ 943.23	4,140	\$ 381.35	\$ 840.56	\$ 1,221.90
Waiver/Institutional												
Child	44	222.47	828.77	1,051.24	86	0.00	3,987.37	3,987.37	130	75.30	2,918.30	2,993.60
Adult	50	312.87	6,471.08	6,783.96	76	47.45	8,554.80	8,602.24	126	152.77	7,727.93	7,880.70
Waiver/Institutional Composite	94	\$ 270.56	\$ 3,830.00	\$ 4,100.56	162	\$ 22.26	\$ 6,130.11	\$ 6,152.37	256	\$ 113.43	\$ 5,285.54	\$ 5,398.97
All Populations Composite	49,442	\$ 356.76	\$ 407.41	\$ 764.17	20,701	\$ 37.19	\$ 399.87	\$ 437.06	70,142	\$ 262.44	\$ 405.19	\$ 667.63

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix A - High Level Summaries

Fiscal Year: SFY 2016
Region: Southern Southeast Region

Rate Cell	Tribal Members				Non-Tribal Members				All Members			
	Member Months	PMPM			Member Months	PMPM			Member Months	PMPM		
		Tribal Providers	Non-Tribal Providers	Total		Tribal Providers	Non-Tribal Providers	Total		Tribal Providers	Non-Tribal Providers	Total
Excluded-Dual												
None	2,224	152.59	940.68	1,093.27	2,813	17.90	1,038.21	1,056.11	5,037	77.37	995.15	1,072.52
Excluded-Dual Composite	2,224	\$ 152.59	\$ 940.68	\$ 1,093.27	2,813	\$ 17.90	\$ 1,038.21	\$ 1,056.11	5,037	\$ 77.37	\$ 995.15	\$ 1,072.52
Excluded-Other												
None	-	0.00	0.00	0.00	-	0.00	0.00	0.00	-	0.00	0.00	0.00
Excluded-Other Composite	-	\$ 0.00	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Low-Income Family												
0-2 Months	245	\$ 315.62	\$ 5,510.46	\$ 5,826.09	155	\$ 38.13	\$ 3,359.61	\$ 3,397.74	400	\$ 208.10	\$ 4,677.01	\$ 4,885.10
3-12 Months	1,037	164.08	326.52	490.60	600	20.08	214.20	234.27	1,637	111.30	285.35	396.65
1-4 Male and Female	4,132	178.88	335.11	513.99	2,768	8.23	210.17	218.39	6,900	110.42	284.99	395.41
5-13 Male and Female	8,139	263.87	440.87	704.74	5,353	23.91	460.48	484.39	13,492	168.66	448.65	617.31
14-18 Female	1,660	418.78	696.29	1,115.07	1,117	39.63	925.21	964.84	2,777	266.27	788.37	1,054.64
14-18 Male	1,847	269.26	732.95	1,002.22	1,536	41.49	632.92	674.40	3,383	165.84	687.53	853.38
19-25 Female	1,105	308.46	246.53	554.98	812	42.34	295.24	337.59	1,917	195.74	267.16	462.90
19-25 Male	513	138.98	132.68	271.65	463	20.97	308.69	329.66	976	83.00	216.18	299.17
26-39 Female	2,595	422.82	418.96	841.78	2,425	62.49	542.42	604.91	5,020	248.77	478.59	727.36
26-39 Male	1,259	245.54	210.35	455.89	1,326	40.91	551.57	592.47	2,585	140.59	385.35	525.94
40+	1,963	523.57	532.71	1,056.28	2,007	52.38	565.19	617.56	3,970	285.36	549.13	834.49
Low-Income Family Composite	24,496	\$ 292.83	\$ 486.19	\$ 779.03	18,562	\$ 34.03	\$ 499.15	\$ 533.18	43,058	\$ 181.27	\$ 491.78	\$ 673.05
Medicaid Expansion												
19-25 Female	158	\$ 421.37	\$ 664.18	\$ 1,085.55	195	\$ 50.07	\$ 645.88	\$ 695.95	353	\$ 216.26	\$ 654.07	\$ 870.33
19-25 Male	183	269.01	416.10	685.11	331	12.75	322.69	335.44	514	103.99	355.95	459.93
26-39 Female	249	835.41	1,078.22	1,913.63	284	21.04	1,023.31	1,044.35	533	402.07	1,049.00	1,451.08
26-39 Male	441	535.30	799.61	1,334.92	659	69.25	738.37	807.62	1,099	256.04	762.92	1,018.95
40-54 Female	584	1,073.09	1,190.50	2,263.59	633	86.37	1,325.96	1,412.33	1,217	559.88	1,260.96	1,820.84
40-54 Male	488	682.37	704.39	1,386.76	780	110.40	1,434.05	1,544.45	1,268	330.60	1,153.14	1,483.74
55-64 Female	275	823.00	439.21	1,262.21	401	88.11	1,279.67	1,367.78	676	387.07	937.77	1,324.84
55-64 Male	292	1,668.99	1,145.89	2,814.88	567	63.08	1,127.93	1,191.01	859	608.50	1,134.03	1,742.53
Medicaid Expansion Composite	2,670	\$ 836.34	\$ 860.12	\$ 1,696.46	3,849	\$ 72.08	\$ 1,070.31	\$ 1,142.38	6,519	\$ 385.07	\$ 984.23	\$ 1,369.30
Pregnant Women												
Pregnant Women	919	466.46	1,443.94	1,910.40	752	141.70	1,397.04	1,538.74	1,671	320.31	1,422.83	1,743.14
Pregnant Women Composite	919	\$ 466.46	\$ 1,443.94	\$ 1,910.40	752	\$ 141.70	\$ 1,397.04	\$ 1,538.74	1,671	\$ 320.31	\$ 1,422.83	\$ 1,743.14
SSI/Disabled												
Adult	1,545	437.32	1,296.37	1,733.69	2,839	58.37	1,294.91	1,353.28	4,384	191.92	1,295.42	1,487.34
Child	257	299.86	1,752.15	2,052.01	326	51.76	3,872.68	3,924.44	583	161.13	2,937.90	3,099.03
SSI/Disabled Composite	1,802	\$ 417.72	\$ 1,361.37	\$ 1,779.09	3,165	\$ 57.69	\$ 1,560.42	\$ 1,618.11	4,967	\$ 188.30	\$ 1,488.21	\$ 1,676.51
Waiver/Institutional												
Child	126	346.45	3,984.44	4,330.89	129	102.78	3,762.79	3,865.56	255	223.18	3,872.31	4,095.49
Adult	264	224.74	8,367.61	8,592.34	381	23.74	9,280.76	9,304.50	645	106.01	8,907.00	9,013.01
Waiver/Institutional Composite	390	\$ 264.06	\$ 6,951.50	\$ 7,215.57	510	\$ 43.73	\$ 7,885.04	\$ 7,928.77	900	\$ 139.21	\$ 7,480.51	\$ 7,619.71
All Populations Composite	32,501	\$ 339.37	\$ 701.20	\$ 1,040.57	29,651	\$ 42.86	\$ 887.53	\$ 930.40	62,151	\$ 197.91	\$ 790.09	\$ 988.01

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix A - High Level Summaries

Fiscal Year: SFY 2016
Region: Western Region

Rate Cell	Tribal Members				Non-Tribal Members				All Members			
	Member Months	PMPM			Member Months	PMPM			Member Months	PMPM		
		Tribal Providers	Non-Tribal Providers	Total		Tribal Providers	Non-Tribal Providers	Total		Tribal Providers	Non-Tribal Providers	Total
Excluded-Dual												
<i>None</i>	11,956	1,076.90	467.03	1,543.93	770	587.19	289.91	877.10	12,726	1,047.27	456.31	1,503.59
Excluded-Dual Composite	11,956	\$ 1,076.90	\$ 467.03	\$ 1,543.93	770	\$ 587.19	\$ 289.91	\$ 877.10	12,726	\$ 1,047.27	\$ 456.31	\$ 1,503.59
Excluded-Other												
<i>None</i>	6	19.59	0.00	19.59	-	0.00	0.00	0.00	6	19.59	0.00	19.59
Excluded-Other Composite	6	\$ 19.59	\$ 0.00	\$ 19.59	-	\$ 0.00	\$ 0.00	\$ 0.00	6	\$ 19.59	\$ 0.00	\$ 19.59
Low-Income Family												
0-2 Months	2,040	\$ 4,554.99	\$ 2,535.32	\$ 7,090.31	42	\$ 2,712.40	\$ 4,108.99	\$ 6,821.40	2,082	\$ 4,517.83	\$ 2,567.06	\$ 7,084.89
3-12 Months	8,380	805.58	327.54	1,133.12	192	665.88	350.54	1,016.42	8,572	802.45	328.06	1,130.51
1-4 Male and Female	34,920	337.56	261.36	598.92	248	84.83	179.96	264.79	35,168	335.78	260.78	596.57
5-13 Male and Female	71,431	266.96	192.96	459.92	639	153.16	48.64	201.79	72,070	265.95	191.68	457.63
14-18 Female	14,394	374.80	360.37	735.18	146	153.86	62.42	216.28	14,540	372.58	357.38	729.97
14-18 Male	16,174	363.62	336.78	700.41	72	430.48	95.72	526.20	16,246	363.92	335.71	699.63
19-25 Female	10,679	456.16	129.31	585.47	30	608.93	216.51	825.43	10,709	456.58	129.56	586.14
19-25 Male	6,603	178.93	80.67	259.61	46	35.79	83.93	119.72	6,649	177.94	80.70	258.64
26-39 Female	18,371	560.51	169.73	730.24	160	243.31	183.60	426.91	18,531	557.77	169.85	727.62
26-39 Male	12,884	244.74	107.27	352.01	186	146.34	92.83	239.17	13,070	243.35	107.07	350.41
40+	27,947	430.34	206.12	636.46	450	116.15	161.42	277.58	28,397	425.36	205.41	630.77
Low-Income Family Composite	223,824	\$ 400.79	\$ 239.64	\$ 640.43	2,210	\$ 249.87	\$ 208.62	\$ 458.49	226,034	\$ 399.32	\$ 239.33	\$ 638.65
Medicaid Expansion												
19-25 Female	1,151	\$ 404.42	\$ 165.49	\$ 569.92	1	\$ 0.00	\$ 0.00	\$ 0.00	1,152	\$ 404.07	\$ 165.35	\$ 569.42
19-25 Male	2,339	269.80	337.35	607.15	38	216.81	531.81	748.62	2,377	268.95	340.46	609.41
26-39 Female	909	1,104.65	350.82	1,455.46	32	263.31	550.80	814.11	941	1,076.05	357.61	1,433.66
26-39 Male	2,411	756.95	178.75	935.70	102	513.42	84.26	597.68	2,512	747.11	174.94	922.05
40-54 Female	1,254	1,401.01	335.04	1,736.05	41	79.47	560.01	639.48	1,295	1,359.16	342.16	1,701.32
40-54 Male	2,060	1,054.57	259.60	1,314.17	119	285.23	1,441.71	1,726.94	2,179	1,012.56	324.16	1,336.72
55-64 Female	1,286	772.91	249.98	1,022.89	37	520.97	30.55	551.53	1,323	765.86	243.85	1,009.71
55-64 Male	1,417	896.55	296.81	1,193.35	140	394.87	813.24	1,208.12	1,557	851.44	343.24	1,194.68
Medicaid Expansion Composite	12,827	\$ 788.88	\$ 267.13	\$ 1,056.01	510	\$ 354.34	\$ 698.52	\$ 1,052.86	13,337	\$ 772.28	\$ 283.61	\$ 1,055.89
Pregnant Women												
Pregnant Women	7,057	1,739.82	511.55	2,251.37	88	1,141.07	651.18	1,792.24	7,145	1,732.45	513.27	2,245.71
Pregnant Women Composite	7,057	\$ 1,739.82	\$ 511.55	\$ 2,251.37	88	\$ 1,141.07	\$ 651.18	\$ 1,792.24	7,145	\$ 1,732.45	\$ 513.27	\$ 2,245.71
SSI/Disabled												
Adult	6,004	1,062.28	478.95	1,541.23	519	1,255.57	326.47	1,582.04	6,523	1,077.66	466.82	1,544.47
Child	1,871	646.63	1,327.57	1,974.20	55	154.70	205.98	360.68	1,926	632.58	1,295.55	1,928.13
SSI/Disabled Composite	7,875	\$ 963.52	\$ 680.57	\$ 1,644.10	574	\$ 1,150.09	\$ 314.92	\$ 1,465.01	8,449	\$ 976.20	\$ 655.73	\$ 1,631.93
Waiver/Institutional												
Child	419	986.27	3,167.17	4,153.44	39	299.69	5,609.49	5,909.18	458	927.80	3,375.14	4,302.94
Adult	663	5,653.36	4,101.21	9,754.57	47	25,754.16	357.20	26,111.36	710	6,983.97	3,853.37	10,837.34
Waiver/Institutional Composite	1,082	\$ 3,846.04	\$ 3,739.51	\$ 7,585.55	86	\$ 14,210.86	\$ 2,739.05	\$ 16,949.91	1,168	\$ 4,609.21	\$ 3,665.84	\$ 8,275.05
All Populations Composite	264,627	\$ 516.69	\$ 285.92	\$ 802.61	4,238	\$ 747.46	\$ 357.22	\$ 1,104.68	268,865	\$ 520.32	\$ 287.04	\$ 807.37

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix A - High Level Summaries

Fiscal Year: SFY 2017
Region: Statewide

Rate Cell	Tribal Members				Non-Tribal Members				All Members			
	Member Months	PMPM			Member Months	PMPM			Member Months	PMPM		
		Tribal Providers	Non-Tribal Providers	Total		Tribal Providers	Non-Tribal Providers	Total		Tribal Providers	Non-Tribal Providers	Total
Excluded-Dual												
None	45,036	472.87	1,442.97	1,915.85	101,886	13.98	1,559.93	1,573.90	146,922	154.64	1,524.08	1,678.72
Excluded-Dual Composite	45,036	\$ 472.87	\$ 1,442.97	\$ 1,915.85	101,886	\$ 13.98	\$ 1,559.93	\$ 1,573.90	146,922	\$ 154.64	\$ 1,524.08	\$ 1,678.72
Excluded-Other												
None	45	508.58	3,880.89	4,389.48	228	523.00	5,477.62	6,000.62	272	520.62	5,214.63	5,735.25
Excluded-Other Composite	45	\$ 508.58	\$ 3,880.89	\$ 4,389.48	228	\$ 523.00	\$ 5,477.62	\$ 6,000.62	272	\$ 520.62	\$ 5,214.63	\$ 5,735.25
Low-Income Family												
0-2 Months	5,900	\$ 3,693.75	\$ 3,411.53	\$ 7,105.29	7,979	\$ 79.10	\$ 4,755.11	\$ 4,834.21	13,879	\$ 1,615.67	\$ 4,183.97	\$ 5,799.63
3-12 Months	25,759	522.72	290.74	813.46	34,695	11.90	394.52	406.42	60,454	229.55	350.30	579.86
1-4 Male and Female	106,141	248.38	213.42	461.80	141,811	6.24	173.96	180.20	247,952	109.89	190.85	300.74
5-13 Male and Female	216,145	212.14	242.10	454.23	267,591	13.18	232.26	245.44	483,736	102.08	236.66	338.74
14-18 Female	45,364	368.07	600.01	968.07	61,465	18.66	457.85	476.51	106,828	167.03	518.22	685.25
14-18 Male	47,610	330.98	498.91	829.89	62,682	18.27	417.20	435.48	110,293	153.26	452.47	605.73
19-25 Female	33,351	403.78	194.23	598.01	40,439	8.06	299.75	307.81	73,789	186.91	252.06	438.97
19-25 Male	19,486	168.74	118.96	287.70	25,805	3.21	193.35	196.55	45,291	74.42	161.34	235.77
26-39 Female	62,538	529.66	274.11	803.77	90,664	16.77	426.46	443.24	153,202	226.13	364.27	590.41
26-39 Male	31,715	226.29	148.32	374.61	52,177	7.29	287.98	295.27	83,892	90.09	235.18	325.27
40+	57,823	493.25	277.10	770.34	79,933	17.76	529.96	547.72	137,756	217.34	423.82	641.17
Low-Income Family Composite	651,830	\$ 345.95	\$ 307.19	\$ 653.14	865,241	\$ 13.27	\$ 353.55	\$ 366.82	1,517,072	\$ 156.21	\$ 333.63	\$ 489.84
Medicaid Expansion												
19-25 Female	9,666	\$ 529.68	\$ 304.41	\$ 834.08	17,136	\$ 18.56	\$ 334.16	\$ 352.71	26,801	\$ 202.89	\$ 323.43	\$ 526.32
19-25 Male	14,502	295.23	235.86	531.09	19,953	16.69	350.79	367.48	34,455	133.92	302.41	436.34
26-39 Female	15,275	927.94	595.44	1,523.38	31,892	49.51	639.02	688.53	47,167	333.99	624.91	958.90
26-39 Male	24,886	567.56	387.61	955.17	51,925	22.74	553.08	575.82	76,811	199.26	499.47	698.72
40-54 Female	18,829	1,045.30	586.45	1,631.75	31,187	37.17	939.96	977.13	50,017	416.69	806.88	1,223.57
40-54 Male	22,187	933.27	525.23	1,458.49	40,837	39.27	995.35	1,034.63	63,024	353.99	829.85	1,183.84
55-64 Female	13,505	944.67	521.24	1,465.92	26,250	30.39	922.86	953.24	39,755	340.98	786.42	1,127.40
55-64 Male	15,378	875.95	547.25	1,423.20	29,797	44.63	1,168.15	1,212.78	45,175	327.62	956.79	1,284.41
Medicaid Expansion Composite	134,228	\$ 777.16	\$ 471.25	\$ 1,248.41	248,978	\$ 33.34	\$ 766.41	\$ 799.75	383,206	\$ 293.88	\$ 663.02	\$ 956.90
Pregnant Women												
Pregnant Women	17,976	1,601.69	786.07	2,387.76	28,700	64.20	1,252.58	1,316.78	46,677	656.31	1,072.92	1,729.23
Pregnant Women Composite	17,976	\$ 1,601.69	\$ 786.07	\$ 2,387.76	28,700	\$ 64.20	\$ 1,252.58	\$ 1,316.78	46,677	\$ 656.31	\$ 1,072.92	\$ 1,729.23
SSI/Disabled												
Adult	31,598	1,086.38	1,004.81	2,091.19	79,765	49.72	1,411.69	1,461.41	111,362	343.86	1,296.25	1,640.10
Child	10,695	298.94	1,702.92	2,001.87	19,989	39.88	1,289.08	1,328.95	30,684	130.17	1,433.33	1,563.50
SSI/Disabled Composite	42,293	\$ 887.25	\$ 1,181.35	\$ 2,068.60	99,754	\$ 47.75	\$ 1,387.12	\$ 1,434.87	142,046	\$ 297.70	\$ 1,325.86	\$ 1,623.56
Waiver/Institutional												
Child	3,283	480.98	7,188.06	7,669.05	6,675	9.78	5,741.06	5,750.85	9,958	165.13	6,218.10	6,383.23
Adult	6,122	1,451.56	8,654.30	10,105.87	20,441	89.89	8,345.02	8,434.91	26,563	403.72	8,416.30	8,820.01
Waiver/Institutional Composite	9,405	\$ 1,112.77	\$ 8,142.50	\$ 9,255.27	27,116	\$ 70.17	\$ 7,704.01	\$ 7,774.19	36,521	\$ 338.66	\$ 7,816.93	\$ 8,155.60
All Populations Composite	900,813	\$ 475.04	\$ 521.00	\$ 996.03	1,371,903	\$ 21.74	\$ 758.16	\$ 779.91	2,272,716	\$ 201.41	\$ 664.16	\$ 865.57

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix A - High Level Summaries

Fiscal Year: SFY 2017
Region: Anchorage Municipality

Rate Cell	Tribal Members				Non-Tribal Members				All Members			
	Member Months	PMPM			Member Months	PMPM			Member Months	PMPM		
		Tribal Providers	Non-Tribal Providers	Total		Tribal Providers	Non-Tribal Providers	Total		Tribal Providers	Non-Tribal Providers	Total
Excluded-Dual												
None	11,231	431.36	1,965.71	2,397.07	47,870	15.34	1,648.81	1,664.15	59,101	94.39	1,709.03	1,803.42
Excluded-Dual Composite	11,231	\$ 431.36	\$ 1,965.71	\$ 2,397.07	47,870	\$ 15.34	\$ 1,648.81	\$ 1,664.15	59,101	\$ 94.39	\$ 1,709.03	\$ 1,803.42
Excluded-Other												
None	12	914.67	4,354.51	5,269.18	112	7.09	7,838.28	7,845.37	124	94.26	7,503.68	7,597.94
Excluded-Other Composite	12	\$ 914.67	\$ 4,354.51	\$ 5,269.18	112	\$ 7.09	\$ 7,838.28	\$ 7,845.37	124	\$ 94.26	\$ 7,503.68	\$ 7,597.94
Low-Income Family												
0-2 Months	1,309	\$ 4,381.88	\$ 3,555.38	\$ 7,937.26	3,686	\$ 47.12	\$ 5,169.09	\$ 5,216.21	4,995	\$ 1,183.28	\$ 4,746.12	\$ 5,929.41
3-12 Months	5,504	525.18	357.41	882.59	15,891	4.72	507.09	511.81	21,395	138.62	468.58	607.20
1-4 Male and Female	23,323	248.68	240.33	489.00	65,568	1.44	169.09	170.53	88,891	66.31	187.78	254.09
5-13 Male and Female	46,759	192.54	294.51	487.05	121,797	1.57	220.57	222.14	168,556	54.55	241.08	295.63
14-18 Female	9,840	387.44	755.15	1,142.59	29,055	7.67	463.09	470.77	38,894	103.75	536.98	640.73
14-18 Male	9,791	353.97	533.54	887.52	29,002	12.35	389.48	401.83	38,793	98.57	425.84	524.41
19-25 Female	7,201	426.52	172.96	599.48	19,611	3.76	277.99	281.76	26,812	117.30	249.78	367.09
19-25 Male	3,465	172.13	128.44	300.57	12,138	1.76	185.56	187.32	15,603	39.59	172.88	212.47
26-39 Female	14,505	573.74	306.81	880.55	39,013	11.02	413.69	424.71	53,517	163.53	384.72	548.25
26-39 Male	4,859	230.63	138.69	369.32	20,907	5.18	306.84	312.01	25,766	47.70	275.13	322.82
40+	8,018	639.01	320.32	959.33	33,755	2.69	520.85	523.53	41,773	124.82	482.36	607.18
Low-Income Family Composite	134,573	\$ 363.68	\$ 356.94	\$ 720.62	390,421	\$ 4.71	\$ 352.57	\$ 357.28	524,994	\$ 96.73	\$ 353.69	\$ 450.42
Medicaid Expansion												
19-25 Female	2,804	\$ 623.16	\$ 356.88	\$ 980.04	7,815	\$ 6.80	\$ 292.94	\$ 299.74	10,619	\$ 169.56	\$ 309.83	\$ 479.39
19-25 Male	3,302	326.48	328.51	654.98	8,927	18.66	289.26	307.92	12,229	101.77	299.86	401.63
26-39 Female	5,704	1,056.40	548.17	1,604.56	14,263	36.31	585.48	621.79	19,967	327.74	574.82	902.56
26-39 Male	7,723	663.85	369.47	1,033.32	24,276	12.14	576.21	588.35	31,999	169.43	526.31	695.74
40-54 Female	6,367	1,280.13	536.02	1,816.15	12,136	17.63	916.47	934.10	18,502	452.05	785.56	1,237.61
40-54 Male	6,880	1,315.16	610.08	1,925.24	17,370	32.14	1,099.16	1,131.30	24,250	396.15	960.40	1,356.55
55-64 Female	3,497	1,185.37	395.16	1,580.52	9,964	18.92	960.79	979.71	13,461	321.92	813.86	1,135.78
55-64 Male	3,682	1,229.10	680.11	1,909.21	11,036	31.12	1,150.01	1,181.13	14,718	330.83	1,032.45	1,363.28
Medicaid Expansion Composite	39,959	\$ 997.21	\$ 489.55	\$ 1,486.76	105,787	\$ 22.09	\$ 753.31	\$ 775.39	145,746	\$ 289.43	\$ 680.99	\$ 970.43
Pregnant Women												
Pregnant Women	3,777	1,851.05	568.07	2,419.12	12,278	41.02	1,319.01	1,360.03	16,055	466.80	1,142.36	1,609.17
Pregnant Women Composite	3,777	\$ 1,851.05	\$ 568.07	\$ 2,419.12	12,278	\$ 41.02	\$ 1,319.01	\$ 1,360.03	16,055	\$ 466.80	\$ 1,142.36	\$ 1,609.17
SSI/Disabled												
Adult	11,011	1,478.77	941.80	2,420.57	37,634	35.24	1,419.83	1,455.07	48,645	361.98	1,311.63	1,673.61
Child	3,812	275.15	2,252.59	2,527.75	10,298	10.20	1,169.89	1,180.10	14,110	81.78	1,462.40	1,544.18
SSI/Disabled Composite	14,823	\$ 1,169.24	\$ 1,278.90	\$ 2,448.13	47,932	\$ 29.86	\$ 1,366.13	\$ 1,395.99	62,755	\$ 298.98	\$ 1,345.53	\$ 1,644.51
Waiver/Institutional												
Child	1,448	520.05	8,440.15	8,960.20	3,609	2.40	5,302.43	5,304.83	5,057	150.61	6,200.80	6,351.41
Adult	2,881	1,177.07	7,688.13	8,865.20	10,017	12.86	7,827.95	7,840.81	12,898	272.90	7,796.72	8,069.62
Waiver/Institutional Composite	4,329	\$ 957.32	\$ 7,939.65	\$ 8,896.97	13,626	\$ 10.09	\$ 7,159.04	\$ 7,169.13	17,955	\$ 238.46	\$ 7,347.24	\$ 7,585.70
All Populations Composite	208,704	\$ 585.09	\$ 695.71	\$ 1,280.80	618,026	\$ 11.30	\$ 770.80	\$ 782.10	826,730	\$ 156.15	\$ 751.84	\$ 907.99

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix A - High Level Summaries

Fiscal Year: SFY 2017
Region: Fairbanks North Star Borough

Rate Cell	Tribal Members				Non-Tribal Members				All Members			
	Member Months	PMPM			Member Months	PMPM			Member Months	PMPM		
		Tribal Providers	Non-Tribal Providers	Total		Tribal Providers	Non-Tribal Providers	Total		Tribal Providers	Non-Tribal Providers	Total
Excluded-Dual												
None	3,000	232.06	1,779.05	2,011.11	9,145	2.51	1,419.96	1,422.47	12,145	59.21	1,508.66	1,567.87
Excluded-Dual Composite	3,000	\$ 232.06	\$ 1,779.05	\$ 2,011.11	9,145	\$ 2.51	\$ 1,419.96	\$ 1,422.47	12,145	\$ 59.21	\$ 1,508.66	\$ 1,567.87
Excluded-Other												
None	-	0.00	0.00	0.00	30	0.00	1,329.57	1,329.57	30	0.00	1,329.57	1,329.57
Excluded-Other Composite	-	\$ 0.00	\$ 0.00	\$ 0.00	30	\$ 0.00	\$ 1,329.57	\$ 1,329.57	30	\$ 0.00	\$ 1,329.57	\$ 1,329.57
Low-Income Family												
0-2 Months	422	\$ 810.85	\$ 4,949.67	\$ 5,760.51	895	\$ 10.35	\$ 3,987.03	\$ 3,997.38	1,317	\$ 266.85	\$ 4,295.48	\$ 4,562.33
3-12 Months	2,014	288.29	444.29	732.58	3,911	4.65	227.99	232.64	5,925	101.06	301.51	402.56
1-4 Male and Female	1,179	113.03	166.14	279.17	15,773	0.76	174.14	174.90	22,951	35.87	171.64	207.51
5-13 Male and Female	13,688	103.48	354.60	458.08	28,025	2.85	239.65	242.50	41,713	35.87	277.37	313.24
14-18 Female	2,719	307.08	974.07	1,281.15	5,445	2.01	577.32	579.33	8,164	103.62	709.46	813.08
14-18 Male	2,982	226.80	906.16	1,132.96	5,793	0.50	536.30	536.80	8,775	77.40	661.99	739.39
19-25 Female	2,061	340.13	318.01	658.14	3,975	0.75	391.45	392.20	6,036	116.63	366.37	483.00
19-25 Male	914	122.23	354.65	476.88	2,083	0.94	275.88	276.81	2,997	37.92	299.90	337.83
26-39 Female	4,148	552.27	306.21	858.49	9,905	27.20	427.86	455.06	14,053	182.17	391.96	574.13
26-39 Male	1,445	175.21	153.19	328.40	4,970	1.60	240.42	242.02	6,415	40.71	220.77	261.47
40+	2,182	583.20	489.96	1,073.16	6,252	9.72	487.03	496.75	8,434	158.08	487.79	645.87
Low-Income Family Composite	39,754	\$ 233.72	\$ 450.80	\$ 684.51	87,027	\$ 5.47	\$ 353.70	\$ 359.17	126,781	\$ 77.04	\$ 384.15	\$ 461.19
Medicaid Expansion												
19-25 Female	527	\$ 460.16	\$ 391.76	\$ 851.92	1,710	\$ 47.37	\$ 342.67	\$ 390.04	2,237	\$ 144.65	\$ 354.24	\$ 498.89
19-25 Male	640	368.61	602.49	971.10	1,678	26.06	411.90	437.96	2,317	120.59	464.50	585.09
26-39 Female	1,421	1,336.63	1,112.61	2,449.24	3,644	106.49	606.96	713.45	5,065	451.54	748.79	1,200.33
26-39 Male	1,635	757.26	501.05	1,258.31	5,414	18.08	385.33	403.41	7,049	189.50	412.17	601.66
40-54 Female	1,461	1,027.69	828.16	1,855.85	3,329	25.85	856.49	882.35	4,790	331.45	847.85	1,179.30
40-54 Male	1,362	1,151.18	948.84	2,100.02	3,590	39.79	919.89	959.67	4,952	345.53	927.85	1,273.38
55-64 Female	1,081	1,054.87	642.53	1,697.40	2,356	24.52	753.91	778.43	3,438	348.63	718.87	1,067.50
55-64 Male	794	1,206.65	908.08	2,114.73	2,692	88.66	892.26	980.91	3,487	343.37	895.86	1,239.23
Medicaid Expansion Composite	8,921	\$ 984.65	\$ 774.60	\$ 1,759.25	24,414	\$ 46.54	\$ 651.58	\$ 698.11	33,335	\$ 297.60	\$ 684.50	\$ 982.10
Pregnant Women												
Pregnant Women	1,551	1,040.73	1,019.65	2,060.38	3,921	70.24	1,018.05	1,088.29	5,472	345.29	1,018.50	1,363.79
Pregnant Women Composite	1,551	\$ 1,040.73	\$ 1,019.65	\$ 2,060.38	3,921	\$ 70.24	\$ 1,018.05	\$ 1,088.29	5,472	\$ 345.29	\$ 1,018.50	\$ 1,363.79
SSI/Disabled												
Adult	2,829	1,194.44	1,177.90	2,372.34	7,660	30.75	1,175.56	1,206.31	10,489	344.62	1,176.19	1,520.81
Child	983	64.65	1,568.16	1,632.81	2,190	0.00	2,055.08	2,055.08	3,173	20.03	1,904.23	1,924.26
SSI/Disabled Composite	3,812	\$ 903.10	\$ 1,278.54	\$ 2,181.63	9,850	\$ 23.91	\$ 1,371.12	\$ 1,395.03	13,662	\$ 269.23	\$ 1,345.28	\$ 1,614.52
Waiver/Institutional												
Child	298	116.50	5,858.33	5,974.83	639	0.00	5,149.25	5,149.25	937	37.05	5,374.76	5,411.81
Adult	520	231.29	10,278.92	10,510.21	1,399	0.00	9,459.15	9,459.15	1,919	62.67	9,681.29	9,743.96
Waiver/Institutional Composite	818	\$ 189.47	\$ 8,668.48	\$ 8,857.96	2,038	\$ 0.00	\$ 8,107.81	\$ 8,107.81	2,856	\$ 54.27	\$ 8,268.40	\$ 8,322.67
All Populations Composite	57,856	\$ 414.53	\$ 755.57	\$ 1,170.10	136,425	\$ 15.73	\$ 687.08	\$ 702.81	194,281	\$ 134.49	\$ 707.48	\$ 841.97

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix A - High Level Summaries

Fiscal Year: SFY 2017
Region: Gulf Coast/Aleutian Region

Rate Cell	Tribal Members				Non-Tribal Members				All Members			
	Member Months	PMPM			Member Months	PMPM			Member Months	PMPM		
		Tribal Providers	Non-Tribal Providers	Total		Tribal Providers	Non-Tribal Providers	Total		Tribal Providers	Non-Tribal Providers	Total
Excluded-Dual												
None	3,544	232.65	1,575.22	1,807.87	3,143	8.50	2,354.35	2,362.85	6,687	127.29	1,941.42	2,068.72
Excluded-Dual Composite	3,544	\$ 232.65	\$ 1,575.22	\$ 1,807.87	3,143	\$ 8.50	\$ 2,354.35	\$ 2,362.85	6,687	\$ 127.29	\$ 1,941.42	\$ 2,068.72
Excluded-Other												
None	4	451.78	688.79	1,140.57	6	0.00	4,999.45	4,999.45	10	186.73	3,217.71	3,404.44
Excluded-Other Composite	4	\$ 451.78	\$ 688.79	\$ 1,140.57	6	\$ 0.00	\$ 4,999.45	\$ 4,999.45	10	\$ 186.73	\$ 3,217.71	\$ 3,404.44
Low-Income Family												
0-2 Months	431	\$ 3,847.34	\$ 1,114.06	\$ 4,961.40	297	\$ 117.71	\$ 5,313.28	\$ 5,430.99	728	\$ 2,327.19	\$ 2,825.61	\$ 5,152.80
3-12 Months	1,867	434.59	141.54	576.13	1,264	55.38	256.82	312.20	3,131	281.48	188.09	469.56
1-4 Male and Female	7,402	288.76	175.76	464.52	4,993	48.23	151.24	199.47	12,395	191.87	165.88	357.75
5-13 Male and Female	14,378	250.72	145.31	396.02	9,055	22.12	196.60	218.72	23,433	162.38	165.13	327.51
14-18 Female	3,004	565.65	588.09	1,153.74	2,351	120.73	368.29	489.03	5,356	370.33	491.60	861.92
14-18 Male	3,335	464.34	486.76	951.10	2,149	10.54	341.25	351.79	5,485	286.51	429.74	716.25
19-25 Female	2,311	385.40	123.28	508.68	1,162	41.71	231.33	273.04	3,473	270.44	159.42	429.86
19-25 Male	1,598	243.00	94.52	337.51	794	5.56	115.46	121.02	2,392	164.19	101.47	265.65
26-39 Female	4,344	527.00	203.77	730.78	3,050	70.02	267.53	337.55	7,394	338.51	230.07	568.58
26-39 Male	2,540	238.25	169.36	407.61	1,723	18.63	136.68	155.32	4,264	149.48	156.15	305.63
40+	4,074	463.28	261.73	725.01	3,657	51.85	519.12	570.97	7,731	268.67	383.48	652.15
Low-Income Family Composite	45,285	\$ 386.91	\$ 228.39	\$ 615.30	30,495	\$ 43.96	\$ 306.46	\$ 350.43	75,780	\$ 248.90	\$ 259.81	\$ 508.71
Medicaid Expansion												
19-25 Female	630	\$ 580.39	\$ 132.05	\$ 712.44	558	\$ 53.68	\$ 143.02	\$ 196.69	1,188	\$ 332.89	\$ 137.20	\$ 470.09
19-25 Male	1,040	218.61	230.80	449.41	485	71.12	463.03	534.15	1,526	171.71	304.65	476.36
26-39 Female	1,004	1,249.87	307.35	1,557.22	891	93.66	480.54	574.21	1,895	706.35	388.77	1,095.12
26-39 Male	1,627	441.82	259.46	701.28	1,374	156.76	562.10	718.86	3,001	311.31	398.02	709.33
40-54 Female	1,424	1,248.75	365.57	1,614.32	985	114.52	575.10	689.62	2,409	784.98	451.25	1,236.22
40-54 Male	1,746	842.79	334.97	1,177.76	1,485	91.05	907.73	998.78	3,231	497.36	598.16	1,095.52
55-64 Female	1,364	1,022.98	630.78	1,653.76	1,275	43.46	524.56	568.03	2,639	549.84	579.47	1,129.31
55-64 Male	1,746	871.45	344.05	1,215.51	1,437	72.43	1,226.02	1,298.44	3,183	510.76	742.18	1,252.95
Medicaid Expansion Composite	10,582	\$ 825.37	\$ 342.17	\$ 1,167.53	8,489	\$ 90.79	\$ 689.00	\$ 779.78	19,072	\$ 498.38	\$ 496.55	\$ 994.93
Pregnant Women												
Pregnant Women	1,311	1,639.61	550.06	2,189.67	1,071	258.75	1,326.47	1,585.22	2,382	1,018.69	899.18	1,917.88
Pregnant Women Composite	1,311	\$ 1,639.61	\$ 550.06	\$ 2,189.67	1,071	\$ 258.75	\$ 1,326.47	\$ 1,585.22	2,382	\$ 1,018.69	\$ 899.18	\$ 1,917.88
SSI/Disabled												
Adult	2,131	841.76	1,351.64	2,193.40	2,332	46.85	1,188.45	1,235.31	4,463	426.45	1,266.38	1,692.83
Child	546	446.17	1,076.41	1,522.58	468	21.83	386.69	408.53	1,014	250.32	758.08	1,008.40
SSI/Disabled Composite	2,677	\$ 761.09	\$ 1,295.51	\$ 2,056.60	2,800	\$ 42.67	\$ 1,054.44	\$ 1,097.12	5,477	\$ 393.84	\$ 1,172.28	\$ 1,566.13
Waiver/Institutional												
Child	113	703.84	4,255.63	4,959.48	87	21.86	2,077.91	2,099.76	200	407.18	3,308.32	3,715.50
Adult	243	408.40	11,559.38	11,967.78	562	1.93	16,500.35	16,502.28	805	124.62	15,008.85	15,133.48
Waiver/Institutional Composite	356	\$ 502.18	\$ 9,241.06	\$ 9,743.23	649	\$ 4.60	\$ 14,566.99	\$ 14,571.59	1,005	\$ 180.85	\$ 12,680.39	\$ 12,861.24
All Populations Composite	63,760	\$ 493.23	\$ 423.91	\$ 917.14	46,653	\$ 54.40	\$ 781.30	\$ 835.69	110,414	\$ 307.81	\$ 574.92	\$ 882.73

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix A - High Level Summaries

Fiscal Year: SFY 2017
Region: Kenai Peninsula Borough

Rate Cell	Tribal Members				Non-Tribal Members				All Members			
	Member Months	PMPM			Member Months	PMPM			Member Months	PMPM		
		Tribal Providers	Non-Tribal Providers	Total		Tribal Providers	Non-Tribal Providers	Total		Tribal Providers	Non-Tribal Providers	Total
Excluded-Dual												
None	1,945	102.15	3,493.89	3,596.04	11,848	9.33	1,928.63	1,937.96	13,793	22.42	2,149.35	2,171.77
Excluded-Dual Composite	1,945	\$ 102.15	\$ 3,493.89	\$ 3,596.04	11,848	\$ 9.33	\$ 1,928.63	\$ 1,937.96	13,793	\$ 22.42	\$ 2,149.35	\$ 2,171.77
Excluded-Other												
None	0	0.00	0.00	0.00	45	0.35	630.78	631.13	46	0.35	629.44	629.79
Excluded-Other Composite	0	\$ 0.00	\$ 0.00	\$ 0.00	45	\$ 0.35	\$ 630.78	\$ 631.13	46	\$ 0.35	\$ 629.44	\$ 629.79
Low-Income Family												
0-2 Months	301	\$ 1,274.87	\$ 4,903.22	\$ 6,178.09	796	\$ 3.87	\$ 4,923.19	\$ 4,927.06	1,097	\$ 352.91	\$ 4,917.70	\$ 5,270.62
3-12 Months	1,345	179.90	554.59	734.49	3,564	3.50	253.38	256.89	4,910	51.83	335.91	387.74
1-4 Male and Female	5,007	91.05	231.12	322.16	14,781	5.76	219.96	225.72	19,788	27.34	222.78	250.13
5-13 Male and Female	10,140	203.20	287.81	491.01	27,746	51.70	247.09	298.79	37,886	92.25	257.99	350.24
14-18 Female	2,111	271.79	513.82	785.61	6,513	35.79	378.06	413.84	8,624	93.55	411.29	504.84
14-18 Male	2,113	426.34	996.09	1,422.44	6,373	74.91	288.04	362.95	8,486	162.41	464.32	626.73
19-25 Female	1,572	173.48	259.95	433.43	4,073	16.59	417.35	433.94	5,644	60.28	373.53	433.80
19-25 Male	746	96.45	284.28	380.73	2,878	5.05	239.44	244.50	3,624	23.87	248.67	272.54
26-39 Female	2,831	256.68	422.86	679.54	9,930	12.60	434.30	446.90	12,761	66.75	431.76	498.51
26-39 Male	1,207	119.22	165.33	284.55	6,787	6.83	299.09	305.92	7,994	23.80	278.89	302.69
40+	2,036	361.66	686.92	1,048.58	9,616	18.85	559.47	578.33	11,652	78.75	581.74	660.50
Low-Income Family Composite	29,409	\$ 223.35	\$ 438.78	\$ 662.13	93,057	\$ 28.81	\$ 358.26	\$ 387.06	122,466	\$ 75.53	\$ 377.59	\$ 453.12
Medicaid Expansion												
19-25 Female	499	\$ 392.63	\$ 350.78	\$ 743.40	1,774	\$ 30.23	\$ 396.35	\$ 426.58	2,273	\$ 109.81	\$ 386.34	\$ 496.15
19-25 Male	529	171.59	207.80	379.38	2,391	5.35	414.89	420.23	2,920	35.45	377.38	412.84
26-39 Female	939	485.72	745.75	1,231.47	3,747	65.16	772.19	837.35	4,686	149.45	766.89	916.34
26-39 Male	1,015	215.95	443.29	659.24	5,676	13.71	584.86	598.57	6,690	44.38	563.39	607.77
40-54 Female	993	608.33	1,335.63	1,943.96	4,414	50.27	1,190.60	1,240.87	5,407	152.77	1,217.24	1,370.01
40-54 Male	1,008	608.79	457.90	1,066.69	4,982	22.12	904.53	926.66	5,990	120.84	829.38	950.22
55-64 Female	588	632.48	630.66	1,263.15	3,861	35.77	978.64	1,014.41	4,448	114.63	932.65	1,047.28
55-64 Male	660	790.50	872.49	1,662.99	4,275	19.25	1,386.36	1,405.61	4,935	122.43	1,317.61	1,440.04
Medicaid Expansion Composite	6,231	\$ 493.28	\$ 669.25	\$ 1,162.52	31,119	\$ 30.23	\$ 879.68	\$ 909.91	37,350	\$ 107.48	\$ 844.57	\$ 952.05
Pregnant Women												
Pregnant Women	806	721.72	1,185.63	1,907.35	3,031	15.94	1,414.50	1,430.44	3,837	164.24	1,366.41	1,530.65
Pregnant Women Composite	806	\$ 721.72	\$ 1,185.63	\$ 1,907.35	3,031	\$ 15.94	\$ 1,414.50	\$ 1,430.44	3,837	\$ 164.24	\$ 1,366.41	\$ 1,530.65
SSI/Disabled												
Adult	1,165	561.65	1,897.65	2,459.30	8,578	40.40	1,984.88	2,025.28	9,743	102.73	1,974.45	2,077.18
Child	482	377.96	1,071.37	1,449.33	1,775	312.66	1,083.29	1,395.95	2,257	326.61	1,080.74	1,407.35
SSI/Disabled Composite	1,647	\$ 507.89	\$ 1,655.83	\$ 2,163.73	10,353	\$ 87.08	\$ 1,830.30	\$ 1,917.39	12,000	\$ 144.84	\$ 1,806.36	\$ 1,951.20
Waiver/Institutional												
Child	212	275.00	8,978.66	9,253.67	545	25.95	7,351.47	7,377.41	757	95.70	7,807.17	7,902.86
Adult	438	1,094.92	12,473.88	13,568.80	3,328	6.18	8,706.16	8,712.34	3,766	132.81	9,144.36	9,277.17
Waiver/Institutional Composite	650	\$ 827.50	\$ 11,333.90	\$ 12,161.40	3,873	\$ 8.96	\$ 8,515.53	\$ 8,524.50	4,523	\$ 126.59	\$ 8,920.56	\$ 9,047.16
All Populations Composite	40,689	\$ 289.94	\$ 858.23	\$ 1,148.17	153,326	\$ 30.76	\$ 911.84	\$ 942.60	194,015	\$ 85.12	\$ 900.60	\$ 985.71

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix A - High Level Summaries

Fiscal Year: SFY 2017
Region: MatSu Borough

Rate Cell	Tribal Members				Non-Tribal Members				All Members			
	Member Months	PMPM			Member Months	PMPM			Member Months	PMPM		
		Tribal Providers	Non-Tribal Providers	Total		Tribal Providers	Non-Tribal Providers	Total		Tribal Providers	Non-Tribal Providers	Total
Excluded-Dual												
None	2,270	93.17	2,153.43	2,246.60	17,283	1.35	1,165.44	1,166.79	19,553	12.01	1,280.14	1,292.15
Excluded-Dual Composite	2,270	\$ 93.17	\$ 2,153.43	\$ 2,246.60	17,283	\$ 1.35	\$ 1,165.44	\$ 1,166.79	19,553	\$ 12.01	\$ 1,280.14	\$ 1,292.15
Excluded-Other												
None	10	30.39	11,941.59	11,971.97	17	0.00	1,705.34	1,705.34	27	11.25	5,496.54	5,507.80
Excluded-Other Composite	10	\$ 30.39	\$ 11,941.59	\$ 11,971.97	17	\$ 0.00	\$ 1,705.34	\$ 1,705.34	27	\$ 11.25	\$ 5,496.54	\$ 5,507.80
Low-Income Family												
0-2 Months	396	\$ 3,233.14	\$ 4,144.71	\$ 7,377.86	1,613	\$ 14.00	\$ 4,577.78	\$ 4,591.78	2,009	\$ 649.12	\$ 4,492.34	\$ 5,141.46
3-12 Months	1,743	240.90	240.65	481.55	6,907	3.26	424.04	427.30	8,651	51.14	387.09	438.23
1-4 Male and Female	8,414	121.26	147.01	268.27	28,487	0.91	173.66	174.57	36,901	28.35	167.58	195.93
5-13 Male and Female	16,320	104.98	257.39	362.37	56,522	1.27	253.93	255.20	72,842	24.51	254.70	279.21
14-18 Female	3,166	258.48	737.60	996.08	12,368	3.42	418.30	421.72	15,534	55.40	483.37	538.77
14-18 Male	3,548	159.50	623.94	783.44	12,862	1.65	458.13	459.78	16,411	35.78	493.98	529.76
19-25 Female	2,339	280.10	330.94	611.04	8,214	1.48	284.91	286.39	10,553	63.24	295.12	358.36
19-25 Male	1,548	141.84	102.00	243.83	5,431	1.15	172.89	174.04	6,979	32.36	157.17	189.52
26-39 Female	4,100	323.30	329.26	652.56	19,313	2.84	492.82	495.66	23,413	58.96	464.18	523.14
26-39 Male	1,754	155.62	355.75	511.37	12,107	0.91	288.15	289.06	13,860	20.48	296.70	317.19
40+	2,353	405.17	316.95	722.12	16,658	2.34	587.02	589.36	19,011	52.20	553.59	605.79
Low-Income Family Composite	45,682	\$ 202.40	\$ 343.70	\$ 546.10	180,482	\$ 1.83	\$ 369.80	\$ 371.63	226,164	\$ 42.34	\$ 364.53	\$ 406.87
Medicaid Expansion												
19-25 Female	949	\$ 633.27	\$ 223.90	\$ 857.16	3,498	\$ 2.80	\$ 434.20	\$ 436.99	4,447	\$ 137.38	\$ 389.30	\$ 526.69
19-25 Male	1,225	225.76	192.49	418.25	4,401	2.82	393.32	396.14	5,626	51.38	349.58	400.96
26-39 Female	1,131	237.05	358.07	595.12	5,300	23.88	818.77	842.65	6,432	61.38	737.73	799.11
26-39 Male	1,490	497.69	336.08	833.77	8,586	4.60	565.99	570.59	10,077	77.53	531.98	609.52
40-54 Female	1,192	785.70	548.76	1,334.46	6,478	18.22	990.76	1,008.98	7,670	137.50	922.06	1,059.57
40-54 Male	1,020	463.31	920.82	1,384.13	7,718	8.70	864.62	873.32	8,737	61.75	871.18	932.92
55-64 Female	827	762.67	391.66	1,154.33	5,363	3.08	966.79	969.87	6,190	104.58	889.94	994.52
55-64 Male	593	659.41	367.66	1,027.07	5,398	3.04	1,131.57	1,134.60	5,991	67.97	1,056.00	1,123.97
Medicaid Expansion Composite	8,428	\$ 512.39	\$ 414.01	\$ 926.40	46,742	\$ 8.69	\$ 788.01	\$ 796.71	55,170	\$ 85.64	\$ 730.88	\$ 816.52
Pregnant Women												
Pregnant Women	1,335	1,155.95	721.23	1,877.18	5,785	33.29	1,201.26	1,234.55	7,121	243.83	1,111.23	1,355.07
Pregnant Women Composite	1,335	\$ 1,155.95	\$ 721.23	\$ 1,877.18	5,785	\$ 33.29	\$ 1,201.26	\$ 1,234.55	7,121	\$ 243.83	\$ 1,111.23	\$ 1,355.07
SSI/Disabled												
Adult	1,800	426.42	793.04	1,219.46	13,458	31.95	1,315.14	1,347.09	15,258	78.48	1,253.56	1,332.03
Child	1,366	96.49	1,852.61	1,949.10	3,557	5.29	1,324.28	1,329.56	4,923	30.59	1,470.88	1,501.47
SSI/Disabled Composite	3,166	\$ 284.06	\$ 1,250.24	\$ 1,534.30	17,015	\$ 26.37	\$ 1,317.05	\$ 1,343.42	20,181	\$ 66.80	\$ 1,306.57	\$ 1,373.37
Waiver/Institutional												
Child	417	232.39	7,324.05	7,556.44	1,074	1.50	7,566.02	7,567.52	1,491	66.08	7,498.35	7,564.42
Adult	647	409.70	9,515.13	9,924.84	3,403	2.91	6,702.24	6,705.15	4,050	67.90	7,151.61	7,219.51
Waiver/Institutional Composite	1,064	\$ 340.21	\$ 8,656.41	\$ 8,996.62	4,477	\$ 2.58	\$ 6,909.45	\$ 6,912.03	5,541	\$ 67.41	\$ 7,244.91	\$ 7,312.32
All Populations Composite	61,955	\$ 267.63	\$ 618.66	\$ 886.30	271,802	\$ 5.20	\$ 677.11	\$ 682.31	333,757	\$ 53.91	\$ 666.26	\$ 720.17

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix A - High Level Summaries

Fiscal Year: SFY 2017
Region: Northern Southeast Region

Rate Cell	Tribal Members				Non-Tribal Members				All Members			
	Member Months	PMPM			Member Months	PMPM			Member Months	PMPM		
		Tribal Providers	Non-Tribal Providers	Total		Tribal Providers	Non-Tribal Providers	Total		Tribal Providers	Non-Tribal Providers	Total
Excluded-Dual												
None	4,572	176.34	2,272.28	2,448.63	6,703	33.67	1,714.81	1,748.49	11,275	91.52	1,940.86	2,032.38
Excluded-Dual Composite	4,572	\$ 176.34	\$ 2,272.28	\$ 2,448.63	6,703	\$ 33.67	\$ 1,714.81	\$ 1,748.49	11,275	\$ 91.52	\$ 1,940.86	\$ 2,032.38
Excluded-Other												
None	8	1,227.65	0.00	1,227.65	9	0.00	2,440.50	2,440.50	17	564.86	1,317.60	1,882.45
Excluded-Other Composite	8	\$ 1,227.65	\$ 0.00	\$ 1,227.65	9	\$ 0.00	\$ 2,440.50	\$ 2,440.50	17	\$ 564.86	\$ 1,317.60	\$ 1,882.45
Low-Income Family												
0-2 Months	346	\$ 1,853.84	\$ 6,987.53	\$ 8,841.37	344	\$ 188.76	\$ 3,502.25	\$ 3,691.02	690	\$ 1,023.37	\$ 5,249.21	\$ 6,272.58
3-12 Months	1,622	264.65	237.43	502.08	1,697	38.11	225.90	264.02	3,319	148.82	231.54	380.36
1-4 Male and Female	7,355	201.98	158.20	360.18	6,200	37.73	174.06	211.79	13,555	126.85	165.45	292.31
5-13 Male and Female	14,192	203.90	323.12	527.01	12,200	58.04	221.27	279.31	26,392	136.47	276.04	412.51
14-18 Female	4,235	282.00	514.65	796.65	2,888	81.06	627.49	708.55	7,122	200.53	560.40	760.93
14-18 Male	3,686	309.89	305.90	615.79	3,242	52.34	528.34	580.69	6,928	189.37	409.99	599.36
19-25 Female	2,245	315.88	223.45	539.33	1,872	29.71	237.02	266.72	4,117	185.76	229.62	415.38
19-25 Male	1,339	102.90	177.95	280.85	1,195	15.27	203.53	218.80	2,534	61.57	190.02	251.59
26-39 Female	4,319	414.13	401.32	815.45	5,037	49.36	373.96	423.32	9,356	217.74	386.59	604.33
26-39 Male	1,983	254.87	241.70	496.57	2,936	25.44	307.42	332.87	4,920	117.92	280.93	398.86
40+	2,981	548.70	515.70	1,064.40	5,004	88.24	576.16	664.40	7,985	260.14	553.59	813.73
Low-Income Family Composite	44,302	\$ 283.56	\$ 368.98	\$ 652.54	42,614	\$ 54.30	\$ 357.81	\$ 412.11	86,917	\$ 171.16	\$ 363.50	\$ 534.66
Medicaid Expansion												
19-25 Female	795	\$ 298.38	\$ 514.87	\$ 813.25	1,169	\$ 58.37	\$ 307.05	\$ 365.42	1,964	\$ 155.56	\$ 391.20	\$ 546.76
19-25 Male	997	235.23	328.95	564.18	1,172	37.19	400.98	438.17	2,169	128.18	367.88	496.07
26-39 Female	1,435	767.21	832.84	1,600.05	2,777	50.65	526.84	577.49	4,211	294.77	631.09	925.87
26-39 Male	1,961	660.11	826.38	1,486.49	4,133	53.74	607.14	660.88	6,094	248.90	677.70	926.59
40-54 Female	1,772	744.53	659.36	1,403.89	2,024	81.66	859.63	941.29	3,796	391.07	766.15	1,157.22
40-54 Male	2,045	633.37	626.54	1,259.91	3,408	124.38	1,017.38	1,141.76	5,452	315.27	870.80	1,186.07
55-64 Female	1,065	936.49	557.63	1,494.13	1,787	102.10	1,097.53	1,199.63	2,851	413.66	895.94	1,309.60
55-64 Male	1,472	853.60	626.72	1,480.32	2,504	133.51	1,322.91	1,456.42	3,975	400.09	1,065.18	1,465.27
Medicaid Expansion Composite	11,541	\$ 670.20	\$ 651.46	\$ 1,321.66	18,972	\$ 83.30	\$ 805.41	\$ 888.71	30,513	\$ 305.28	\$ 747.19	\$ 1,052.47
Pregnant Women												
Pregnant Women	1,133	1,146.01	1,373.49	2,519.50	1,462	249.46	1,235.46	1,484.92	2,595	640.88	1,295.72	1,936.61
Pregnant Women Composite	1,133	\$ 1,146.01	\$ 1,373.49	\$ 2,519.50	1,462	\$ 249.46	\$ 1,235.46	\$ 1,484.92	2,595	\$ 640.88	\$ 1,295.72	\$ 1,936.61
SSI/Disabled												
Adult	3,297	679.65	1,122.96	1,802.61	5,017	84.59	1,433.32	1,517.91	8,314	320.57	1,310.24	1,630.81
Child	891	319.79	1,079.58	1,399.36	1,053	53.37	965.86	1,019.22	1,944	175.47	1,017.98	1,193.45
SSI/Disabled Composite	4,188	\$ 603.09	\$ 1,113.73	\$ 1,716.82	6,070	\$ 79.17	\$ 1,352.23	\$ 1,431.40	10,258	\$ 293.07	\$ 1,254.86	\$ 1,547.93
Waiver/Institutional												
Child	279	127.64	8,062.09	8,189.73	438	33.40	5,563.68	5,597.08	717	70.07	6,535.86	6,605.93
Adult	495	472.82	9,981.05	10,453.87	1,205	97.28	11,025.95	11,123.23	1,700	206.63	10,721.70	10,928.33
Waiver/Institutional Composite	774	\$ 348.39	\$ 9,289.33	\$ 9,637.73	1,643	\$ 80.25	\$ 9,569.79	\$ 9,650.04	2,417	\$ 166.12	\$ 9,479.98	\$ 9,646.09
All Populations Composite	66,518	\$ 378.95	\$ 716.56	\$ 1,095.50	77,475	\$ 65.79	\$ 874.92	\$ 940.71	143,993	\$ 210.46	\$ 801.76	\$ 1,012.22

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix A - High Level Summaries

Fiscal Year: SFY 2017
Region: Northern and Interior Region

Rate Cell	Tribal Members				Non-Tribal Members				All Members			
	Member Months	PMPM			Member Months	PMPM			Member Months	PMPM		
		Tribal Providers	Non-Tribal Providers	Total		Tribal Providers	Non-Tribal Providers	Total		Tribal Providers	Non-Tribal Providers	Total
Excluded-Dual												
None	3,466	182.22	547.36	729.58	1,843	8.00	562.56	570.56	5,309	121.74	552.64	674.38
Excluded-Dual Composite	3,466	\$ 182.22	\$ 547.36	\$ 729.58	1,843	\$ 8.00	\$ 562.56	\$ 570.56	5,309	\$ 121.74	\$ 552.64	\$ 674.38
Excluded-Other												
None	1	0.00	0.00	0.00	2	0.00	46,935.31	46,935.31	3	0.00	31,290.20	31,290.20
Excluded-Other Composite	1	\$ 0.00	\$ 0.00	\$ 0.00	2	\$ 0.00	\$ 46,935.31	\$ 46,935.31	3	\$ 0.00	\$ 31,290.20	\$ 31,290.20
Low-Income Family												
0-2 Months	447	\$ 3,196.97	\$ 1,951.44	\$ 5,148.41	128	\$ 567.15	\$ 4,876.40	\$ 5,443.55	575	\$ 2,611.55	\$ 2,602.56	\$ 5,214.11
3-12 Months	1,826	278.60	249.39	527.99	536	22.18	91.95	114.13	2,362	220.42	213.66	434.07
1-4 Male and Female	7,015	191.83	178.93	370.76	2,487	21.92	74.80	96.72	9,502	147.37	151.68	299.04
5-13 Male and Female	14,828	184.24	208.83	393.07	5,382	18.84	119.57	138.41	20,210	140.20	185.06	325.26
14-18 Female	3,110	330.07	733.02	1,063.09	1,251	14.50	233.94	248.44	4,361	239.54	589.85	829.39
14-18 Male	3,051	197.74	357.77	555.51	1,438	14.38	253.03	271.40	4,489	140.28	324.22	464.51
19-25 Female	1,880	338.22	147.89	486.11	501	54.15	376.77	430.92	2,381	278.44	196.05	474.49
19-25 Male	1,217	130.89	116.05	246.94	511	5.10	114.97	120.07	1,728	93.69	115.73	209.42
26-39 Female	4,344	465.95	271.04	736.99	1,337	27.63	222.28	249.91	5,681	362.80	259.57	622.36
26-39 Male	2,491	157.82	135.19	293.01	992	14.54	170.21	184.75	3,483	117.00	145.17	262.17
40+	4,043	524.96	353.92	878.88	2,034	51.70	392.88	444.58	6,076	366.58	366.96	733.54
Low-Income Family Composite	44,252	\$ 293.32	\$ 280.55	\$ 573.87	16,596	\$ 28.39	\$ 221.25	\$ 249.64	60,849	\$ 221.06	\$ 264.38	\$ 485.44
Medicaid Expansion												
19-25 Female	418	\$ 439.85	\$ 636.60	\$ 1,076.46	201	\$ 41.82	\$ 116.45	\$ 158.28	619	\$ 310.52	\$ 467.60	\$ 778.12
19-25 Male	705	816.81	372.36	1,189.18	157	30.28	75.82	106.10	862	673.51	318.33	991.85
26-39 Female	777	929.93	499.45	1,429.37	381	12.26	220.67	232.93	1,158	628.12	407.76	1,035.88
26-39 Male	1,683	421.39	321.48	742.87	539	122.89	445.97	568.86	2,222	349.00	351.67	700.67
40-54 Female	1,472	1,087.97	576.12	1,664.09	521	55.81	590.89	646.70	1,993	818.34	579.98	1,398.32
40-54 Male	1,773	723.36	459.97	1,183.33	380	43.19	561.31	604.50	2,153	603.28	477.86	1,081.14
55-64 Female	1,484	733.62	967.79	1,701.42	520	94.04	382.17	476.21	2,004	567.68	815.86	1,383.54
55-64 Male	1,895	652.36	684.61	1,336.97	727	64.19	1,400.14	1,464.33	2,622	489.30	882.98	1,372.28
Medicaid Expansion Composite	10,207	\$ 725.04	\$ 573.62	\$ 1,298.66	3,425	\$ 65.71	\$ 612.23	\$ 677.94	13,633	\$ 559.38	\$ 583.32	\$ 1,142.70
Pregnant Women												
Pregnant Women	1,525	1,452.54	819.72	2,272.27	500	77.38	783.60	860.99	2,024	1,113.00	810.80	1,923.81
Pregnant Women Composite	1,525	\$ 1,452.54	\$ 819.72	\$ 2,272.27	500	\$ 77.38	\$ 783.60	\$ 860.99	2,024	\$ 1,113.00	\$ 810.80	\$ 1,923.81
SSI/Disabled												
Adult	1,883	714.12	1,285.95	2,000.07	1,633	86.86	663.84	750.70	3,516	422.79	997.01	1,419.80
Child	429	246.15	677.32	923.47	263	30.04	248.72	278.76	692	164.02	514.43	678.44
SSI/Disabled Composite	2,312	\$ 627.29	\$ 1,173.02	\$ 1,800.30	1,896	\$ 78.98	\$ 606.25	\$ 685.24	4,208	\$ 380.24	\$ 917.65	\$ 1,297.89
Waiver/Institutional												
Child	23	375.02	3,142.12	3,517.14	86	0.00	3,951.25	3,951.25	109	79.13	3,780.52	3,859.65
Adult	44	347.44	7,514.94	7,862.38	45	0.23	6,002.44	6,002.67	89	171.88	6,750.20	6,922.08
Waiver/Institutional Composite	67	\$ 356.91	\$ 6,013.82	\$ 6,370.73	131	\$ 0.08	\$ 4,655.86	\$ 4,655.94	198	\$ 120.82	\$ 5,115.37	\$ 5,236.19
All Populations Composite	61,830	\$ 399.50	\$ 396.76	\$ 796.26	24,394	\$ 36.87	\$ 371.04	\$ 407.91	86,224	\$ 296.91	\$ 389.48	\$ 686.39

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix A - High Level Summaries

Fiscal Year: SFY 2017
Region: Southern Southeast Region

Rate Cell	Tribal Members				Non-Tribal Members				All Members			
	Member Months	PMPM			Member Months	PMPM			Member Months	PMPM		
		Tribal Providers	Non-Tribal Providers	Total		Tribal Providers	Non-Tribal Providers	Total		Tribal Providers	Non-Tribal Providers	Total
Excluded-Dual												
None	2,305	113.30	838.34	951.63	3,118	16.33	1,220.55	1,236.88	5,423	57.55	1,058.09	1,115.64
Excluded-Dual Composite	2,305	\$ 113.30	\$ 838.34	\$ 951.63	3,118	\$ 16.33	\$ 1,220.55	\$ 1,236.88	5,423	\$ 57.55	\$ 1,058.09	\$ 1,115.64
Excluded-Other												
None	-	0.00	0.00	0.00	6	0.00	2,512.86	2,512.86	6	0.00	2,512.86	2,512.86
Excluded-Other Composite	-	\$ 0.00	\$ 0.00	\$ 0.00	6	\$ 0.00	\$ 2,512.86	\$ 2,512.86	6	\$ 0.00	\$ 2,512.86	\$ 2,512.86
Low-Income Family												
0-2 Months	187	\$ 662.65	\$ 10,959.79	\$ 11,622.44	137	\$ 88.98	\$ 3,529.74	\$ 3,618.72	324	\$ 420.08	\$ 7,818.07	\$ 8,238.15
3-12 Months	977	190.64	319.26	509.90	678	28.81	167.92	196.73	1,655	124.35	257.26	381.61
1-4 Male and Female	4,082	153.82	309.76	463.58	3,075	29.00	192.42	221.42	7,157	100.19	259.35	359.54
5-13 Male and Female	8,782	286.38	472.65	759.03	6,188	108.74	349.30	458.04	14,970	212.95	421.66	634.61
14-18 Female	1,727	304.27	621.98	926.25	1,449	61.21	638.72	699.93	3,176	193.38	629.62	822.99
14-18 Male	1,989	287.59	783.15	1,070.74	1,723	34.57	693.91	728.48	3,712	170.15	741.73	911.88
19-25 Female	1,231	283.64	378.71	662.36	972	24.10	174.96	199.06	2,203	169.13	288.82	457.95
19-25 Male	658	150.48	257.26	407.74	700	16.56	198.64	215.20	1,358	81.45	227.04	308.49
26-39 Female	2,817	570.17	495.91	1,066.09	2,913	29.79	500.48	530.28	5,730	295.45	498.24	793.69
26-39 Male	1,338	262.87	293.53	556.40	1,574	29.50	317.68	347.18	2,912	136.73	306.59	443.31
40+	2,166	454.71	532.52	987.23	2,442	55.39	394.78	450.17	4,608	243.09	459.52	702.62
Low-Income Family Composite	25,954	\$ 305.99	\$ 538.92	\$ 844.91	21,851	\$ 57.00	\$ 398.28	\$ 455.28	47,804	\$ 192.18	\$ 474.64	\$ 666.81
Medicaid Expansion												
19-25 Female	361	\$ 309.99	\$ 537.39	\$ 847.38	403	\$ 31.33	\$ 410.84	\$ 442.17	764	\$ 163.00	\$ 470.64	\$ 633.64
19-25 Male	523	242.44	524.15	766.59	684	9.64	389.90	399.54	1,207	110.51	448.07	558.58
26-39 Female	592	628.26	814.14	1,442.40	776	32.16	763.14	795.30	1,368	290.01	785.20	1,075.21
26-39 Male	1,154	486.04	1,195.78	1,681.82	1,619	22.50	564.12	586.62	2,773	215.43	827.03	1,042.47
40-54 Female	1,000	815.46	1,119.53	1,934.99	1,205	114.89	857.50	972.39	2,205	432.61	976.34	1,408.94
40-54 Male	1,023	600.03	779.62	1,379.65	1,564	46.51	1,260.62	1,307.13	2,587	265.43	1,070.37	1,335.81
55-64 Female	684	691.41	859.41	1,550.83	1,006	61.30	1,015.21	1,076.51	1,690	316.33	952.15	1,268.48
55-64 Male	738	722.08	745.61	1,467.69	1,365	55.30	1,104.43	1,159.73	2,103	289.29	978.51	1,267.80
Medicaid Expansion Composite	6,075	\$ 593.68	\$ 886.46	\$ 1,480.14	8,621	\$ 49.75	\$ 866.55	\$ 916.30	14,696	\$ 274.59	\$ 874.78	\$ 1,149.37
Pregnant Women												
Pregnant Women	630	457.23	1,670.01	2,127.25	577	116.10	1,484.60	1,600.70	1,207	294.16	1,581.38	1,875.54
Pregnant Women Composite	630	\$ 457.23	\$ 1,670.01	\$ 2,127.25	577	\$ 116.10	\$ 1,484.60	\$ 1,600.70	1,207	\$ 294.16	\$ 1,581.38	\$ 1,875.54
SSI/Disabled												
Adult	1,529	448.56	1,376.77	1,825.33	2,880	46.37	1,428.81	1,475.17	4,409	185.84	1,410.76	1,596.60
Child	290	209.40	1,683.08	1,892.49	315	55.53	4,107.58	4,163.11	605	129.29	2,945.42	3,074.71
SSI/Disabled Composite	1,819	\$ 410.43	\$ 1,425.61	\$ 1,836.04	3,195	\$ 47.27	\$ 1,692.91	\$ 1,740.18	5,014	\$ 179.02	\$ 1,595.94	\$ 1,774.96
Waiver/Institutional												
Child	130	469.52	3,050.09	3,519.61	148	36.84	3,615.21	3,652.06	278	239.18	3,350.95	3,590.12
Adult	225	218.63	11,888.78	12,107.41	432	60.73	9,956.76	10,017.49	657	114.80	10,618.41	10,733.21
Waiver/Institutional Composite	355	\$ 310.51	\$ 8,652.07	\$ 8,962.58	580	\$ 54.63	\$ 8,338.57	\$ 8,393.20	935	\$ 151.78	\$ 8,457.60	\$ 8,609.38
All Populations Composite	37,138	\$ 348.81	\$ 754.53	\$ 1,103.34	37,948	\$ 52.05	\$ 819.44	\$ 871.48	75,086	\$ 198.83	\$ 787.33	\$ 986.16

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix A - High Level Summaries

Fiscal Year: SFY 2017
Region: Western Region

Rate Cell	Tribal Members				Non-Tribal Members				All Members			
	Member Months	PMPM			Member Months	PMPM			Member Months	PMPM		
		Tribal Providers	Non-Tribal Providers	Total		Tribal Providers	Non-Tribal Providers	Total		Tribal Providers	Non-Tribal Providers	Total
Excluded-Dual												
None	12,703	1,009.36	479.17	1,488.53	933	230.39	312.19	542.58	13,636	956.06	467.74	1,423.81
Excluded-Dual Composite	12,703	\$ 1,009.36	\$ 479.17	\$ 1,488.53	933	\$ 230.39	\$ 312.19	\$ 542.58	13,636	\$ 956.06	\$ 467.74	\$ 1,423.81
Excluded-Other												
None	10	0.00	12.22	12.22	-	0.00	0.00	0.00	10	0.00	12.22	12.22
Excluded-Other Composite	10	\$ 0.00	\$ 12.22	\$ 12.22	-	\$ 0.00	\$ 0.00	\$ 0.00	10	\$ 0.00	\$ 12.22	\$ 12.22
Low-Income Family												
0-2 Months	2,060	\$ 4,949.07	\$ 2,158.05	\$ 7,107.11	84	\$ 2,832.30	\$ 1,561.72	\$ 4,394.02	2,144	\$ 4,866.14	\$ 2,134.68	\$ 7,000.82
3-12 Months	8,860	834.73	230.78	1,065.51	246	481.59	142.39	623.98	9,106	825.19	228.40	1,053.59
1-4 Male and Female	36,363	348.67	233.10	581.77	448	110.35	57.71	168.06	36,811	345.77	230.97	576.73
5-13 Male and Female	77,058	258.42	164.33	422.75	676	100.54	112.67	213.22	77,734	257.05	163.88	420.93
14-18 Female	15,453	402.01	415.48	817.48	146	89.19	80.38	169.57	15,599	399.08	412.34	811.42
14-18 Male	17,115	367.10	356.91	724.01	100	72.91	147.95	220.86	17,215	365.39	355.69	721.09
19-25 Female	12,511	494.06	148.94	642.99	60	246.44	43.36	289.79	12,571	492.88	148.43	641.31
19-25 Male	8,000	187.97	59.87	247.85	75	24.01	20.63	44.64	8,075	186.45	59.51	245.96
26-39 Female	21,130	603.44	174.26	777.69	167	332.84	17.47	350.30	21,297	601.32	173.03	774.34
26-39 Male	14,097	250.46	95.48	345.94	181	217.45	500.03	717.49	14,278	250.04	100.61	350.65
40+	29,971	460.62	168.60	629.22	515	342.11	61.95	404.06	30,485	458.62	166.80	625.42
Low-Income Family Composite	242,618	\$ 414.02	\$ 216.73	\$ 630.75	2,698	\$ 289.77	\$ 157.25	\$ 447.02	245,316	\$ 412.66	\$ 216.07	\$ 628.73
Medicaid Expansion												
19-25 Female	2,682	\$ 534.65	\$ 147.26	\$ 681.90	8	\$ 140.01	\$ 168.89	\$ 308.90	2,691	\$ 533.42	\$ 147.32	\$ 680.74
19-25 Male	5,541	259.12	90.24	349.36	58	138.95	512.19	651.14	5,599	257.87	94.61	352.48
26-39 Female	2,271	913.30	400.04	1,313.34	113	431.22	147.59	578.81	2,384	890.45	388.07	1,278.52
26-39 Male	6,597	532.74	160.47	693.21	308	424.42	96.30	520.73	6,905	527.91	157.61	685.52
40-54 Female	3,148	945.03	248.58	1,193.60	96	767.65	217.20	984.85	3,244	939.78	247.65	1,187.43
40-54 Male	5,331	814.36	240.88	1,055.24	342	225.43	219.72	445.16	5,673	778.82	239.60	1,018.42
55-64 Female	2,915	862.91	270.92	1,133.83	118	409.03	524.25	933.28	3,033	845.25	280.78	1,126.03
55-64 Male	3,798	665.20	269.96	935.15	363	244.36	218.57	462.93	4,161	628.48	265.47	893.95
Medicaid Expansion Composite	32,284	\$ 644.81	\$ 208.89	\$ 853.70	1,407	\$ 338.74	\$ 223.74	\$ 562.48	33,690	\$ 632.03	\$ 209.51	\$ 841.54
Pregnant Women												
Pregnant Women	5,908	2,049.83	661.06	2,710.89	75	999.81	671.94	1,671.75	5,983	2,036.67	661.20	2,697.86
Pregnant Women Composite	5,908	\$ 2,049.83	\$ 661.06	\$ 2,710.89	75	\$ 999.81	\$ 671.94	\$ 1,671.75	5,983	\$ 2,036.67	\$ 661.20	\$ 2,697.86
SSI/Disabled												
Adult	5,953	1,205.88	554.31	1,760.19	573	1,428.87	484.96	1,913.82	6,526	1,225.46	548.22	1,773.68
Child	1,896	567.46	1,428.81	1,996.28	70	377.41	408.56	785.96	1,966	560.69	1,392.49	1,953.18
SSI/Disabled Composite	7,849	\$ 1,051.65	\$ 765.57	\$ 1,817.22	643	\$ 1,314.40	\$ 476.64	\$ 1,791.04	8,492	\$ 1,071.55	\$ 743.69	\$ 1,815.24
Waiver/Institutional												
Child	363	1,243.27	4,063.12	5,306.39	49	385.82	5,505.25	5,891.07	412	1,141.29	4,234.63	5,375.92
Adult	629	6,729.17	4,947.63	11,676.80	50	30,673.14	435.94	31,109.08	679	8,492.35	4,615.40	13,107.75
Waiver/Institutional Composite	992	\$ 4,721.73	\$ 4,623.96	\$ 9,345.69	99	\$ 15,682.45	\$ 2,944.99	\$ 18,627.44	1,091	\$ 5,716.33	\$ 4,471.61	\$ 10,187.94
All Populations Composite	302,363	\$ 526.31	\$ 264.30	\$ 790.61	5,855	\$ 674.00	\$ 286.73	\$ 960.73	308,218	\$ 529.12	\$ 264.72	\$ 793.84

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

APPENDIX B: DETAILED SUMMARIES – COMPOSITE POPULATION BY REGION

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year:		SFY 2016						
Population:		All Populations						
Rate Cell:		All Rate Cells						
Region:		Statewide						
Tribal/Non-Tribal Members:		All						
Member Months:		1,850,238						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	332.7	\$ 3,022.48	\$ 83.80	109.9	\$ 3,056.18	\$ 27.99	\$ 111.79
Inpatient Maternity Delivery	Days	44.7	2,834.02	10.56	18.6	3,114.52	4.82	15.38
Inpatient Well Newborn	Days	35.1	2,906.76	8.49	12.5	3,080.61	3.22	11.71
Other Inpatient	Days	0.3	25.45	0.00	-	-	-	0.00
Subtotal – Inpatient Hospital		412.8	\$ 2,989.75	\$ 102.85	141.0	\$ 3,066.03	\$ 36.03	\$ 138.88
Outpatient Hospital								
Outpatient Emergency Room	Visits	501.5	\$ 682.43	\$ 28.52	241.3	\$ 567.08	\$ 11.40	\$ 39.92
Outpatient Surgery	Visits	83.4	2,226.45	15.47	28.3	986.17	2.33	17.80
Outpatient Radiology	Procedures	180.4	331.82	4.99	50.8	503.78	2.13	7.12
Outpatient Pathology/Lab	Procedures	910.5	21.36	1.62	347.2	394.34	11.41	13.03
Outpatient Pharmacy	Procedures	146.8	256.96	3.14	27.5	396.71	0.91	4.05
Other Outpatient	Procedures	750.8	113.36	7.09	433.4	368.68	13.32	20.41
Subtotal – Outpatient Hospital		2,573.4	\$ 283.69	\$ 60.84	1,128.6	\$ 441.28	\$ 41.50	\$ 102.34
Professional								
Inpatient and Outpatient Surgery	Procedures	435.7	\$ 320.47	\$ 11.64	81.4	\$ 387.95	\$ 2.63	\$ 14.27
Anesthesia	Procedures	120.1	421.01	4.21	36.1	423.98	1.27	5.49
Inpatient Visits	Visits	458.4	267.27	10.21	93.9	290.13	2.27	12.48
Emergency Room	Visits	529.8	158.42	6.99	175.8	131.34	1.92	8.92
Office/Home Visits/Consults	Visits	2,200.2	112.46	20.62	515.0	111.04	4.77	25.39
Maternity	Procedures	51.9	687.78	2.98	18.7	781.74	1.22	4.20
Pathology/Lab	Procedures	1,816.2	23.99	3.63	91.9	30.12	0.23	3.86
Radiology	Procedures	1,084.2	91.25	8.24	218.0	44.61	0.81	9.06
Office Administered Drugs	Procedures	269.2	149.94	3.36	19.2	36.96	0.06	3.42
FQHC/RHC/Tribal Clinic	Visits	380.0	242.04	7.66	927.5	523.95	40.50	48.16
Physical Exams	Visits	325.8	161.58	4.39	46.0	125.83	0.48	4.87
Therapy	Visits	1,051.5	138.03	12.10	8.7	55.89	0.04	12.14
Vision	Visits	579.8	94.87	4.58	12.7	96.65	0.10	4.69
Other Professional	Procedures	1,019.0	78.49	6.67	80.0	86.47	0.58	7.24
Telemedicine	Procedures	7.2	141.81	0.08	56.5	363.53	1.71	1.80
Subtotal – Professional		10,328.9	\$ 124.74	\$ 107.37	2,381.5	\$ 295.27	\$ 58.60	\$ 165.96
Pharmacy								
Psychotropic Drugs	Scripts	691.9	\$ 54.48	\$ 3.14	171.4	\$ 29.79	\$ 0.43	\$ 3.57
Opioid Drugs	Scripts	490.5	56.91	2.33	104.7	22.50	0.20	2.52
All Other Drugs	Scripts	3,770.3	111.56	35.05	1,310.1	66.89	7.30	42.35
Subtotal – Pharmacy		4,952.7	\$ 98.18	\$ 40.52	1,586.2	\$ 59.95	\$ 7.92	\$ 48.44
Ancillary								
Ground Transportation	Trips	1,907.0	\$ 54.89	\$ 8.72	0.9	\$ 288.07	\$ 0.02	\$ 8.74
Air Transportation	Trips	581.9	654.05	31.72	1.5	7,639.15	0.95	32.67
Accommodations	Claims	230.6	303.30	5.83	-	-	-	5.83
DIME/Prosthetics	Procedures	1,243.3	94.21	9.76	0.1	47.62	0.00	9.76
Dental	Procedures	3,086.3	128.66	33.09	374.1	512.80	15.99	49.08
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		7,049.2	\$ 151.71	\$ 89.12	376.6	\$ 540.37	\$ 16.96	\$ 106.08
LTSS								
Hospice	Days	1.3	\$ 3,317.22	\$ 0.36	-	\$ 0.00	\$ 0.00	\$ 0.36
Nursing Home	Days	55.8	162.21	0.75	2.6	3,018.84	0.65	1.40
Skilled Nursing Facility	Days	1,254.8	543.25	56.81	114.7	938.48	8.97	65.78
HCBS	Procedures	9,270.3	176.25	136.16	0.6	357.89	0.02	136.17
Case Management	Procedures	378.6	219.58	6.93	17.6	294.92	0.43	7.36
Personal Care	Procedures	5,879.9	80.94	39.66	16.7	46.34	0.06	39.73
Subtotal – LTSS		16,840.6	\$ 171.49	\$ 240.66	152.1	\$ 798.95	\$ 10.13	\$ 250.79
Behavioral Health								
IP Psych Hospital - API	Days	22.0	\$ 1,305.67	\$ 2.39	-	\$ 0.00	\$ 0.00	\$ 2.39
IP Psych Hospital - All Other	Days	134.4	713.68	7.99	-	-	-	7.99
IP General Hospital - MH/SA	Days	36.2	2,815.40	8.48	1.8	3,854.73	0.58	9.06
OP General Hospital - MH/SA	Visits	3.9	54.53	0.02	1.0	16.82	0.00	0.02
Screening	Procedures	26.7	40.55	0.09	5.5	580.77	0.27	0.36
Assessment	Procedures	37.9	208.86	0.66	10.4	592.33	0.51	1.17
Crisis Services	Procedures	38.3	189.99	0.61	13.2	597.16	0.66	1.26
Medication Services	Procedures	184.3	30.98	0.48	8.6	598.42	0.43	0.91
Methadone Medication Services	Procedures	246.5	12.50	0.26	-	-	-	0.26
Other Opioid Medication Services	Procedures	0.0	15.99	0.00	-	-	-	0.00
Individual Therapy OP	Procedures	409.0	88.27	3.01	62.4	590.98	3.07	6.08
Family Therapy OP	Procedures	101.6	98.18	0.83	9.0	575.82	0.43	1.26
Group Therapy OP	Procedures	247.3	75.12	1.55	15.6	517.24	0.67	2.22
SBIRT	Procedures	0.2	43.90	0.00	5.1	600.38	0.26	0.26
Substance Abuse Residential	Days	132.8	230.60	2.55	143.7	383.48	4.59	7.14
Children's Residential	Days	796.3	176.24	11.70	83.2	317.12	2.20	13.89
RPTC - In State	Days	279.0	323.09	7.51	-	-	-	7.51
RPTC - Out of State	Days	246.6	362.10	7.44	-	-	-	7.44
Detoxification	Procedures	-	-	-	5.5	602.34	0.28	0.28
Medical Evaluation	Procedures	17.3	218.55	0.32	0.2	538.44	0.01	0.33
Psychological Testing	Procedures	67.0	330.36	1.85	0.9	459.90	0.03	1.88
Peer Support Services	Units	32.4	16.73	0.05	0.1	150.50	0.00	0.05
Psychosocial Rehabilitation Services	Procedures	1,864.9	184.32	28.65	200.3	601.23	10.03	38.68
BH Case Management	Units	1,112.1	15.98	1.48	48.9	225.64	0.92	2.40
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	12.7	103.35	0.11	3.9	579.56	0.19	0.30
Other Professional MH/SA	Visits	85.2	40.56	0.29	14.2	601.71	0.71	1.00
Subtotal – Behavioral Health		6,134.6	\$ 172.72	\$ 88.30	633.5	\$ 489.55	\$ 25.84	\$ 114.14
Total All Services		48,292.3	\$ 181.31	\$ 729.66	6,399.5	\$ 369.37	\$ 196.98	\$ 926.64

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year: SFY 2016
Population: All Populations
Rate Cell: All Rate Cells
Region: Anchorage Municipality
Tribal/Non-Tribal Members: All
Member Months: 668,863

Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	438.9	\$ 2,945.09	\$ 107.72	117.4	\$ 2,963.45	\$ 28.98	\$ 136.70
Inpatient Maternity Delivery	Days	50.8	2,723.54	11.52	10.4	3,152.03	2.73	14.25
Inpatient Well Newborn	Days	42.4	2,789.61	9.87	7.4	3,028.26	1.88	11.75
Other Inpatient	Days	1.0	25.45	0.00	-	-	-	0.00
Subtotal - Inpatient Hospital		533.1	\$ 2,906.40	\$ 129.11	135.2	\$ 2,981.51	\$ 33.59	\$ 162.70
Outpatient Hospital								
Outpatient Emergency Room	Visits	651.8	\$ 582.28	\$ 31.63	250.6	\$ 496.38	\$ 10.36	\$ 41.99
Outpatient Surgery	Visits	85.5	1,838.12	13.09	18.9	947.05	1.49	14.58
Outpatient Radiology	Procedures	81.3	305.61	2.07	30.4	486.40	1.23	3.30
Outpatient Pathology/Lab	Procedures	978.2	18.32	1.49	207.2	463.01	7.99	9.49
Outpatient Pharmacy	Procedures	168.4	267.05	3.75	8.1	447.83	0.30	4.05
Other Outpatient	Procedures	923.3	110.12	8.47	394.1	277.80	9.12	17.60
Subtotal - Outpatient Hospital		2,888.4	\$ 251.36	\$ 60.50	909.2	\$ 402.63	\$ 30.51	\$ 91.01
Professional								
Inpatient and Outpatient Surgery	Procedures	521.6	\$ 314.65	\$ 13.68	79.7	\$ 328.88	\$ 2.19	\$ 15.86
Anesthesia	Procedures	132.5	434.85	4.80	30.7	429.00	1.10	5.90
Inpatient Visits	Visits	611.0	273.50	13.93	86.5	317.79	2.29	16.22
Emergency Room	Visits	685.8	162.22	9.27	290.3	139.99	3.39	12.66
Office/Home Visits/Consults	Visits	2,520.8	110.93	23.30	196.2	104.78	1.71	25.02
Maternity	Procedures	62.2	643.37	3.34	13.9	512.15	0.59	3.93
Pathology/Lab	Procedures	2,349.6	21.66	4.24	23.9	73.30	0.15	4.39
Radiology	Procedures	1,340.7	85.75	9.58	306.4	40.20	1.03	10.61
Office Administered Drugs	Procedures	330.4	161.51	4.45	2.8	26.62	0.01	4.45
FQHC/RHC/Tribal Clinic	Visits	381.9	249.06	7.93	700.0	524.69	30.61	38.53
Physical Exams	Visits	466.3	160.45	6.23	9.9	138.92	0.11	6.35
Therapy	Visits	1,317.5	128.67	14.13	18.2	50.16	0.08	14.20
Vision	Visits	575.3	89.79	4.30	9.5	133.77	0.11	4.41
Other Professional	Procedures	1,453.0	74.54	9.03	93.5	83.78	0.65	9.68
Telemedicine	Procedures	3.8	148.58	0.05	6.9	314.06	0.18	0.23
Subtotal - Professional		12,752.4	\$ 120.68	\$ 128.25	1,868.4	\$ 283.75	\$ 44.18	\$ 172.43
Pharmacy								
Psychotropic Drugs	Scripts	975.3	\$ 47.39	\$ 3.85	262.5	\$ 28.53	\$ 0.62	\$ 4.48
Opioid Drugs	Scripts	492.4	51.52	2.11	81.1	35.59	0.24	2.35
All Other Drugs	Scripts	4,664.0	102.84	39.97	1,310.9	79.43	8.68	48.65
Subtotal - Pharmacy		6,131.7	\$ 89.90	\$ 45.94	1,654.5	\$ 69.21	\$ 9.54	\$ 55.48
Ancillary								
Ground Transportation	Trips	837.4	\$ 107.30	\$ 7.49	0.1	\$ 219.80	\$ 0.00	\$ 7.49
Air Transportation	Trips	72.0	842.10	5.05	0.2	7,424.08	0.11	5.17
Accommodations	Claims	32.3	455.97	1.23	-	-	-	1.23
DIME/Prosthetics	Procedures	1,671.4	88.36	12.31	0.0	44.63	0.00	12.31
Dental	Procedures	3,925.7	128.39	42.00	136.5	491.02	5.59	47.59
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		6,538.9	\$ 124.94	\$ 68.08	136.9	\$ 499.80	\$ 5.70	\$ 73.78
LTSS								
Hospice	Days	0.8	\$ 9,191.17	\$ 0.63	-	\$ 0.00	\$ 0.00	\$ 0.63
Nursing Home	Days	12.5	548.51	0.57	4.7	3,097.97	1.22	1.79
Skilled Nursing Facility	Days	1,486.0	388.92	48.16	8.1	904.13	0.61	48.77
HCBS	Procedures	13,144.8	170.19	186.42	1.0	326.95	0.03	186.45
Case Management	Procedures	488.2	221.60	9.02	16.8	247.55	0.35	9.36
Personal Care	Procedures	9,452.0	77.50	61.05	-	-	-	61.05
Subtotal - LTSS		24,584.4	\$ 149.29	\$ 305.85	30.8	\$ 862.83	\$ 2.21	\$ 308.06
Behavioral Health								
IP Psych Hospital - API	Days	30.1	\$ 1,304.67	\$ 3.27	-	\$ 0.00	\$ 0.00	\$ 3.27
IP Psych Hospital - All Other	Days	170.4	711.79	10.11	-	-	-	10.11
IP General Hospital - MH/SA	Days	36.7	2,741.88	8.37	1.2	2,941.63	0.29	8.67
OP General Hospital - MH/SA	Visits	1.0	90.59	0.01	0.2	19.14	0.00	0.01
Screening	Procedures	24.9	44.02	0.09	3.4	536.96	0.15	0.24
Assessment	Procedures	39.5	195.40	0.64	6.5	593.92	0.32	0.96
Crisis Services	Procedures	36.1	144.65	0.43	9.3	599.23	0.46	0.90
Medication Services	Procedures	111.8	38.77	0.36	14.4	601.83	0.72	1.08
Methadone Medication Services	Procedures	561.2	12.50	0.58	-	-	-	0.58
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	413.8	87.75	3.03	55.3	580.78	2.68	5.70
Family Therapy OP	Procedures	102.2	94.53	0.81	7.7	592.92	0.38	1.18
Group Therapy OP	Procedures	192.0	72.83	1.17	23.1	449.53	0.87	2.03
SBIRT	Procedures	0.3	44.06	0.00	0.7	602.21	0.03	0.04
Substance Abuse Residential	Days	122.2	244.34	2.49	127.3	240.06	2.55	5.03
Children's Residential	Days	956.0	174.36	13.89	55.3	240.64	1.11	15.00
RPTC - In State	Days	453.9	310.25	11.73	-	-	-	11.73
RPTC - Out of State	Days	268.4	370.42	8.29	-	-	-	8.29
Detoxification	Procedures	-	-	-	0.9	602.72	0.05	0.05
Medical Evaluation	Procedures	26.2	221.77	0.49	-	-	-	0.49
Psychological Testing	Procedures	90.0	303.75	2.28	0.1	284.97	0.00	2.28
Peer Support Services	Units	25.9	16.99	0.04	-	-	-	0.04
Psychosocial Rehabilitation Services	Procedures	1,644.2	192.35	26.36	200.8	601.21	10.06	36.42
BH Case Management	Units	1,301.7	15.99	1.73	60.7	176.36	0.89	2.63
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	5.5	117.90	0.05	0.7	527.20	0.03	0.08
Other Professional MH/SA	Visits	81.0	41.65	0.28	10.7	603.08	0.54	0.82
Subtotal - Behavioral Health		6,695.0	\$ 172.96	\$ 96.50	578.2	\$ 438.61	\$ 21.13	\$ 117.63
Total All Services		60,123.9	\$ 166.50	\$ 834.22	5,313.1	\$ 331.70	\$ 146.86	\$ 981.09

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year:		SFY 2016						
Population:		All Populations						
Rate Cell:		All Rate Cells						
Region:		Fairbanks North Star Borough						
Tribal/Non-Tribal Members:		All						
Member Months:		155,785						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	356.4	\$ 2,993.20	\$ 88.90	25.8	\$ 3,229.11	\$ 6.94	\$ 95.85
Inpatient Maternity Delivery	Days	76.7	2,734.42	17.48	2.2	3,208.07	0.60	18.08
Inpatient Well Newborn	Days	49.2	2,775.51	11.38	0.6	3,130.50	0.16	11.55
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal – Inpatient Hospital		482.4	\$ 2,929.82	\$ 117.77	28.7	\$ 3,225.35	\$ 7.70	\$ 125.47
Outpatient Hospital								
Outpatient Emergency Room	Visits	720.8	\$ 728.61	\$ 43.77	31.7	\$ 543.60	\$ 1.44	\$ 45.21
Outpatient Surgery	Visits	94.8	2,074.98	16.40	8.6	915.01	0.65	17.05
Outpatient Radiology	Procedures	408.6	265.80	9.05	7.5	494.45	0.31	9.36
Outpatient Pathology/Lab	Procedures	1,413.9	18.77	2.21	33.6	476.77	1.33	3.55
Outpatient Pharmacy	Procedures	184.6	117.82	1.81	4.4	450.72	0.16	1.98
Other Outpatient	Procedures	637.9	118.06	6.28	92.9	347.24	2.69	8.96
Subtotal – Outpatient Hospital		3,460.7	\$ 275.72	\$ 79.52	178.7	\$ 442.38	\$ 6.59	\$ 86.10
Professional								
Inpatient and Outpatient Surgery	Procedures	501.4	\$ 299.50	\$ 12.51	31.8	\$ 475.23	\$ 1.26	\$ 13.77
Anesthesia	Procedures	135.0	404.46	4.55	12.7	406.01	0.43	4.98
Inpatient Visits	Visits	432.9	296.30	10.69	31.0	345.98	0.90	11.58
Emergency Room	Visits	767.7	161.80	10.35	28.8	149.42	0.36	10.71
Office/Home Visits/Consults	Visits	2,583.5	112.94	24.31	85.0	113.95	0.81	25.12
Maternity	Procedures	60.0	796.94	3.99	9.9	1,393.69	1.15	5.13
Pathology/Lab	Procedures	1,143.4	26.29	2.50	15.8	56.22	0.07	2.58
Radiology	Procedures	1,200.9	58.26	5.83	57.4	45.95	0.22	6.05
Office Administered Drugs	Procedures	396.8	127.43	4.21	2.4	49.55	0.01	4.22
FQHC/RHC/Tribal Clinic	Visits	521.3	237.59	10.32	1,270.2	507.10	53.68	64.00
Physical Exams	Visits	384.7	170.57	5.47	8.7	126.32	0.09	5.56
Therapy	Visits	1,939.4	103.10	16.66	1.2	52.42	0.01	16.67
Vision	Visits	588.0	95.49	4.68	3.7	95.91	0.03	4.71
Other Professional	Procedures	862.8	96.10	6.91	19.3	183.96	0.30	7.21
Telemedicine	Procedures	15.9	182.33	0.24	9.2	132.20	0.10	0.34
Subtotal – Professional		11,533.6	\$ 128.21	\$ 123.23	1,587.0	\$ 449.14	\$ 59.40	\$ 182.63
Pharmacy								
Psychotropic Drugs	Scripts	689.7	\$ 68.54	\$ 3.94	169.5	\$ 40.44	\$ 0.57	\$ 4.51
Opioid Drugs	Scripts	554.1	49.33	2.28	93.2	22.62	0.18	2.45
All Other Drugs	Scripts	4,276.0	99.44	35.43	980.6	59.24	4.84	40.27
Subtotal – Pharmacy		5,519.8	\$ 90.55	\$ 41.65	1,243.3	\$ 53.94	\$ 5.59	\$ 47.24
Ancillary								
Ground Transportation	Trips	1,003.5	\$ 71.18	\$ 5.95	-	\$ 0.00	\$ 0.00	\$ 5.95
Air Transportation	Trips	265.4	751.73	16.62	0.1	11,729.45	0.08	16.70
Accommodations	Claims	129.1	328.58	3.54	-	-	-	3.54
DME/Prosthetics	Procedures	947.5	101.90	8.05	0.2	29.12	0.00	8.05
Dental	Procedures	3,473.2	148.97	43.12	231.6	479.70	9.26	52.38
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		5,818.7	\$ 159.36	\$ 77.27	231.9	\$ 483.14	\$ 9.33	\$ 86.61
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.40	-	\$ 0.00	\$ 0.00	\$ 0.40
Nursing Home	Days	6.5	291.74	0.16	4.5	3,335.00	1.24	1.40
Skilled Nursing Facility	Days	1,679.7	671.19	93.95	-	-	-	93.95
HCBS	Procedures	7,577.7	202.64	127.96	0.1	370.00	0.00	127.96
Case Management	Procedures	369.0	214.10	6.58	2.0	312.70	0.05	6.64
Personal Care	Procedures	2,661.6	88.88	19.71	9.1	60.87	0.05	19.76
Subtotal – LTSS		12,294.5	\$ 242.81	\$ 248.77	15.6	\$ 1,030.11	\$ 1.34	\$ 250.11
Behavioral Health								
IP Psych Hospital - API	Days	29.2	\$ 1,152.63	\$ 2.80	-	\$ 0.00	\$ 0.00	\$ 2.80
IP Psych Hospital - All Other	Days	131.6	179.71	7.89	-	-	-	7.89
IP General Hospital - MH/SA	Days	89.5	2,824.95	21.07	0.2	6,630.23	0.13	21.20
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	22.0	42.03	0.08	3.1	590.18	0.15	0.23
Assessment	Procedures	39.1	205.77	0.67	7.5	596.13	0.37	1.04
Crisis Services	Procedures	186.6	257.04	4.00	2.4	597.88	0.12	4.12
Medication Services	Procedures	481.7	21.43	0.86	12.6	602.51	0.63	1.49
Methadone Medication Services	Procedures	365.0	12.50	0.38	-	-	-	0.38
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	549.3	98.21	4.50	20.9	589.23	1.03	5.52
Family Therapy OP	Procedures	101.7	96.60	0.82	1.7	601.00	0.08	0.90
Group Therapy OP	Procedures	264.3	75.38	1.66	3.4	598.32	0.17	1.83
SBIRT	Procedures	-	-	-	17.0	599.03	0.85	0.85
Substance Abuse Residential	Days	66.1	227.85	1.25	311.0	571.36	14.81	16.06
Children's Residential	Days	1,155.6	178.24	17.16	21.4	172.22	0.31	17.47
RPTC - In State	Days	112.7	323.55	3.04	-	-	-	3.04
RPTC - Out of State	Days	425.6	365.37	12.96	-	-	-	12.96
Detoxification	Procedures	-	-	-	51.3	602.21	2.57	2.57
Medical Evaluation	Procedures	11.7	225.80	0.22	1.8	602.65	0.09	0.31
Psychological Testing	Procedures	31.4	454.66	1.19	-	-	-	1.19
Peer Support Services	Units	2.5	17.00	0.00	-	-	-	0.00
Psychosocial Rehabilitation Services	Procedures	2,582.8	181.22	39.00	275.4	601.26	13.80	52.80
BH Case Management	Units	1,174.6	15.98	1.56	44.4	468.62	1.74	3.30
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	24.9	66.23	0.14	-	-	-	0.14
Other Professional MH/SA	Visits	100.3	39.94	0.33	14.7	602.25	0.74	1.07
Subtotal – Behavioral Health		7,948.0	\$ 183.58	\$ 121.59	788.9	\$ 571.74	\$ 37.59	\$ 159.18
Total All Services		47,057.6	\$ 206.51	\$ 809.80	4,074.0	\$ 375.67	\$ 127.54	\$ 937.34

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year: SFY 2016
 Population: All Populations
 Rate Cell: All Rate Cells
 Region: Gulf Coast/Aleutian Region
 Tribal/Non-Tribal Members: All
 Member Months: 88,646

Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	242.6	\$ 3,128.34	\$ 63.24	102.9	\$ 2,979.72	\$ 25.55	\$ 88.79
Inpatient Maternity Delivery	Days	24.2	3,708.94	7.49	31.5	2,922.48	7.68	15.17
Inpatient Well Newborn	Days	48.2	3,061.38	12.29	24.9	2,905.31	6.03	18.32
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		315.0	\$ 3,162.76	\$ 83.02	159.3	\$ 2,956.75	\$ 39.26	\$ 122.28
Outpatient Hospital								
Outpatient Emergency Room	Visits	201.6	\$ 1,148.18	\$ 19.29	183.7	\$ 541.66	\$ 8.29	\$ 27.58
Outpatient Surgery	Visits	60.2	2,588.42	12.99	70.5	907.22	5.33	18.33
Outpatient Radiology	Procedures	224.8	352.92	6.61	82.2	539.67	3.70	10.31
Outpatient Pathology/Lab	Procedures	505.7	14.53	0.61	455.8	528.66	20.08	20.69
Outpatient Pharmacy	Procedures	146.6	439.52	5.37	38.7	564.11	1.82	7.19
Other Outpatient	Procedures	622.0	162.23	8.41	826.4	423.57	29.17	37.58
Subtotal - Outpatient Hospital		1,761.0	\$ 363.09	\$ 53.28	1,657.3	\$ 495.18	\$ 68.39	\$ 121.67
Professional								
Inpatient and Outpatient Surgery	Procedures	249.8	\$ 419.46	\$ 8.73	137.4	\$ 367.44	\$ 4.21	\$ 12.94
Anesthesia	Procedures	96.2	398.34	3.19	64.4	395.86	2.13	5.32
Inpatient Visits	Visits	285.8	265.51	6.32	124.3	254.19	2.63	8.96
Emergency Room	Visits	196.3	174.05	2.85	126.8	124.13	1.31	4.16
Office/Home Visits/Consults	Visits	1,111.1	117.32	10.86	1,202.5	102.83	10.30	21.17
Maternity	Procedures	25.2	875.42	1.84	32.5	717.61	1.94	3.78
Pathology/Lab	Procedures	983.7	20.40	1.67	301.1	21.82	0.55	2.22
Radiology	Procedures	662.2	108.37	5.98	277.4	42.42	0.98	6.96
Office Administered Drugs	Procedures	143.2	164.16	1.96	56.3	36.61	0.17	2.13
FQHC/RHC/Tribal Clinic	Visits	625.3	293.13	15.27	1,013.4	534.13	45.11	60.38
Physical Exams	Visits	108.3	150.47	1.36	103.8	90.78	0.79	2.14
Therapy	Visits	139.0	104.02	1.21	2.7	56.36	0.01	1.22
Vision	Visits	536.2	86.90	3.88	20.3	150.17	0.25	4.14
Other Professional	Procedures	592.0	64.49	3.18	112.0	92.88	0.87	4.05
Telemedicine	Procedures	1.1	216.19	0.02	28.8	148.19	0.36	0.38
Subtotal - Professional		5,755.4	\$ 142.46	\$ 68.33	3,603.7	\$ 238.44	\$ 71.61	\$ 139.93
Pharmacy								
Psychotropic Drugs	Scripts	281.0	\$ 44.38	\$ 1.04	126.6	\$ 27.62	\$ 0.29	\$ 1.33
Opioid Drugs	Scripts	270.9	37.91	0.86	122.6	17.72	0.18	1.04
All Other Drugs	Scripts	2,130.9	109.52	19.45	1,319.3	83.29	9.16	28.60
Subtotal - Pharmacy		2,682.8	\$ 95.47	\$ 21.34	1,568.5	\$ 73.67	\$ 9.63	\$ 30.97
Ancillary								
Ground Transportation	Trips	2,345.4	\$ 39.96	\$ 7.81	-	\$ 0.00	\$ 0.00	\$ 7.81
Air Transportation	Trips	1,171.5	601.53	58.72	4.5	4,876.12	1.82	60.54
Accommodations	Claims	442.5	349.70	12.90	-	-	-	12.90
DME/Prosthetics	Procedures	653.8	96.93	5.28	0.3	29.12	0.00	5.28
Dental	Procedures	1,980.2	124.17	20.49	675.2	497.76	28.01	48.50
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		6,593.4	\$ 191.46	\$ 105.20	680.0	\$ 526.34	\$ 29.82	\$ 135.02
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Nursing Home	Days	13.7	635.69	0.72	1.6	1,297.34	0.18	0.90
Skilled Nursing Facility	Days	1,886.0	831.95	130.75	-	-	-	130.75
HCBS	Procedures	5,490.7	227.81	104.24	-	-	-	104.24
Case Management	Procedures	205.8	236.55	4.06	43.2	304.62	1.10	5.15
Personal Care	Procedures	4,395.3	73.36	26.87	-	-	-	26.87
Subtotal - LTSS		11,991.4	\$ 266.83	\$ 266.64	44.8	\$ 340.61	\$ 1.27	\$ 267.91
Behavioral Health								
IP Psych Hospital - API	Days	5.6	\$ 1,349.79	\$ 0.62	-	\$ 0.00	\$ 0.00	\$ 0.62
IP Psych Hospital - All Other	Days	99.8	714.59	5.94	-	-	-	5.94
IP General Hospital - MH/SA	Days	31.0	2,787.92	7.20	2.2	3,130.50	0.57	7.77
OP General Hospital - MH/SA	Visits	12.2	43.03	0.04	-	-	-	0.04
Screening	Procedures	18.5	36.28	0.06	2.7	602.50	0.14	0.19
Assessment	Procedures	27.2	197.39	0.45	23.8	601.96	1.20	1.64
Crisis Services	Procedures	9.1	88.57	0.07	36.5	597.58	1.82	1.89
Medication Services	Procedures	97.9	33.52	0.27	2.2	601.25	0.11	0.38
Methadone Medication Services	Procedures	29.8	12.50	0.03	-	-	-	0.03
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	193.7	89.68	1.45	80.8	581.34	3.92	5.36
Family Therapy OP	Procedures	19.0	94.99	0.15	26.4	598.99	1.32	1.47
Group Therapy OP	Procedures	137.5	66.90	0.77	14.1	595.35	0.70	1.47
SBIRT	Procedures	0.1	43.80	0.00	0.4	601.67	0.02	0.02
Substance Abuse Residential	Days	51.0	160.74	0.68	414.6	474.80	16.41	17.09
Children's Residential	Days	346.5	196.58	5.68	109.6	462.82	4.23	9.91
RPTC - In State	Days	192.4	363.53	5.83	-	-	-	5.83
RPTC - Out of State	Days	123.2	358.36	3.68	-	-	-	3.68
Detoxification	Procedures	-	-	-	-	-	-	-
Medical Evaluation	Procedures	5.6	230.90	0.11	-	-	-	0.11
Psychological Testing	Procedures	22.1	482.01	0.89	-	-	-	0.89
Peer Support Services	Units	-	-	-	-	-	-	-
Psychosocial Rehabilitation Services	Procedures	755.4	123.46	7.77	205.4	599.98	10.27	18.04
BH Case Management	Units	259.0	15.64	0.34	75.0	234.83	1.47	1.81
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	4.3	72.68	0.03	18.7	592.37	0.92	0.95
Other Professional MH/SA	Visits	37.6	39.94	0.13	20.4	601.43	1.02	1.15
Subtotal - Behavioral Health		2,478.3	\$ 204.19	\$ 42.17	1,032.9	\$ 512.28	\$ 44.09	\$ 86.26
Total All Services		31,577.4	\$ 243.21	\$ 639.99	8,746.5	\$ 362.30	\$ 264.07	\$ 904.06

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year: SFY 2016
Population: All Populations
Rate Cell: All Rate Cells
Region: Kenai Peninsula Borough
Tribal/Non-Tribal Members: All
Member Months: 153,291

Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	363.0	\$ 3,175.30	\$ 96.05	36.7	\$ 3,121.21	\$ 9.55	\$ 105.60
Inpatient Maternity Delivery	Days	53.9	3,353.60	15.07	4.1	3,110.93	1.08	16.15
Inpatient Well Newborn	Days	41.6	3,636.96	12.62	2.3	2,751.03	0.54	13.16
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		458.6	\$ 3,238.19	\$ 123.75	43.2	\$ 3,100.10	\$ 11.16	\$ 134.91
Outpatient Hospital								
Outpatient Emergency Room	Visits	624.1	\$ 1,000.90	\$ 52.06	35.9	\$ 511.06	\$ 1.53	\$ 53.59
Outpatient Surgery	Visits	136.1	2,906.68	32.96	8.5	993.08	0.71	33.66
Outpatient Radiology	Procedures	501.2	409.13	17.09	10.6	469.43	0.42	17.50
Outpatient Pathology/Lab	Procedures	1,505.1	25.90	3.25	73.1	451.41	2.75	6.00
Outpatient Pharmacy	Procedures	231.8	178.73	3.45	6.7	475.82	0.27	3.72
Other Outpatient	Procedures	1,593.8	104.98	13.94	90.1	335.15	2.52	16.46
Subtotal - Outpatient Hospital		4,592.0	\$ 320.76	\$ 122.75	225.1	\$ 436.51	\$ 8.19	\$ 130.93
Professional								
Inpatient and Outpatient Surgery	Procedures	612.7	\$ 344.79	\$ 17.60	25.8	\$ 411.42	\$ 0.88	\$ 18.49
Anesthesia	Procedures	168.0	369.55	5.17	11.3	454.44	0.43	5.60
Inpatient Visits	Visits	573.3	234.10	11.19	34.9	250.40	0.73	11.91
Emergency Room	Visits	628.0	150.71	7.89	39.6	137.48	0.45	8.34
Office/Home Visits/Consults	Visits	3,288.4	110.55	30.30	104.4	105.33	0.92	31.21
Maternity	Procedures	44.2	1,145.58	4.22	4.9	589.60	0.24	4.46
Pathology/Lab	Procedures	2,155.7	29.00	5.21	18.6	41.15	0.06	5.27
Radiology	Procedures	1,569.9	82.93	10.85	73.8	43.86	0.27	11.12
Office Administered Drugs	Procedures	325.3	98.01	2.66	2.7	45.16	0.01	2.67
FQHC/RHC/Tribal Clinic	Visits	828.9	219.15	15.14	512.0	521.52	22.25	37.39
Physical Exams	Visits	336.0	156.90	4.39	7.4	146.04	0.09	4.48
Therapy	Visits	1,785.7	151.88	22.60	0.2	48.23	0.00	22.60
Vision	Visits	580.4	108.94	5.27	4.4	133.48	0.05	5.32
Other Professional	Procedures	1,229.2	75.75	7.76	29.4	95.50	0.23	7.99
Telemedicine	Procedures	29.4	137.27	0.34	5.1	137.10	0.06	0.39
Subtotal - Professional		14,155.2	\$ 127.65	\$ 150.58	874.5	\$ 366.10	\$ 26.68	\$ 177.26
Pharmacy								
Psychotropic Drugs	Scripts	745.6	\$ 53.47	\$ 3.32	21.1	\$ 32.15	\$ 0.06	\$ 3.38
Opioid Drugs	Scripts	892.0	59.02	4.39	18.5	38.86	0.06	4.45
All Other Drugs	Scripts	5,394.8	117.72	52.92	294.3	168.15	4.12	57.05
Subtotal - Pharmacy		7,032.3	\$ 103.46	\$ 60.63	333.9	\$ 152.42	\$ 4.24	\$ 64.87
Ancillary								
Ground Transportation	Trips	1,487.3	\$ 80.23	\$ 9.94	-	\$ 0.00	\$ 0.00	\$ 9.94
Air Transportation	Trips	346.1	584.85	16.87	-	-	-	16.87
Accommodations	Claims	121.8	278.28	2.82	-	-	-	2.82
DIME/Prosthetics	Procedures	2,077.9	90.09	15.60	0.4	32.22	0.00	15.60
Dental	Procedures	2,770.2	122.19	28.21	236.9	454.47	8.97	37.18
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		6,803.3	\$ 129.54	\$ 73.44	237.3	\$ 453.78	\$ 8.97	\$ 82.42
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.12	-	\$ 0.00	\$ 0.00	\$ 0.12
Nursing Home	Days	36.6	609.18	1.86	-	-	-	1.86
Skilled Nursing Facility	Days	2,519.0	674.56	141.60	23.8	914.27	1.81	143.41
HCBS	Procedures	12,342.1	173.78	178.73	-	-	-	178.73
Case Management	Procedures	617.4	225.69	11.61	1.2	353.91	0.03	11.65
Personal Care	Procedures	8,310.5	103.25	71.50	-	-	-	71.50
Subtotal - LTSS		23,825.6	\$ 204.20	\$ 405.43	25.0	\$ 887.93	\$ 1.85	\$ 407.28
Behavioral Health								
IP Psych Hospital - API	Days	13.2	\$ 1,262.34	\$ 1.39	-	\$ 0.00	\$ 0.00	\$ 1.39
IP Psych Hospital - All Other	Days	132.6	718.17	7.94	-	-	-	7.94
IP General Hospital - MH/SA	Days	25.9	2,677.24	5.78	0.4	2,926.00	0.10	5.88
OP General Hospital - MH/SA	Visits	24.3	34.09	0.07	-	-	-	0.07
Screening	Procedures	46.1	39.94	0.15	2.1	602.04	0.11	0.26
Assessment	Procedures	52.5	226.74	0.99	3.4	599.47	0.17	1.16
Crisis Services	Procedures	17.6	202.58	0.30	5.2	602.07	0.26	0.56
Medication Services	Procedures	130.7	37.60	0.41	0.1	603.00	0.00	0.41
Methadone Medication Services	Procedures	4.4	12.50	0.00	-	-	-	0.00
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	680.0	86.02	4.87	96.0	599.79	4.80	9.67
Family Therapy OP	Procedures	146.3	109.70	1.34	7.0	598.47	0.35	1.69
Group Therapy OP	Procedures	334.0	81.50	2.27	3.7	594.17	0.18	2.45
SBIRT	Procedures	-	-	-	-	-	-	-
Substance Abuse Residential	Days	273.5	218.55	4.98	57.3	336.33	1.61	6.59
Children's Residential	Days	358.3	190.27	5.68	21.6	211.82	0.38	6.06
RPTC - In State	Days	208.4	352.30	6.12	-	-	-	6.12
RPTC - Out of State	Days	235.2	370.23	7.26	-	-	-	7.26
Detoxification	Procedures	-	-	-	0.4	603.00	0.02	0.02
Medical Evaluation	Procedures	10.6	203.32	0.18	-	-	-	0.18
Psychological Testing	Procedures	74.1	402.97	2.49	0.1	603.00	0.00	2.49
Peer Support Services	Units	4.6	17.00	0.01	0.3	150.25	0.00	0.01
Psychosocial Rehabilitation Services	Procedures	3,782.1	153.76	48.46	254.3	601.74	12.75	61.21
BH Case Management	Units	2,691.0	15.99	3.58	114.3	221.07	2.11	5.69
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	13.6	66.47	0.08	0.4	601.80	0.02	0.10
Other Professional MH/SA	Visits	136.0	39.83	0.45	8.3	602.43	0.42	0.87
Subtotal - Behavioral Health		9,395.2	\$ 133.86	\$ 104.80	574.9	\$ 485.88	\$ 23.28	\$ 128.08
Total All Services		66,262.2	\$ 188.59	\$ 1,041.38	2,313.8	\$ 437.56	\$ 84.37	\$ 1,125.75

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year:		SFY 2016						
Population:		All Populations						
Rate Cell:		All Rate Cells						
Region:		MatSu Borough						
Tribal/Non-Tribal Members:		All						
Member Months:		267,644						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	333.2	\$ 2,954.69	\$ 82.04	26.1	\$ 3,097.22	\$ 6.73	\$ 88.77
Inpatient Maternity Delivery	Days	46.4	2,762.40	10.68	7.6	3,073.37	1.95	12.63
Inpatient Well Newborn	Days	36.2	2,768.45	8.35	3.5	3,183.85	0.94	9.29
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		415.8	\$ 2,917.02	\$ 101.07	37.3	\$ 3,100.57	\$ 9.63	\$ 110.69
Outpatient Hospital								
Outpatient Emergency Room	Visits	501.4	\$ 574.29	\$ 24.00	51.1	\$ 523.69	\$ 2.23	\$ 26.23
Outpatient Surgery	Visits	113.7	2,314.75	21.94	8.8	968.48	0.71	22.65
Outpatient Radiology	Procedures	171.4	219.68	3.14	11.5	486.46	0.47	3.60
Outpatient Pathology/Lab	Procedures	1,032.1	16.49	1.42	98.1	467.02	3.82	5.24
Outpatient Pharmacy	Procedures	126.9	241.53	2.55	3.4	468.28	0.13	2.69
Other Outpatient	Procedures	397.1	123.17	4.08	95.0	349.26	2.76	6.84
Subtotal - Outpatient Hospital		2,342.5	\$ 292.61	\$ 57.12	267.8	\$ 453.39	\$ 10.12	\$ 67.24
Professional								
Inpatient and Outpatient Surgery	Procedures	636.1	\$ 314.46	\$ 16.67	28.6	\$ 351.29	\$ 0.84	\$ 17.51
Anesthesia	Procedures	151.7	436.59	5.52	12.6	535.53	0.56	6.08
Inpatient Visits	Visits	494.7	257.48	10.61	27.3	231.43	0.53	11.14
Emergency Room	Visits	575.3	146.87	7.04	53.6	137.05	0.61	7.65
Office/Home Visits/Consults	Visits	3,436.3	112.71	32.27	74.7	111.26	0.69	32.97
Maternity	Procedures	77.3	645.91	4.16	7.1	663.95	0.39	4.55
Pathology/Lab	Procedures	3,375.4	25.68	7.22	11.7	65.69	0.06	7.29
Radiology	Procedures	1,366.9	103.53	11.79	98.1	47.15	0.39	12.18
Office Administered Drugs	Procedures	423.1	170.13	6.00	0.9	41.90	0.00	6.00
FQHC/RHC/Tribal Clinic	Visits	429.3	216.58	7.75	370.7	542.35	16.76	24.50
Physical Exams	Visits	413.6	166.70	5.75	6.5	145.79	0.08	5.82
Therapy	Visits	1,438.5	163.99	19.66	5.0	53.47	0.02	19.68
Vision	Visits	677.2	96.69	5.46	2.2	124.31	0.02	5.48
Other Professional	Procedures	1,234.9	85.61	8.81	29.4	61.36	0.15	8.96
Telemedicine	Procedures	5.2	116.95	0.05	2.6	315.35	0.07	0.12
Subtotal - Professional		14,735.5	\$ 121.14	\$ 148.76	731.1	\$ 347.58	\$ 21.18	\$ 169.94
Pharmacy								
Psychotropic Drugs	Scripts	964.2	\$ 62.54	\$ 5.03	66.3	\$ 36.69	\$ 0.20	\$ 5.23
Opioid Drugs	Scripts	756.2	68.23	4.30	22.6	25.58	0.05	4.35
All Other Drugs	Scripts	5,307.4	110.43	48.84	410.2	80.91	2.77	51.61
Subtotal - Pharmacy		7,027.7	\$ 99.32	\$ 58.16	499.1	\$ 72.53	\$ 3.02	\$ 61.18
Ancillary								
Ground Transportation	Trips	631.0	\$ 124.40	\$ 6.54	-	\$ 0.00	\$ 0.00	\$ 6.54
Air Transportation	Trips	43.1	1,211.75	4.35	-	-	-	4.35
Accommodations	Claims	20.4	434.53	0.74	-	-	-	0.74
DIME/Prosthetics	Procedures	1,478.1	101.65	12.52	-	-	-	12.52
Dental	Procedures	4,116.4	120.47	41.33	88.7	476.97	3.53	44.85
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		6,288.9	\$ 124.94	\$ 65.48	88.7	\$ 476.97	\$ 3.53	\$ 69.00
LTSS								
Hospice	Days	6.9	\$ 932.15	\$ 0.54	-	\$ 0.00	\$ 0.00	\$ 0.54
Nursing Home	Days	207.3	64.39	1.11	0.8	2,926.00	0.19	1.30
Skilled Nursing Facility	Days	72.9	442.53	2.69	-	-	-	2.69
HCBS	Procedures	11,437.9	161.19	153.64	0.2	409.90	0.01	153.65
Case Management	Procedures	464.4	207.19	8.02	5.9	241.65	0.12	8.14
Personal Care	Procedures	6,092.5	83.42	42.35	-	-	-	42.35
Subtotal - LTSS		18,281.9	\$ 136.76	\$ 208.35	6.9	\$ 543.43	\$ 0.31	\$ 208.66
Behavioral Health								
IP Psych Hospital - API	Days	12.1	\$ 1,372.35	\$ 1.38	-	\$ 0.00	\$ 0.00	\$ 1.38
IP Psych Hospital - All Other	Days	138.1	718.10	8.26	-	-	-	8.26
IP General Hospital - MH/SA	Days	23.1	2,707.67	5.21	0.6	3,715.54	0.19	5.40
OP General Hospital - MH/SA	Visits	3.6	149.78	0.04	-	-	-	0.04
Screening	Procedures	38.2	38.29	0.12	0.5	555.45	0.02	0.14
Assessment	Procedures	44.7	207.55	0.77	1.9	575.02	0.09	0.87
Crisis Services	Procedures	26.1	126.13	0.27	2.0	602.09	0.10	0.37
Medication Services	Procedures	33.8	37.83	0.11	0.9	602.16	0.04	0.15
Methadone Medication Services	Procedures	45.1	12.50	0.05	-	-	-	0.05
Other Opioid Medication Services	Procedures	0.0	15.99	0.00	-	-	-	0.00
Individual Therapy OP	Procedures	477.5	88.07	3.50	8.8	588.23	0.43	3.94
Family Therapy OP	Procedures	121.3	101.52	1.03	0.7	548.54	0.03	1.06
Group Therapy OP	Procedures	250.4	71.77	1.50	4.4	602.73	0.22	1.72
SBIRT	Procedures	0.0	43.80	0.00	0.0	601.00	0.00	0.00
Substance Abuse Residential	Days	45.1	233.88	0.88	43.7	263.80	0.96	1.84
Children's Residential	Days	755.0	176.89	11.13	12.0	314.64	0.32	11.45
RPTC - In State	Days	350.8	332.68	9.73	-	-	-	9.73
RPTC - Out of State	Days	244.8	362.47	7.40	-	-	-	7.40
Detoxification	Procedures	-	-	-	0.0	603.00	0.00	0.00
Medical Evaluation	Procedures	26.0	206.49	0.45	-	-	-	0.45
Psychological Testing	Procedures	126.7	276.82	2.92	-	-	-	2.92
Peer Support Services	Units	80.8	17.00	0.11	-	-	-	0.11
Psychosocial Rehabilitation Services	Procedures	1,559.2	181.76	23.62	18.0	601.20	0.90	24.52
BH Case Management	Units	1,060.0	15.99	1.41	5.4	189.16	0.09	1.50
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	24.7	152.07	0.31	0.2	601.80	0.01	0.32
Other Professional MH/SA	Visits	111.6	39.76	0.37	1.3	601.93	0.07	0.44
Subtotal - Behavioral Health		5,598.8	\$ 172.70	\$ 80.57	100.5	\$ 415.39	\$ 3.48	\$ 84.05
Total All Services		54,691.1	\$ 157.87	\$ 719.51	1,731.4	\$ 355.25	\$ 51.26	\$ 770.77

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year: SFY 2016
 Population: All Populations
 Rate Cell: All Rate Cells
 Region: Northern Southeast Region
 Tribal/Non-Tribal Members: All
 Member Months: 114,851

Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	269.4	\$ 3,100.71	\$ 69.60	73.1	\$ 2,979.68	\$ 18.16	\$ 87.76
Inpatient Maternity Delivery	Days	42.9	3,121.23	11.17	13.3	2,788.66	3.08	14.25
Inpatient Well Newborn	Days	25.2	3,362.06	7.05	13.5	2,923.56	3.28	10.34
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		337.5	\$ 3,122.82	\$ 87.82	99.9	\$ 2,946.73	\$ 24.53	\$ 112.35
Outpatient Hospital								
Outpatient Emergency Room	Visits	585.5	\$ 785.45	\$ 38.33	79.7	\$ 566.76	\$ 3.77	\$ 42.09
Outpatient Surgery	Visits	67.9	2,627.76	14.87	33.5	801.09	2.24	17.11
Outpatient Radiology	Procedures	248.9	435.58	9.03	50.6	561.78	2.37	11.40
Outpatient Pathology/Lab	Procedures	896.5	56.76	4.24	205.1	536.84	9.18	13.42
Outpatient Pharmacy	Procedures	118.2	299.54	2.95	13.6	571.91	0.65	3.60
Other Outpatient	Procedures	1,060.1	130.62	11.54	534.2	353.70	15.75	27.29
Subtotal - Outpatient Hospital		2,977.1	\$ 326.34	\$ 80.96	916.7	\$ 444.28	\$ 33.94	\$ 114.90
Professional								
Inpatient and Outpatient Surgery	Procedures	374.5	\$ 291.31	\$ 9.09	71.5	\$ 413.11	\$ 2.46	\$ 11.55
Anesthesia	Procedures	107.4	429.02	3.84	36.4	321.12	0.97	4.81
Inpatient Visits	Visits	349.0	213.23	6.20	86.3	247.80	1.78	7.98
Emergency Room	Visits	577.2	155.59	7.48	53.9	128.38	0.58	8.06
Office/Home Visits/Consults	Visits	1,901.6	110.50	17.51	298.0	177.41	4.41	21.92
Maternity	Procedures	43.8	667.76	2.44	16.0	864.59	1.15	3.59
Pathology/Lab	Procedures	1,333.1	27.08	3.01	103.1	35.75	0.31	3.32
Radiology	Procedures	941.1	76.98	6.04	124.3	41.67	0.43	6.47
Office Administered Drugs	Procedures	126.2	87.97	0.93	13.5	39.25	0.04	0.97
FQHC/RHC/Tribal Clinic	Visits	288.6	201.22	4.84	1,969.8	450.84	74.01	78.85
Physical Exams	Visits	240.4	148.33	2.97	27.0	114.13	0.26	3.23
Therapy	Visits	352.5	249.93	7.34	2.9	135.68	0.03	7.38
Vision	Visits	439.1	83.89	3.07	9.4	141.09	0.11	3.18
Other Professional	Procedures	556.6	88.03	4.08	58.2	84.28	0.41	4.49
Telemedicine	Procedures	9.1	79.04	0.06	23.8	144.39	0.29	0.35
Subtotal - Professional		7,640.2	\$ 123.92	\$ 78.90	2,894.1	\$ 361.71	\$ 87.24	\$ 166.13
Pharmacy								
Psychotropic Drugs	Scripts	549.7	\$ 70.97	\$ 3.25	172.8	\$ 12.76	\$ 0.18	\$ 3.43
Opioid Drugs	Scripts	528.1	62.53	2.75	174.5	27.61	0.40	3.15
All Other Drugs	Scripts	2,979.0	155.19	38.53	1,538.2	44.07	5.65	44.18
Subtotal - Pharmacy		4,056.8	\$ 131.72	\$ 44.53	1,885.5	\$ 39.67	\$ 6.23	\$ 50.76
Ancillary								
Ground Transportation	Trips	1,677.8	\$ 69.13	\$ 9.67	-	\$ 0.00	\$ 0.00	\$ 9.67
Air Transportation	Trips	698.6	774.02	45.06	0.1	5,574.65	0.05	45.11
Accommodations	Claims	326.0	319.41	8.68	-	-	-	8.68
DIME/Prosthetics	Procedures	832.2	105.54	7.32	-	-	-	7.32
Dental	Procedures	2,087.0	156.04	27.14	804.4	492.60	33.02	60.16
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		5,621.5	\$ 208.89	\$ 97.86	804.5	\$ 493.26	\$ 33.07	\$ 130.93
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.08	-	\$ 0.00	\$ 0.00	\$ 0.08
Nursing Home	Days	274.8	130.34	2.98	2.4	2,514.41	0.50	3.49
Skilled Nursing Facility	Days	3,521.0	574.49	168.56	-	-	-	168.56
HCBS	Procedures	9,424.1	201.75	158.44	-	-	-	158.44
Case Management	Procedures	433.3	213.28	7.70	0.5	303.08	0.01	7.71
Personal Care	Procedures	3,350.6	64.59	18.03	-	-	-	18.03
Subtotal - LTSS		17,003.8	\$ 251.10	\$ 355.81	2.9	\$ 2,119.53	\$ 0.52	\$ 356.33
Behavioral Health								
IP Psych Hospital - API	Days	24.8	\$ 1,412.44	\$ 2.91	-	\$ 0.00	\$ 0.00	\$ 2.91
IP Psych Hospital - All Other	Days	74.9	710.53	4.44	-	-	-	4.44
IP General Hospital - MH/SA	Days	58.4	3,066.04	14.92	0.1	6,671.17	0.06	14.98
OP General Hospital - MH/SA	Visits	6.3	19.01	0.01	-	-	-	0.01
Screening	Procedures	52.2	36.71	0.16	15.5	602.31	0.78	0.94
Assessment	Procedures	83.2	240.82	1.67	23.0	602.32	1.15	2.82
Crisis Services	Procedures	30.7	170.01	0.44	35.6	602.14	1.79	2.22
Medication Services	Procedures	1,068.7	31.59	2.81	16.3	596.78	0.81	3.62
Methadone Medication Services	Procedures	12.0	12.50	0.01	-	-	-	0.01
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	745.1	81.26	5.05	182.1	600.97	9.12	14.17
Family Therapy OP	Procedures	189.6	92.86	1.47	18.8	461.76	0.72	2.19
Group Therapy OP	Procedures	772.1	81.49	5.24	9.2	593.55	0.45	5.70
SBIRT	Procedures	2.0	43.80	0.01	2.2	602.81	0.11	0.12
Substance Abuse Residential	Days	491.4	209.63	8.58	186.7	370.57	5.77	14.35
Children's Residential	Days	940.2	153.08	11.99	48.4	200.64	0.81	12.80
RPTC - In State	Days	134.5	330.32	3.70	-	-	-	3.70
RPTC - Out of State	Days	244.4	366.79	7.47	-	-	-	7.47
Detoxification	Procedures	-	-	-	0.1	601.00	0.01	0.01
Medical Evaluation	Procedures	15.0	244.85	0.31	0.5	220.21	0.01	0.32
Psychological Testing	Procedures	52.9	363.31	1.60	0.7	517.93	0.03	1.63
Peer Support Services	Units	1.7	17.00	0.00	-	-	-	0.00
Psychosocial Rehabilitation Services	Procedures	4,179.4	194.95	67.90	175.0	601.88	8.78	76.68
BH Case Management	Units	1,260.9	15.96	1.68	67.2	186.41	1.04	2.72
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	26.2	87.83	0.19	28.3	593.21	1.40	1.59
Other Professional MH/SA	Visits	187.1	39.84	0.62	48.2	600.94	2.41	3.03
Subtotal - Behavioral Health		10,653.8	\$ 161.28	\$ 143.19	857.9	\$ 493.06	\$ 35.25	\$ 178.44
Total All Services		48,290.5	\$ 220.93	\$ 889.07	7,461.6	\$ 355.06	\$ 220.78	\$ 1,109.84

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year: SFY 2016
 Population: All Populations
 Rate Cell: All Rate Cells
 Region: Northern and Interior Region
 Tribal/Non-Tribal Members: All
 Member Months: 70,142

Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	217.1	\$ 2,885.29	\$ 52.20	131.9	\$ 3,004.68	\$ 33.03	\$ 85.23
Inpatient Maternity Delivery	Days	46.4	2,806.34	10.84	27.4	2,981.93	6.80	17.64
Inpatient Well Newborn	Days	37.3	2,796.38	8.69	24.1	3,013.47	6.06	14.75
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		300.8	\$ 2,862.09	\$ 71.73	183.4	\$ 3,002.44	\$ 45.89	\$ 117.62
Outpatient Hospital								
Outpatient Emergency Room	Visits	233.9	\$ 892.03	\$ 17.38	276.6	\$ 568.01	\$ 13.09	\$ 30.48
Outpatient Surgery	Visits	54.9	2,019.71	9.24	35.9	976.69	2.92	12.17
Outpatient Radiology	Procedures	136.7	401.81	4.58	72.2	531.76	3.20	7.78
Outpatient Pathology/Lab	Procedures	386.0	21.60	0.69	282.3	524.36	12.33	13.03
Outpatient Pharmacy	Procedures	74.9	124.56	0.78	42.8	523.17	1.86	2.64
Other Outpatient	Procedures	182.0	150.06	2.28	670.0	434.15	24.24	26.51
Subtotal - Outpatient Hospital		1,068.4	\$ 392.59	\$ 34.95	1,379.8	\$ 501.44	\$ 57.66	\$ 92.61
Professional								
Inpatient and Outpatient Surgery	Procedures	216.4	\$ 341.63	\$ 6.16	111.0	\$ 452.84	\$ 4.19	\$ 10.35
Anesthesia	Procedures	78.2	416.34	2.71	55.3	455.88	2.10	4.81
Inpatient Visits	Visits	285.4	239.95	5.71	126.6	278.17	2.93	8.64
Emergency Room	Visits	267.1	173.68	3.87	115.5	143.42	1.38	5.25
Office/Home Visits/Consults	Visits	854.5	114.93	8.18	647.4	102.99	5.56	13.74
Maternity	Procedures	25.0	889.72	1.85	39.5	750.35	2.47	4.32
Pathology/Lab	Procedures	538.0	25.03	1.12	144.2	24.59	0.30	1.42
Radiology	Procedures	565.8	131.50	6.20	229.1	51.48	0.98	7.18
Office Administered Drugs	Procedures	170.4	104.57	1.48	33.4	40.97	0.11	1.60
FQHC/RHC/Tribal Clinic	Visits	132.2	274.05	3.02	1,778.6	514.76	76.29	79.31
Physical Exams	Visits	105.7	172.09	1.52	79.7	113.80	0.76	2.27
Therapy	Visits	316.5	116.41	3.07	4.6	56.22	0.02	3.09
Vision	Visits	426.5	93.86	3.34	12.1	109.40	0.11	3.45
Other Professional	Procedures	492.2	84.90	3.48	90.2	140.44	1.06	4.54
Telemedicine	Procedures	2.6	194.91	0.04	37.8	198.71	0.63	0.67
Subtotal - Professional		4,476.5	\$ 138.74	\$ 51.76	3,504.9	\$ 338.57	\$ 98.89	\$ 150.64
Pharmacy								
Psychotropic Drugs	Scripts	131.4	\$ 54.96	\$ 0.60	147.5	\$ 32.17	\$ 0.40	\$ 1.00
Opioid Drugs	Scripts	176.2	53.35	0.78	197.1	11.70	0.19	0.98
All Other Drugs	Scripts	1,325.5	77.69	8.58	2,030.9	47.71	8.07	16.66
Subtotal - Pharmacy		1,633.1	\$ 73.23	\$ 9.97	2,375.5	\$ 43.76	\$ 8.66	\$ 18.63
Ancillary								
Ground Transportation	Trips	3,618.4	\$ 37.66	\$ 11.36	0.3	\$ 286.85	\$ 0.01	\$ 11.36
Air Transportation	Trips	1,365.1	852.66	96.99	0.3	6,168.05	0.18	97.17
Accommodations	Claims	1,008.3	224.56	18.87	-	-	-	18.87
DIME/Prosthetics	Procedures	744.0	86.75	5.38	0.3	124.63	0.00	5.38
Dental	Procedures	2,126.9	147.47	26.14	698.5	535.80	31.19	57.33
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		8,862.7	\$ 214.93	\$ 158.73	699.5	\$ 538.23	\$ 31.38	\$ 190.11
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.02	-	\$ 0.00	\$ 0.00	\$ 0.02
Nursing Home	Days	-	-	-	0.5	3,335.00	0.14	0.14
Skilled Nursing Facility	Days	166.6	611.83	8.50	-	-	-	8.50
HCBS	Procedures	1,087.0	185.32	16.79	0.2	569.52	0.01	16.80
Case Management	Procedures	76.6	172.96	1.10	35.9	320.48	0.96	2.06
Personal Care	Procedures	2,742.4	66.42	15.18	421.2	45.65	1.60	16.78
Subtotal - LTSS		4,072.7	\$ 122.54	\$ 41.59	457.8	\$ 71.10	\$ 2.71	\$ 44.30
Behavioral Health								
IP Psych Hospital - API	Days	11.8	\$ 1,356.51	\$ 1.33	-	\$ 0.00	\$ 0.00	\$ 1.33
IP Psych Hospital - All Other	Days	44.3	718.42	2.65	-	-	-	2.65
IP General Hospital - MH/SA	Days	38.0	2,748.71	8.70	-	-	-	8.70
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	7.4	41.50	0.03	4.1	438.33	0.15	0.18
Assessment	Procedures	10.1	203.61	0.17	10.4	602.11	0.52	0.69
Crisis Services	Procedures	7.9	268.07	0.18	2.2	597.69	0.11	0.29
Medication Services	Procedures	2.9	29.71	0.01	8.4	602.84	0.42	0.43
Methadone Medication Services	Procedures	57.1	12.50	0.06	-	-	-	0.06
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	110.2	115.24	1.06	38.2	589.35	1.87	2.93
Family Therapy OP	Procedures	11.8	101.59	0.10	2.7	601.75	0.14	0.24
Group Therapy OP	Procedures	41.9	76.56	0.27	7.9	544.02	0.36	0.62
SBIRT	Procedures	-	-	-	13.3	602.13	0.67	0.67
Substance Abuse Residential	Days	15.2	261.24	0.33	143.9	600.77	7.20	7.53
Children's Residential	Days	282.1	191.38	4.50	41.6	200.05	0.69	5.19
RPTC - In State	Days	223.1	337.37	6.27	-	-	-	6.27
RPTC - Out of State	Days	121.0	320.41	3.23	-	-	-	3.23
Detoxification	Procedures	-	-	-	20.2	602.81	1.01	1.01
Medical Evaluation	Procedures	2.6	221.49	0.05	1.0	603.00	0.05	0.10
Psychological Testing	Procedures	10.6	517.50	0.46	-	-	-	0.46
Peer Support Services	Units	-	-	-	-	-	-	-
Psychosocial Rehabilitation Services	Procedures	342.7	233.43	6.67	58.9	600.05	2.94	9.61
BH Case Management	Units	205.3	16.00	0.27	9.9	353.24	0.29	0.57
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	7.4	74.91	0.05	1.7	602.60	0.09	0.13
Other Professional MH/SA	Visits	17.5	56.75	0.08	14.7	602.37	0.74	0.82
Subtotal - Behavioral Health		1,570.7	\$ 278.52	\$ 36.46	379.1	\$ 546.46	\$ 17.26	\$ 53.72
Total All Services		21,984.9	\$ 221.16	\$ 405.19	8,980.0	\$ 350.71	\$ 262.44	\$ 667.63

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year: SFY 2016
 Population: All Populations
 Rate Cell: All Rate Cells
 Region: Southern Southeast Region
 Tribal/Non-Tribal Members: All
 Member Months: 62,151

Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	310.7	\$ 3,132.60	\$ 81.10	48.5	\$ 3,183.75	\$ 12.86	\$ 93.96
Inpatient Maternity Delivery	Days	65.8	2,463.12	13.51	1.7	3,062.33	0.44	13.96
Inpatient Well Newborn	Days	40.2	2,657.32	8.89	1.4	3,101.29	0.35	9.24
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		416.7	\$ 2,981.00	\$ 103.51	51.6	\$ 3,177.49	\$ 13.65	\$ 117.16
Outpatient Hospital								
Outpatient Emergency Room	Visits	683.3	\$ 749.65	\$ 42.69	18.9	\$ 515.74	\$ 0.81	\$ 43.50
Outpatient Surgery	Visits	93.3	2,542.48	19.76	19.9	958.24	1.59	21.35
Outpatient Radiology	Procedures	517.6	350.52	15.12	22.0	535.30	0.98	16.10
Outpatient Pathology/Lab	Procedures	1,757.6	16.82	2.46	52.9	502.58	2.22	4.68
Outpatient Pharmacy	Procedures	312.8	444.31	11.58	5.6	501.93	0.23	11.82
Other Outpatient	Procedures	1,833.1	83.76	12.80	193.3	314.91	5.07	17.87
Subtotal - Outpatient Hospital		5,197.6	\$ 241.04	\$ 104.40	312.6	\$ 418.62	\$ 10.90	\$ 115.31
Professional								
Inpatient and Outpatient Surgery	Procedures	338.7	\$ 271.34	\$ 7.66	56.2	\$ 337.54	\$ 1.58	\$ 9.24
Anesthesia	Procedures	135.0	320.37	3.60	19.9	298.66	0.49	4.10
Inpatient Visits	Visits	382.3	195.66	6.23	37.5	343.56	1.07	7.31
Emergency Room	Visits	685.2	157.16	8.97	23.9	140.26	0.28	9.25
Office/Home Visits/Consults	Visits	2,462.5	122.87	25.21	126.5	120.07	1.27	26.48
Maternity	Procedures	100.8	442.19	3.71	1.7	890.89	0.13	3.84
Pathology/Lab	Procedures	1,349.0	19.99	2.25	17.6	101.73	0.15	2.40
Radiology	Procedures	1,165.4	114.37	11.11	71.8	45.10	0.27	11.38
Office Administered Drugs	Procedures	146.0	63.55	0.77	0.6	5.78	0.00	0.77
FQHC/RHC/Tribal Clinic	Visits	25.7	235.40	0.50	1,918.6	518.17	82.85	83.35
Physical Exams	Visits	364.1	156.64	4.75	1.9	175.28	0.03	4.78
Therapy	Visits	378.2	185.83	5.86	0.2	108.85	0.00	5.86
Vision	Visits	568.8	92.77	4.40	7.0	104.99	0.06	4.46
Other Professional	Procedures	586.8	97.07	4.75	51.6	127.56	0.55	5.29
Telemedicine	Procedures	6.4	141.79	0.08	21.0	190.47	0.33	0.41
Subtotal - Professional		8,694.8	\$ 124.01	\$ 89.86	2,355.9	\$ 453.64	\$ 89.06	\$ 178.92
Pharmacy								
Psychotropic Drugs	Scripts	662.3	\$ 66.09	\$ 3.65	227.8	\$ 7.15	\$ 0.14	\$ 3.78
Opioid Drugs	Scripts	824.8	57.43	3.95	328.4	10.70	0.29	4.24
All Other Drugs	Scripts	4,624.0	130.47	50.27	2,516.8	38.88	8.15	58.43
Subtotal - Pharmacy		6,111.1	\$ 113.64	\$ 57.87	3,073.0	\$ 33.51	\$ 8.58	\$ 66.45
Ancillary								
Ground Transportation	Trips	2,394.9	\$ 59.69	\$ 11.91	-	\$ 0.00	\$ 0.00	\$ 11.91
Air Transportation	Trips	660.7	1,000.94	55.11	-	-	-	55.11
Accommodations	Claims	403.3	346.23	11.64	-	-	-	11.64
DME/Prosthetics	Procedures	562.0	99.51	4.66	-	-	-	4.66
Dental	Procedures	3,122.2	99.94	26.00	536.2	465.83	20.81	46.82
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		7,143.3	\$ 183.65	\$ 109.32	536.2	\$ 465.83	\$ 20.81	\$ 130.14
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Nursing Home	Days	-	-	-	0.4	638.76	0.02	0.02
Skilled Nursing Facility	Days	1,089.0	680.21	61.73	-	-	-	61.73
HCBS	Procedures	5,278.5	192.50	84.67	-	-	-	84.67
Case Management	Procedures	260.3	271.76	5.89	-	-	-	5.89
Personal Care	Procedures	2,531.2	64.55	13.62	-	-	-	13.62
Subtotal - LTSS		9,159.0	\$ 217.37	\$ 165.91	0.4	\$ 638.76	\$ 0.02	\$ 165.93
Behavioral Health								
IP Psych Hospital - API	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
IP Psych Hospital - All Other	Days	57.9	700.94	3.38	-	-	-	3.38
IP General Hospital - MH/SA	Days	51.2	3,109.97	13.26	-	-	-	13.26
OP General Hospital - MH/SA	Visits	0.2	27.65	0.00	-	-	-	0.00
Screening	Procedures	45.6	39.81	0.15	14.9	601.86	0.75	0.90
Assessment	Procedures	55.6	194.66	0.90	22.2	597.37	1.11	2.01
Crisis Services	Procedures	46.1	71.11	0.27	36.9	599.17	1.84	2.11
Medication Services	Procedures	294.4	27.21	0.67	3.3	570.76	0.16	0.82
Methadone Medication Services	Procedures	3.5	12.50	0.00	-	-	-	0.00
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	629.0	86.03	4.51	174.7	599.54	8.73	13.24
Family Therapy OP	Procedures	345.4	100.42	2.89	25.9	585.01	1.26	4.15
Group Therapy OP	Procedures	836.8	68.70	4.79	8.7	601.89	0.44	5.23
SBIRT	Procedures	-	-	-	16.2	601.40	0.81	0.81
Substance Abuse Residential	Days	434.4	260.91	9.45	212.2	293.79	5.19	14.64
Children's Residential	Days	2,362.1	182.20	35.86	329.6	468.43	12.87	48.73
RPTC - In State	Days	73.6	357.65	2.19	-	-	-	2.19
RPTC - Out of State	Days	201.2	332.55	5.58	-	-	-	5.58
Detoxification	Procedures	-	-	-	-	-	-	-
Medical Evaluation	Procedures	13.1	209.93	0.23	0.2	265.27	0.00	0.23
Psychological Testing	Procedures	26.5	410.22	0.90	6.8	602.31	0.34	1.24
Peer Support Services	Units	314.7	16.19	0.42	-	-	-	0.42
Psychosocial Rehabilitation Services	Procedures	4,223.7	201.31	70.86	328.8	601.19	16.47	87.33
BH Case Management	Units	1,613.3	15.91	2.14	85.3	365.00	2.60	4.74
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	49.2	73.71	0.30	8.5	568.23	0.40	0.70
Other Professional MH/SA	Visits	138.0	39.57	0.46	38.2	602.04	1.92	2.37
Subtotal - Behavioral Health		11,815.7	\$ 161.71	\$ 159.22	1,312.3	\$ 501.83	\$ 54.88	\$ 214.10
Total All Services		48,538.1	\$ 195.33	\$ 790.09	7,642.0	\$ 310.78	\$ 197.91	\$ 988.01

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year:		SFY 2016						
Population:		All Populations						
Rate Cell:		All Rate Cells						
Region:		Western Region						
Tribal/Non-Tribal Members:		All						
Member Months:		268,865						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	129.0	\$ 3,516.98	\$ 37.82	291.7	\$ 3,150.06	\$ 76.58	\$ 114.39
Inpatient Maternity Delivery	Days	6.4	2,745.58	1.46	67.1	3,174.73	17.76	19.22
Inpatient Well Newborn	Days	1.7	2,787.22	0.40	41.9	3,171.12	11.06	11.47
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		137.2	\$ 3,471.82	\$ 39.68	400.7	\$ 3,156.39	\$ 105.40	\$ 145.08
Outpatient Hospital								
Outpatient Emergency Room	Visits	21.4	\$ 823.70	\$ 1.47	776.1	\$ 630.84	\$ 40.80	\$ 42.27
Outpatient Surgery	Visits	30.7	2,405.83	6.16	77.9	1,076.22	6.99	13.15
Outpatient Radiology	Procedures	10.4	395.32	0.34	179.7	497.29	7.45	7.79
Outpatient Pathology/Lab	Procedures	70.9	21.73	0.13	1,389.4	329.30	38.13	38.26
Outpatient Pharmacy	Procedures	35.0	285.88	0.83	128.4	346.65	3.71	4.54
Other Outpatient	Procedures	67.3	149.46	0.84	1,079.9	436.53	39.28	40.12
Subtotal - Outpatient Hospital		235.7	\$ 497.41	\$ 9.77	3,631.4	\$ 450.59	\$ 136.36	\$ 146.12
Professional								
Inpatient and Outpatient Surgery	Procedures	50.5	\$ 473.26	\$ 1.99	181.4	\$ 440.64	\$ 6.66	\$ 8.65
Anesthesia	Procedures	42.4	488.83	1.73	89.5	429.22	3.20	4.93
Inpatient Visits	Visits	153.9	367.57	4.71	243.3	277.38	5.62	10.34
Emergency Room	Visits	25.1	167.44	0.35	293.8	107.35	2.63	2.98
Office/Home Visits/Consults	Visits	105.5	158.07	1.39	2,150.4	110.62	19.82	21.21
Maternity	Procedures	8.7	454.16	0.33	50.6	931.21	3.93	4.26
Pathology/Lab	Procedures	55.1	38.32	0.18	355.9	22.01	0.65	0.83
Radiology	Procedures	134.3	253.99	2.84	340.5	53.39	1.51	4.36
Office Administered Drugs	Procedures	14.5	453.66	0.55	88.5	36.96	0.27	0.82
FQHC/RHC/Tribal Clinic	Visits	92.8	347.59	2.69	1,157.8	585.27	56.47	59.16
Physical Exams	Visits	5.5	157.56	0.07	209.2	130.71	2.28	2.35
Therapy	Visits	17.4	165.53	0.24	5.2	88.83	0.04	0.28
Vision	Visits	605.4	103.21	5.21	41.6	57.66	0.20	5.41
Other Professional	Procedures	270.6	62.86	1.42	163.6	75.31	1.03	2.44
Telemedicine	Procedures	2.4	119.35	0.02	326.5	392.92	10.69	10.72
Subtotal - Professional		1,584.2	\$ 179.68	\$ 23.72	5,697.9	\$ 242.22	\$ 115.01	\$ 138.73
Pharmacy								
Psychotropic Drugs	Scripts	36.1	\$ 41.30	\$ 0.12	143.8	\$ 41.91	\$ 0.50	\$ 0.63
Opioid Drugs	Scripts	16.1	55.05	0.07	189.3	13.93	0.22	0.29
All Other Drugs	Scripts	115.6	594.08	5.72	2,404.6	56.53	11.33	17.05
Subtotal - Pharmacy		167.8	\$ 423.39	\$ 5.92	2,737.7	\$ 52.82	\$ 12.05	\$ 17.97
Ancillary								
Ground Transportation	Trips	5,995.2	\$ 26.72	\$ 13.35	6.1	\$ 291.60	\$ 0.15	\$ 13.50
Air Transportation	Trips	2,237.8	565.47	105.45	8.2	8,154.17	5.55	111.00
Accommodations	Claims	700.7	292.73	17.09	-	-	-	17.09
DME/Prosthetics	Procedures	297.6	128.45	3.19	-	-	-	3.19
Dental	Procedures	961.3	122.83	9.84	1,004.6	547.45	45.83	55.67
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		10,192.5	\$ 175.32	\$ 148.92	1,018.9	\$ 606.90	\$ 51.53	\$ 200.44
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Nursing Home	Days	-	-	-	0.8	2,926.00	0.19	0.19
Skilled Nursing Facility	Days	35.3	565.81	1.67	752.7	939.42	58.93	60.59
HCBS	Procedures	940.1	232.39	18.21	1.0	414.88	0.04	18.24
Case Management	Procedures	29.0	222.45	0.54	47.5	334.08	1.32	1.86
Personal Care	Procedures	422.1	86.35	3.04	-	-	-	3.04
Subtotal - LTSS		1,426.6	\$ 197.23	\$ 23.45	802.0	\$ 904.78	\$ 60.47	\$ 83.92
Behavioral Health								
IP Psych Hospital - API	Days	24.7	\$ 1,338.93	\$ 2.76	-	\$ 0.00	\$ 0.00	\$ 2.76
IP Psych Hospital - All Other	Days	121.8	710.24	7.21	-	-	-	7.21
IP General Hospital - MH/SA	Days	11.2	2,988.31	2.78	7.5	4,261.44	2.68	5.46
OP General Hospital - MH/SA	Visits	-	-	-	6.6	16.68	0.01	0.01
Screening	Procedures	3.7	36.66	0.01	13.8	599.22	0.69	0.70
Assessment	Procedures	5.7	223.11	0.11	21.8	580.91	1.06	1.16
Crisis Services	Procedures	0.6	129.79	0.01	25.0	590.30	1.23	1.24
Medication Services	Procedures	45.3	23.85	0.09	4.7	569.90	0.22	0.31
Methadone Medication Services	Procedures	10.2	12.50	0.01	-	-	-	0.01
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	46.7	88.67	0.35	60.4	592.76	2.98	3.33
Family Therapy OP	Procedures	11.4	90.85	0.09	13.6	591.41	0.67	0.76
Group Therapy OP	Procedures	52.0	78.46	0.34	28.3	597.93	1.41	1.75
SBIRT	Procedures	-	-	-	15.5	600.25	0.77	0.77
Substance Abuse Residential	Days	31.7	248.56	0.66	98.7	443.49	3.65	4.31
Children's Residential	Days	338.1	183.32	5.17	254.6	319.16	6.77	11.94
RPTC - In State	Days	61.2	376.15	1.92	-	-	-	1.92
RPTC - Out of State	Days	182.0	333.61	5.06	-	-	-	5.06
Detoxification	Procedures	-	-	-	0.6	603.00	0.03	0.03
Medical Evaluation	Procedures	3.1	211.27	0.06	-	-	-	0.06
Psychological Testing	Procedures	11.8	717.67	0.70	4.0	407.55	0.13	0.84
Peer Support Services	Units	0.2	17.00	0.00	0.2	150.75	0.00	0.00
Psychosocial Rehabilitation Services	Procedures	436.9	223.26	8.13	319.5	601.19	16.01	24.14
BH Case Management	Units	88.0	16.00	0.12	13.1	186.49	0.20	0.32
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	1.0	138.79	0.01	3.7	538.37	0.16	0.18
Other Professional MH/SA	Visits	8.9	39.10	0.03	16.3	599.69	0.81	0.84
Subtotal - Behavioral Health		1,496.2	\$ 285.44	\$ 35.59	908.0	\$ 522.14	\$ 39.51	\$ 75.10
Total All Services		15,240.1	\$ 226.02	\$ 287.04	15,196.6	\$ 410.87	\$ 520.32	\$ 807.37

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year:		SFY 2016						
Population:		All Populations						
Rate Cell:		All Rate Cells						
Region:		Statewide						
Tribal/Non-Tribal Members:		Tribal						
Member Months:		752,491						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	249.3	\$ 3,180.62	\$ 66.07	264.3	\$ 3,056.38	\$ 67.31	\$ 133.38
Inpatient Maternity Delivery	Days	28.7	2,831.52	6.77	44.3	3,117.12	11.52	18.29
Inpatient Well Newborn	Days	20.7	2,931.36	5.06	30.5	3,080.57	7.83	12.90
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal – Inpatient Hospital		298.7	\$ 3,129.78	\$ 77.91	339.1	\$ 3,066.50	\$ 86.66	\$ 164.57
Outpatient Hospital								
Outpatient Emergency Room	Visits	317.3	\$ 720.52	\$ 19.05	579.6	\$ 566.97	\$ 27.38	\$ 46.43
Outpatient Surgery	Visits	42.8	2,358.65	8.42	68.4	987.95	5.63	14.05
Outpatient Radiology	Procedures	86.1	360.15	2.58	121.1	503.24	5.08	7.66
Outpatient Pathology/Lab	Procedures	362.8	26.21	0.79	830.2	393.74	27.24	28.03
Outpatient Pharmacy	Procedures	69.3	269.97	1.56	66.3	395.66	2.19	3.75
Other Outpatient	Procedures	333.0	134.14	3.72	1,010.7	372.46	31.37	35.09
Subtotal – Outpatient Hospital		1,211.3	\$ 357.93	\$ 36.13	2,676.2	\$ 443.41	\$ 98.89	\$ 135.02
Professional								
Inpatient and Outpatient Surgery	Procedures	173.2	\$ 353.98	\$ 5.11	194.6	\$ 390.67	\$ 6.33	\$ 11.44
Anesthesia	Procedures	67.8	446.28	2.52	86.7	424.30	3.07	5.59
Inpatient Visits	Visits	303.0	333.25	8.42	222.3	289.18	5.36	13.77
Emergency Room	Visits	332.4	163.94	4.54	416.9	131.74	4.58	9.12
Office/Home Visits/Consults	Visits	786.0	125.89	8.25	1,242.7	110.61	11.45	19.70
Maternity	Procedures	25.9	574.99	1.24	44.2	784.27	2.89	4.13
Pathology/Lab	Procedures	724.9	25.26	1.53	221.1	29.80	0.55	2.07
Radiology	Procedures	520.6	135.38	5.87	515.7	44.76	1.92	7.80
Office Administered Drugs	Procedures	71.8	121.08	0.72	46.4	37.10	0.14	0.87
FQHC/RHC/Tribal Clinic	Visits	113.3	285.14	2.69	2,111.6	530.25	93.31	96.00
Physical Exams	Visits	116.9	166.25	1.62	111.5	125.96	1.17	2.79
Therapy	Visits	594.9	147.45	7.31	20.7	55.96	0.10	7.41
Vision	Visits	510.3	91.22	3.88	30.6	96.71	0.25	4.13
Other Professional	Procedures	578.5	72.93	3.52	190.2	85.26	1.35	4.87
Telemedicine	Procedures	6.4	134.79	0.07	137.7	363.71	4.17	4.25
Subtotal – Professional		4,925.9	\$ 139.55	\$ 57.29	5,592.9	\$ 293.17	\$ 136.64	\$ 193.92
Pharmacy								
Psychotropic Drugs	Scripts	336.8	\$ 51.63	\$ 1.45	403.3	\$ 29.57	\$ 0.99	\$ 2.44
Opioid Drugs	Scripts	231.6	66.05	1.27	250.3	22.68	0.47	1.75
All Other Drugs	Scripts	1,376.9	114.68	13.16	3,109.6	66.83	17.32	30.48
Subtotal – Pharmacy		1,945.3	\$ 97.97	\$ 15.88	3,763.1	\$ 59.90	\$ 18.78	\$ 34.67
Ancillary								
Ground Transportation	Trips	3,457.7	\$ 41.85	\$ 12.06	2.2	\$ 290.26	\$ 0.05	\$ 12.11
Air Transportation	Trips	1,231.7	624.83	64.13	3.6	7,679.46	2.31	66.44
Accommodations	Claims	475.1	288.89	11.44	-	-	-	11.44
DIME/Prosthetics	Procedures	765.8	114.81	7.33	0.2	47.62	0.00	7.33
Dental	Procedures	1,634.7	129.54	17.65	847.9	520.36	36.77	54.42
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		7,565.0	\$ 178.62	\$ 112.61	853.9	\$ 549.86	\$ 39.13	\$ 151.73
LTSS								
Hospice	Days	0.2	\$ 8,138.09	\$ 0.16	-	\$ 0.00	\$ 0.00	\$ 0.16
Nursing Home	Days	10.3	503.99	0.43	6.3	3,018.84	1.59	2.02
Skilled Nursing Facility	Days	766.6	580.09	37.06	253.0	916.25	19.32	56.38
HCBS	Procedures	6,199.0	204.26	105.52	1.3	354.33	0.04	105.56
Case Management	Procedures	244.0	216.34	4.40	40.1	294.94	0.99	5.38
Personal Care	Procedures	1,782.0	82.76	12.29	41.1	46.34	0.16	12.45
Subtotal – LTSS		9,002.1	\$ 213.10	\$ 159.86	341.9	\$ 775.41	\$ 22.09	\$ 181.95
Behavioral Health								
IP Psych Hospital - API	Days	37.9	\$ 1,320.16	\$ 4.17	-	\$ 0.00	\$ 0.00	\$ 4.17
IP Psych Hospital - All Other	Days	185.7	712.67	11.03	-	-	-	11.03
IP General Hospital - MH/SA	Days	32.2	2,839.07	7.63	4.4	3,863.80	1.40	9.03
OP General Hospital - MH/SA	Visits	1.1	88.20	0.01	2.2	17.22	0.00	0.01
Screening	Procedures	21.0	36.57	0.06	12.3	580.04	0.60	0.66
Assessment	Procedures	32.0	215.12	0.57	22.1	591.26	1.09	1.66
Crisis Services	Procedures	21.0	152.48	0.27	30.2	597.12	1.50	1.77
Medication Services	Procedures	164.4	31.01	0.42	18.0	598.30	0.90	1.32
Methadone Medication Services	Procedures	200.3	12.50	0.21	-	-	-	0.21
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	323.6	89.27	2.41	120.2	589.74	5.91	8.31
Family Therapy OP	Procedures	93.2	99.41	0.77	17.8	579.49	0.86	1.63
Group Therapy OP	Procedures	283.1	76.95	1.82	32.4	533.88	1.44	3.26
SBIRT	Procedures	0.2	43.80	0.00	11.9	600.27	0.60	0.60
Substance Abuse Residential	Days	143.7	237.35	2.84	262.2	402.68	8.80	11.64
Children's Residential	Days	1,181.2	176.61	17.38	197.8	317.70	5.24	22.62
RPTC - In State	Days	232.8	330.63	6.41	-	-	-	6.41
RPTC - Out of State	Days	336.5	361.52	10.14	-	-	-	10.14
Detoxification	Procedures	-	-	-	10.9	602.40	0.55	0.55
Medical Evaluation	Procedures	11.2	228.79	0.21	0.4	544.40	0.02	0.23
Psychological Testing	Procedures	45.8	494.57	1.89	1.9	447.39	0.07	1.96
Peer Support Services	Units	33.5	16.97	0.05	0.1	150.50	0.00	0.05
Psychosocial Rehabilitation Services	Procedures	1,956.5	198.26	32.32	413.3	601.09	20.70	53.03
BH Case Management	Units	873.2	15.98	1.16	96.0	213.18	1.71	2.87
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	8.7	94.14	0.07	8.0	579.65	0.39	0.45
Other Professional MH/SA	Visits	68.7	39.14	0.22	29.1	602.25	1.46	1.68
Subtotal – Behavioral Health		6,287.4	\$ 194.81	\$ 102.07	1,291.4	\$ 494.62	\$ 53.23	\$ 155.30
Total All Services		31,235.8	\$ 215.81	\$ 561.74	14,858.5	\$ 367.81	\$ 455.42	\$ 1,017.17

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year: SFY 2016
Population: All Populations
Rate Cell: All Rate Cells
Region: Anchorage Municipality
Tribal/Non-Tribal Members: Tribal
Member Months: 167,208

Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	437.4	\$ 3,148.94	\$ 114.78	452.8	\$ 2,957.81	\$ 111.62	\$ 226.40
Inpatient Maternity Delivery	Days	22.7	2,860.43	5.41	39.5	3,155.80	10.40	15.81
Inpatient Well Newborn	Days	16.6	2,720.83	3.78	29.4	3,029.76	7.41	11.19
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		476.7	\$ 3,120.26	\$ 123.96	521.7	\$ 2,976.87	\$ 129.43	\$ 253.39
Outpatient Hospital								
Outpatient Emergency Room	Visits	454.5	\$ 641.53	\$ 24.30	969.4	\$ 496.52	\$ 40.11	\$ 64.41
Outpatient Surgery	Visits	35.5	2,025.54	5.98	73.6	944.09	5.79	11.77
Outpatient Radiology	Procedures	36.5	328.44	1.00	117.5	486.94	4.77	5.77
Outpatient Pathology/Lab	Procedures	439.9	26.63	0.98	804.4	463.56	31.07	32.05
Outpatient Pharmacy	Procedures	94.9	289.68	2.29	30.4	445.92	1.13	3.42
Other Outpatient	Procedures	415.7	128.14	4.44	1,480.6	281.66	34.75	39.19
Subtotal - Outpatient Hospital		1,477.0	\$ 316.77	\$ 38.99	3,475.9	\$ 406.08	\$ 117.62	\$ 156.61
Professional								
Inpatient and Outpatient Surgery	Procedures	250.7	\$ 364.33	\$ 7.61	305.5	\$ 330.82	\$ 8.42	\$ 16.03
Anesthesia	Procedures	69.6	453.15	2.63	118.2	429.29	4.23	6.86
Inpatient Visits	Visits	541.9	358.67	16.20	328.1	320.04	8.75	24.95
Emergency Room	Visits	480.3	172.05	6.89	1,113.3	140.29	13.02	19.90
Office/Home Visits/Consults	Visits	1,073.1	127.65	11.42	752.2	105.34	6.60	18.02
Maternity	Procedures	30.2	536.29	1.35	52.3	508.44	2.22	3.57
Pathology/Lab	Procedures	1,446.4	22.65	2.73	90.6	73.72	0.56	3.29
Radiology	Procedures	732.8	132.22	8.07	1,165.2	40.39	3.92	12.00
Office Administered Drugs	Procedures	95.2	136.97	1.09	8.8	28.00	0.02	1.11
FQHC/RHC/Tribal Clinic	Visits	62.0	289.45	1.50	2,672.6	529.85	118.01	119.50
Physical Exams	Visits	160.5	167.47	2.24	38.8	138.94	0.45	2.69
Therapy	Visits	1,184.1	136.77	13.50	70.8	50.61	0.30	13.79
Vision	Visits	436.6	76.00	2.77	36.6	135.08	0.41	3.18
Other Professional	Procedures	1,167.7	62.55	6.09	354.3	82.48	2.44	8.52
Telemedicine	Procedures	6.1	139.78	0.07	27.0	315.18	0.71	0.78
Subtotal - Professional		7,737.3	\$ 130.49	\$ 84.13	7,134.4	\$ 286.02	\$ 170.05	\$ 254.18
Pharmacy								
Psychotropic Drugs	Scripts	733.7	\$ 49.43	\$ 3.02	1,017.3	\$ 27.56	\$ 2.34	\$ 5.36
Opioid Drugs	Scripts	307.7	69.06	1.77	313.7	36.09	0.94	2.71
All Other Drugs	Scripts	2,287.5	87.07	16.60	5,057.1	79.17	33.37	49.96
Subtotal - Pharmacy		3,328.8	\$ 77.11	\$ 21.39	6,388.1	\$ 68.84	\$ 36.65	\$ 58.04
Ancillary								
Ground Transportation	Trips	1,315.4	\$ 116.02	\$ 12.72	0.4	\$ 236.36	\$ 0.01	\$ 12.73
Air Transportation	Trips	208.3	735.83	12.78	0.6	7,990.51	0.43	13.21
Accommodations	Claims	93.2	410.10	3.18	-	-	-	3.18
DIME/Prosthetics	Procedures	1,545.0	112.06	14.43	0.1	44.63	0.00	14.43
Dental	Procedures	2,317.1	134.46	25.96	527.2	495.62	21.77	47.74
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		5,479.0	\$ 151.27	\$ 69.07	528.3	\$ 504.51	\$ 22.21	\$ 91.28
LTSS								
Hospice	Days	0.2	\$ 28,096.84	\$ 0.50	-	\$ 0.00	\$ 0.00	\$ 0.50
Nursing Home	Days	31.6	521.14	1.37	18.9	3,097.97	4.89	6.27
Skilled Nursing Facility	Days	1,171.1	385.18	37.59	32.6	904.13	2.45	40.05
HCBS	Procedures	13,935.9	195.49	227.03	3.8	322.88	0.10	227.13
Case Management	Procedures	480.1	213.64	8.55	63.7	247.03	1.31	9.86
Personal Care	Procedures	2,568.6	88.21	18.88	-	-	-	18.88
Subtotal - LTSS		18,187.6	\$ 193.93	\$ 293.93	119.1	\$ 882.95	\$ 8.76	\$ 302.69
Behavioral Health								
IP Psych Hospital - API	Days	74.4	\$ 1,324.06	\$ 8.20	-	\$ 0.00	\$ 0.00	\$ 8.20
IP Psych Hospital - All Other	Days	351.6	710.87	20.83	-	-	-	20.83
IP General Hospital - MH/SA	Days	52.0	2,760.15	11.95	4.8	2,941.63	1.18	13.13
OP General Hospital - MH/SA	Visits	0.3	40.71	0.00	0.6	19.79	0.00	0.00
Screening	Procedures	32.5	36.34	0.10	12.1	535.65	0.54	0.64
Assessment	Procedures	54.0	203.04	0.91	21.7	592.68	1.07	1.98
Crisis Services	Procedures	58.8	147.93	0.73	35.8	599.20	1.79	2.51
Medication Services	Procedures	159.1	40.07	0.53	50.4	601.80	2.53	3.06
Methadone Medication Services	Procedures	735.6	12.50	0.77	-	-	-	0.77
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	484.5	89.08	3.60	186.3	579.47	9.00	12.59
Family Therapy OP	Procedures	136.5	97.04	1.10	25.5	592.01	1.26	2.36
Group Therapy OP	Procedures	304.1	79.20	2.01	73.3	473.28	2.89	4.90
SBIRT	Procedures	0.2	43.80	0.00	2.7	602.21	0.14	0.14
Substance Abuse Residential	Days	226.4	244.69	4.62	382.3	234.50	7.47	12.09
Children's Residential	Days	1,935.3	172.21	27.77	209.6	228.55	3.99	31.76
RPTC - In State	Days	567.7	319.20	15.10	-	-	-	15.10
RPTC - Out of State	Days	573.6	380.93	18.21	-	-	-	18.21
Detoxification	Procedures	-	-	-	2.9	602.65	0.14	0.14
Medical Evaluation	Procedures	25.7	230.55	0.49	-	-	-	0.49
Psychological Testing	Procedures	84.8	509.75	3.60	0.4	284.97	0.01	3.61
Peer Support Services	Units	45.6	17.00	0.06	-	-	-	0.06
Psychosocial Rehabilitation Services	Procedures	2,806.4	206.80	48.36	674.6	601.05	33.79	82.15
BH Case Management	Units	1,607.4	15.98	2.14	210.6	171.46	3.01	5.15
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	6.5	112.01	0.06	2.7	525.21	0.12	0.18
Other Professional MH/SA	Visits	107.4	39.91	0.36	35.7	605.43	1.80	2.16
Subtotal - Behavioral Health		10,430.4	\$ 197.32	\$ 171.51	1,932.0	\$ 439.27	\$ 70.72	\$ 242.23
Total All Services		47,116.9	\$ 204.51	\$ 802.98	20,099.6	\$ 331.61	\$ 555.44	\$ 1,358.42

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year:		SFY 2016						
Population:		All Populations						
Rate Cell:		All Rate Cells						
Region:		Fairbanks North Star Borough						
Tribal/Non-Tribal Members:		Tribal						
Member Months:		47,978						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	440.0	\$ 2,778.75	\$ 101.88	81.5	\$ 3,226.19	\$ 21.92	\$ 123.80
Inpatient Maternity Delivery	Days	103.3	2,765.97	23.81	7.3	3,208.07	1.94	25.75
Inpatient Well Newborn	Days	49.8	2,791.37	11.58	2.0	3,130.50	0.52	12.10
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal – Inpatient Hospital		593.0	\$ 2,777.58	\$ 137.26	90.8	\$ 3,222.63	\$ 24.38	\$ 161.65
Outpatient Hospital								
Outpatient Emergency Room	Visits	821.9	\$ 703.39	\$ 48.17	101.8	\$ 538.67	\$ 4.57	\$ 52.74
Outpatient Surgery	Visits	74.0	1,740.80	10.74	27.8	915.01	2.12	12.86
Outpatient Radiology	Procedures	262.9	299.39	6.56	24.0	493.72	0.99	7.55
Outpatient Pathology/Lab	Procedures	798.6	19.76	1.31	105.5	473.79	4.17	5.48
Outpatient Pharmacy	Procedures	133.8	150.34	1.68	14.3	450.72	0.54	2.21
Other Outpatient	Procedures	479.5	137.67	5.50	296.6	344.38	8.51	14.01
Subtotal – Outpatient Hospital		2,570.7	\$ 345.27	\$ 73.96	570.0	\$ 439.79	\$ 20.89	\$ 94.86
Professional								
Inpatient and Outpatient Surgery	Procedures	310.4	\$ 322.39	\$ 8.34	103.3	\$ 475.23	\$ 4.09	\$ 12.43
Anesthesia	Procedures	106.3	427.74	3.79	41.3	406.01	1.40	5.19
Inpatient Visits	Visits	478.2	331.10	13.19	99.0	345.75	2.85	16.05
Emergency Room	Visits	894.2	163.81	12.21	92.5	149.52	1.15	13.36
Office/Home Visits/Consults	Visits	1,495.2	121.27	15.11	270.1	113.63	2.56	17.67
Maternity	Procedures	42.3	685.07	2.41	30.3	1,382.38	3.49	5.90
Pathology/Lab	Procedures	660.8	28.49	1.57	50.5	57.02	0.24	1.81
Radiology	Procedures	962.2	55.38	4.44	182.8	45.64	0.70	5.14
Office Administered Drugs	Procedures	149.6	40.16	0.50	7.8	49.55	0.03	0.53
FQHC/RHC/Tribal Clinic	Visits	124.1	265.95	2.75	3,996.6	508.38	169.32	172.07
Physical Exams	Visits	250.1	175.59	3.66	26.3	124.64	0.27	3.93
Therapy	Visits	1,900.1	96.18	15.23	3.8	52.42	0.02	15.25
Vision	Visits	438.5	77.50	2.83	12.0	95.91	0.10	2.93
Other Professional	Procedures	648.8	99.76	5.39	61.8	174.10	0.90	6.29
Telemedicine	Procedures	16.5	168.67	0.23	29.5	133.26	0.33	0.56
Subtotal – Professional		8,477.1	\$ 129.75	\$ 91.66	5,007.5	\$ 449.16	\$ 187.43	\$ 279.09
Pharmacy								
Psychotropic Drugs	Scripts	529.0	\$ 52.16	\$ 2.30	512.5	\$ 40.41	\$ 1.73	\$ 4.03
Opioid Drugs	Scripts	379.7	73.52	2.33	299.6	22.75	0.57	2.89
All Other Drugs	Scripts	2,480.9	118.89	24.58	3,118.2	60.28	15.66	40.24
Subtotal – Pharmacy		3,389.6	\$ 103.39	\$ 29.21	3,930.3	\$ 54.83	\$ 17.96	\$ 47.16
Ancillary								
Ground Transportation	Trips	1,724.8	\$ 68.11	\$ 9.79	-	\$ 0.00	\$ 0.00	\$ 9.79
Air Transportation	Trips	525.2	648.40	28.38	0.3	11,729.45	0.24	28.63
Accommodations	Claims	286.9	252.14	6.03	-	-	-	6.03
DME/Prosthetics	Procedures	833.1	98.09	6.81	0.5	29.12	0.00	6.81
Dental	Procedures	2,760.8	145.32	33.43	743.8	480.44	29.78	63.21
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		6,130.8	\$ 165.28	\$ 84.44	744.6	\$ 483.91	\$ 30.03	\$ 114.47
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.25	-	\$ 0.00	\$ 0.00	\$ 0.25
Nursing Home	Days	13.8	102.45	0.12	14.5	3,335.00	4.03	4.15
Skilled Nursing Facility	Days	1,331.6	653.63	72.53	-	-	-	72.53
HCBS	Procedures	7,222.3	221.62	133.39	0.3	370.00	0.01	133.39
Case Management	Procedures	344.7	212.95	6.12	6.5	312.70	0.17	6.29
Personal Care	Procedures	2,297.8	95.25	18.24	29.5	60.87	0.15	18.39
Subtotal – LTSS		11,210.1	\$ 246.90	\$ 230.64	50.8	\$ 1,030.11	\$ 4.36	\$ 235.00
Behavioral Health								
IP Psych Hospital - API	Days	80.5	\$ 1,238.23	\$ 8.31	-	\$ 0.00	\$ 0.00	\$ 8.31
IP Psych Hospital - All Other	Days	235.1	713.34	13.98	-	-	-	13.98
IP General Hospital - MH/SA	Days	85.5	2,841.14	20.25	0.8	6,630.23	0.41	20.67
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	28.3	38.84	0.09	7.8	586.78	0.38	0.47
Assessment	Procedures	51.0	215.90	0.92	20.8	595.09	1.03	1.95
Crisis Services	Procedures	17.5	170.54	0.25	7.3	597.52	0.36	0.61
Medication Services	Procedures	515.5	22.78	0.98	35.0	602.51	1.76	2.74
Methadone Medication Services	Procedures	428.7	12.50	0.45	-	-	-	0.45
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	618.8	95.24	4.91	64.8	588.66	3.18	8.09
Family Therapy OP	Procedures	143.3	95.93	1.15	5.5	601.00	0.28	1.42
Group Therapy OP	Procedures	476.7	77.54	3.08	10.3	597.98	0.51	3.59
SBIRT	Procedures	-	-	-	53.3	598.95	2.66	2.66
Substance Abuse Residential	Days	162.3	232.67	3.15	668.8	556.52	31.02	34.16
Children's Residential	Days	2,222.0	190.42	35.26	69.5	172.22	1.00	36.26
RPTC - In State	Days	180.3	337.19	5.07	-	-	-	5.07
RPTC - Out of State	Days	975.7	368.64	29.97	-	-	-	29.97
Detoxification	Procedures	-	-	-	129.3	602.27	6.49	6.49
Medical Evaluation	Procedures	11.0	243.24	0.22	4.3	602.65	0.21	0.44
Psychological Testing	Procedures	45.5	473.96	1.80	-	-	-	1.80
Peer Support Services	Units	8.0	17.00	0.01	-	-	-	0.01
Psychosocial Rehabilitation Services	Procedures	3,985.1	189.59	62.96	793.4	601.16	39.74	102.70
BH Case Management	Units	1,363.1	16.00	1.82	87.8	432.40	3.16	4.98
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	10.8	66.54	0.06	-	-	-	0.06
Other Professional MH/SA	Visits	98.5	39.85	0.33	42.8	602.22	2.15	2.47
Subtotal – Behavioral Health		11,743.4	\$ 199.26	\$ 195.00	2,001.2	\$ 565.71	\$ 94.34	\$ 289.34
Total All Services		44,114.7	\$ 229.09	\$ 842.18	12,395.2	\$ 367.29	\$ 379.38	\$ 1,221.57

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year:		SFY 2016						
Population:		All Populations						
Rate Cell:		All Rate Cells						
Region:		Gulf Coast/Aleutian Region						
Tribal/Non-Tribal Members:		Tribal						
Member Months:		52,378						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	182.8	\$ 3,614.96	\$ 55.08	173.4	\$ 2,979.93	\$ 43.07	\$ 98.14
Inpatient Maternity Delivery	Days	12.1	3,595.36	3.64	52.7	2,922.43	12.83	16.47
Inpatient Well Newborn	Days	44.7	2,864.38	10.66	41.9	2,905.20	10.15	20.81
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		239.6	\$ 3,474.04	\$ 69.38	268.1	\$ 2,956.94	\$ 66.05	\$ 135.43
Outpatient Hospital								
Outpatient Emergency Room	Visits	115.5	\$ 1,024.54	\$ 9.86	307.9	\$ 541.12	\$ 13.89	\$ 23.74
Outpatient Surgery	Visits	34.8	1,949.00	5.66	117.1	905.08	8.83	14.49
Outpatient Radiology	Procedures	74.0	323.81	2.00	134.9	538.67	6.06	8.05
Outpatient Pathology/Lab	Procedures	206.2	14.13	0.24	744.8	532.95	33.08	33.32
Outpatient Pharmacy	Procedures	64.4	463.54	2.49	65.3	563.97	3.07	5.56
Other Outpatient	Procedures	253.2	205.87	4.34	1,357.9	422.59	47.82	52.16
Subtotal - Outpatient Hospital		748.0	\$ 394.39	\$ 24.58	2,727.9	\$ 495.93	\$ 112.74	\$ 137.32
Professional								
Inpatient and Outpatient Surgery	Procedures	119.1	\$ 405.39	\$ 4.02	227.7	\$ 370.00	\$ 7.02	\$ 11.05
Anesthesia	Procedures	63.9	392.93	2.09	107.7	394.12	3.54	5.63
Inpatient Visits	Visits	217.2	315.54	5.71	205.7	254.72	4.37	10.08
Emergency Room	Visits	118.2	169.58	1.67	212.6	124.22	2.20	3.87
Office/Home Visits/Consults	Visits	333.1	134.19	3.73	1,998.9	103.11	17.18	20.90
Maternity	Procedures	9.6	764.72	0.61	52.5	726.49	3.18	3.79
Pathology/Lab	Procedures	318.7	29.28	0.78	499.7	21.90	0.91	1.69
Radiology	Procedures	351.0	189.52	5.54	465.3	42.71	1.66	7.20
Office Administered Drugs	Procedures	51.5	190.22	0.82	94.4	36.45	0.29	1.10
FQHC/RHC/Tribal Clinic	Visits	217.2	321.52	5.82	1,510.5	536.44	67.52	73.34
Physical Exams	Visits	32.3	151.80	0.41	169.1	91.28	1.29	1.69
Therapy	Visits	71.5	113.81	0.68	4.6	56.36	0.02	0.70
Vision	Visits	444.5	83.07	3.08	34.4	150.17	0.43	3.51
Other Professional	Procedures	262.3	73.02	1.60	186.7	93.58	1.46	3.05
Telemedicine	Procedures	1.6	221.71	0.03	48.6	148.52	0.60	0.63
Subtotal - Professional		2,611.8	\$ 168.09	\$ 36.58	5,818.3	\$ 230.27	\$ 111.65	\$ 148.23
Pharmacy								
Psychotropic Drugs	Scripts	135.6	\$ 54.15	\$ 0.61	200.0	\$ 28.93	\$ 0.48	\$ 1.09
Opioid Drugs	Scripts	140.4	43.39	0.51	206.0	17.84	0.31	0.81
All Other Drugs	Scripts	775.7	116.50	7.53	2,154.0	80.13	14.38	21.92
Subtotal - Pharmacy		1,051.8	\$ 98.70	\$ 8.65	2,560.0	\$ 71.12	\$ 15.17	\$ 23.82
Ancillary								
Ground Transportation	Trips	2,954.5	\$ 39.07	\$ 9.62	-	\$ 0.00	\$ 0.00	\$ 9.62
Air Transportation	Trips	1,559.0	609.30	79.16	7.6	4,876.12	3.07	82.23
Accommodations	Claims	577.1	330.29	15.88	-	-	-	15.88
DIME/Prosthetics	Procedures	652.0	100.73	5.47	0.5	29.12	0.00	5.47
Dental	Procedures	954.7	139.49	11.10	1,074.7	504.77	45.21	56.31
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		6,697.4	\$ 217.22	\$ 121.24	1,082.7	\$ 535.10	\$ 48.28	\$ 169.52
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Nursing Home	Days	-	-	-	2.7	1,297.34	0.30	0.30
Skilled Nursing Facility	Days	931.5	811.92	63.03	-	-	-	63.03
HCBS	Procedures	3,701.9	273.66	84.42	-	-	-	84.42
Case Management	Procedures	176.2	228.07	3.35	52.7	305.22	1.34	4.69
Personal Care	Procedures	3,558.4	81.86	24.28	-	-	-	24.28
Subtotal - LTSS		8,368.0	\$ 251.06	\$ 175.07	55.4	\$ 354.41	\$ 1.64	\$ 176.71
Behavioral Health								
IP Psych Hospital - API	Days	6.0	\$ 1,319.13	\$ 0.65	-	\$ 0.00	\$ 0.00	\$ 0.65
IP Psych Hospital - All Other	Days	101.5	694.57	5.87	-	-	-	5.87
IP General Hospital - MH/SA	Days	23.6	2,781.99	5.47	3.7	3,130.50	0.96	6.43
OP General Hospital - MH/SA	Visits	5.3	53.93	0.02	-	-	-	0.02
Screening	Procedures	8.5	35.00	0.02	3.7	602.63	0.18	0.21
Assessment	Procedures	13.3	213.84	0.24	33.2	601.83	1.67	1.90
Crisis Services	Procedures	5.0	100.36	0.04	57.7	597.26	2.87	2.92
Medication Services	Procedures	26.1	43.73	0.10	3.7	601.25	0.18	0.28
Methodone Medication Services	Procedures	-	-	-	-	-	-	-
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	141.4	87.52	1.03	112.7	589.18	5.53	6.57
Family Therapy OP	Procedures	19.7	87.59	0.14	30.2	597.21	1.51	1.65
Group Therapy OP	Procedures	177.6	67.35	1.00	22.0	594.88	1.09	2.09
SBIRT	Procedures	0.2	43.80	0.00	0.7	601.67	0.03	0.04
Substance Abuse Residential	Days	17.4	238.82	0.35	613.1	508.19	25.96	26.31
Children's Residential	Days	437.6	195.58	7.13	185.6	462.82	7.16	14.29
RPTC - In State	Days	138.1	392.94	4.52	-	-	-	4.52
RPTC - Out of State	Days	135.2	354.04	3.99	-	-	-	3.99
Detoxification	Procedures	-	-	-	-	-	-	-
Medical Evaluation	Procedures	5.5	240.85	0.11	-	-	-	0.11
Psychological Testing	Procedures	22.5	530.32	0.99	-	-	-	0.99
Peer Support Services	Units	-	-	-	-	-	-	-
Psychosocial Rehabilitation Services	Procedures	535.2	196.57	8.77	304.2	599.69	15.20	23.97
BH Case Management	Units	228.9	15.88	0.30	107.7	246.02	2.21	2.51
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	5.5	65.56	0.03	30.0	591.84	1.48	1.51
Other Professional MH/SA	Visits	19.7	39.71	0.07	26.8	602.21	1.35	1.41
Subtotal - Behavioral Health		2,073.6	\$ 236.41	\$ 40.85	1,535.0	\$ 526.80	\$ 67.39	\$ 108.24
Total All Services		21,790.3	\$ 262.33	\$ 476.36	14,047.5	\$ 361.28	\$ 422.92	\$ 899.28

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year: SFY 2016
Population: All Populations
Rate Cell: All Rate Cells
Region: Kenai Peninsula Borough
Tribal/Non-Tribal Members: Tribal
Member Months: 32,920

Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	328.8	\$ 3,221.92	\$ 88.28	164.8	\$ 3,154.65	\$ 43.31	\$ 131.60
Inpatient Maternity Delivery	Days	48.8	3,436.28	13.99	17.1	3,108.43	4.44	18.43
Inpatient Well Newborn	Days	52.1	3,672.71	15.95	10.9	2,751.03	2.51	18.46
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		429.8	\$ 3,300.96	\$ 118.22	192.8	\$ 3,127.65	\$ 50.26	\$ 168.48
Outpatient Hospital								
Outpatient Emergency Room	Visits	602.9	\$ 1,047.36	\$ 52.62	161.5	\$ 514.04	\$ 6.92	\$ 59.54
Outpatient Surgery	Visits	79.5	3,154.68	20.89	38.3	994.99	3.17	24.06
Outpatient Radiology	Procedures	298.5	392.34	9.76	47.8	467.27	1.86	11.62
Outpatient Pathology/Lab	Procedures	901.8	23.37	1.76	322.2	460.21	12.36	14.11
Outpatient Pharmacy	Procedures	81.3	141.41	0.96	26.2	473.84	1.04	1.99
Other Outpatient	Procedures	882.5	125.16	9.20	393.7	330.69	10.85	20.05
Subtotal - Outpatient Hospital		2,846.6	\$ 401.30	\$ 95.19	989.7	\$ 438.86	\$ 36.19	\$ 131.39
Professional								
Inpatient and Outpatient Surgery	Procedures	367.1	\$ 333.59	\$ 10.20	117.7	\$ 411.75	\$ 4.04	\$ 14.24
Anesthesia	Procedures	117.4	392.08	3.84	51.0	454.18	1.93	5.77
Inpatient Visits	Visits	465.5	302.52	11.74	156.4	242.05	3.15	14.89
Emergency Room	Visits	612.8	161.42	8.24	178.3	137.60	2.04	10.29
Office/Home Visits/Consults	Visits	2,148.1	123.63	22.13	470.6	104.83	4.11	26.24
Maternity	Procedures	37.9	1,259.97	3.98	20.0	623.01	1.04	5.02
Pathology/Lab	Procedures	1,483.6	28.20	3.49	84.6	41.46	0.29	3.78
Radiology	Procedures	1,111.4	122.97	11.39	324.1	44.09	1.19	12.58
Office Administered Drugs	Procedures	184.8	94.75	1.46	11.7	45.91	0.14	1.50
FQHC/RHC/Tribal Clinic	Visits	341.2	249.04	7.08	1,716.9	534.20	76.43	83.51
Physical Exams	Visits	271.9	164.83	3.74	33.5	146.99	0.41	4.15
Therapy	Visits	1,638.5	168.55	23.01	1.1	48.23	0.00	23.02
Vision	Visits	529.3	112.00	4.94	19.0	132.70	0.21	5.15
Other Professional	Procedures	712.3	81.63	4.85	130.5	89.99	0.98	5.82
Telemedicine	Procedures	43.0	115.44	0.41	23.0	141.23	0.27	0.68
Subtotal - Professional		10,064.9	\$ 143.66	\$ 120.49	3,338.3	\$ 345.64	\$ 96.15	\$ 216.65
Pharmacy								
Psychotropic Drugs	Scripts	530.7	\$ 50.91	\$ 2.25	93.7	\$ 33.13	\$ 0.26	\$ 2.51
Opioid Drugs	Scripts	655.4	66.15	3.61	85.3	39.18	0.28	3.89
All Other Drugs	Scripts	3,301.1	87.99	24.20	1,309.0	164.50	17.94	42.15
Subtotal - Pharmacy		4,487.3	\$ 80.41	\$ 30.07	1,488.0	\$ 149.04	\$ 18.48	\$ 48.55
Ancillary								
Ground Transportation	Trips	1,774.9	\$ 74.01	\$ 10.95	-	\$ 0.00	\$ 0.00	\$ 10.95
Air Transportation	Trips	621.9	563.66	29.21	-	-	-	29.21
Accommodations	Claims	224.2	267.83	5.00	-	-	-	5.00
DIME/Prosthetics	Procedures	1,277.7	118.38	12.60	1.8	32.22	0.00	12.61
Dental	Procedures	1,919.2	111.58	17.85	631.7	497.85	26.21	44.05
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		5,817.8	\$ 155.96	\$ 75.61	633.5	\$ 496.51	\$ 26.21	\$ 101.82
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Nursing Home	Days	9.5	618.12	0.49	-	-	-	0.49
Skilled Nursing Facility	Days	2,179.9	773.30	140.47	110.8	914.27	8.44	148.92
HCBS	Procedures	10,411.5	217.94	189.09	-	-	-	189.09
Case Management	Procedures	487.0	228.34	9.27	5.5	353.91	0.16	9.43
Personal Care	Procedures	3,385.7	82.96	23.41	-	-	-	23.41
Subtotal - LTSS		16,473.6	\$ 264.22	\$ 362.73	116.3	\$ 887.93	\$ 8.60	\$ 371.33
Behavioral Health								
IP Psych Hospital - API	Days	11.7	\$ 1,064.30	\$ 1.03	-	\$ 0.00	\$ 0.00	\$ 1.03
IP Psych Hospital - All Other	Days	285.1	720.12	17.11	-	-	-	17.11
IP General Hospital - MH/SA	Days	26.6	2,290.26	5.08	1.8	2,926.00	0.44	5.52
OP General Hospital - MH/SA	Visits	9.8	165.41	0.14	-	-	-	0.14
Screening	Procedures	42.6	37.53	0.13	6.6	601.78	0.33	0.46
Assessment	Procedures	52.9	226.47	1.00	10.9	598.07	0.55	1.54
Crisis Services	Procedures	22.2	243.17	0.45	24.4	602.07	1.23	1.68
Medication Services	Procedures	50.3	49.78	0.21	0.4	603.00	0.02	0.23
Methadone Medication Services	Procedures	8.4	12.50	0.01	-	-	-	0.01
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	645.9	89.43	4.81	257.4	598.01	12.83	17.64
Family Therapy OP	Procedures	241.7	110.43	2.22	13.5	601.86	0.68	2.90
Group Therapy OP	Procedures	416.3	76.99	2.67	7.7	602.24	0.38	3.06
SBIRT	Procedures	-	-	-	-	-	-	-
Substance Abuse Residential	Days	316.4	188.77	4.98	186.3	221.24	3.43	8.41
Children's Residential	Days	1,248.5	191.55	19.93	10.2	241.07	0.21	20.13
RPTC - In State	Days	229.3	351.31	6.71	-	-	-	6.71
RPTC - Out of State	Days	547.5	351.22	16.02	-	-	-	16.02
Detoxification	Procedures	-	-	-	1.8	603.00	0.09	0.09
Medical Evaluation	Procedures	10.2	215.17	0.18	-	-	-	0.18
Psychological Testing	Procedures	87.5	457.68	3.34	0.4	603.00	0.02	3.36
Peer Support Services	Units	12.0	17.00	0.02	1.5	150.25	0.02	0.04
Psychosocial Rehabilitation Services	Procedures	3,739.3	165.33	51.52	526.4	601.37	26.38	77.90
BH Case Management	Units	2,917.3	15.99	3.89	370.0	187.53	5.78	9.67
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	7.7	67.98	0.04	1.5	602.00	0.07	0.12
Other Professional MH/SA	Visits	128.3	39.79	0.43	20.4	602.36	1.02	1.45
Subtotal - Behavioral Health		11,057.5	\$ 154.02	\$ 141.92	1,441.0	\$ 445.32	\$ 53.47	\$ 195.39
Total All Services		51,177.4	\$ 221.40	\$ 944.24	8,199.6	\$ 423.50	\$ 289.38	\$ 1,233.62

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year: SFY 2016
Population: All Populations
Rate Cell: All Rate Cells
Region: MatSu Borough
Tribal/Non-Tribal Members: Tribal
Member Months: 49,897

Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	179.7	\$ 3,093.41	\$ 46.31	135.9	\$ 3,097.02	\$ 35.07	\$ 81.38
Inpatient Maternity Delivery	Days	31.3	2,841.81	7.40	39.2	3,074.68	10.04	17.45
Inpatient Well Newborn	Days	24.8	2,756.43	5.69	19.0	3,183.85	5.04	10.73
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		235.7	\$ 3,024.62	\$ 59.41	194.1	\$ 3,101.01	\$ 50.15	\$ 109.56
Outpatient Hospital								
Outpatient Emergency Room	Visits	465.4	\$ 577.89	\$ 22.41	267.7	\$ 523.92	\$ 11.69	\$ 34.10
Outpatient Surgery	Visits	49.3	2,691.88	11.06	45.7	964.21	3.67	14.73
Outpatient Radiology	Procedures	94.0	304.73	2.39	58.9	488.28	2.40	4.79
Outpatient Pathology/Lab	Procedures	534.6	17.57	0.78	496.1	475.87	19.68	20.46
Outpatient Pharmacy	Procedures	66.4	137.68	0.76	17.6	468.13	0.68	1.45
Other Outpatient	Procedures	222.7	109.40	2.03	465.6	350.36	13.59	15.62
Subtotal - Outpatient Hospital		1,432.4	\$ 330.35	\$ 39.43	1,351.6	\$ 459.10	\$ 51.71	\$ 91.14
Professional								
Inpatient and Outpatient Surgery	Procedures	285.0	\$ 333.85	\$ 7.93	145.0	\$ 361.31	\$ 4.37	\$ 12.30
Anesthesia	Procedures	81.3	444.16	3.01	64.7	539.69	2.91	5.92
Inpatient Visits	Visits	303.7	300.64	7.61	140.0	234.18	2.73	10.34
Emergency Room	Visits	502.6	145.89	6.11	276.1	138.22	3.18	9.29
Office/Home Visits/Consults	Visits	1,749.8	119.66	17.45	378.3	113.03	3.56	21.01
Maternity	Procedures	44.7	500.53	1.87	35.4	665.49	1.96	3.83
Pathology/Lab	Procedures	1,921.8	27.25	4.36	60.8	65.26	0.33	4.69
Radiology	Procedures	761.7	114.10	7.24	496.4	47.16	1.95	9.19
Office Administered Drugs	Procedures	162.8	42.59	0.58	5.1	41.90	0.02	0.60
FQHC/RHC/Tribal Clinic	Visits	211.6	231.07	4.08	1,840.3	549.98	84.34	88.42
Physical Exams	Visits	300.9	171.72	4.31	34.4	146.17	0.42	4.72
Therapy	Visits	1,129.9	192.85	18.16	25.7	53.85	0.12	18.27
Vision	Visits	549.8	84.94	3.89	11.1	122.90	0.11	4.00
Other Professional	Procedures	754.7	86.96	5.47	148.9	59.30	0.74	6.20
Telemedicine	Procedures	6.7	143.80	0.08	13.5	318.26	0.36	0.44
Subtotal - Professional		8,767.0	\$ 126.11	\$ 92.14	3,675.5	\$ 349.65	\$ 107.09	\$ 199.23
Pharmacy								
Psychotropic Drugs	Scripts	756.1	\$ 55.68	\$ 3.51	345.1	\$ 37.22	\$ 1.07	\$ 4.58
Opioid Drugs	Scripts	391.0	65.46	2.13	117.1	26.35	0.26	2.39
All Other Drugs	Scripts	2,810.2	68.43	16.03	2,078.8	82.64	14.32	30.34
Subtotal - Pharmacy		3,957.4	\$ 65.70	\$ 21.67	2,541.1	\$ 73.88	\$ 15.64	\$ 37.31
Ancillary								
Ground Transportation	Trips	575.7	\$ 130.17	\$ 6.25	-	\$ 0.00	\$ 0.00	\$ 6.25
Air Transportation	Trips	98.6	946.38	7.78	-	-	-	7.78
Accommodations	Claims	41.8	377.48	1.32	-	-	-	1.32
DIME/Prosthetics	Procedures	1,049.3	131.46	11.50	-	-	-	11.50
Dental	Procedures	2,554.3	108.37	23.07	452.4	486.64	18.35	41.41
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		4,319.8	\$ 138.62	\$ 49.90	452.4	\$ 486.64	\$ 18.35	\$ 68.25
LTSS								
Hospice	Days	2.9	\$ 1,256.44	\$ 0.30	-	\$ 0.00	\$ 0.00	\$ 0.30
Nursing Home	Days	-	-	-	4.1	2,926.00	1.00	1.00
Skilled Nursing Facility	Days	19.2	926.24	1.49	-	-	-	1.49
HCBS	Procedures	13,379.8	194.44	216.79	1.0	419.88	0.03	216.83
Case Management	Procedures	493.7	202.93	8.35	29.1	241.73	0.59	8.94
Personal Care	Procedures	2,654.1	93.18	20.61	-	-	-	20.61
Subtotal - LTSS		16,549.7	\$ 179.49	\$ 247.54	34.2	\$ 568.10	\$ 1.62	\$ 249.15
Behavioral Health								
IP Psych Hospital - API	Days	45.9	\$ 1,378.75	\$ 5.28	-	\$ 0.00	\$ 0.00	\$ 5.28
IP Psych Hospital - All Other	Days	256.8	726.34	15.55	-	-	-	15.55
IP General Hospital - MH/SA	Days	22.1	2,818.43	5.20	2.9	3,855.47	0.93	6.12
OP General Hospital - MH/SA	Visits	0.2	33.07	0.00	-	-	-	0.00
Screening	Procedures	39.2	36.55	0.12	2.6	555.45	0.12	0.24
Assessment	Procedures	49.5	206.93	0.85	8.2	585.09	0.40	1.25
Crisis Services	Procedures	29.1	154.18	0.37	9.4	602.03	0.47	0.84
Medication Services	Procedures	72.4	37.91	0.23	4.6	602.16	0.23	0.46
Methadone Medication Services	Procedures	25.3	12.50	0.03	-	-	-	0.03
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	536.1	92.19	4.12	34.9	587.24	1.71	5.82
Family Therapy OP	Procedures	148.6	104.50	1.29	1.0	401.78	0.03	1.33
Group Therapy OP	Procedures	340.5	75.51	2.14	17.1	602.72	0.86	3.00
SBIRT	Procedures	-	-	-	0.2	601.00	0.01	0.01
Substance Abuse Residential	Days	23.3	250.00	0.49	50.5	558.61	2.35	2.84
Children's Residential	Days	2,170.0	175.91	31.81	64.5	314.64	1.69	33.50
RPTC - In State	Days	389.1	305.03	9.89	-	-	-	9.89
RPTC - Out of State	Days	273.2	372.06	8.47	-	-	-	8.47
Detoxification	Procedures	-	-	-	-	-	-	-
Medical Evaluation	Procedures	23.8	209.93	0.42	-	-	-	0.42
Psychological Testing	Procedures	142.1	408.46	4.84	-	-	-	4.84
Peer Support Services	Units	291.5	17.00	0.41	-	-	-	0.41
Psychosocial Rehabilitation Services	Procedures	2,623.6	189.10	41.34	93.6	601.16	4.69	46.03
BH Case Management	Units	1,120.5	16.00	1.49	20.7	182.26	0.31	1.81
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	17.6	137.87	0.20	-	-	-	0.20
Other Professional MH/SA	Visits	140.0	34.36	0.40	5.1	601.95	0.25	0.65
Subtotal - Behavioral Health		8,780.5	\$ 184.42	\$ 134.95	315.0	\$ 535.22	\$ 14.05	\$ 149.00
Total All Services		44,042.5	\$ 175.75	\$ 645.02	8,563.8	\$ 362.38	\$ 258.61	\$ 903.64

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year:		SFY 2016						
Population:		All Populations						
Rate Cell:		All Rate Cells						
Region:		Northern Southeast Region						
Tribal/Non-Tribal Members:		Tribal						
Member Months:		55,541						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	201.4	\$ 2,985.75	\$ 50.10	146.3	\$ 2,994.54	\$ 36.50	\$ 86.60
Inpatient Maternity Delivery	Days	42.8	3,028.64	10.80	22.0	2,753.57	5.06	15.85
Inpatient Well Newborn	Days	23.3	3,425.35	6.66	27.9	2,923.56	6.79	13.45
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		267.5	\$ 3,030.96	\$ 67.56	196.2	\$ 2,957.39	\$ 48.35	\$ 115.91
Outpatient Hospital								
Outpatient Emergency Room	Visits	648.4	\$ 715.88	\$ 38.68	144.5	\$ 562.83	\$ 6.78	\$ 45.46
Outpatient Surgery	Visits	50.3	2,806.44	11.77	65.0	813.04	4.41	16.18
Outpatient Radiology	Procedures	133.7	491.29	5.48	88.6	558.88	4.13	9.60
Outpatient Pathology/Lab	Procedures	513.1	66.79	2.86	341.6	539.17	15.35	18.20
Outpatient Pharmacy	Procedures	57.7	316.53	1.52	24.8	570.87	1.18	2.70
Other Outpatient	Procedures	689.4	137.73	7.91	889.3	356.64	26.43	34.34
Subtotal - Outpatient Hospital		2,092.7	\$ 391.18	\$ 68.22	1,553.9	\$ 450.00	\$ 58.27	\$ 126.49
Professional								
Inpatient and Outpatient Surgery	Procedures	247.8	\$ 294.21	\$ 6.08	142.2	\$ 417.34	\$ 4.94	\$ 11.02
Anesthesia	Procedures	84.5	518.87	3.65	71.1	324.85	1.92	5.58
Inpatient Visits	Visits	175.2	258.18	3.77	166.4	258.43	3.58	7.35
Emergency Room	Visits	638.2	154.38	8.21	103.3	132.92	1.14	9.35
Office/Home Visits/Consults	Visits	1,092.4	118.70	10.81	561.5	163.72	7.66	18.47
Maternity	Procedures	27.0	546.93	1.23	28.7	851.60	2.04	3.27
Pathology/Lab	Procedures	827.1	26.69	1.84	194.0	34.64	0.56	2.40
Radiology	Procedures	719.0	66.75	4.00	250.4	41.55	0.87	4.87
Office Administered Drugs	Procedures	68.7	51.19	0.29	26.1	39.05	0.19	0.38
FQHC/RHC/Tribal Clinic	Visits	184.3	193.67	2.97	3,522.1	463.66	136.09	139.06
Physical Exams	Visits	155.8	150.92	1.96	53.8	114.26	0.51	2.47
Therapy	Visits	330.6	305.48	8.42	5.4	133.77	0.06	8.48
Vision	Visits	423.0	70.37	2.48	18.8	139.79	0.22	2.70
Other Professional	Procedures	480.7	91.92	3.68	116.0	77.81	0.75	4.43
Telemedicine	Procedures	7.1	106.15	0.06	48.8	145.11	0.59	0.65
Subtotal - Professional		5,461.4	\$ 130.63	\$ 59.45	5,308.7	\$ 364.00	\$ 161.03	\$ 220.48
Pharmacy								
Psychotropic Drugs	Scripts	319.5	\$ 61.91	\$ 1.65	318.5	\$ 12.87	\$ 0.34	\$ 1.99
Opioid Drugs	Scripts	406.2	69.68	2.36	331.9	29.53	0.82	3.18
All Other Drugs	Scripts	1,731.2	188.66	27.22	2,893.2	44.95	10.84	38.05
Subtotal - Pharmacy		2,457.0	\$ 152.51	\$ 31.23	3,543.5	\$ 40.62	\$ 11.99	\$ 43.22
Ancillary								
Ground Transportation	Trips	2,147.8	\$ 60.91	\$ 10.90	-	\$ 0.00	\$ 0.00	\$ 10.90
Air Transportation	Trips	884.7	685.48	50.54	0.2	5,574.65	0.10	50.64
Accommodations	Claims	404.2	308.86	10.40	-	-	-	10.40
DME/Prosthetics	Procedures	652.5	104.36	5.67	-	-	-	5.67
Dental	Procedures	1,289.8	145.08	15.59	1,282.1	501.12	53.54	69.13
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		5,379.1	\$ 207.73	\$ 93.12	1,282.3	\$ 501.97	\$ 53.64	\$ 146.75
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.16	-	\$ 0.00	\$ 0.00	\$ 0.16
Nursing Home	Days	26.4	598.69	1.32	5.0	2,514.41	1.04	2.36
Skilled Nursing Facility	Days	2,737.4	611.54	139.50	-	-	-	139.50
HCBS	Procedures	6,958.3	197.17	114.33	-	-	-	114.33
Case Management	Procedures	356.3	212.34	6.30	1.1	303.08	0.03	6.33
Personal Care	Procedures	3,001.6	57.65	14.42	-	-	-	14.42
Subtotal - LTSS		13,080.0	\$ 253.25	\$ 276.04	6.0	\$ 2,119.53	\$ 1.07	\$ 277.11
Behavioral Health								
IP Psych Hospital - API	Days	36.7	\$ 1,365.69	\$ 4.18	-	\$ 0.00	\$ 0.00	\$ 4.18
IP Psych Hospital - All Other	Days	70.9	711.77	4.20	-	-	-	4.20
IP General Hospital - MH/SA	Days	44.1	3,134.00	11.51	0.2	6,671.17	0.12	11.63
OP General Hospital - MH/SA	Visits	3.2	18.09	0.00	-	-	-	0.00
Screening	Procedures	49.9	36.15	0.15	28.1	602.29	1.41	1.56
Assessment	Procedures	75.4	247.20	1.55	37.4	602.31	1.88	3.43
Crisis Services	Procedures	28.5	181.71	0.43	60.7	602.12	3.05	3.48
Medication Services	Procedures	873.7	30.64	2.23	23.8	594.69	1.18	3.41
Methadone Medication Services	Procedures	24.8	12.50	0.03	-	-	-	0.03
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	775.4	83.36	5.39	249.8	600.35	12.50	17.88
Family Therapy OP	Procedures	200.1	96.51	1.61	27.7	488.01	1.12	2.73
Group Therapy OP	Procedures	885.2	81.28	6.00	13.6	590.09	0.67	6.66
SBIRT	Procedures	1.3	43.80	0.00	2.6	602.67	0.13	0.13
Substance Abuse Residential	Days	428.9	226.62	8.10	283.2	442.16	10.44	18.54
Children's Residential	Days	1,515.0	146.78	18.53	95.5	202.86	1.61	20.15
RPTC - In State	Days	46.0	336.43	1.29	-	-	-	1.29
RPTC - Out of State	Days	219.3	330.89	6.05	-	-	-	6.05
Detoxification	Procedures	-	-	-	0.2	601.00	0.01	0.01
Medical Evaluation	Procedures	13.0	260.65	0.28	0.6	190.18	0.01	0.29
Psychological Testing	Procedures	48.0	391.71	1.57	0.9	455.63	0.03	1.60
Peer Support Services	Units	-	-	-	-	-	-	-
Psychosocial Rehabilitation Services	Procedures	4,463.9	190.62	70.91	265.5	601.63	13.31	84.22
BH Case Management	Units	1,320.7	15.96	1.76	91.2	191.30	1.45	3.21
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	33.7	88.09	0.25	49.0	591.49	2.42	2.66
Other Professional MH/SA	Visits	173.3	39.85	0.58	79.9	600.60	4.00	4.58
Subtotal - Behavioral Health		11,331.0	\$ 155.25	\$ 146.59	1,309.9	\$ 506.95	\$ 55.34	\$ 201.93
Total All Services		40,068.6	\$ 222.28	\$ 742.20	13,200.5	\$ 354.25	\$ 389.69	\$ 1,131.89

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year:		SFY 2016						
Population:		All Populations						
Rate Cell:		All Rate Cells						
Region:		Northern and Interior Region						
Tribal/Non-Tribal Members:		Tribal						
Member Months:		49,442						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid
		Utilization per 1,000	Paid per Unit	PMPM	Utilization per 1,000	Paid per Unit	PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	228.1	\$ 2,951.82	\$ 56.12	184.9	\$ 3,003.86	\$ 46.30	\$ 102.42
Inpatient Maternity Delivery	Days	46.4	2,815.26	10.88	38.1	2,996.43	9.52	20.39
Inpatient Well Newborn	Days	37.6	2,762.89	8.66	34.2	3,013.47	8.59	17.26
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		312.1	\$ 2,908.77	\$ 75.66	257.3	\$ 3,004.04	\$ 64.40	\$ 140.06
Outpatient Hospital								
Outpatient Emergency Room	Visits	249.3	\$ 829.96	\$ 17.24	385.9	\$ 567.10	\$ 18.24	\$ 35.48
Outpatient Surgery	Visits	48.1	1,855.79	7.43	50.5	975.88	4.11	11.54
Outpatient Radiology	Procedures	103.6	411.67	3.56	99.0	532.77	4.40	7.95
Outpatient Pathology/Lab	Procedures	257.3	21.10	0.45	386.2	525.61	16.91	17.37
Outpatient Pharmacy	Procedures	68.2	164.79	0.94	58.7	523.36	2.56	3.50
Other Outpatient	Procedures	141.0	175.45	2.06	912.8	436.32	33.19	35.25
Subtotal - Outpatient Hospital		867.4	\$ 438.22	\$ 31.68	1,893.1	\$ 503.33	\$ 79.41	\$ 111.08
Professional								
Inpatient and Outpatient Surgery	Procedures	134.5	\$ 372.95	\$ 4.18	154.4	\$ 455.45	\$ 5.86	\$ 10.04
Anesthesia	Procedures	65.8	430.23	2.36	77.9	453.80	2.95	5.30
Inpatient Visits	Visits	283.2	256.16	6.05	176.2	278.35	4.09	10.13
Emergency Room	Visits	271.4	178.58	4.04	161.6	144.12	1.94	5.98
Office/Home Visits/Consults	Visits	367.2	126.87	3.88	886.6	103.25	7.63	11.51
Maternity	Procedures	16.5	700.65	0.96	54.9	741.84	3.39	4.35
Pathology/Lab	Procedures	204.8	35.72	0.61	193.9	25.10	0.41	1.02
Radiology	Procedures	464.5	168.53	6.52	320.1	51.23	1.37	7.89
Office Administered Drugs	Procedures	83.5	144.24	1.00	46.6	40.89	0.16	1.16
FQHC/RHC/Tribal Clinic	Visits	27.9	284.95	0.66	2,348.0	517.99	101.35	102.01
Physical Exams	Visits	51.9	170.77	0.74	109.5	113.57	1.04	1.78
Therapy	Visits	249.7	114.14	2.38	6.3	56.40	0.03	2.41
Vision	Visits	352.7	86.66	2.55	16.5	113.60	0.16	2.70
Other Professional	Procedures	351.0	84.07	2.46	126.0	136.16	1.43	3.89
Telemedicine	Procedures	1.5	228.49	0.03	52.9	198.22	0.87	0.90
Subtotal - Professional		2,926.1	\$ 157.55	\$ 38.42	4,731.4	\$ 336.46	\$ 132.66	\$ 171.08
Pharmacy								
Psychotropic Drugs	Scripts	80.3	\$ 65.71	\$ 0.44	204.6	\$ 32.72	\$ 0.56	\$ 1.00
Opioid Drugs	Scripts	121.1	71.40	0.72	271.1	11.72	0.26	0.99
All Other Drugs	Scripts	489.5	96.93	3.95	2,741.4	47.69	10.89	14.85
Subtotal - Pharmacy		691.0	\$ 88.83	\$ 5.11	3,217.1	\$ 43.70	\$ 11.72	\$ 16.83
Ancillary								
Ground Transportation	Trips	4,819.5	\$ 35.44	\$ 14.23	0.5	\$ 286.85	\$ 0.01	\$ 14.25
Air Transportation	Trips	1,829.3	857.64	130.74	0.5	6,168.05	0.25	130.99
Accommodations	Claims	1,310.6	220.75	24.11	-	-	-	24.11
DIME/Prosthetics	Procedures	439.5	111.95	4.10	0.5	124.63	0.01	4.11
Dental	Procedures	1,237.6	166.81	17.20	967.7	537.50	43.34	60.55
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		9,636.6	\$ 237.08	\$ 190.39	969.1	\$ 539.99	\$ 43.61	\$ 234.00
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.03	-	\$ 0.00	\$ 0.00	\$ 0.03
Nursing Home	Days	-	-	-	0.7	3,335.00	0.20	0.20
Skilled Nursing Facility	Days	50.7	586.84	2.48	-	-	-	2.48
HCBS	Procedures	758.7	240.76	15.22	0.2	569.52	0.01	15.23
Case Management	Procedures	51.5	177.54	0.76	49.8	320.91	1.33	2.09
Personal Care	Procedures	692.9	78.57	4.54	597.6	45.65	2.27	6.81
Subtotal - LTSS		1,553.8	\$ 177.87	\$ 23.03	648.3	\$ 70.66	\$ 3.82	\$ 26.85
Behavioral Health								
IP Psych Hospital - API	Days	10.7	\$ 1,347.77	\$ 1.20	-	\$ 0.00	\$ 0.00	\$ 1.20
IP Psych Hospital - All Other	Days	62.9	718.42	3.76	-	-	-	3.76
IP General Hospital - MH/SA	Days	42.0	2,768.95	9.69	-	-	-	9.69
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	7.3	35.00	0.02	5.6	431.26	0.20	0.22
Assessment	Procedures	10.4	197.16	0.17	12.6	602.15	0.63	0.80
Crisis Services	Procedures	0.5	138.00	0.01	3.2	597.69	0.16	0.16
Medication Services	Procedures	0.7	75.00	0.00	11.9	602.84	0.60	0.60
Methadone Medication Services	Procedures	81.1	12.50	0.08	-	-	-	0.08
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	69.4	94.96	0.55	27.7	577.26	1.33	1.88
Family Therapy OP	Procedures	10.2	89.05	0.08	1.2	602.60	0.06	0.14
Group Therapy OP	Procedures	46.1	75.58	0.29	11.2	544.02	0.51	0.80
SBIRT	Procedures	-	-	-	17.7	602.07	0.89	0.89
Substance Abuse Residential	Days	21.6	261.24	0.47	204.1	600.77	10.22	10.69
Children's Residential	Days	376.7	191.38	6.01	59.0	200.05	0.98	6.99
RPTC - In State	Days	316.5	337.37	8.90	-	-	-	8.90
RPTC - Out of State	Days	126.9	317.38	3.36	-	-	-	3.36
Detoxification	Procedures	-	-	-	28.6	602.81	1.44	1.44
Medical Evaluation	Procedures	1.0	206.60	0.02	1.5	603.00	0.07	0.09
Psychological Testing	Procedures	9.2	586.26	0.45	-	-	-	0.45
Peer Support Services	Units	-	-	-	-	-	-	-
Psychosocial Rehabilitation Services	Procedures	401.4	229.31	7.67	54.9	598.54	2.74	10.41
BH Case Management	Units	235.9	16.00	0.31	12.4	366.29	0.38	0.69
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	3.6	105.50	0.03	2.2	602.78	0.11	0.14
Other Professional MH/SA	Visits	14.8	43.02	0.05	16.5	602.41	0.83	0.88
Subtotal - Behavioral Health		1,849.0	\$ 279.89	\$ 43.13	470.1	\$ 539.64	\$ 21.14	\$ 64.27
Total All Services		17,836.1	\$ 274.11	\$ 407.41	12,186.5	\$ 351.30	\$ 356.76	\$ 764.17

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year: SFY 2016
 Population: All Populations
 Rate Cell: All Rate Cells
 Region: Southern Southeast Region
 Tribal/Non-Tribal Members: Tribal
 Member Months: 32,501

Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	244.8	\$ 3,148.34	\$ 64.23	92.7	\$ 3,183.75	\$ 24.59	\$ 88.81
Inpatient Maternity Delivery	Days	83.4	2,301.04	16.00	2.2	2,926.00	0.54	16.54
Inpatient Well Newborn	Days	49.1	2,717.15	11.12	2.6	3,101.29	0.67	11.79
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		377.3	\$ 2,904.86	\$ 91.35	97.5	\$ 3,175.70	\$ 25.80	\$ 117.14
Outpatient Hospital								
Outpatient Emergency Room	Visits	653.5	\$ 702.24	\$ 38.24	35.8	\$ 516.05	\$ 1.54	\$ 39.78
Outpatient Surgery	Visits	84.9	2,934.34	20.77	37.7	962.02	3.02	23.78
Outpatient Radiology	Procedures	398.0	352.03	11.68	36.6	533.81	1.63	13.30
Outpatient Pathology/Lab	Procedures	1,094.0	16.47	1.50	83.8	506.13	3.54	5.04
Outpatient Pharmacy	Procedures	148.8	391.42	4.85	10.7	501.93	0.45	5.30
Other Outpatient	Procedures	1,289.3	114.63	12.32	335.6	320.46	8.96	21.28
Subtotal - Outpatient Hospital		3,668.6	\$ 292.29	\$ 89.36	540.2	\$ 425.00	\$ 19.13	\$ 108.49
Professional								
Inpatient and Outpatient Surgery	Procedures	260.3	\$ 272.07	\$ 5.90	104.1	\$ 337.39	\$ 2.93	\$ 8.83
Anesthesia	Procedures	125.5	364.30	3.81	36.6	298.01	0.91	4.72
Inpatient Visits	Visits	305.0	212.09	5.39	70.9	345.16	2.04	7.43
Emergency Room	Visits	651.7	158.79	8.62	43.9	144.85	0.53	9.15
Office/Home Visits/Consults	Visits	1,890.8	125.83	19.83	232.2	116.65	2.26	22.08
Maternity	Procedures	119.3	424.57	4.22	1.8	1,190.57	0.18	4.40
Pathology/Lab	Procedures	1,281.9	19.36	2.07	28.8	108.11	0.26	2.33
Radiology	Procedures	1,047.1	190.98	16.67	132.6	44.63	0.49	17.16
Office Administered Drugs	Procedures	104.5	61.67	0.54	1.1	5.78	0.00	0.54
FQHC/RHC/Tribal Clinic	Visits	12.9	231.29	0.25	3,185.3	524.10	139.12	139.37
Physical Exams	Visits	342.6	161.17	4.60	2.6	179.58	0.04	4.64
Therapy	Visits	286.5	216.08	5.16	0.4	108.85	0.00	5.16
Vision	Visits	605.2	92.27	4.65	13.3	104.99	0.12	4.77
Other Professional	Procedures	583.4	99.26	4.83	97.8	128.18	1.05	5.87
Telemedicine	Procedures	2.2	128.81	0.02	33.6	127.03	0.36	0.38
Subtotal - Professional		7,618.9	\$ 136.33	\$ 86.56	3,985.0	\$ 452.52	\$ 150.27	\$ 236.83
Pharmacy								
Psychotropic Drugs	Scripts	381.8	\$ 46.80	\$ 1.49	426.5	\$ 7.23	\$ 0.26	\$ 1.75
Opioid Drugs	Scripts	734.0	59.74	3.65	611.1	9.55	0.49	4.14
All Other Drugs	Scripts	3,020.6	88.93	22.39	4,698.4	38.41	15.04	37.42
Subtotal - Pharmacy		4,136.4	\$ 79.86	\$ 27.53	5,735.9	\$ 33.02	\$ 15.78	\$ 43.31
Ancillary								
Ground Transportation	Trips	3,119.2	\$ 52.72	\$ 13.70	-	\$ 0.00	\$ 0.00	\$ 13.70
Air Transportation	Trips	734.8	992.30	60.76	-	-	-	60.76
Accommodations	Claims	462.3	352.95	13.60	-	-	-	13.60
DIME/Prosthetics	Procedures	423.1	121.50	4.28	-	-	-	4.28
Dental	Procedures	2,511.8	101.18	21.18	835.9	475.56	33.13	54.31
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		7,251.2	\$ 187.87	\$ 113.52	835.9	\$ 475.56	\$ 33.13	\$ 146.65
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Nursing Home	Days	-	-	-	0.7	638.76	0.04	0.04
Skilled Nursing Facility	Days	972.5	684.31	55.46	-	-	-	55.46
HCBS	Procedures	3,726.2	179.70	55.80	-	-	-	55.80
Case Management	Procedures	235.9	273.68	5.38	-	-	-	5.38
Personal Care	Procedures	1,955.0	62.05	10.11	-	-	-	10.11
Subtotal - LTSS		6,889.7	\$ 220.76	\$ 126.75	0.7	\$ 638.76	\$ 0.04	\$ 126.79
Behavioral Health								
IP Psych Hospital - API	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
IP Psych Hospital - All Other	Days	72.0	718.85	4.31	-	-	-	4.31
IP General Hospital - MH/SA	Days	22.5	3,149.09	5.91	-	-	-	5.91
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	36.9	36.90	0.11	24.7	601.93	1.24	1.35
Assessment	Procedures	48.4	191.96	0.77	32.5	595.82	1.61	2.39
Crisis Services	Procedures	27.3	74.11	0.17	61.7	598.74	3.08	3.25
Medication Services	Procedures	160.2	30.31	0.40	3.7	549.00	0.17	0.57
Methadone Medication Services	Procedures	6.6	12.50	0.01	-	-	-	0.01
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	570.1	90.07	4.28	286.1	599.46	14.29	18.57
Family Therapy OP	Procedures	289.8	102.27	2.47	48.0	584.50	2.34	4.81
Group Therapy OP	Procedures	1,043.1	69.70	6.06	13.3	601.61	0.67	6.72
SBIRT	Procedures	-	-	-	29.5	601.32	1.48	1.48
Substance Abuse Residential	Days	509.5	260.51	11.06	251.8	334.61	7.02	18.08
Children's Residential	Days	2,852.3	183.10	43.52	630.3	468.43	24.60	68.12
RPTC - In State	Days	83.8	348.39	2.43	-	-	-	2.43
RPTC - Out of State	Days	135.1	342.00	3.85	-	-	-	3.85
Detoxification	Procedures	-	-	-	-	-	-	-
Medical Evaluation	Procedures	7.8	227.53	0.15	0.4	265.27	0.01	0.16
Psychological Testing	Procedures	21.4	500.60	0.89	10.3	602.36	0.52	1.41
Peer Support Services	Units	66.8	16.70	0.09	-	-	-	0.09
Psychosocial Rehabilitation Services	Procedures	4,462.4	206.85	76.92	600.4	601.15	30.08	107.00
BH Case Management	Units	1,551.5	15.99	2.07	149.9	379.54	4.74	6.81
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	38.4	69.26	0.22	4.8	563.82	0.23	0.45
Other Professional MH/SA	Visits	128.5	39.91	0.43	62.8	601.99	3.15	3.58
Subtotal - Behavioral Health		12,134.6	\$ 164.30	\$ 166.14	2,210.2	\$ 517.00	\$ 95.22	\$ 261.36
Total All Services		42,076.8	\$ 199.98	\$ 701.20	13,405.4	\$ 303.79	\$ 339.37	\$ 1,040.57

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year: SFY 2016
Population: All Populations
Rate Cell: All Rate Cells
Region: Western Region
Tribal/Non-Tribal Members: Tribal
Member Months: 264,627

Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	126.8	\$ 3,538.08	\$ 37.38	293.5	\$ 3,150.16	\$ 77.04	\$ 114.43
Inpatient Maternity Delivery	Days	6.3	2,680.76	1.41	67.8	3,174.15	17.94	19.35
Inpatient Well Newborn	Days	1.5	3,025.71	0.37	42.0	3,170.94	11.11	11.47
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		134.5	\$ 3,492.39	\$ 39.16	403.4	\$ 3,156.36	\$ 106.10	\$ 145.25
Outpatient Hospital								
Outpatient Emergency Room	Visits	17.4	\$ 909.37	\$ 1.32	778.7	\$ 629.68	\$ 40.86	\$ 42.18
Outpatient Surgery	Visits	30.0	2,405.08	6.01	78.8	1,078.33	7.08	13.09
Outpatient Radiology	Procedures	8.3	319.82	0.22	180.3	497.51	7.48	7.70
Outpatient Pathology/Lab	Procedures	64.9	21.41	0.12	1,398.3	330.10	38.46	38.58
Outpatient Pharmacy	Procedures	34.5	292.24	0.84	129.7	347.61	3.76	4.60
Other Outpatient	Procedures	65.9	152.05	0.84	1,080.7	438.32	39.47	40.31
Subtotal - Outpatient Hospital		221.0	\$ 507.14	\$ 9.34	3,646.4	\$ 451.21	\$ 137.11	\$ 146.45
Professional								
Inpatient and Outpatient Surgery	Procedures	45.7	\$ 489.40	\$ 1.86	182.9	\$ 442.12	\$ 6.74	\$ 8.60
Anesthesia	Procedures	41.4	487.99	1.69	90.6	429.07	3.24	4.93
Inpatient Visits	Visits	147.2	382.64	4.70	243.8	278.11	5.65	10.35
Emergency Room	Visits	20.4	177.88	0.30	291.6	107.94	2.62	2.92
Office/Home Visits/Consults	Visits	92.8	166.50	1.29	2,171.8	110.75	20.04	21.33
Maternity	Procedures	8.5	446.66	0.32	51.2	932.20	3.97	4.29
Pathology/Lab	Procedures	48.3	40.95	0.16	360.9	21.99	0.66	0.83
Radiology	Procedures	125.2	269.15	2.81	342.5	53.43	1.52	4.33
Office Administered Drugs	Procedures	10.0	615.69	0.51	89.6	36.98	0.28	0.79
FQHC/RHC/Tribal Clinic	Visits	89.7	352.13	2.63	1,162.5	585.29	56.70	59.33
Physical Exams	Visits	4.3	155.25	0.06	211.7	130.68	2.31	2.36
Therapy	Visits	16.7	166.98	0.23	5.2	87.25	0.04	0.27
Vision	Visits	609.3	103.30	5.24	41.7	57.73	0.20	5.45
Other Professional	Procedures	268.6	62.47	1.40	164.5	75.75	1.04	2.44
Telemedicine	Procedures	2.4	119.35	0.02	329.9	393.21	10.81	10.84
Subtotal - Professional		1,530.7	\$ 182.10	\$ 23.23	5,740.4	\$ 242.13	\$ 115.82	\$ 139.05
Pharmacy								
Psychotropic Drugs	Scripts	33.9	\$ 42.74	\$ 0.12	137.4	\$ 43.65	\$ 0.50	\$ 0.62
Opioid Drugs	Scripts	14.2	45.10	0.05	190.3	13.95	0.22	0.27
All Other Drugs	Scripts	100.4	687.53	5.75	2,403.9	56.83	11.38	17.13
Subtotal - Pharmacy		148.5	\$ 478.80	\$ 5.92	2,731.6	\$ 53.18	\$ 12.11	\$ 18.03
Ancillary								
Ground Transportation	Trips	6,039.8	\$ 26.64	\$ 13.41	6.0	\$ 292.74	\$ 0.15	\$ 13.56
Air Transportation	Trips	2,253.4	563.90	105.89	8.2	8,183.85	5.57	111.46
Accommodations	Claims	703.5	290.73	17.04	-	-	-	17.04
DME/Prosthetics	Procedures	293.4	130.10	3.18	-	-	-	3.18
Dental	Procedures	964.1	122.74	9.86	1,014.0	548.22	46.32	56.18
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		10,254.2	\$ 174.82	\$ 149.38	1,028.1	\$ 607.34	\$ 52.04	\$ 201.42
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Nursing Home	Days	-	-	-	0.8	2,926.00	0.19	0.19
Skilled Nursing Facility	Days	35.9	565.81	1.69	685.1	916.65	52.33	54.03
HCBS	Procedures	901.9	234.36	17.61	1.0	407.67	0.03	17.65
Case Management	Procedures	26.1	222.41	0.48	46.4	333.91	1.29	1.78
Personal Care	Procedures	402.0	89.33	2.99	-	-	-	2.99
Subtotal - LTSS		1,365.9	\$ 200.16	\$ 22.78	733.3	\$ 881.17	\$ 53.85	\$ 76.63
Behavioral Health								
IP Psych Hospital - API	Days	25.1	\$ 1,338.93	\$ 2.80	-	\$ 0.00	\$ 0.00	\$ 2.80
IP Psych Hospital - All Other	Days	123.8	710.24	7.32	-	-	-	7.32
IP General Hospital - MH/SA	Days	11.3	2,988.31	2.82	7.7	4,261.44	2.72	5.54
OP General Hospital - MH/SA	Visits	-	-	-	5.9	17.06	0.01	0.01
Screening	Procedures	3.4	35.37	0.01	13.9	599.18	0.70	0.71
Assessment	Procedures	5.4	228.96	0.10	21.8	580.55	1.06	1.16
Crisis Services	Procedures	0.5	139.92	0.01	24.9	591.11	1.22	1.23
Medication Services	Procedures	45.3	23.47	0.09	3.8	568.18	0.18	0.27
Methadone Medication Services	Procedures	-	-	-	-	-	-	-
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	46.7	88.52	0.34	58.7	592.33	2.90	3.24
Family Therapy OP	Procedures	11.2	91.12	0.09	13.7	591.30	0.67	0.76
Group Therapy OP	Procedures	52.7	78.48	0.34	28.8	597.93	1.43	1.78
SBIRT	Procedures	-	-	-	14.8	600.15	0.74	0.74
Substance Abuse Residential	Days	32.2	248.56	0.67	100.3	443.49	3.71	4.37
Children's Residential	Days	343.5	183.32	5.25	258.7	319.16	6.88	12.13
RPTC - In State	Days	62.2	376.15	1.95	-	-	-	1.95
RPTC - Out of State	Days	184.9	333.61	5.14	-	-	-	5.14
Detoxification	Procedures	-	-	-	0.2	603.00	0.01	0.01
Medical Evaluation	Procedures	3.0	212.30	0.05	-	-	-	0.05
Psychological Testing	Procedures	11.7	730.32	0.71	3.8	402.62	0.13	0.84
Peer Support Services	Units	0.2	17.00	0.00	0.2	150.75	0.00	0.00
Psychosocial Rehabilitation Services	Procedures	441.8	223.81	8.24	322.2	601.27	16.14	24.38
BH Case Management	Units	89.0	16.00	0.12	13.0	187.49	0.20	0.32
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	1.0	138.79	0.01	3.5	550.05	0.16	0.17
Other Professional MH/SA	Visits	8.6	39.05	0.03	16.1	599.62	0.80	0.83
Subtotal - Behavioral Health		1,503.6	\$ 288.15	\$ 36.10	911.8	\$ 522.06	\$ 39.67	\$ 75.77
Total All Services		15,158.5	\$ 226.35	\$ 285.92	15,195.0	\$ 408.04	\$ 516.69	\$ 802.61

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year:		SFY 2016						
Population:		All Populations						
Rate Cell:		All Rate Cells						
Region:		Statewide						
Tribal/Non-Tribal Members:		Non-Tribal						
Member Months:		1,097,747						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid
		Utilization per 1,000	Paid per Unit	PMPM	Utilization per 1,000	Paid per Unit	PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	389.9	\$ 2,953.17	\$ 95.95	4.1	\$ 3,047.36	\$ 1.04	\$ 96.98
Inpatient Maternity Delivery	Days	55.7	2,834.91	13.16	0.9	3,027.47	0.23	13.39
Inpatient Well Newborn	Days	44.9	2,898.97	10.84	0.2	3,085.06	0.05	10.89
Other Inpatient	Days	0.6	25.45	0.00	-	-	-	0.00
Subtotal – Inpatient Hospital		491.0	\$ 2,931.35	\$ 119.95	5.2	\$ 3,045.31	\$ 1.31	\$ 121.27
Outpatient Hospital								
Outpatient Emergency Room	Visits	627.8	\$ 669.23	\$ 35.01	9.5	\$ 571.61	\$ 0.45	\$ 35.46
Outpatient Surgery	Visits	111.2	2,191.52	20.31	0.9	890.68	0.06	20.37
Outpatient Radiology	Procedures	245.1	325.00	6.64	2.7	520.33	0.12	6.75
Outpatient Pathology/Lab	Procedures	1,286.0	20.42	2.19	16.0	415.79	0.56	2.74
Outpatient Pharmacy	Procedures	199.8	253.86	4.23	0.9	448.33	0.03	4.26
Other Outpatient	Procedures	1,037.3	108.79	9.40	37.7	299.24	0.94	10.34
Subtotal – Outpatient Hospital		3,507.2	\$ 266.11	\$ 77.77	67.7	\$ 383.52	\$ 2.16	\$ 79.94
Professional								
Inpatient and Outpatient Surgery	Procedures	615.7	\$ 314.01	\$ 16.11	3.9	\$ 294.62	\$ 0.10	\$ 16.21
Anesthesia	Procedures	155.9	413.48	5.37	1.3	409.42	0.05	5.42
Inpatient Visits	Visits	564.9	243.01	11.44	5.9	314.54	0.15	11.59
Emergency Room	Visits	665.2	156.53	8.68	10.5	120.61	0.11	8.78
Office/Home Visits/Consults	Visits	3,169.6	110.18	29.10	16.3	133.09	0.18	29.28
Maternity	Procedures	69.7	716.52	4.16	1.3	720.82	0.08	4.24
Pathology/Lab	Procedures	2,564.2	23.74	5.07	3.3	44.97	0.01	5.09
Radiology	Procedures	1,470.6	80.55	9.87	13.9	40.61	0.05	9.92
Office Administered Drugs	Procedures	404.5	153.45	5.17	0.6	29.66	0.00	5.17
FQHC/RHC/Tribal Clinic	Visits	562.7	236.09	11.07	115.8	445.26	4.30	15.37
Physical Exams	Visits	468.9	160.78	6.28	1.1	116.52	0.01	6.29
Therapy	Visits	1,364.6	135.21	15.38	0.4	53.52	0.00	15.38
Vision	Visits	627.4	96.91	5.07	0.5	94.24	0.00	5.07
Other Professional	Procedures	1,321.0	80.17	8.82	4.5	121.40	0.05	8.87
Telemedicine	Procedures	7.7	145.82	0.09	0.8	343.16	0.02	0.12
Subtotal – Professional		14,032.6	\$ 121.17	\$ 141.70	180.1	\$ 339.85	\$ 5.10	\$ 146.80
Pharmacy								
Psychotropic Drugs	Scripts	935.4	\$ 55.18	\$ 4.30	12.5	\$ 34.64	\$ 0.04	\$ 4.34
Opioid Drugs	Scripts	667.9	54.74	3.05	5.0	16.45	0.01	3.05
All Other Drugs	Scripts	5,410.9	111.02	50.06	76.5	68.59	0.44	50.50
Subtotal – Pharmacy		7,014.2	\$ 98.22	\$ 57.41	93.9	\$ 61.34	\$ 0.48	\$ 57.89
Ancillary								
Ground Transportation	Trips	844.1	\$ 91.48	\$ 6.43	0.0	\$ 210.87	\$ 0.00	\$ 6.44
Air Transportation	Trips	136.5	834.83	9.49	0.0	5,361.56	0.02	9.51
Accommodations	Claims	63.1	377.66	1.99	-	-	-	1.99
DIME/Prosthetics	Procedures	1,570.6	87.33	11.43	-	-	-	11.43
Dental	Procedures	4,081.4	128.42	43.68	49.3	423.81	1.74	45.42
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		6,695.6	\$ 130.87	\$ 73.02	49.4	\$ 427.99	\$ 1.76	\$ 74.78
LTSS								
Hospice	Days	2.0	\$ 2,926.34	\$ 0.49	-	\$ 0.00	\$ 0.00	\$ 0.49
Nursing Home	Days	87.0	134.55	0.98	-	-	-	0.98
Skilled Nursing Facility	Days	1,589.4	531.08	70.34	19.9	1,132.61	1.87	72.22
HCBS	Procedures	11,375.6	165.78	157.16	0.1	399.05	0.00	157.16
Case Management	Procedures	470.8	220.73	8.66	2.1	294.67	0.05	8.71
Personal Care	Procedures	8,689.0	80.69	58.42	-	-	-	58.42
Subtotal – LTSS		22,213.9	\$ 159.93	\$ 296.05	22.1	\$ 1,048.77	\$ 1.93	\$ 297.98
Behavioral Health								
IP Psych Hospital - API	Days	11.1	\$ 1,271.86	\$ 1.18	-	\$ 0.00	\$ 0.00	\$ 1.18
IP Psych Hospital - All Other	Days	99.3	714.97	5.91	-	-	-	5.91
IP General Hospital - MH/SA	Days	38.9	2,801.93	9.07	0.0	3,029.00	0.01	9.08
OP General Hospital - MH/SA	Visits	5.7	50.03	0.02	0.2	13.75	0.00	0.02
Screening	Procedures	30.6	42.42	0.11	0.8	588.38	0.04	0.15
Assessment	Procedures	42.0	205.60	0.72	2.4	599.15	0.12	0.84
Crisis Services	Procedures	50.2	200.73	0.84	1.5	597.67	0.08	0.92
Medication Services	Procedures	197.9	30.97	0.51	2.2	599.08	0.11	0.62
Methadone Medication Services	Procedures	278.2	12.50	0.29	-	-	-	0.29
Other Opioid Medication Services	Procedures	0.0	15.99	0.00	-	-	-	0.00
Individual Therapy OP	Procedures	467.6	87.79	3.42	22.8	595.49	1.13	4.55
Family Therapy OP	Procedures	107.3	97.44	0.87	3.0	560.89	0.14	1.01
Group Therapy OP	Procedures	222.8	73.53	1.37	4.1	426.40	0.14	1.51
SBIRT	Procedures	0.3	43.95	0.00	0.5	602.22	0.03	0.03
Substance Abuse Residential	Days	125.3	225.29	2.35	62.4	328.16	1.71	4.06
Children's Residential	Days	532.5	175.67	7.80	4.7	300.26	0.12	7.91
RPTC - In State	Days	310.6	319.22	8.26	-	-	-	8.26
RPTC - Out of State	Days	185.0	362.84	5.59	-	-	-	5.59
Detoxification	Procedures	-	-	-	1.9	602.12	0.09	0.09
Medical Evaluation	Procedures	21.5	214.88	0.38	0.1	518.32	0.00	0.39
Psychological Testing	Procedures	81.6	267.25	1.82	0.2	554.56	0.01	1.83
Peer Support Services	Units	31.6	16.56	0.04	-	-	-	0.04
Psychosocial Rehabilitation Services	Procedures	1,802.2	173.95	26.12	54.2	602.01	2.72	28.84
BH Case Management	Units	1,275.8	15.98	1.70	16.6	275.19	0.38	2.08
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	15.4	106.93	0.14	1.0	579.10	0.05	0.19
Other Professional MH/SA	Visits	96.5	41.26	0.33	4.0	599.00	0.20	0.53
Subtotal – Behavioral Health		6,029.8	\$ 156.93	\$ 78.86	182.5	\$ 464.97	\$ 7.07	\$ 85.93
Total All Services		59,984.2	\$ 169.00	\$ 844.76	600.9	\$ 395.85	\$ 19.82	\$ 864.58

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year: SFY 2016
Population: All Populations
Rate Cell: All Rate Cells
Region: Anchorage Municipality
Tribal/Non-Tribal Members: Non-Tribal
Member Months: 501,654

Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	439.4	\$ 2,877.46	\$ 105.36	5.5	\$ 3,117.31	\$ 1.44	\$ 106.80
Inpatient Maternity Delivery	Days	60.1	2,706.33	13.56	0.7	3,077.75	0.17	13.73
Inpatient Well Newborn	Days	51.0	2,797.09	11.90	0.1	2,926.00	0.03	11.93
Other Inpatient	Days	1.3	25.45	0.00	-	-	-	0.00
Subtotal – Inpatient Hospital		551.9	\$ 2,844.82	\$ 130.83	6.3	\$ 3,108.80	\$ 1.64	\$ 132.47
Outpatient Hospital								
Outpatient Emergency Room	Visits	717.5	\$ 569.77	\$ 34.07	11.0	\$ 492.24	\$ 0.45	\$ 34.52
Outpatient Surgery	Visits	102.1	1,816.44	15.46	0.7	1,055.24	0.06	15.52
Outpatient Radiology	Procedures	96.3	302.73	2.43	1.3	470.47	0.05	2.48
Outpatient Pathology/Lab	Procedures	1,157.6	17.26	1.67	8.2	445.20	0.30	1.97
Outpatient Pharmacy	Procedures	192.9	263.35	4.23	0.6	477.89	0.03	4.26
Other Outpatient	Procedures	1,092.5	107.83	9.82	32.0	218.12	0.58	10.40
Subtotal – Outpatient Hospital		3,358.9	\$ 241.77	\$ 67.67	53.7	\$ 328.23	\$ 1.47	\$ 69.14
Professional								
Inpatient and Outpatient Surgery	Procedures	611.9	\$ 307.87	\$ 15.70	4.5	\$ 284.95	\$ 0.11	\$ 15.81
Anesthesia	Procedures	153.5	432.08	5.53	1.6	421.55	0.05	5.58
Inpatient Visits	Visits	634.0	249.24	13.17	6.0	276.49	0.14	13.31
Emergency Room	Visits	754.3	160.14	10.07	16.0	133.08	0.18	10.24
Office/Home Visits/Consults	Visits	3,003.4	108.94	27.26	10.9	91.87	0.08	27.35
Maternity	Procedures	72.9	658.16	4.00	1.0	575.07	0.05	4.05
Pathology/Lab	Procedures	2,650.6	21.48	4.74	1.6	65.48	0.01	4.75
Radiology	Procedures	1,543.3	78.39	10.08	20.2	36.49	0.06	10.14
Office Administered Drugs	Procedures	408.8	163.42	5.57	0.8	21.35	0.00	5.57
FQHC/RHC/Tribal Clinic	Visits	488.5	247.36	10.07	42.5	416.56	1.48	11.54
Physical Exams	Visits	568.2	159.79	7.57	0.3	138.11	0.00	7.57
Therapy	Visits	1,362.0	126.32	14.34	0.7	34.48	0.00	14.34
Vision	Visits	621.5	93.02	4.82	0.5	101.91	0.00	4.82
Other Professional	Procedures	1,548.1	77.55	10.00	6.6	107.17	0.06	10.06
Telemedicine	Procedures	3.1	154.43	0.04	0.1	244.13	0.00	0.04
Subtotal – Professional		14,424.0	\$ 118.93	\$ 142.95	113.1	\$ 236.18	\$ 2.23	\$ 145.18
Pharmacy								
Psychotropic Drugs	Scripts	1,055.8	\$ 46.92	\$ 4.13	10.9	\$ 58.63	\$ 0.05	\$ 4.18
Opioid Drugs	Scripts	553.9	48.27	2.23	3.6	20.88	0.01	2.23
All Other Drugs	Scripts	5,456.2	105.05	47.76	62.2	86.37	0.45	48.21
Subtotal – Pharmacy		7,065.9	\$ 91.91	\$ 54.12	76.7	\$ 79.37	\$ 0.51	\$ 54.63
Ancillary								
Ground Transportation	Trips	678.0	\$ 101.66	\$ 5.74	0.0	\$ 120.44	\$ 0.00	\$ 5.74
Air Transportation	Trips	26.6	1,119.55	2.48	0.0	2,326.29	0.00	2.49
Accommodations	Claims	12.1	573.88	0.58	-	-	-	0.58
DME/Prosthetics	Procedures	1,713.5	81.24	11.60	-	-	-	11.60
Dental	Procedures	4,461.9	127.34	47.35	6.3	363.45	0.19	47.54
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		6,892.1	\$ 117.96	\$ 67.75	6.4	\$ 369.89	\$ 0.20	\$ 67.95
LTSS								
Hospice	Days	1.0	\$ 7,872.17	\$ 0.67	-	\$ 0.00	\$ 0.00	\$ 0.67
Nursing Home	Days	6.1	596.20	0.30	-	-	-	0.30
Skilled Nursing Facility	Days	1,591.0	389.83	51.68	-	-	-	51.68
HCBS	Procedures	12,881.2	161.06	172.89	0.1	370.00	0.00	172.89
Case Management	Procedures	491.0	224.20	9.17	1.2	256.63	0.03	9.20
Personal Care	Procedures	11,746.4	76.72	75.10	-	-	-	75.10
Subtotal – LTSS		26,716.5	\$ 139.16	\$ 309.82	1.3	\$ 266.75	\$ 0.03	\$ 309.85
Behavioral Health								
IP Psych Hospital - API	Days	15.3	\$ 1,273.23	\$ 1.62	-	\$ 0.00	\$ 0.00	\$ 1.62
IP Psych Hospital - All Other	Days	110.1	712.76	6.54	-	-	-	6.54
IP General Hospital - MH/SA	Days	31.6	2,731.85	7.18	-	-	-	7.18
OP General Hospital - MH/SA	Visits	1.2	94.66	0.01	0.0	13.95	0.00	0.01
Screening	Procedures	22.4	47.73	0.09	0.5	548.58	0.02	0.11
Assessment	Procedures	34.7	191.44	0.55	1.4	600.42	0.07	0.62
Crisis Services	Procedures	28.5	142.40	0.34	0.4	600.09	0.02	0.36
Medication Services	Procedures	96.0	38.06	0.30	2.4	602.05	0.12	0.43
Methadone Medication Services	Procedures	503.0	12.50	0.52	-	-	-	0.52
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	390.3	87.20	2.84	11.6	587.77	0.57	3.41
Family Therapy OP	Procedures	90.8	93.27	0.71	1.7	597.38	0.09	0.79
Group Therapy OP	Procedures	154.6	68.66	0.88	6.4	358.62	0.19	1.08
SBIRT	Procedures	0.3	44.13	0.00	-	-	-	0.00
Substance Abuse Residential	Days	87.5	244.04	1.78	42.3	256.82	0.91	2.68
Children's Residential	Days	629.6	176.56	9.26	3.8	462.68	0.15	9.41
RPTC - In State	Days	415.9	306.18	10.61	-	-	-	10.61
RPTC - Out of State	Days	166.7	358.37	4.98	-	-	-	4.98
Detoxification	Procedures	-	-	-	0.2	603.00	0.01	0.01
Medical Evaluation	Procedures	26.4	218.93	0.48	-	-	-	0.48
Psychological Testing	Procedures	91.8	240.36	1.84	-	-	-	1.84
Peer Support Services	Units	19.4	16.98	0.03	-	-	-	0.03
Psychosocial Rehabilitation Services	Procedures	1,256.8	181.60	19.02	42.9	602.06	2.15	21.17
BH Case Management	Units	1,199.8	15.99	1.60	10.8	208.28	0.19	1.79
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	5.1	120.36	0.05	0.0	603.00	0.00	0.05
Other Professional MH/SA	Visits	72.3	42.51	0.26	2.4	591.40	0.12	0.37
Subtotal – Behavioral Health		5,449.9	\$ 157.42	\$ 71.50	127.0	\$ 435.25	\$ 4.61	\$ 76.10
Total All Services		64,459.3	\$ 157.24	\$ 844.64	384.6	\$ 333.18	\$ 10.68	\$ 855.32

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year: SFY 2016
 Population: All Populations
 Rate Cell: All Rate Cells
 Region: Fairbanks North Star Borough
 Tribal/Non-Tribal Members: Non-Tribal
 Member Months: 107,807

Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	319.2	\$ 3,124.72	\$ 83.13	1.0	\$ 3,335.00	\$ 0.28	\$ 83.41
Inpatient Maternity Delivery	Days	64.9	2,712.07	14.67	-	-	-	14.67
Inpatient Well Newborn	Days	49.0	2,768.33	11.30	-	-	-	11.30
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal – Inpatient Hospital		433.1	\$ 3,022.59	\$ 109.09	1.0	\$ 3,335.00	\$ 0.28	\$ 109.37
Outpatient Hospital								
Outpatient Emergency Room	Visits	675.9	\$ 742.26	\$ 41.81	0.6	\$ 944.82	\$ 0.04	\$ 41.85
Outpatient Surgery	Visits	104.1	2,180.77	18.91	-	-	-	18.91
Outpatient Radiology	Procedures	473.5	257.50	10.16	0.2	529.42	0.01	10.17
Outpatient Pathology/Lab	Procedures	1,687.7	18.56	2.61	1.6	566.65	0.07	2.68
Outpatient Pharmacy	Procedures	207.3	108.48	1.87	-	-	-	1.87
Other Outpatient	Procedures	708.4	112.16	6.62	2.2	516.61	0.10	6.72
Subtotal – Outpatient Hospital		3,856.8	\$ 255.09	\$ 81.99	4.6	\$ 586.54	\$ 0.22	\$ 82.21
Professional								
Inpatient and Outpatient Surgery	Procedures	586.4	\$ 294.10	\$ 14.37	-	\$ 0.00	\$ 0.00	\$ 14.37
Anesthesia	Procedures	147.7	397.00	4.89	-	-	-	4.89
Inpatient Visits	Visits	412.7	278.36	9.57	0.8	359.03	0.02	9.60
Emergency Room	Visits	711.4	160.67	9.52	0.4	140.17	0.01	9.53
Office/Home Visits/Consults	Visits	3,067.8	111.13	28.41	2.6	129.30	0.03	28.44
Maternity	Procedures	67.9	827.93	4.68	0.8	1,589.12	0.10	4.79
Pathology/Lab	Procedures	1,358.2	25.81	2.92	0.3	2.53	0.00	2.92
Radiology	Procedures	1,307.1	59.20	6.45	1.6	61.71	0.01	6.46
Office Administered Drugs	Procedures	506.8	138.89	5.87	-	-	-	5.87
FQHC/RHC/Tribal Clinic	Visits	698.0	235.34	13.69	56.9	466.89	2.21	15.90
Physical Exams	Visits	444.6	169.31	6.27	0.9	148.37	0.01	6.28
Therapy	Visits	1,956.9	106.09	17.30	-	-	-	17.30
Vision	Visits	654.6	100.85	5.50	-	-	-	5.50
Other Professional	Procedures	958.0	95.00	7.58	0.4	792.93	0.03	7.61
Telemedicine	Procedures	15.7	188.73	0.25	0.1	6.87	0.00	0.25
Subtotal – Professional		12,893.9	\$ 127.77	\$ 137.28	64.8	\$ 448.44	\$ 2.42	\$ 139.70
Pharmacy								
Psychotropic Drugs	Scripts	761.2	\$ 73.61	\$ 4.67	16.8	\$ 40.82	\$ 0.06	\$ 4.73
Opioid Drugs	Scripts	631.7	42.86	2.26	1.3	9.39	0.00	2.26
All Other Drugs	Scripts	5,074.8	95.21	40.26	29.3	10.28	0.03	40.29
Subtotal – Pharmacy		6,467.8	\$ 87.55	\$ 47.19	47.4	\$ 21.08	\$ 0.08	\$ 47.27
Ancillary								
Ground Transportation	Trips	682.6	\$ 74.63	\$ 4.25	-	\$ 0.00	\$ 0.00	\$ 4.25
Air Transportation	Trips	149.7	913.06	11.39	-	-	-	11.39
Accommodations	Claims	58.9	494.34	2.43	-	-	-	2.43
DME/Prosthetics	Procedures	998.4	103.31	8.60	-	-	-	8.60
Dental	Procedures	3,790.2	150.16	47.43	3.7	413.19	0.13	47.55
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		5,679.8	\$ 156.52	\$ 74.09	3.7	\$ 413.19	\$ 0.13	\$ 74.21
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.47	-	\$ 0.00	\$ 0.00	\$ 0.47
Nursing Home	Days	3.3	638.76	0.18	-	-	-	0.18
Skilled Nursing Facility	Days	1,834.6	676.86	103.48	-	-	-	103.48
HCBS	Procedures	7,735.8	194.75	125.55	-	-	-	125.55
Case Management	Procedures	379.8	214.56	6.79	-	-	-	6.79
Personal Care	Procedures	2,823.5	86.57	20.37	-	-	-	20.37
Subtotal – LTSS		12,777.0	\$ 241.22	\$ 256.84	-	\$ 0.00	\$ 0.00	\$ 256.84
Behavioral Health								
IP Psych Hospital - API	Days	6.3	\$ 669.05	\$ 0.35	-	\$ 0.00	\$ 0.00	\$ 0.35
IP Psych Hospital - All Other	Days	85.5	727.52	5.18	-	-	-	5.18
IP General Hospital - MH/SA	Days	91.3	2,818.20	21.44	-	-	-	21.44
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	19.1	44.12	0.07	1.0	601.89	0.05	0.12
Assessment	Procedures	33.8	198.97	0.56	1.6	602.29	0.08	0.64
Crisis Services	Procedures	261.9	259.61	5.67	0.2	603.00	0.01	5.68
Medication Services	Procedures	466.6	20.76	0.81	2.7	602.50	0.13	0.94
Methadone Medication Services	Procedures	336.7	12.50	0.35	-	-	-	0.35
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	518.4	99.79	4.31	1.3	601.67	0.07	4.38
Family Therapy OP	Procedures	83.1	97.11	0.67	-	-	-	0.67
Group Therapy OP	Procedures	169.7	72.70	1.03	0.3	603.00	0.02	1.05
SBIRT	Procedures	-	-	-	0.9	601.25	0.04	0.04
Substance Abuse Residential	Days	23.3	212.89	0.41	151.8	600.45	7.60	8.01
Children's Residential	Days	681.0	160.55	9.11	-	-	-	9.11
RPTC - In State	Days	82.6	310.30	2.14	-	-	-	2.14
RPTC - Out of State	Days	180.8	357.50	5.39	-	-	-	5.39
Detoxification	Procedures	-	-	-	16.6	601.99	0.83	0.83
Medical Evaluation	Procedures	12.0	218.70	0.22	0.7	602.67	0.03	0.25
Psychological Testing	Procedures	25.0	439.05	0.92	-	-	-	0.92
Peer Support Services	Units	-	-	-	-	-	-	-
Psychosocial Rehabilitation Services	Procedures	1,958.7	173.64	28.34	44.9	602.03	2.25	30.59
BH Case Management	Units	1,090.7	15.97	1.45	25.2	524.87	1.10	2.55
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	31.2	66.19	0.17	-	-	-	0.17
Other Professional MH/SA	Visits	101.1	39.98	0.34	2.2	602.50	0.11	0.45
Subtotal – Behavioral Health		6,259.0	\$ 170.49	\$ 88.92	249.3	\$ 593.29	\$ 12.33	\$ 101.25
Total All Services		48,367.4	\$ 197.34	\$ 795.39	370.8	\$ 500.34	\$ 15.46	\$ 810.85

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year: SFY 2016
 Population: All Populations
 Rate Cell: All Rate Cells
 Region: Gulf Coast/Aleutian Region
 Tribal/Non-Tribal Members: Non-Tribal
 Member Months: 36,268

Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	328.9	\$ 2,737.67	\$ 75.03	1.0	\$ 2,926.00	\$ 0.24	\$ 75.27
Inpatient Maternity Delivery	Days	41.7	3,756.72	13.05	1.0	2,926.00	0.24	13.29
Inpatient Well Newborn	Days	53.3	3,299.98	14.65	0.3	2,926.00	0.08	14.73
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		423.8	\$ 2,908.58	\$ 102.73	2.3	\$ 2,926.00	\$ 0.56	\$ 103.30
Outpatient Hospital								
Outpatient Emergency Room	Visits	325.9	\$ 1,211.44	\$ 32.90	4.3	\$ 597.34	\$ 0.21	\$ 33.12
Outpatient Surgery	Visits	96.9	2,920.13	23.59	3.3	1,016.90	0.28	23.87
Outpatient Radiology	Procedures	442.7	359.95	13.28	6.0	572.20	0.28	13.56
Outpatient Pathology/Lab	Procedures	938.3	14.65	1.15	38.4	408.39	1.31	2.45
Outpatient Pharmacy	Procedures	265.4	431.11	9.53	0.3	603.00	0.02	9.55
Other Outpatient	Procedures	1,154.7	148.42	14.28	58.9	456.25	2.24	16.52
Subtotal - Outpatient Hospital		3,224.0	\$ 352.60	\$ 94.73	111.2	\$ 468.52	\$ 4.34	\$ 99.07
Professional								
Inpatient and Outpatient Surgery	Procedures	438.4	\$ 424.99	\$ 15.53	6.9	\$ 246.12	\$ 0.14	\$ 15.67
Anesthesia	Procedures	142.9	401.82	4.79	2.0	532.29	0.09	4.87
Inpatient Visits	Visits	384.8	224.74	7.21	6.6	230.10	0.13	7.33
Emergency Room	Visits	309.0	176.52	4.55	3.0	115.77	0.03	4.57
Office/Home Visits/Consults	Visits	2,234.7	113.68	21.17	52.3	87.82	0.38	21.55
Maternity	Procedures	47.6	907.71	3.60	3.6	532.80	0.16	3.77
Pathology/Lab	Procedures	1,944.2	18.29	2.96	14.2	17.57	0.02	2.98
Radiology	Procedures	1,111.7	71.37	6.61	6.0	9.96	0.00	6.62
Office Administered Drugs	Procedures	275.6	157.13	3.61	1.3	52.58	0.01	3.61
FQHC/RHC/Tribal Clinic	Visits	1,214.6	285.79	28.93	295.5	517.10	12.73	41.66
Physical Exams	Visits	218.0	150.18	2.73	9.6	78.03	0.06	2.79
Therapy	Visits	236.6	99.74	1.97	-	-	-	1.97
Vision	Visits	668.7	90.57	5.05	-	-	-	5.05
Other Professional	Procedures	1,068.0	61.46	5.47	4.0	44.94	0.01	5.49
Telemedicine	Procedures	0.3	177.55	0.00	0.3	76.84	0.00	0.01
Subtotal - Professional		10,295.3	\$ 133.07	\$ 114.17	405.3	\$ 407.78	\$ 13.77	\$ 127.94
Pharmacy								
Psychotropic Drugs	Scripts	491.0	\$ 40.49	\$ 1.66	20.5	\$ 9.14	\$ 0.02	\$ 1.67
Opioid Drugs	Scripts	459.2	35.50	1.36	2.3	1.95	0.00	1.36
All Other Drugs	Scripts	4,087.9	107.61	36.66	113.8	169.57	1.61	38.27
Subtotal - Pharmacy		5,038.1	\$ 94.49	\$ 39.67	136.6	\$ 142.65	\$ 1.62	\$ 41.30
Ancillary								
Ground Transportation	Trips	1,465.7	\$ 42.54	\$ 5.20	-	\$ 0.00	\$ 0.00	\$ 5.20
Air Transportation	Trips	611.8	572.93	29.21	-	-	-	29.21
Accommodations	Claims	248.2	414.89	8.58	-	-	-	8.58
DME/Prosthetics	Procedures	656.4	91.47	5.00	-	-	-	5.00
Dental	Procedures	3,461.2	118.06	34.05	98.3	386.95	3.17	37.22
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		6,443.3	\$ 152.79	\$ 82.04	98.3	\$ 386.95	\$ 3.17	\$ 85.21
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Nursing Home	Days	33.4	635.69	1.77	-	-	-	1.77
Skilled Nursing Facility	Days	3,264.4	840.20	228.56	-	-	-	228.56
HCBS	Procedures	8,074.2	197.45	132.86	-	-	-	132.86
Case Management	Procedures	248.5	245.24	5.08	29.4	303.07	0.74	5.82
Personal Care	Procedures	5,603.9	65.57	30.62	-	-	-	30.62
Subtotal - LTSS		17,224.4	\$ 277.90	\$ 398.88	29.4	\$ 303.07	\$ 0.74	\$ 399.63
Behavioral Health								
IP Psych Hospital - API	Days	5.0	\$ 1,402.92	\$ 0.58	-	\$ 0.00	\$ 0.00	\$ 0.58
IP Psych Hospital - All Other	Days	97.3	744.75	6.04	-	-	-	6.04
IP General Hospital - MH/SA	Days	41.7	2,792.76	9.70	-	-	-	9.70
OP General Hospital - MH/SA	Visits	22.2	39.30	0.07	-	-	-	0.07
Screening	Procedures	33.1	36.76	0.10	1.3	602.00	0.07	0.17
Assessment	Procedures	47.3	190.71	0.75	10.3	602.55	0.52	1.27
Crisis Services	Procedures	14.9	82.80	0.10	6.0	602.00	0.30	0.40
Medication Services	Procedures	201.5	31.61	0.53	-	-	-	0.53
Methadone Medication Services	Procedures	72.8	12.50	0.08	-	-	-	0.08
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	269.3	91.32	2.05	34.7	544.62	1.58	3.63
Family Therapy OP	Procedures	17.9	106.78	0.16	20.8	602.71	1.05	1.21
Group Therapy OP	Procedures	79.7	65.48	0.44	2.6	601.00	0.13	0.57
SBIRT	Procedures	-	-	-	-	-	-	-
Substance Abuse Residential	Days	99.6	141.03	1.17	128.0	243.93	2.60	3.77
Children's Residential	Days	215.1	199.51	3.58	-	-	-	3.58
RPTC - In State	Days	270.7	341.85	7.71	-	-	-	7.71
RPTC - Out of State	Days	105.9	366.32	3.23	-	-	-	3.23
Detoxification	Procedures	-	-	-	-	-	-	-
Medical Evaluation	Procedures	5.6	216.86	0.10	-	-	-	0.10
Psychological Testing	Procedures	21.5	409.17	0.73	-	-	-	0.73
Peer Support Services	Units	-	-	-	-	-	-	-
Psychosocial Rehabilitation Services	Procedures	1,073.3	70.81	6.33	62.5	602.07	3.14	9.47
BH Case Management	Units	302.4	15.38	0.39	27.8	172.21	0.40	0.79
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	2.6	94.05	0.02	2.3	602.14	0.12	0.14
Other Professional MH/SA	Visits	63.5	40.04	0.21	11.2	598.76	0.56	0.77
Subtotal - Behavioral Health		3,062.9	\$ 172.68	\$ 44.08	307.7	\$ 407.65	\$ 10.45	\$ 54.53
Total All Services		45,711.8	\$ 230.04	\$ 876.31	1,090.9	\$ 381.37	\$ 34.67	\$ 910.97

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year: SFY 2016
 Population: All Populations
 Rate Cell: All Rate Cells
 Region: Kenai Peninsula Borough
 Tribal/Non-Tribal Members: Non-Tribal
 Member Months: 120,372

Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	372.3	\$ 3,164.04	\$ 98.18	1.7	\$ 2,232.06	\$ 0.32	\$ 98.49
Inpatient Maternity Delivery	Days	55.3	3,333.64	15.37	0.6	3,130.50	0.16	15.53
Inpatient Well Newborn	Days	38.8	3,623.82	11.71	-	-	-	11.71
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		466.5	\$ 3,222.38	\$ 125.26	2.3	\$ 2,466.43	\$ 0.47	\$ 125.73
Outpatient Hospital								
Outpatient Emergency Room	Visits	629.9	\$ 988.73	\$ 51.90	1.6	\$ 428.57	\$ 0.06	\$ 51.96
Outpatient Surgery	Visits	151.5	2,871.12	36.26	0.4	942.81	0.03	36.29
Outpatient Radiology	Procedures	556.6	411.59	19.09	0.5	525.99	0.02	19.11
Outpatient Pathology/Lab	Procedures	1,670.0	26.28	3.66	5.0	295.77	0.12	3.78
Outpatient Pharmacy	Procedures	273.0	181.77	4.13	1.4	486.00	0.06	4.19
Other Outpatient	Procedures	1,788.4	102.25	15.24	7.1	402.87	0.24	15.48
Subtotal - Outpatient Hospital		5,069.4	\$ 308.39	\$ 130.28	16.0	\$ 396.59	\$ 0.53	\$ 130.81
Professional								
Inpatient and Outpatient Surgery	Procedures	679.9	\$ 346.44	\$ 19.63	0.6	\$ 393.43	\$ 0.02	\$ 19.65
Anesthesia	Procedures	181.8	365.57	5.54	0.4	463.47	0.02	5.55
Inpatient Visits	Visits	602.8	219.66	11.03	1.7	460.92	0.07	11.10
Emergency Room	Visits	632.1	147.87	7.79	1.7	133.95	0.02	7.81
Office/Home Visits/Consults	Visits	3,600.3	108.42	32.53	4.3	120.33	0.04	32.57
Maternity	Procedures	46.0	1,119.77	4.29	0.8	359.88	0.02	4.31
Pathology/Lab	Procedures	2,339.6	29.14	5.68	0.6	29.18	0.00	5.68
Radiology	Procedures	1,695.3	75.75	10.70	5.4	40.13	0.02	10.72
Office Administered Drugs	Procedures	363.7	98.46	2.98	0.2	33.10	0.00	2.98
FQHC/RHC/Tribal Clinic	Visits	962.3	216.25	17.34	182.5	488.92	7.44	24.78
Physical Exams	Visits	353.5	155.23	4.57	0.2	102.00	0.00	4.57
Therapy	Visits	1,825.9	147.79	22.49	-	-	-	22.49
Vision	Visits	594.4	108.20	5.36	0.4	143.66	0.00	5.36
Other Professional	Procedures	1,370.6	74.92	8.56	1.7	211.58	0.03	8.59
Telemedicine	Procedures	25.7	147.25	0.32	0.2	6.92	0.00	0.32
Subtotal - Professional		15,273.8	\$ 124.77	\$ 158.81	200.7	\$ 459.21	\$ 7.68	\$ 166.49
Pharmacy								
Psychotropic Drugs	Scripts	804.3	\$ 53.93	\$ 3.61	1.2	\$ 11.06	\$ 0.00	\$ 3.62
Opioid Drugs	Scripts	956.7	57.68	4.60	0.2	0.58	0.00	4.60
All Other Drugs	Scripts	5,967.3	122.22	60.78	16.8	245.84	0.35	61.12
Subtotal - Pharmacy		7,728.4	\$ 107.12	\$ 68.99	18.2	\$ 227.76	\$ 0.35	\$ 69.34
Ancillary								
Ground Transportation	Trips	1,408.6	\$ 82.37	\$ 9.67	-	\$ 0.00	\$ 0.00	\$ 9.67
Air Transportation	Trips	270.7	598.16	13.49	-	-	-	13.49
Accommodations	Claims	93.8	285.10	2.23	-	-	-	2.23
DIME/Prosthetics	Procedures	2,296.8	85.79	16.42	-	-	-	16.42
Dental	Procedures	3,002.9	124.05	31.04	128.9	396.33	4.26	35.30
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		7,072.8	\$ 123.60	\$ 72.85	128.9	\$ 396.33	\$ 4.26	\$ 77.11
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.15	-	\$ 0.00	\$ 0.00	\$ 0.15
Nursing Home	Days	44.1	608.65	2.23	-	-	-	2.23
Skilled Nursing Facility	Days	2,611.7	652.03	141.91	-	-	-	141.91
HCBS	Procedures	12,870.0	164.01	175.90	-	-	-	175.90
Case Management	Procedures	653.1	225.15	12.25	-	-	-	12.25
Personal Care	Procedures	9,657.3	105.20	84.66	-	-	-	84.66
Subtotal - LTSS		25,836.2	\$ 193.73	\$ 417.11	-	\$ 0.00	\$ 0.00	\$ 417.11
Behavioral Health								
IP Psych Hospital - API	Days	13.7	\$ 1,308.59	\$ 1.49	-	\$ 0.00	\$ 0.00	\$ 1.49
IP Psych Hospital - All Other	Days	90.9	716.50	5.43	-	-	-	5.43
IP General Hospital - MH/SA	Days	25.7	2,786.73	5.97	-	-	-	5.97
OP General Hospital - MH/SA	Visits	28.2	21.56	0.05	-	-	-	0.05
Screening	Procedures	47.1	40.54	0.16	0.9	602.56	0.05	0.20
Assessment	Procedures	52.4	226.81	0.99	1.3	602.69	0.07	1.06
Crisis Services	Procedures	16.3	187.49	0.26	-	-	-	0.26
Medication Services	Procedures	152.7	36.51	0.46	-	-	-	0.46
Methadone Medication Services	Procedures	3.3	12.50	0.00	-	-	-	0.00
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	689.3	85.14	4.89	51.8	602.19	2.60	7.49
Family Therapy OP	Procedures	120.2	109.31	1.10	5.3	596.10	0.26	1.36
Group Therapy OP	Procedures	311.4	83.15	2.16	2.6	587.66	0.13	2.28
SBIRT	Procedures	-	-	-	-	-	-	-
Substance Abuse Residential	Days	261.8	228.39	4.98	22.0	602.46	1.11	6.09
Children's Residential	Days	114.8	186.47	1.78	24.7	208.52	0.43	2.21
RPTC - In State	Days	202.7	352.61	5.96	-	-	-	5.96
RPTC - Out of State	Days	149.8	389.22	4.86	-	-	-	4.86
Detoxification	Procedures	-	-	-	-	-	-	-
Medical Evaluation	Procedures	10.8	200.25	0.18	-	-	-	0.18
Psychological Testing	Procedures	70.5	384.39	2.26	-	-	-	2.26
Peer Support Services	Units	2.6	17.00	0.00	-	-	-	0.00
Psychosocial Rehabilitation Services	Procedures	3,793.9	150.64	47.62	179.9	602.04	9.03	56.65
BH Case Management	Units	2,629.2	15.98	3.50	44.4	297.58	1.10	4.60
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	15.3	66.26	0.08	0.1	601.00	0.00	0.09
Other Professional MH/SA	Visits	138.1	39.84	0.46	5.0	602.52	0.25	0.71
Subtotal - Behavioral Health		8,940.6	\$ 127.04	\$ 94.65	338.1	\$ 533.17	\$ 15.02	\$ 109.67
Total All Services		70,387.6	\$ 182.07	\$ 1,067.95	704.1	\$ 482.33	\$ 28.30	\$ 1,096.25

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year:		SFY 2016						
Population:		All Populations						
Rate Cell:		All Rate Cells						
Region:		MatSu Borough						
Tribal/Non-Tribal Members:		Non-Tribal						
Member Months:		217,747						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	368.4	\$ 2,939.19	\$ 90.22	0.9	\$ 3,103.76	\$ 0.24	\$ 90.46
Inpatient Maternity Delivery	Days	49.9	2,751.00	11.43	0.4	3,042.86	0.10	11.53
Inpatient Well Newborn	Days	38.8	2,770.21	8.96	-	-	-	8.96
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal – Inpatient Hospital		457.0	\$ 2,904.31	\$ 110.61	1.3	\$ 3,086.00	\$ 0.34	\$ 110.95
Outpatient Hospital								
Outpatient Emergency Room	Visits	509.7	\$ 573.53	\$ 24.36	1.5	\$ 514.41	\$ 0.06	\$ 24.42
Outpatient Surgery	Visits	128.5	2,281.60	24.44	0.3	1,103.88	0.03	24.47
Outpatient Radiology	Procedures	189.1	209.98	3.31	0.7	449.35	0.02	3.33
Outpatient Pathology/Lab	Procedures	1,146.1	16.37	1.56	6.9	320.97	0.18	1.75
Outpatient Pharmacy	Procedures	140.8	252.75	2.96	0.1	473.85	0.00	2.97
Other Outpatient	Procedures	437.0	124.78	4.54	10.0	337.58	0.28	4.83
Subtotal – Outpatient Hospital		2,551.1	\$ 287.76	\$ 61.18	19.5	\$ 362.75	\$ 0.59	\$ 61.76
Professional								
Inpatient and Outpatient Surgery	Procedures	716.6	\$ 312.69	\$ 18.67	1.9	\$ 178.59	\$ 0.03	\$ 18.70
Anesthesia	Procedures	167.8	435.76	6.09	0.7	449.41	0.03	6.12
Inpatient Visits	Visits	538.5	251.90	11.30	1.5	174.43	0.02	11.33
Emergency Room	Visits	592.0	147.07	7.26	2.6	109.08	0.02	7.28
Office/Home Visits/Consults	Visits	3,822.8	111.98	35.67	5.1	80.95	0.03	35.71
Maternity	Procedures	84.7	663.50	4.68	0.6	643.29	0.03	4.72
Pathology/Lab	Procedures	3,708.5	25.49	7.88	0.5	77.91	0.00	7.88
Radiology	Procedures	1,505.6	102.31	12.84	6.9	47.03	0.03	12.86
Office Administered Drugs	Procedures	482.8	179.99	7.24	-	-	-	7.24
FQHC/RHC/Tribal Clinic	Visits	479.2	215.11	8.59	34.0	447.68	1.27	9.86
Physical Exams	Visits	439.4	165.91	6.08	0.1	118.78	0.00	6.08
Therapy	Visits	1,509.2	159.04	20.00	0.2	43.40	0.00	20.00
Vision	Visits	706.3	98.79	5.81	0.1	156.67	0.00	5.82
Other Professional	Procedures	1,345.0	85.44	9.58	2.0	96.69	0.02	9.59
Telemedicine	Procedures	4.8	108.30	0.04	0.1	152.31	0.00	0.04
Subtotal – Professional		16,103.2	\$ 120.52	\$ 161.74	56.4	\$ 316.61	\$ 1.49	\$ 163.22
Pharmacy								
Psychotropic Drugs	Scripts	1,011.9	\$ 63.72	\$ 5.37	2.4	\$ 19.44	\$ 0.00	\$ 5.38
Opioid Drugs	Scripts	839.8	68.53	4.80	0.9	3.70	0.00	4.80
All Other Drugs	Scripts	5,879.6	115.03	56.36	27.8	51.25	0.12	56.48
Subtotal – Pharmacy		7,731.3	\$ 103.26	\$ 66.53	31.2	\$ 47.35	\$ 0.12	\$ 66.65
Ancillary								
Ground Transportation	Trips	643.6	\$ 123.22	\$ 6.61	-	\$ 0.00	\$ 0.00	\$ 6.61
Air Transportation	Trips	30.4	1,409.21	3.57	-	-	-	3.57
Accommodations	Claims	15.4	469.98	0.60	-	-	-	0.60
DIME/Prosthetics	Procedures	1,576.3	97.11	12.76	-	-	-	12.76
Dental	Procedures	4,474.4	122.06	45.51	5.4	291.38	0.13	45.64
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		6,740.1	\$ 122.93	\$ 69.05	5.4	\$ 291.38	\$ 0.13	\$ 69.18
LTSS								
Hospice	Days	7.8	\$ 904.75	\$ 0.59	-	\$ 0.00	\$ 0.00	\$ 0.59
Nursing Home	Days	254.8	64.39	1.37	-	-	-	1.37
Skilled Nursing Facility	Days	85.1	417.48	2.96	-	-	-	2.96
HCBS	Procedures	10,992.9	151.92	139.17	0.1	370.00	0.00	139.17
Case Management	Procedures	457.7	208.24	7.94	0.6	240.77	0.01	7.95
Personal Care	Procedures	6,880.5	82.56	47.34	-	-	-	47.34
Subtotal – LTSS		18,678.8	\$ 128.08	\$ 199.37	0.7	\$ 251.54	\$ 0.01	\$ 199.38
Behavioral Health								
IP Psych Hospital - API	Days	4.3	\$ 1,356.69	\$ 0.49	-	\$ 0.00	\$ 0.00	\$ 0.49
IP Psych Hospital - All Other	Days	110.9	713.73	6.59	-	-	-	6.59
IP General Hospital - MH/SA	Days	23.3	2,683.58	5.21	0.1	2,876.00	0.03	5.24
OP General Hospital - MH/SA	Visits	4.4	151.25	0.05	-	-	-	0.05
Screening	Procedures	38.0	38.70	0.12	-	-	-	0.12
Assessment	Procedures	43.6	207.71	0.75	0.5	537.00	0.02	0.78
Crisis Services	Procedures	25.4	118.77	0.25	0.3	602.60	0.01	0.27
Medication Services	Procedures	24.9	37.78	0.08	-	-	-	0.08
Methadone Medication Services	Procedures	49.7	12.50	0.05	-	-	-	0.05
Other Opioid Medication Services	Procedures	0.1	15.99	0.00	-	-	-	0.00
Individual Therapy OP	Procedures	464.1	86.99	3.36	2.8	591.03	0.14	3.50
Family Therapy OP	Procedures	115.0	100.64	0.96	0.6	601.91	0.03	0.99
Group Therapy OP	Procedures	229.7	70.49	1.35	1.5	602.78	0.07	1.42
SBIRT	Procedures	0.1	43.80	0.00	-	-	-	0.00
Substance Abuse Residential	Days	50.0	232.16	0.97	42.1	182.76	0.64	1.61
Children's Residential	Days	430.8	178.03	6.39	-	-	-	6.39
RPTC - In State	Days	342.0	339.89	9.69	-	-	-	9.69
RPTC - Out of State	Days	238.4	359.95	7.15	-	-	-	7.15
Detoxification	Procedures	-	-	-	0.1	603.00	0.00	0.00
Medical Evaluation	Procedures	26.5	205.78	0.45	-	-	-	0.45
Psychological Testing	Procedures	123.1	241.99	2.48	-	-	-	2.48
Peer Support Services	Units	32.6	17.00	0.05	-	-	-	0.05
Psychosocial Rehabilitation Services	Procedures	1,315.3	178.40	19.55	0.7	602.33	0.03	19.55
BH Case Management	Units	1,046.1	15.99	1.39	1.9	206.11	0.03	1.43
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	26.4	154.23	0.34	0.3	601.80	0.01	0.35
Other Professional MH/SA	Visits	105.1	41.40	0.36	0.5	601.89	0.02	0.39
Subtotal – Behavioral Health		4,869.7	\$ 167.85	\$ 68.12	51.3	\$ 246.77	\$ 1.06	\$ 69.17
Total All Services		57,131.3	\$ 154.71	\$ 736.58	165.8	\$ 270.77	\$ 3.74	\$ 740.32

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year: SFY 2016
 Population: All Populations
 Rate Cell: All Rate Cells
 Region: Northern Southeast Region
 Tribal/Non-Tribal Members: Non-Tribal
 Member Months: 59,309

Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	333.0	\$ 3,165.80	\$ 87.86	4.7	\$ 2,542.30	\$ 0.99	\$ 88.85
Inpatient Maternity Delivery	Days	43.1	3,207.30	11.52	5.1	2,931.84	1.24	12.75
Inpatient Well Newborn	Days	26.9	3,310.66	7.42	-	-	-	7.42
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		403.0	\$ 3,179.91	\$ 106.80	9.7	\$ 2,745.19	\$ 2.22	\$ 109.02
Outpatient Hospital								
Outpatient Emergency Room	Visits	526.7	\$ 865.67	\$ 37.99	19.0	\$ 594.68	\$ 0.94	\$ 38.94
Outpatient Surgery	Visits	84.4	2,527.92	17.77	4.0	621.17	0.21	17.98
Outpatient Radiology	Procedures	356.7	416.02	12.37	15.0	577.85	0.72	13.09
Outpatient Pathology/Lab	Procedures	1,255.5	52.93	5.54	77.3	527.15	3.40	8.93
Outpatient Pharmacy	Procedures	174.8	294.30	4.29	3.0	579.86	0.15	4.43
Other Outpatient	Procedures	1,407.2	127.35	14.93	201.7	341.60	5.74	20.68
Subtotal - Outpatient Hospital		3,805.2	\$ 292.94	\$ 92.89	320.1	\$ 418.28	\$ 11.16	\$ 104.05
Professional								
Inpatient and Outpatient Surgery	Procedures	493.1	\$ 289.94	\$ 11.91	5.3	\$ 305.97	\$ 0.13	\$ 12.05
Anesthesia	Procedures	128.9	373.87	4.02	3.8	256.51	0.08	4.10
Inpatient Visits	Visits	511.7	198.81	8.48	11.3	101.68	0.10	8.57
Emergency Room	Visits	520.0	156.99	6.80	7.7	71.32	0.05	6.85
Office/Home Visits/Consults	Visits	2,659.4	107.34	23.79	51.2	318.10	1.36	25.15
Maternity	Procedures	59.5	719.13	3.56	4.0	950.99	0.32	3.89
Pathology/Lab	Procedures	1,807.0	27.25	4.10	18.0	46.88	0.07	4.17
Radiology	Procedures	1,149.0	82.97	7.94	6.3	46.23	0.02	7.97
Office Administered Drugs	Procedures	180.1	101.11	1.52	1.6	42.14	0.01	1.52
FQHC/RHC/Tribal Clinic	Visits	386.2	204.59	6.59	516.1	368.96	15.87	22.45
Physical Exams	Visits	319.7	147.15	3.92	1.8	110.60	0.02	3.94
Therapy	Visits	373.1	203.83	6.34	0.6	151.61	0.01	6.35
Vision	Visits	454.2	95.68	3.62	0.6	178.87	0.01	3.63
Other Professional	Procedures	627.6	85.24	4.46	4.0	257.93	0.09	4.55
Telemedicine	Procedures	10.9	62.48	0.06	0.4	63.57	0.00	0.06
Subtotal - Professional		9,680.5	\$ 120.38	\$ 97.11	632.9	\$ 343.72	\$ 18.13	\$ 115.24
Pharmacy								
Psychotropic Drugs	Scripts	765.2	\$ 74.51	\$ 4.75	36.4	\$ 11.78	\$ 0.04	\$ 4.79
Opioid Drugs	Scripts	642.2	58.29	3.12	27.1	5.55	0.01	3.13
All Other Drugs	Scripts	4,147.6	142.11	49.12	269.3	35.23	0.79	49.91
Subtotal - Pharmacy		5,555.0	\$ 123.11	\$ 56.99	332.8	\$ 30.24	\$ 0.84	\$ 57.83
Ancillary								
Ground Transportation	Trips	1,237.7	\$ 82.49	\$ 8.51	-	\$ 0.00	\$ 0.00	\$ 8.51
Air Transportation	Trips	524.2	913.96	39.93	-	-	-	39.93
Accommodations	Claims	252.7	335.20	7.06	-	-	-	7.06
DME/Prosthetics	Procedures	1,000.5	106.26	8.86	-	-	-	8.86
Dental	Procedures	2,833.4	160.71	37.95	357.1	463.99	13.81	51.76
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		5,848.5	\$ 209.90	\$ 102.30	357.1	\$ 463.99	\$ 13.81	\$ 116.11
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.01	-	\$ 0.00	\$ 0.00	\$ 0.01
Nursing Home	Days	507.4	107.55	4.55	-	-	-	4.55
Skilled Nursing Facility	Days	4,254.8	552.16	195.78	-	-	-	195.78
HCBS	Procedures	11,733.3	204.29	199.75	-	-	-	199.75
Case Management	Procedures	505.4	213.90	9.01	-	-	-	9.01
Personal Care	Procedures	3,677.3	69.89	21.42	-	-	-	21.42
Subtotal - LTSS		20,678.3	\$ 249.83	\$ 430.51	-	\$ 0.00	\$ 0.00	\$ 430.51
Behavioral Health								
IP Psych Hospital - API	Days	13.6	\$ 1,531.06	\$ 1.73	-	\$ 0.00	\$ 0.00	\$ 1.73
IP Psych Hospital - All Other	Days	78.7	709.49	4.65	-	-	-	4.65
IP General Hospital - MH/SA	Days	71.8	3,026.98	18.12	-	-	-	18.12
OP General Hospital - MH/SA	Visits	9.1	19.32	0.01	-	-	-	0.01
Screening	Procedures	54.4	37.20	0.17	3.6	602.44	0.18	0.35
Assessment	Procedures	90.4	235.84	1.78	9.5	602.36	0.48	2.25
Crisis Services	Procedures	32.8	160.48	0.44	12.1	602.20	0.61	1.05
Medication Services	Procedures	1,251.2	32.21	3.36	9.3	601.78	0.47	3.82
Methadone Medication Services	Procedures	-	-	-	-	-	-	-
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	716.7	79.14	4.73	118.8	602.19	5.96	10.69
Family Therapy OP	Procedures	179.9	89.06	1.33	10.5	397.12	0.35	1.68
Group Therapy OP	Procedures	666.3	81.76	4.54	5.1	602.28	0.25	4.79
SBIRT	Procedures	2.6	43.80	0.01	1.8	603.00	0.09	0.10
Substance Abuse Residential	Days	549.9	197.22	9.04	96.3	173.41	1.39	10.43
Children's Residential	Days	402.0	175.29	5.87	4.2	153.90	0.05	5.93
RPTC - In State	Days	217.3	329.11	5.96	-	-	-	5.96
RPTC - Out of State	Days	267.9	394.32	8.80	-	-	-	8.80
Detoxification	Procedures	-	-	-	-	-	-	-
Medical Evaluation	Procedures	17.0	233.56	0.33	0.4	265.27	0.01	0.34
Psychological Testing	Procedures	57.5	341.11	1.63	0.6	601.00	0.03	1.66
Peer Support Services	Units	3.2	17.00	0.00	-	-	-	0.00
Psychosocial Rehabilitation Services	Procedures	3,913.1	199.58	65.08	90.2	602.58	4.53	69.61
BH Case Management	Units	1,204.9	15.96	1.60	44.7	177.06	0.66	2.26
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	19.2	87.42	0.14	8.9	602.09	0.45	0.59
Other Professional MH/SA	Visits	200.1	39.83	0.66	18.4	602.32	0.92	1.59
Subtotal - Behavioral Health		10,019.6	\$ 167.67	\$ 140.00	434.6	\$ 453.86	\$ 16.44	\$ 156.43
Total All Services		55,990.1	\$ 220.03	\$ 1,026.60	2,087.2	\$ 359.85	\$ 62.59	\$ 1,089.19

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year: SFY 2016
 Population: All Populations
 Rate Cell: All Rate Cells
 Region: Northern and Interior Region
 Tribal/Non-Tribal Members: Non-Tribal
 Member Months: 20,701

Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	190.7	\$ 2,695.19	\$ 42.83	5.2	\$ 3,074.44	\$ 1.34	\$ 44.17
Inpatient Maternity Delivery	Days	46.4	2,785.06	10.76	1.7	2,223.33	0.32	11.09
Inpatient Well Newborn	Days	36.5	2,878.77	8.76	-	-	-	8.76
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		273.6	\$ 2,734.93	\$ 62.36	7.0	\$ 2,861.67	\$ 1.66	\$ 64.02
Outpatient Hospital								
Outpatient Emergency Room	Visits	197.1	\$ 1,079.51	\$ 17.73	15.7	\$ 621.57	\$ 0.81	\$ 18.54
Outpatient Surgery	Visits	71.3	2,283.59	13.57	1.2	1,061.25	0.10	13.67
Outpatient Radiology	Procedures	215.6	390.49	7.02	8.1	502.34	0.34	7.36
Outpatient Pathology/Lab	Procedures	693.3	22.06	1.27	34.2	490.60	1.40	2.67
Outpatient Pharmacy	Procedures	91.0	52.57	0.40	4.6	517.43	0.20	0.60
Other Outpatient	Procedures	280.0	119.53	2.79	89.9	381.59	2.86	5.65
Subtotal - Outpatient Hospital		1,548.3	\$ 331.54	\$ 42.78	153.6	\$ 445.92	\$ 5.71	\$ 48.49
Professional								
Inpatient and Outpatient Surgery	Procedures	412.2	\$ 317.23	\$ 10.90	7.5	\$ 325.52	\$ 0.20	\$ 11.10
Anesthesia	Procedures	107.8	396.11	3.56	1.2	789.74	0.08	3.64
Inpatient Visits	Visits	290.4	202.18	4.89	8.1	268.74	0.18	5.07
Emergency Room	Visits	256.8	161.32	3.45	5.2	91.52	0.04	3.49
Office/Home Visits/Consults	Visits	2,018.5	109.74	18.46	75.9	95.68	0.61	19.06
Maternity	Procedures	45.2	1,054.54	3.97	2.9	1,134.81	0.27	4.25
Pathology/Lab	Procedures	1,333.9	21.12	2.35	25.5	15.34	0.03	2.38
Radiology	Procedures	807.5	80.62	5.43	11.6	68.09	0.07	5.49
Office Administered Drugs	Procedures	378.0	83.65	2.63	1.7	46.09	0.01	2.64
FQHC/RHC/Tribal Clinic	Visits	381.4	272.14	8.65	418.5	471.52	16.45	25.10
Physical Exams	Visits	234.2	172.79	3.37	8.7	120.74	0.09	3.46
Therapy	Visits	475.9	119.25	4.73	0.6	51.45	0.00	4.73
Vision	Visits	602.9	103.92	5.22	1.7	14.15	0.00	5.22
Other Professional	Procedures	829.5	85.73	5.93	4.6	418.14	0.16	6.09
Telemedicine	Procedures	5.2	172.53	0.08	1.7	234.40	0.03	0.11
Subtotal - Professional		8,179.4	\$ 122.67	\$ 83.61	575.6	\$ 379.83	\$ 18.22	\$ 101.83
Pharmacy								
Psychotropic Drugs	Scripts	253.3	\$ 46.82	\$ 0.99	11.0	\$ 7.77	\$ 0.01	\$ 1.00
Opioid Drugs	Scripts	307.8	36.38	0.93	20.3	10.97	0.02	0.95
All Other Drugs	Scripts	3,322.2	70.91	19.63	333.9	48.20	1.34	20.97
Subtotal - Pharmacy		3,883.3	\$ 66.60	\$ 21.55	365.2	\$ 44.91	\$ 1.37	\$ 22.92
Ancillary								
Ground Transportation	Trips	749.5	\$ 71.77	\$ 4.48	-	\$ 0.00	\$ 0.00	\$ 4.48
Air Transportation	Trips	256.2	767.71	16.39	-	-	-	16.39
Accommodations	Claims	286.4	266.18	6.35	-	-	-	6.35
DME/Prosthetics	Procedures	1,471.2	68.77	8.43	-	-	-	8.43
Dental	Procedures	4,250.8	134.02	47.47	55.7	465.00	2.16	49.63
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		7,014.2	\$ 142.22	\$ 83.13	55.7	\$ 465.00	\$ 2.16	\$ 85.29
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Nursing Home	Days	-	-	-	-	-	-	-
Skilled Nursing Facility	Days	443.5	618.65	22.86	-	-	-	22.86
HCBS	Procedures	1,871.2	131.63	20.53	-	-	-	20.53
Case Management	Procedures	136.8	168.85	1.92	2.9	303.08	0.07	2.00
Personal Care	Procedures	7,637.4	63.79	40.60	-	-	-	40.60
Subtotal - LTSS		10,088.9	\$ 102.19	\$ 85.91	2.9	\$ 303.08	\$ 0.07	\$ 85.98
Behavioral Health								
IP Psych Hospital - API	Days	14.5	\$ 1,371.90	\$ 1.66	-	\$ 0.00	\$ 0.00	\$ 1.66
IP Psych Hospital - All Other	Days	-	-	-	-	-	-	-
IP General Hospital - MH/SA	Days	28.4	2,677.25	6.34	-	-	-	6.34
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	7.5	56.49	0.04	0.6	601.00	0.03	0.06
Assessment	Procedures	9.3	220.94	0.17	5.2	601.89	0.26	0.43
Crisis Services	Procedures	25.5	273.98	0.58	-	-	-	0.58
Medication Services	Procedures	8.1	20.00	0.01	-	-	-	0.01
Methadone Medication Services	Procedures	-	-	-	-	-	-	-
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	207.5	131.44	2.27	63.2	601.99	3.17	5.44
Family Therapy OP	Procedures	15.7	121.11	0.16	6.4	601.36	0.32	0.48
Group Therapy OP	Procedures	31.9	79.93	0.21	-	-	-	0.21
SBIRT	Procedures	-	-	-	2.9	603.00	0.15	0.15
Substance Abuse Residential	Days	-	-	-	-	-	-	-
Children's Residential	Days	56.2	191.35	0.90	-	-	-	0.90
RPTC - In State	Days	-	-	-	-	-	-	-
RPTC - Out of State	Days	106.7	329.00	2.92	-	-	-	2.92
Detoxification	Procedures	-	-	-	-	-	-	-
Medical Evaluation	Procedures	6.4	226.91	0.12	-	-	-	0.12
Psychological Testing	Procedures	13.9	408.64	0.47	-	-	-	0.47
Peer Support Services	Units	-	-	-	-	-	-	-
Psychosocial Rehabilitation Services	Procedures	202.3	252.91	4.26	68.4	602.95	3.44	7.70
BH Case Management	Units	132.2	16.00	0.18	4.1	258.14	0.09	0.26
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	16.2	58.52	0.08	0.6	601.00	0.03	0.11
Other Professional MH/SA	Visits	23.8	77.17	0.15	10.4	602.22	0.52	0.68
Subtotal - Behavioral Health		906.1	\$ 271.87	\$ 20.53	161.7	\$ 593.77	\$ 8.00	\$ 28.53
Total All Services		31,893.8	\$ 150.45	\$ 399.87	1,321.7	\$ 337.63	\$ 37.19	\$ 437.06

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year: SFY 2016
 Population: All Populations
 Rate Cell: All Rate Cells
 Region: Southern Southeast Region
 Tribal/Non-Tribal Members: Non-Tribal
 Member Months: 29,651

Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	382.9	\$ 3,121.56	\$ 99.59	-	\$ 0.00	\$ 0.00	\$ 99.59
Inpatient Maternity Delivery	Days	46.5	2,781.64	10.79	1.2	3,335.00	0.34	11.13
Inpatient Well Newborn	Days	30.4	2,551.23	6.45	-	-	-	6.45
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		459.7	\$ 3,049.49	\$ 116.83	1.2	\$ 3,335.00	\$ 0.34	\$ 117.17
Outpatient Hospital								
Outpatient Emergency Room	Visits	715.9	\$ 797.08	\$ 47.55	0.4	\$ 486.00	\$ 0.02	\$ 47.57
Outpatient Surgery	Visits	102.4	2,186.25	18.65	0.4	572.85	0.02	18.67
Outpatient Radiology	Procedures	648.7	349.50	18.89	6.1	545.15	0.28	19.17
Outpatient Pathology/Lab	Procedures	2,484.9	16.99	3.52	19.0	485.41	0.77	4.29
Outpatient Pharmacy	Procedures	492.5	461.82	18.96	-	-	-	18.96
Other Outpatient	Procedures	2,429.1	65.80	13.32	37.2	260.05	0.81	14.13
Subtotal - Outpatient Hospital		6,873.6	\$ 211.06	\$ 120.90	63.1	\$ 358.82	\$ 1.89	\$ 122.78
Professional								
Inpatient and Outpatient Surgery	Procedures	424.5	\$ 270.85	\$ 9.58	3.6	\$ 342.10	\$ 0.10	\$ 9.69
Anesthesia	Procedures	145.3	278.75	3.38	1.6	314.55	0.04	3.42
Inpatient Visits	Visits	467.0	183.90	7.16	0.8	190.04	0.01	7.17
Emergency Room	Visits	722.0	155.54	9.36	2.0	30.99	0.01	9.36
Office/Home Visits/Consults	Visits	3,089.1	120.89	31.12	10.5	202.72	0.18	31.30
Maternity	Procedures	80.5	470.78	3.16	1.6	516.29	0.07	3.23
Pathology/Lab	Procedures	1,422.6	20.60	2.44	5.3	63.43	0.03	2.47
Radiology	Procedures	1,295.1	46.46	5.01	5.3	58.09	0.03	5.04
Office Administered Drugs	Procedures	191.4	64.67	1.03	-	-	-	1.03
FQHC/RHC/Tribal Clinic	Visits	39.7	236.87	0.78	530.2	479.15	21.17	21.95
Physical Exams	Visits	387.7	152.26	4.92	1.2	165.25	0.02	4.94
Therapy	Visits	478.8	166.00	6.62	-	-	-	6.62
Vision	Visits	529.0	93.38	4.12	-	-	-	4.12
Other Professional	Procedures	590.5	94.69	4.66	0.8	46.23	0.00	4.66
Telemedicine	Procedures	10.9	144.67	0.13	7.3	511.17	0.31	0.44
Subtotal - Professional		9,874.1	\$ 113.60	\$ 93.47	570.2	\$ 462.22	\$ 21.96	\$ 115.44
Pharmacy								
Psychotropic Drugs	Scripts	969.7	\$ 74.42	\$ 6.01	10.1	\$ 3.03	\$ 0.00	\$ 6.02
Opioid Drugs	Scripts	924.4	55.42	4.27	18.6	52.27	0.08	4.35
All Other Drugs	Scripts	6,381.5	152.02	80.84	125.5	58.18	0.61	81.45
Subtotal - Pharmacy		8,275.5	\$ 132.14	\$ 91.13	154.2	\$ 53.85	\$ 0.69	\$ 91.82
Ancillary								
Ground Transportation	Trips	1,601.0	\$ 74.58	\$ 9.95	-	\$ 0.00	\$ 0.00	\$ 9.95
Air Transportation	Trips	579.5	1,012.95	48.92	-	-	-	48.92
Accommodations	Claims	338.7	336.19	9.49	-	-	-	9.49
DIME/Prosthetics	Procedures	714.3	85.23	5.07	-	-	-	5.07
Dental	Procedures	3,791.3	99.03	31.29	207.6	422.89	7.32	38.60
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		7,024.9	\$ 178.89	\$ 104.72	207.6	\$ 422.89	\$ 7.32	\$ 112.04
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Nursing Home	Days	-	-	-	-	-	-	-
Skilled Nursing Facility	Days	1,216.6	676.61	68.59	-	-	-	68.59
HCBS	Procedures	6,980.0	199.99	116.33	-	-	-	116.33
Case Management	Procedures	286.9	270.02	6.46	-	-	-	6.46
Personal Care	Procedures	3,162.8	66.24	17.46	-	-	-	17.46
Subtotal - LTSS		11,646.3	\$ 215.18	\$ 208.84	-	\$ 0.00	\$ 0.00	\$ 208.84
Behavioral Health								
IP Psych Hospital - API	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
IP Psych Hospital - All Other	Days	42.5	667.68	2.36	-	-	-	2.36
IP General Hospital - MH/SA	Days	82.6	3,098.27	21.32	-	-	-	21.32
OP General Hospital - MH/SA	Visits	0.4	27.65	0.00	-	-	-	0.00
Screening	Procedures	55.0	41.94	0.19	4.0	601.40	0.20	0.40
Assessment	Procedures	63.5	196.92	1.04	10.9	602.41	0.55	1.59
Crisis Services	Procedures	66.8	69.76	0.39	9.7	602.17	0.49	0.88
Medication Services	Procedures	441.5	25.97	0.96	2.8	601.86	0.14	1.10
Methadone Medication Services	Procedures	-	-	-	-	-	-	-
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	693.7	82.39	4.76	52.6	600.00	2.63	7.39
Family Therapy OP	Procedures	406.3	98.98	3.35	1.6	601.50	0.08	3.43
Group Therapy OP	Procedures	610.7	66.83	3.40	3.6	603.00	0.18	3.58
SBIRT	Procedures	-	-	-	1.6	603.00	0.08	0.08
Substance Abuse Residential	Days	352.1	261.55	7.67	168.8	227.03	3.19	10.87
Children's Residential	Days	1,824.8	180.65	27.47	-	-	-	27.47
RPTC - In State	Days	62.3	371.29	1.93	-	-	-	1.93
RPTC - Out of State	Days	273.6	327.43	7.47	-	-	-	7.47
Detoxification	Procedures	-	-	-	-	-	-	-
Medical Evaluation	Procedures	19.0	202.06	0.32	-	-	-	0.32
Psychological Testing	Procedures	32.0	343.87	0.92	2.8	602.14	0.14	1.06
Peer Support Services	Units	586.4	16.13	0.79	-	-	-	0.79
Psychosocial Rehabilitation Services	Procedures	3,962.1	194.47	64.21	31.2	602.17	1.56	65.77
BH Case Management	Units	1,681.2	15.84	2.22	14.6	201.00	0.24	2.46
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	61.1	76.78	0.39	12.5	570.07	0.60	0.99
Other Professional MH/SA	Visits	148.5	39.25	0.49	11.3	602.36	0.57	1.05
Subtotal - Behavioral Health		11,466.2	\$ 158.70	\$ 151.64	328.2	\$ 389.91	\$ 10.66	\$ 162.31
Total All Services		55,620.4	\$ 191.48	\$ 887.53	1,324.6	\$ 388.30	\$ 42.86	\$ 930.40

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year: SFY 2016
 Population: All Populations
 Rate Cell: All Rate Cells
 Region: Western Region
 Tribal/Non-Tribal Members: Non-Tribal
 Member Months: 4,238

Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	269.0	\$ 2,895.91	\$ 64.92	181.2	\$ 3,139.41	\$ 47.41	\$ 112.33
Inpatient Maternity Delivery	Days	11.3	4,998.22	4.72	22.7	3,283.88	6.20	10.92
Inpatient Well Newborn	Days	19.8	1,697.01	2.80	31.1	3,186.27	8.27	11.07
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		300.1	\$ 2,896.07	\$ 72.44	235.0	\$ 3,159.55	\$ 61.88	\$ 134.32
Outpatient Hospital								
Outpatient Emergency Room	Visits	271.8	\$ 481.03	\$ 10.90	614.4	\$ 722.37	\$ 36.99	\$ 47.88
Outpatient Surgery	Visits	76.5	2,424.35	15.45	25.5	669.46	1.42	16.87
Outpatient Radiology	Procedures	138.7	677.27	7.83	141.6	480.16	5.66	13.50
Outpatient Pathology/Lab	Procedures	444.6	24.67	0.91	835.3	246.00	17.12	18.04
Outpatient Pharmacy	Procedures	68.0	84.36	0.48	45.3	175.54	0.66	1.14
Other Outpatient	Procedures	152.9	79.91	1.02	1,030.7	319.35	27.43	28.45
Subtotal - Outpatient Hospital		1,152.4	\$ 380.92	\$ 36.58	2,692.8	\$ 397.91	\$ 89.29	\$ 125.87
Professional								
Inpatient and Outpatient Surgery	Procedures	351.1	\$ 342.10	\$ 10.01	87.8	\$ 247.18	\$ 1.81	\$ 11.82
Anesthesia	Procedures	104.8	509.60	4.45	19.8	470.14	0.78	5.23
Inpatient Visits	Visits	569.1	124.13	5.89	209.5	224.22	3.92	9.80
Emergency Room	Visits	320.0	125.96	3.36	427.6	82.48	2.94	6.30
Office/Home Visits/Consults	Visits	900.4	103.83	7.79	812.6	90.40	6.12	13.91
Maternity	Procedures	22.7	630.33	1.19	17.0	744.62	1.05	2.24
Pathology/Lab	Procedures	478.5	21.74	0.87	45.3	32.26	0.12	0.99
Radiology	Procedures	699.4	84.50	4.92	218.0	49.74	0.90	5.83
Office Administered Drugs	Procedures	294.5	109.33	2.68	19.8	31.81	0.05	2.74
FQHC/RHC/Tribal Clinic	Visits	283.2	257.84	6.08	869.3	583.39	42.26	48.34
Physical Exams	Visits	82.1	165.14	1.13	53.8	138.89	0.62	1.75
Therapy	Visits	56.6	138.71	0.65	8.5	149.01	0.11	0.76
Vision	Visits	365.3	94.17	2.87	34.0	52.79	0.15	3.02
Other Professional	Procedures	396.4	79.11	2.61	107.6	33.40	0.30	2.91
Telemedicine	Procedures	-	-	-	113.3	341.20	3.22	3.22
Subtotal - Professional		4,924.0	\$ 132.84	\$ 54.51	3,043.9	\$ 253.69	\$ 64.35	\$ 118.86
Pharmacy								
Psychotropic Drugs	Scripts	175.6	\$ 24.02	\$ 0.35	546.5	\$ 14.54	\$ 0.66	\$ 1.01
Opioid Drugs	Scripts	133.1	121.49	1.35	124.6	11.52	0.12	1.47
All Other Drugs	Scripts	1,067.5	45.53	4.05	2,449.3	38.14	7.78	11.83
Subtotal - Pharmacy		1,376.1	\$ 50.13	\$ 5.75	3,120.3	\$ 32.94	\$ 8.57	\$ 14.31
Ancillary								
Ground Transportation	Trips	3,208.1	\$ 35.73	\$ 9.55	8.5	\$ 241.01	\$ 0.17	\$ 9.72
Air Transportation	Trips	1,262.9	741.01	77.98	8.5	6,373.31	4.51	82.49
Accommodations	Claims	523.8	460.66	20.11	-	-	-	20.11
DME/Prosthetics	Procedures	557.8	74.45	3.46	-	-	-	3.46
Dental	Procedures	787.2	130.01	8.53	421.9	430.74	15.14	23.67
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		6,339.8	\$ 226.44	\$ 119.63	438.9	\$ 542.09	\$ 19.83	\$ 139.46
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Nursing Home	Days	-	-	-	-	-	-	-
Skilled Nursing Facility	Days	-	-	-	4,975.0	1,135.18	470.63	470.63
HCBS	Procedures	3,327.0	199.02	55.18	2.8	573.36	0.14	55.32
Case Management	Procedures	209.5	222.79	3.89	113.3	338.24	3.19	7.08
Personal Care	Procedures	1,676.3	41.68	5.82	-	-	-	5.82
Subtotal - LTSS		5,212.8	\$ 149.38	\$ 64.89	5,091.1	\$ 1,117.14	\$ 473.96	\$ 538.85
Behavioral Health								
IP Psych Hospital - API	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
IP Psych Hospital - All Other	Days	-	-	-	-	-	-	-
IP General Hospital - MH/SA	Days	-	-	-	-	-	-	-
OP General Hospital - MH/SA	Visits	-	-	-	48.1	13.74	0.06	0.06
Screening	Procedures	25.5	47.30	0.10	8.5	603.00	0.43	0.53
Assessment	Procedures	25.5	145.76	0.31	22.7	602.25	1.14	1.45
Crisis Services	Procedures	5.7	69.00	0.03	36.8	556.10	1.71	1.74
Medication Services	Procedures	45.3	47.50	0.18	65.1	576.11	3.13	3.31
Methadone Medication Services	Procedures	645.6	12.50	0.67	-	-	-	0.67
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	51.0	97.22	0.41	167.1	602.15	8.38	8.80
Family Therapy OP	Procedures	22.7	82.50	0.16	8.5	603.00	0.43	0.58
Group Therapy OP	Procedures	2.8	56.00	0.01	-	-	-	0.01
SBIRT	Procedures	-	-	-	56.6	601.90	2.84	2.84
Substance Abuse Residential	Days	-	-	-	-	-	-	-
Children's Residential	Days	-	-	-	-	-	-	-
RPTC - In State	Days	-	-	-	-	-	-	-
RPTC - Out of State	Days	-	-	-	-	-	-	-
Detoxification	Procedures	-	-	-	28.3	603.00	1.42	1.42
Medical Evaluation	Procedures	8.5	188.36	0.13	-	-	-	0.13
Psychological Testing	Procedures	14.2	62.56	0.07	17.0	475.81	0.67	0.75
Peer Support Services	Units	-	-	-	-	-	-	-
Psychosocial Rehabilitation Services	Procedures	133.1	109.23	1.21	150.1	591.11	7.39	8.60
BH Case Management	Units	25.5	16.00	0.03	22.7	150.50	0.28	0.32
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	-	-	-	11.3	310.50	0.29	0.29
Other Professional MH/SA	Visits	28.3	40.00	0.09	28.3	602.00	1.42	1.51
Subtotal - Behavioral Health		1,033.5	\$ 39.75	\$ 3.42	671.1	\$ 529.09	\$ 29.59	\$ 33.01
Total All Services		20,338.9	\$ 210.76	\$ 357.22	15,293.1	\$ 586.50	\$ 747.46	\$ 1,104.68

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year:		SFY 2017						
Population:		All Populations						
Rate Cell:		All Rate Cells						
Region:		Statewide						
Tribal/Non-Tribal Members:		All						
Member Months:		2,272,716						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	307.4	\$ 3,161.77	\$ 80.98	114.0	\$ 3,275.73	\$ 31.12	\$ 112.10
Inpatient Maternity Delivery	Days	38.3	2,903.47	9.27	18.1	3,240.37	4.90	14.16
Inpatient Well Newborn	Days	19.3	2,975.28	4.79	8.7	3,248.74	2.36	7.15
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		365.0	\$ 3,124.80	\$ 95.04	140.9	\$ 3,269.50	\$ 38.38	\$ 133.42
Outpatient Hospital								
Outpatient Emergency Room	Visits	492.5	\$ 714.08	\$ 29.31	237.0	\$ 610.39	\$ 12.05	\$ 41.36
Outpatient Surgery	Visits	74.9	2,475.16	15.45	29.5	1,058.89	2.60	18.05
Outpatient Radiology	Procedures	168.1	331.73	4.65	59.9	534.69	2.67	7.32
Outpatient Pathology/Lab	Procedures	871.2	24.16	1.75	354.5	410.83	12.14	13.89
Outpatient Pharmacy	Procedures	131.5	236.16	2.59	29.6	398.61	0.98	3.57
Other Outpatient	Procedures	694.9	117.91	6.83	410.2	374.09	12.79	19.61
Subtotal - Outpatient Hospital		2,433.1	\$ 298.76	\$ 60.58	1,120.7	\$ 462.94	\$ 43.23	\$ 103.81
Professional								
Inpatient and Outpatient Surgery	Procedures	429.3	\$ 330.83	\$ 11.83	92.5	\$ 410.23	\$ 3.16	\$ 15.00
Anesthesia	Procedures	126.0	395.16	4.15	40.7	405.54	1.37	5.53
Inpatient Visits	Visits	441.8	251.49	9.26	96.3	291.34	2.34	11.60
Emergency Room	Visits	528.8	166.08	7.32	175.9	136.80	2.01	9.32
Office/Home Visits/Consults	Visits	2,070.2	114.45	19.74	497.9	103.98	4.31	24.06
Maternity	Procedures	43.4	641.85	2.32	11.9	1,004.07	1.00	3.32
Pathology/Lab	Procedures	1,549.2	23.43	3.03	125.5	23.16	0.24	3.27
Radiology	Procedures	1,061.1	92.74	8.20	228.0	41.92	0.80	9.00
Office Administered Drugs	Procedures	291.4	167.73	4.07	22.3	36.36	0.07	4.14
FQHC/RHC/Tribal Clinic	Visits	380.7	259.03	8.22	917.9	541.23	41.40	49.62
Physical Exams	Visits	285.2	157.32	3.74	45.1	122.20	0.46	4.20
Therapy	Visits	1,074.4	134.30	12.02	3.6	59.65	0.02	12.04
Vision	Visits	553.4	95.08	4.38	13.4	93.71	0.10	4.49
Other Professional	Procedures	962.3	81.69	6.55	89.4	72.06	0.54	7.09
Telemedicine	Procedures	8.6	153.55	0.11	56.9	323.89	1.54	1.65
Subtotal - Professional		9,805.8	\$ 128.44	\$ 104.95	2,417.2	\$ 294.64	\$ 59.35	\$ 164.30
Pharmacy								
Psychotropic Drugs	Scripts	655.3	\$ 40.10	\$ 2.19	160.0	\$ 24.53	\$ 0.33	\$ 2.52
Opioid Drugs	Scripts	492.9	72.91	2.99	97.4	37.43	0.30	3.30
All Other Drugs	Scripts	3,785.4	124.24	39.19	1,403.7	70.09	8.20	47.39
Subtotal - Pharmacy		4,933.7	\$ 107.94	\$ 44.38	1,661.2	\$ 63.79	\$ 8.83	\$ 53.21
Ancillary								
Ground Transportation	Trips	1,702.0	\$ 55.69	\$ 7.90	0.7	\$ 340.90	\$ 0.02	\$ 7.92
Air Transportation	Trips	480.0	726.04	29.04	1.3	7,424.73	0.81	29.85
Accommodations	Claims	223.2	316.75	5.89	-	-	-	5.89
DME/Prosthetics	Procedures	1,085.6	95.26	8.62	0.1	36.67	0.00	8.62
Dental	Procedures	2,751.7	128.86	29.55	361.8	479.54	14.46	44.01
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		6,242.5	\$ 155.70	\$ 81.00	363.9	\$ 504.08	\$ 15.29	\$ 96.28
LTSS								
Hospice	Days	1.8	\$ 1,303.93	\$ 0.20	-	\$ 0.00	\$ 0.00	\$ 0.20
Nursing Home	Days	75.8	212.84	1.34	3.7	2,699.95	0.82	2.17
Skilled Nursing Facility	Days	929.7	640.10	49.59	90.6	1,051.28	7.94	57.53
HCBS	Procedures	7,652.4	178.49	113.82	0.6	436.20	0.02	113.84
Case Management	Procedures	305.2	227.87	5.80	13.8	292.92	0.34	6.13
Personal Care	Procedures	4,593.9	79.34	30.37	16.2	43.84	0.06	30.43
Subtotal - LTSS		13,558.7	\$ 178.00	\$ 201.12	124.9	\$ 882.01	\$ 9.18	\$ 210.30
Behavioral Health								
IP Psych Hospital - API	Days	19.8	\$ 1,434.46	\$ 2.37	-	\$ 0.00	\$ 0.00	\$ 2.37
IP Psych Hospital - All Other	Days	108.0	755.37	6.80	-	-	-	6.80
IP General Hospital - MH/SA	Days	34.9	2,692.01	7.82	1.3	4,465.60	0.49	8.31
OP General Hospital - MH/SA	Visits	1.2	170.32	0.02	-	-	-	0.02
Screening	Procedures	27.7	41.83	0.10	7.1	608.18	0.36	0.46
Assessment	Procedures	35.4	204.48	0.60	10.6	603.68	0.53	1.14
Crisis Services	Procedures	39.9	171.25	0.57	15.4	608.17	0.78	1.35
Medication Services	Procedures	185.8	28.55	0.44	7.4	608.13	0.37	0.81
Methadone Medication Services	Procedures	240.1	12.56	0.25	-	-	-	0.25
Other Opioid Medication Services	Procedures	0.0	40.63	0.00	-	-	-	0.00
Individual Therapy OP	Procedures	358.2	89.68	2.68	58.3	591.25	2.87	5.55
Family Therapy OP	Procedures	96.3	99.47	0.80	7.5	565.19	0.35	1.15
Group Therapy OP	Procedures	211.0	75.56	1.33	13.5	577.23	0.65	1.98
SBIRT	Procedures	0.5	44.61	0.00	6.2	609.46	0.31	0.32
Substance Abuse Residential	Days	122.7	235.14	2.40	126.2	470.36	4.95	7.35
Children's Residential	Days	619.7	193.76	10.01	86.2	490.42	3.52	13.53
RPTC - In State	Days	224.5	321.95	6.02	-	-	-	6.02
RPTC - Out of State	Days	225.3	367.21	6.89	-	-	-	6.89
Detoxification	Procedures	6.0	616.00	0.31	5.7	608.42	0.29	0.60
Medical Evaluation	Procedures	16.9	216.90	0.31	1.3	589.41	0.07	0.37
Psychological Testing	Procedures	64.0	322.71	1.72	0.8	473.06	0.03	1.75
Peer Support Services	Units	82.1	17.10	0.12	0.0	301.50	0.00	0.12
Psychosocial Rehabilitation Services	Procedures	1,494.9	191.25	23.83	189.9	608.99	9.64	33.46
BH Case Management	Units	950.7	16.05	1.27	40.6	266.22	0.90	2.17
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	18.0	104.04	0.16	4.5	590.11	0.22	0.38
Other Professional MH/SA	Visits	84.7	41.80	0.29	16.0	608.32	0.81	1.11
Subtotal - Behavioral Health		5,268.1	\$ 175.62	\$ 77.10	598.5	\$ 544.33	\$ 27.15	\$ 104.25
Total All Services		42,606.8	\$ 187.06	\$ 664.16	6,427.3	\$ 376.04	\$ 201.41	\$ 865.57

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year: SFY 2017
Population: All Populations
Rate Cell: All Rate Cells
Region: Anchorage Municipality
Tribal/Non-Tribal Members: All
Member Months: 826,730

Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	402.6	\$ 3,131.15	\$ 105.06	127.9	\$ 3,230.78	\$ 34.43	\$ 139.49
Inpatient Maternity Delivery	Days	44.1	2,874.92	10.56	11.7	3,232.69	3.16	13.72
Inpatient Well Newborn	Days	23.5	2,857.63	5.60	5.2	3,261.65	1.42	7.02
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		470.3	\$ 3,093.44	\$ 121.23	144.8	\$ 3,232.05	\$ 39.01	\$ 160.24
Outpatient Hospital								
Outpatient Emergency Room	Visits	639.9	\$ 587.24	\$ 31.31	256.9	\$ 518.11	\$ 11.09	\$ 42.41
Outpatient Surgery	Visits	72.5	2,029.37	12.26	20.6	989.50	1.70	13.96
Outpatient Radiology	Procedures	69.4	310.20	1.79	36.5	506.87	1.54	3.34
Outpatient Pathology/Lab	Procedures	880.0	17.18	1.26	211.9	485.99	8.58	9.84
Outpatient Pharmacy	Procedures	129.5	287.03	3.10	9.2	453.72	0.35	3.45
Other Outpatient	Procedures	818.4	109.46	7.47	361.9	292.21	8.81	16.28
Subtotal - Outpatient Hospital		2,609.7	\$ 262.97	\$ 57.19	897.0	\$ 429.09	\$ 32.08	\$ 89.27
Professional								
Inpatient and Outpatient Surgery	Procedures	505.4	\$ 326.64	\$ 13.76	88.7	\$ 372.77	\$ 2.76	\$ 16.51
Anesthesia	Procedures	143.6	385.05	4.61	36.2	411.01	1.24	5.85
Inpatient Visits	Visits	602.7	254.82	12.80	97.8	319.24	2.60	15.40
Emergency Room	Visits	688.4	167.97	9.64	297.9	148.05	3.68	13.31
Office/Home Visits/Consults	Visits	2,330.1	112.58	21.86	192.0	104.81	1.68	23.54
Maternity	Procedures	51.8	607.40	2.62	8.1	820.29	0.55	3.18
Pathology/Lab	Procedures	1,877.2	22.13	3.46	27.2	71.49	0.16	3.62
Radiology	Procedures	1,299.2	88.47	9.58	330.4	40.01	1.10	10.68
Office Administered Drugs	Procedures	350.6	180.96	5.29	2.4	25.99	0.01	5.29
FQHC/RHC/Tribal Clinic	Visits	381.6	265.71	8.45	691.1	541.12	31.16	39.61
Physical Exams	Visits	419.0	155.02	5.41	9.5	146.94	0.12	5.53
Therapy	Visits	1,304.8	125.71	13.67	5.5	35.41	0.02	13.69
Vision	Visits	546.8	90.96	4.14	9.3	140.54	0.11	4.25
Other Professional	Procedures	1,338.7	76.71	8.56	100.8	66.40	0.56	9.12
Telemedicine	Procedures	7.8	155.33	0.10	5.5	347.15	0.16	0.26
Subtotal - Professional		11,847.6	\$ 125.54	\$ 123.94	1,902.3	\$ 289.51	\$ 45.90	\$ 169.84
Pharmacy								
Psychotropic Drugs	Scripts	860.4	\$ 34.79	\$ 2.49	225.0	\$ 24.62	\$ 0.46	\$ 2.96
Opioid Drugs	Scripts	491.7	68.71	2.82	84.0	68.92	0.48	3.30
All Other Drugs	Scripts	4,532.5	113.92	43.03	1,360.5	84.09	9.53	52.56
Subtotal - Pharmacy		5,884.6	\$ 98.57	\$ 48.34	1,669.6	\$ 75.31	\$ 10.48	\$ 58.82
Ancillary								
Ground Transportation	Trips	729.3	\$ 105.31	\$ 6.40	0.1	\$ 327.24	\$ 0.00	\$ 6.40
Air Transportation	Trips	48.5	1,101.79	4.45	0.1	7,426.41	0.09	4.54
Accommodations	Claims	25.4	398.67	0.84	-	-	-	0.84
DME/Prosthetics	Procedures	1,438.4	92.51	11.09	-	-	-	11.09
Dental	Procedures	3,442.0	129.07	37.02	146.5	483.69	5.91	42.93
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		5,683.6	\$ 126.26	\$ 59.80	146.8	\$ 490.43	\$ 6.00	\$ 65.80
LTSS								
Hospice	Days	4.0	\$ 1,065.08	\$ 0.35	-	\$ 0.00	\$ 0.00	\$ 0.35
Nursing Home	Days	15.0	983.99	1.23	4.4	3,158.26	1.15	2.38
Skilled Nursing Facility	Days	955.3	547.19	43.56	11.2	761.34	0.71	44.27
HCBS	Procedures	11,015.7	172.24	158.11	1.0	373.04	0.03	158.14
Case Management	Procedures	403.7	225.09	7.57	13.6	242.93	0.27	7.85
Personal Care	Procedures	7,242.9	76.32	46.07	-	-	-	46.07
Subtotal - LTSS		19,636.5	\$ 156.99	\$ 256.89	30.1	\$ 863.30	\$ 2.16	\$ 259.06
Behavioral Health								
IP Psych Hospital - API	Days	24.7	\$ 1,385.68	\$ 2.85	-	\$ 0.00	\$ 0.00	\$ 2.85
IP Psych Hospital - All Other	Days	144.0	750.80	9.01	-	-	-	9.01
IP General Hospital - MH/SA	Days	34.2	2,700.39	7.71	0.7	3,932.02	0.22	7.93
OP General Hospital - MH/SA	Visits	0.2	1,117.51	0.02	-	-	-	0.02
Screening	Procedures	24.2	43.85	0.09	4.6	608.07	0.23	0.32
Assessment	Procedures	36.1	190.48	0.57	6.3	599.32	0.31	0.89
Crisis Services	Procedures	40.4	129.99	0.44	13.4	609.93	0.68	1.12
Medication Services	Procedures	193.5	28.59	0.46	6.4	605.39	0.32	0.78
Methadone Medication Services	Procedures	494.5	12.57	0.52	-	-	-	0.52
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	359.7	88.77	2.66	54.4	585.78	2.66	5.32
Family Therapy OP	Procedures	102.8	99.43	0.85	6.7	591.97	0.33	1.18
Group Therapy OP	Procedures	178.0	72.95	1.08	20.3	569.32	0.96	2.05
SBIRT	Procedures	0.8	46.31	0.00	1.1	610.36	0.06	0.06
Substance Abuse Residential	Days	105.9	262.76	2.32	60.5	468.86	2.36	4.68
Children's Residential	Days	705.4	187.86	11.04	49.7	513.95	2.13	13.17
RPTC - In State	Days	365.2	316.58	9.63	-	-	-	9.63
RPTC - Out of State	Days	272.8	364.98	8.30	-	-	-	8.30
Detoxification	Procedures	10.8	616.00	0.56	0.6	604.90	0.03	0.59
Medical Evaluation	Procedures	24.4	212.78	0.43	0.1	531.83	0.00	0.44
Psychological Testing	Procedures	86.6	302.24	2.18	0.1	610.80	0.00	2.18
Peer Support Services	Units	73.6	17.02	0.10	-	-	-	0.10
Psychosocial Rehabilitation Services	Procedures	1,381.8	190.39	21.92	179.7	608.41	9.11	31.03
BH Case Management	Units	998.1	16.05	1.33	28.4	219.82	0.52	1.86
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	9.9	101.00	0.08	0.6	577.78	0.03	0.11
Other Professional MH/SA	Visits	83.4	40.72	0.28	11.0	618.95	0.57	0.85
Subtotal - Behavioral Health		5,751.1	\$ 176.20	\$ 84.45	444.4	\$ 554.39	\$ 20.53	\$ 104.98
Total All Services		51,883.4	\$ 173.89	\$ 751.84	5,235.0	\$ 357.93	\$ 156.15	\$ 907.99

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year:		SFY 2017						
Population:		All Populations						
Rate Cell:		All Rate Cells						
Region:		Fairbanks North Star Borough						
Tribal/Non-Tribal Members:		All						
Member Months:		194,281						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	296.4	\$ 2,880.27	\$ 71.13	16.8	\$ 3,219.34	\$ 4.51	\$ 75.64
Inpatient Maternity Delivery	Days	63.7	2,595.20	13.79	0.7	3,612.92	0.22	14.01
Inpatient Well Newborn	Days	22.1	2,666.61	4.90	0.3	3,962.00	0.10	5.00
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		382.1	\$ 2,820.39	\$ 89.82	17.9	\$ 3,248.53	\$ 4.83	\$ 94.65
Outpatient Hospital								
Outpatient Emergency Room	Visits	706.8	\$ 808.53	\$ 47.62	23.9	\$ 532.33	\$ 1.06	\$ 48.68
Outpatient Surgery	Visits	85.8	2,327.29	16.64	6.0	1,028.46	0.51	17.15
Outpatient Radiology	Procedures	362.1	290.77	8.77	10.6	505.16	0.44	9.22
Outpatient Pathology/Lab	Procedures	1,286.7	16.73	1.79	28.7	469.97	1.12	2.92
Outpatient Pharmacy	Procedures	146.1	124.85	1.52	2.5	457.88	0.09	1.61
Other Outpatient	Procedures	582.6	142.00	6.89	72.3	364.71	2.20	9.09
Subtotal - Outpatient Hospital		3,170.2	\$ 315.10	\$ 83.24	143.9	\$ 453.09	\$ 5.43	\$ 88.67
Professional								
Inpatient and Outpatient Surgery	Procedures	457.1	\$ 309.74	\$ 11.80	33.7	\$ 506.70	\$ 1.42	\$ 13.22
Anesthesia	Procedures	146.0	400.14	4.87	9.9	455.82	0.38	5.24
Inpatient Visits	Visits	430.6	246.67	8.85	17.0	329.60	0.47	9.32
Emergency Room	Visits	755.2	166.74	10.49	22.7	144.93	0.27	10.77
Office/Home Visits/Consults	Visits	2,388.6	115.20	22.93	80.5	106.71	0.72	23.65
Maternity	Procedures	56.0	707.02	3.30	6.2	1,270.89	0.65	3.95
Pathology/Lab	Procedures	1,134.0	26.04	2.46	15.6	37.41	0.05	2.51
Radiology	Procedures	1,100.1	60.05	5.51	46.6	43.81	0.17	5.68
Office Administered Drugs	Procedures	404.3	128.21	4.32	4.1	28.16	0.01	4.33
FQHC/RHC/Tribal Clinic	Visits	438.2	244.90	8.94	1,225.8	517.44	52.85	61.80
Physical Exams	Visits	318.0	171.07	4.53	4.9	105.83	0.04	4.58
Therapy	Visits	2,013.5	96.13	16.13	3.0	37.68	0.01	16.14
Vision	Visits	630.0	100.40	5.27	2.7	145.58	0.03	5.30
Other Professional	Procedures	918.3	86.95	6.65	20.1	107.80	0.18	6.83
Telemedicine	Procedures	14.0	186.98	0.22	17.6	224.96	0.33	0.55
Subtotal - Professional		11,203.8	\$ 124.54	\$ 116.27	1,510.5	\$ 457.52	\$ 57.59	\$ 173.86
Pharmacy								
Psychotropic Drugs	Scripts	646.6	\$ 50.67	\$ 2.73	144.0	\$ 27.72	\$ 0.33	\$ 3.06
Opioid Drugs	Scripts	536.1	65.66	2.93	77.4	51.52	0.33	3.27
All Other Drugs	Scripts	4,132.0	110.80	38.15	1,028.7	74.81	6.41	44.57
Subtotal - Pharmacy		5,314.7	\$ 98.93	\$ 43.82	1,250.2	\$ 67.94	\$ 7.08	\$ 50.90
Ancillary								
Ground Transportation	Trips	944.8	\$ 69.95	\$ 5.51	0.1	\$ 286.85	\$ 0.00	\$ 5.51
Air Transportation	Trips	209.6	757.94	13.24	0.1	5,988.65	0.03	13.27
Accommodations	Claims	96.0	277.24	2.22	-	-	-	2.22
DIME/Prosthetics	Procedures	750.2	99.32	6.21	0.1	44.63	0.00	6.21
Dental	Procedures	3,042.4	148.77	37.72	220.1	445.00	8.16	45.88
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		5,042.9	\$ 154.42	\$ 64.89	220.3	\$ 446.40	\$ 8.19	\$ 73.09
LTSS								
Hospice	Days	1.0	\$ 3,290.38	\$ 0.27	-	\$ 0.00	\$ 0.00	\$ 0.27
Nursing Home	Days	-	-	-	4.9	3,335.00	1.36	1.36
Skilled Nursing Facility	Days	1,397.0	716.95	83.47	-	-	-	83.47
HCBS	Procedures	5,873.0	206.11	100.87	-	-	-	100.87
Case Management	Procedures	304.4	216.29	5.49	0.1	303.08	0.00	5.49
Personal Care	Procedures	2,006.4	88.34	14.77	-	-	-	14.77
Subtotal - LTSS		9,581.8	\$ 256.57	\$ 204.87	4.9	\$ 3,297.10	\$ 1.36	\$ 206.23
Behavioral Health								
IP Psych Hospital - API	Days	3.7	\$ 1,474.79	\$ 0.46	-	\$ 0.00	\$ 0.00	\$ 0.46
IP Psych Hospital - All Other	Days	120.8	752.26	7.57	-	-	-	7.57
IP General Hospital - MH/SA	Days	94.0	2,604.08	20.40	-	-	-	20.40
OP General Hospital - MH/SA	Visits	0.3	2,543.13	0.07	-	-	-	0.07
Screening	Procedures	23.8	42.36	0.08	2.6	610.12	0.13	0.22
Assessment	Procedures	35.1	200.31	0.59	9.1	600.19	0.45	1.04
Crisis Services	Procedures	161.1	259.82	3.49	2.7	609.05	0.13	3.62
Medication Services	Procedures	266.1	21.27	0.47	44.1	610.65	2.24	2.72
Methadone Medication Services	Procedures	480.7	12.54	0.50	-	-	-	0.50
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	488.6	100.11	4.08	22.2	582.04	1.08	5.16
Family Therapy OP	Procedures	135.4	92.71	1.05	2.0	606.61	0.10	1.15
Group Therapy OP	Procedures	211.2	77.57	1.37	0.9	588.53	0.05	1.41
SBIRT	Procedures	-	-	-	25.1	609.99	1.28	1.28
Substance Abuse Residential	Days	57.3	282.42	1.35	375.1	609.07	19.04	20.39
Children's Residential	Days	788.8	190.31	12.51	16.5	572.79	0.79	13.30
RPTC - In State	Days	116.3	331.80	3.22	-	-	-	3.22
RPTC - Out of State	Days	335.1	369.92	10.33	-	-	-	10.33
Detoxification	Procedures	0.4	616.00	0.02	49.8	608.61	2.52	2.54
Medical Evaluation	Procedures	14.2	241.04	0.29	11.6	609.78	0.59	0.88
Psychological Testing	Procedures	27.7	427.83	0.99	0.5	421.58	0.02	1.00
Peer Support Services	Units	122.1	17.00	0.17	-	-	-	0.17
Psychosocial Rehabilitation Services	Procedures	1,848.9	214.70	33.08	359.0	609.86	18.25	51.33
BH Case Management	Units	1,391.2	16.05	1.86	57.8	467.26	2.25	4.11
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	46.0	63.56	0.24	1.2	615.35	0.06	0.31
Other Professional MH/SA	Visits	102.8	47.03	0.40	20.1	610.46	1.02	1.42
Subtotal - Behavioral Health		6,871.5	\$ 182.61	\$ 104.57	1,000.4	\$ 599.89	\$ 50.01	\$ 154.58
Total All Services		41,567.1	\$ 204.24	\$ 707.48	4,147.9	\$ 389.09	\$ 134.49	\$ 841.97

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year:		SFY 2017						
Population:		All Populations						
Rate Cell:		All Rate Cells						
Region:		Gulf Coast/Aleutian Region						
Tribal/Non-Tribal Members:		All						
Member Months:		110,414						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	181.0	\$ 3,362.78	\$ 50.71	149.5	\$ 3,226.88	\$ 40.21	\$ 90.92
Inpatient Maternity Delivery	Days	23.4	3,419.22	6.66	26.5	3,245.23	7.17	13.83
Inpatient Well Newborn	Days	16.0	3,631.67	4.84	13.5	3,292.26	3.70	8.53
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		220.3	\$ 3,388.27	\$ 62.20	189.5	\$ 3,234.09	\$ 51.08	\$ 113.29
Outpatient Hospital								
Outpatient Emergency Room	Visits	195.4	\$ 1,134.96	\$ 18.48	223.5	\$ 565.51	\$ 10.53	\$ 29.01
Outpatient Surgery	Visits	51.7	3,180.69	13.71	84.1	919.73	6.45	20.16
Outpatient Radiology	Procedures	211.7	361.72	6.38	97.2	549.23	4.45	10.83
Outpatient Pathology/Lab	Procedures	479.6	14.11	0.56	481.5	545.43	21.88	22.45
Outpatient Pharmacy	Procedures	179.8	293.28	4.39	47.6	586.29	2.33	6.72
Other Outpatient	Procedures	634.9	161.01	8.52	867.8	449.01	32.47	40.99
Subtotal - Outpatient Hospital		1,753.2	\$ 356.29	\$ 52.05	1,801.6	\$ 520.24	\$ 78.11	\$ 130.16
Professional								
Inpatient and Outpatient Surgery	Procedures	222.9	\$ 404.38	\$ 7.51	165.4	\$ 373.01	\$ 5.14	\$ 12.65
Anesthesia	Procedures	86.1	404.82	2.90	71.3	398.17	2.37	5.27
Inpatient Visits	Visits	239.9	247.96	4.96	133.6	277.82	3.09	8.05
Emergency Room	Visits	191.7	169.00	2.70	125.7	134.87	1.41	4.11
Office/Home Visits/Consults	Visits	1,082.0	117.96	10.64	1,195.9	100.52	10.02	20.65
Maternity	Procedures	26.6	685.38	1.52	17.8	1,026.74	1.53	3.05
Pathology/Lab	Procedures	898.3	17.52	1.31	337.6	20.02	0.56	1.87
Radiology	Procedures	658.2	155.87	8.55	295.2	43.16	1.06	9.61
Office Administered Drugs	Procedures	149.7	90.92	1.13	56.4	34.77	0.16	1.30
FQHC/RHC/Tribal Clinic	Visits	497.2	292.39	12.12	1,169.4	556.07	54.19	66.31
Physical Exams	Visits	95.2	143.84	1.14	97.7	100.98	0.82	1.96
Therapy	Visits	197.7	117.39	1.93	10.5	155.54	0.14	2.07
Vision	Visits	518.0	94.80	4.09	16.0	123.61	0.16	4.26
Other Professional	Procedures	560.5	78.62	3.67	135.0	82.43	0.93	4.60
Telemedicine	Procedures	3.5	149.97	0.04	60.8	273.83	1.39	1.43
Subtotal - Professional		5,427.4	\$ 141.99	\$ 64.22	3,888.3	\$ 256.06	\$ 82.97	\$ 147.19
Pharmacy								
Psychotropic Drugs	Scripts	319.4	\$ 24.80	\$ 0.66	141.2	\$ 16.98	\$ 0.20	\$ 0.86
Opioid Drugs	Scripts	239.0	53.86	1.07	121.5	22.57	0.23	1.30
All Other Drugs	Scripts	2,221.7	110.09	20.38	1,430.2	79.42	9.47	29.85
Subtotal - Pharmacy		2,780.1	\$ 95.46	\$ 22.12	1,692.8	\$ 70.13	\$ 9.89	\$ 32.01
Ancillary								
Ground Transportation	Trips	2,231.7	\$ 41.99	\$ 7.81	-	\$ 0.00	\$ 0.00	\$ 7.81
Air Transportation	Trips	1,000.1	711.78	59.32	5.2	4,893.29	2.13	61.45
Accommodations	Claims	475.9	351.15	13.93	-	-	-	13.93
DIME/Prosthetics	Procedures	600.4	98.50	4.93	0.5	24.36	0.00	4.93
Dental	Procedures	1,684.3	118.49	16.63	763.8	448.19	28.53	45.16
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		5,992.3	\$ 205.49	\$ 102.61	769.6	\$ 478.02	\$ 30.66	\$ 133.27
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Nursing Home	Days	29.9	721.10	1.80	5.5	1,432.61	0.66	2.46
Skilled Nursing Facility	Days	1,621.8	893.18	120.71	-	-	-	120.71
HCBS	Procedures	4,323.4	227.20	81.85	-	-	-	81.85
Case Management	Procedures	166.5	229.32	3.18	40.6	304.49	1.03	4.21
Personal Care	Procedures	3,487.9	72.99	21.22	-	-	-	21.22
Subtotal - LTSS		9,629.5	\$ 285.07	\$ 228.76	46.2	\$ 439.86	\$ 1.69	\$ 230.45
Behavioral Health								
IP Psych Hospital - API	Days	33.3	\$ 1,488.49	\$ 4.13	-	\$ 0.00	\$ 0.00	\$ 4.13
IP Psych Hospital - All Other	Days	40.1	754.07	2.52	-	-	-	2.52
IP General Hospital - MH/SA	Days	31.3	2,990.44	7.80	0.2	3,335.00	0.06	7.86
OP General Hospital - MH/SA	Visits	6.1	56.24	0.03	-	-	-	0.03
Screening	Procedures	18.5	41.97	0.06	7.6	610.61	0.39	0.45
Assessment	Procedures	24.6	188.70	0.39	26.1	608.65	1.32	1.71
Crisis Services	Procedures	10.2	85.54	0.07	67.5	608.87	3.42	3.50
Medication Services	Procedures	161.2	28.63	0.38	0.7	605.17	0.03	0.42
Methadone Medication Services	Procedures	0.9	12.50	0.00	-	-	-	0.00
Other Opioid Medication Services	Procedures	0.1	179.98	0.00	-	-	-	0.00
Individual Therapy OP	Procedures	196.6	89.24	1.46	104.4	588.95	5.13	6.59
Family Therapy OP	Procedures	32.6	105.39	0.29	19.6	601.61	0.98	1.27
Group Therapy OP	Procedures	128.1	72.74	0.78	15.7	607.27	0.79	1.57
SBIRT	Procedures	-	-	-	0.7	613.83	0.03	0.03
Substance Abuse Residential	Days	5.2	291.56	0.13	311.8	561.25	14.58	14.71
Children's Residential	Days	335.9	201.03	5.63	262.4	503.22	11.00	16.63
RPTC - In State	Days	228.5	354.33	6.75	-	-	-	6.75
RPTC - Out of State	Days	99.7	396.78	3.30	-	-	-	3.30
Detoxification	Procedures	3.9	616.00	0.20	0.3	611.67	0.02	0.22
Medical Evaluation	Procedures	6.5	210.02	0.11	0.2	412.08	0.01	0.12
Psychological Testing	Procedures	23.9	551.78	1.10	0.1	192.76	0.00	1.10
Peer Support Services	Units	-	-	-	-	-	-	-
Psychosocial Rehabilitation Services	Procedures	681.4	128.07	7.27	207.4	610.57	10.55	17.82
BH Case Management	Units	268.4	16.26	0.36	102.3	277.70	2.37	2.73
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	6.4	105.97	0.06	27.5	568.20	1.30	1.36
Other Professional MH/SA	Visits	43.1	39.46	0.14	29.8	568.55	1.41	1.55
Subtotal - Behavioral Health		2,386.6	\$ 215.98	\$ 42.95	1,184.1	\$ 541.19	\$ 53.40	\$ 96.36
Total All Services		28,189.3	\$ 244.74	\$ 574.92	9,572.2	\$ 385.88	\$ 307.81	\$ 882.73

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year:		SFY 2017						
Population:		All Populations						
Rate Cell:		All Rate Cells						
Region:		Kenai Peninsula Borough						
Tribal/Non-Tribal Members:		All						
Member Months:		194,015						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid
		Utilization per 1,000	Paid per Unit	PMPM	Utilization per 1,000	Paid per Unit	PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	342.0	\$ 3,391.78	\$ 96.66	22.1	\$ 3,269.97	\$ 6.03	\$ 102.69
Inpatient Maternity Delivery	Days	46.4	3,460.61	13.38	4.1	3,028.51	1.05	14.42
Inpatient Well Newborn	Days	24.2	3,697.16	7.47	1.7	3,216.22	0.46	7.93
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		412.6	\$ 3,417.47	\$ 117.51	28.0	\$ 3,230.93	\$ 7.54	\$ 125.05
Outpatient Hospital								
Outpatient Emergency Room	Visits	567.9	\$ 973.57	\$ 46.07	31.9	\$ 580.00	\$ 1.54	\$ 47.61
Outpatient Surgery	Visits	115.9	2,999.37	28.97	8.7	1,023.82	0.74	29.72
Outpatient Radiology	Procedures	482.9	351.19	14.13	12.4	502.73	0.52	14.65
Outpatient Pathology/Lab	Procedures	1,458.0	26.63	3.24	55.4	462.19	2.13	5.37
Outpatient Pharmacy	Procedures	183.8	175.56	2.69	4.0	490.89	0.16	2.85
Other Outpatient	Procedures	1,486.0	99.42	12.31	83.4	363.73	2.53	14.84
Subtotal - Outpatient Hospital		4,294.4	\$ 300.14	\$ 107.41	195.8	\$ 467.60	\$ 7.63	\$ 115.04
Professional								
Inpatient and Outpatient Surgery	Procedures	615.7	\$ 347.22	\$ 17.82	24.9	\$ 380.25	\$ 0.79	\$ 18.61
Anesthesia	Procedures	167.1	372.23	5.18	9.8	426.11	0.35	5.53
Inpatient Visits	Visits	476.4	221.57	8.80	20.0	284.87	0.48	9.27
Emergency Room	Visits	587.8	165.76	8.12	32.3	145.98	0.39	8.51
Office/Home Visits/Consults	Visits	3,075.0	115.98	29.72	127.5	103.25	1.10	30.82
Maternity	Procedures	42.2	897.70	3.16	1.9	1,005.82	0.16	3.32
Pathology/Lab	Procedures	2,262.8	26.51	5.00	28.7	29.23	0.07	5.07
Radiology	Procedures	1,456.1	100.41	12.18	62.7	46.33	0.24	12.43
Office Administered Drugs	Procedures	378.5	138.53	4.37	3.5	33.30	0.01	4.38
FQHC/RHC/Tribal Clinic	Visits	788.6	256.32	16.84	509.6	544.23	23.11	39.96
Physical Exams	Visits	274.2	152.93	3.49	8.9	106.71	0.08	3.57
Therapy	Visits	1,756.0	153.43	22.45	0.1	90.50	0.00	22.45
Vision	Visits	563.3	107.44	5.04	3.8	112.76	0.04	5.08
Other Professional	Procedures	1,091.5	83.40	7.59	30.1	78.63	0.20	7.78
Telemedicine	Procedures	22.6	133.92	0.25	11.4	242.31	0.23	0.48
Subtotal - Professional		13,557.9	\$ 132.78	\$ 150.02	875.3	\$ 373.46	\$ 27.24	\$ 177.26
Pharmacy								
Psychotropic Drugs	Scripts	801.4	\$ 40.12	\$ 2.68	14.2	\$ 15.14	\$ 0.02	\$ 2.70
Opioid Drugs	Scripts	923.7	73.54	5.66	15.5	21.86	0.03	5.69
All Other Drugs	Scripts	5,662.7	133.52	63.01	195.8	146.47	2.39	65.40
Subtotal - Pharmacy		7,387.8	\$ 115.89	\$ 71.35	225.4	\$ 129.63	\$ 2.44	\$ 73.78
Ancillary								
Ground Transportation	Trips	1,454.1	\$ 71.96	\$ 8.72	0.1	\$ 430.38	\$ 0.00	\$ 8.72
Air Transportation	Trips	288.5	630.14	15.15	0.1	11,729.45	0.12	15.27
Accommodations	Claims	106.2	339.20	3.00	-	-	-	3.00
DIME/Prosthetics	Procedures	1,647.8	91.06	12.50	0.1	13.60	0.00	12.50
Dental	Procedures	2,787.6	122.74	28.51	240.5	395.15	7.92	36.43
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		6,284.2	\$ 129.64	\$ 67.89	240.8	\$ 400.89	\$ 8.05	\$ 75.93
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Nursing Home	Days	42.8	593.74	2.12	0.1	3,335.00	0.03	2.15
Skilled Nursing Facility	Days	1,964.4	651.86	106.71	21.6	1,042.66	1.88	108.59
HCBS	Procedures	9,602.8	177.52	142.06	-	-	-	142.06
Case Management	Procedures	482.0	227.73	9.15	1.1	357.47	0.03	9.18
Personal Care	Procedures	6,439.9	100.12	53.73	-	-	-	53.73
Subtotal - LTSS		18,531.9	\$ 203.17	\$ 313.76	22.8	\$ 1,023.52	\$ 1.95	\$ 315.71
Behavioral Health								
IP Psych Hospital - API	Days	7.5	\$ 1,424.78	\$ 0.90	-	\$ 0.00	\$ 0.00	\$ 0.90
IP Psych Hospital - All Other	Days	27.5	753.33	1.73	-	-	-	1.73
IP General Hospital - MH/SA	Days	18.4	2,881.98	4.43	-	-	-	4.43
OP General Hospital - MH/SA	Visits	5.8	61.42	0.03	-	-	-	0.03
Screening	Procedures	40.3	39.54	0.13	4.3	611.36	0.22	0.35
Assessment	Procedures	46.8	205.70	0.80	5.1	603.10	0.25	1.06
Crisis Services	Procedures	13.1	122.79	0.13	8.8	608.43	0.45	0.58
Medication Services	Procedures	58.1	47.86	0.23	-	-	-	0.23
Methadone Medication Services	Procedures	-	-	-	-	-	-	-
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	557.0	88.40	4.10	95.1	603.94	4.79	8.89
Family Therapy OP	Procedures	91.4	107.98	0.82	3.5	608.34	0.18	1.00
Group Therapy OP	Procedures	260.3	88.40	1.92	8.0	602.69	0.40	2.32
SBIRT	Procedures	-	-	-	0.1	609.50	0.01	0.01
Substance Abuse Residential	Days	231.7	173.26	3.35	21.8	596.42	1.08	4.43
Children's Residential	Days	333.1	221.51	6.15	43.9	369.47	1.35	7.50
RPTC - In State	Days	115.3	365.34	3.51	-	-	-	3.51
RPTC - Out of State	Days	159.3	366.57	4.87	-	-	-	4.87
Detoxification	Procedures	5.8	616.00	0.30	-	-	-	0.30
Medical Evaluation	Procedures	10.4	221.03	0.19	0.1	221.17	0.00	0.19
Psychological Testing	Procedures	56.8	399.37	1.89	-	-	-	1.89
Peer Support Services	Units	3.0	17.00	0.00	0.1	301.50	0.00	0.01
Psychosocial Rehabilitation Services	Procedures	2,451.0	167.51	34.21	353.8	610.39	18.00	52.21
BH Case Management	Units	1,866.5	16.04	2.50	141.2	247.86	2.92	5.41
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	16.0	72.54	0.10	0.1	603.00	0.01	0.10
Other Professional MH/SA	Visits	112.6	40.81	0.38	12.2	610.42	0.62	1.01
Subtotal - Behavioral Health		6,487.6	\$ 134.41	\$ 72.67	698.2	\$ 520.36	\$ 30.28	\$ 102.94
Total All Services		56,956.4	\$ 189.74	\$ 900.60	2,286.4	\$ 446.73	\$ 85.12	\$ 985.71

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year: SFY 2017
Population: All Populations
Rate Cell: All Rate Cells
Region: MatSu Borough
Tribal/Non-Tribal Members: All
Member Months: 333,757

Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	317.2	\$ 3,090.07	\$ 81.69	28.1	\$ 3,270.10	\$ 7.66	\$ 89.35
Inpatient Maternity Delivery	Days	41.3	2,868.70	9.87	6.5	3,191.00	1.72	11.59
Inpatient Well Newborn	Days	24.0	2,927.21	5.86	3.3	3,283.91	0.91	6.76
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		382.5	\$ 3,055.95	\$ 97.41	37.9	\$ 3,257.80	\$ 10.29	\$ 107.70
Outpatient Hospital								
Outpatient Emergency Room	Visits	466.3	\$ 610.21	\$ 23.71	49.8	\$ 527.78	\$ 2.19	\$ 25.90
Outpatient Surgery	Visits	100.0	2,788.52	23.24	9.6	937.11	0.75	24.00
Outpatient Radiology	Procedures	161.5	196.90	2.65	13.7	501.64	0.57	3.22
Outpatient Pathology/Lab	Procedures	982.3	15.68	1.28	100.7	489.66	4.11	5.39
Outpatient Pharmacy	Procedures	124.8	126.16	1.31	1.7	466.11	0.07	1.38
Other Outpatient	Procedures	403.4	136.47	4.59	87.0	379.43	2.75	7.34
Subtotal - Outpatient Hospital		2,238.4	\$ 304.44	\$ 56.79	262.5	\$ 477.27	\$ 10.44	\$ 67.23
Professional								
Inpatient and Outpatient Surgery	Procedures	649.7	\$ 327.98	\$ 17.76	25.6	\$ 407.06	\$ 0.87	\$ 18.62
Anesthesia	Procedures	154.0	429.65	5.51	12.3	455.21	0.47	5.98
Inpatient Visits	Visits	471.0	238.14	9.35	22.6	253.62	0.48	9.82
Emergency Room	Visits	541.9	162.48	7.34	51.7	145.48	0.63	7.96
Office/Home Visits/Consults	Visits	3,215.2	116.88	31.32	67.7	113.44	0.64	31.96
Maternity	Procedures	62.5	585.25	3.05	3.7	977.04	0.30	3.35
Pathology/Lab	Procedures	2,718.7	23.07	5.23	11.2	60.24	0.06	5.28
Radiology	Procedures	1,384.7	101.33	11.69	96.5	44.15	0.35	12.05
Office Administered Drugs	Procedures	440.4	193.85	7.11	1.0	35.75	0.00	7.12
FQHC/RHC/Tribal Clinic	Visits	500.7	225.08	9.39	381.3	567.47	18.03	27.42
Physical Exams	Visits	355.3	164.43	4.87	5.0	141.82	0.06	4.93
Therapy	Visits	1,455.8	169.51	20.56	1.5	29.70	0.00	20.57
Vision	Visits	625.0	97.17	5.06	3.7	153.73	0.05	5.11
Other Professional	Procedures	1,108.0	92.91	8.58	30.0	60.99	0.15	8.73
Telemedicine	Procedures	6.3	137.57	0.07	1.2	354.70	0.03	0.11
Subtotal - Professional		13,689.1	\$ 128.76	\$ 146.89	714.9	\$ 371.41	\$ 22.13	\$ 169.02
Pharmacy								
Psychotropic Drugs	Scripts	950.6	\$ 44.79	\$ 3.55	75.1	\$ 29.14	\$ 0.18	\$ 3.73
Opioid Drugs	Scripts	765.2	84.96	5.42	23.6	61.66	0.12	5.54
All Other Drugs	Scripts	5,330.5	124.88	55.47	484.1	83.85	3.38	58.85
Subtotal - Pharmacy		7,046.3	\$ 109.74	\$ 64.44	582.7	\$ 75.90	\$ 3.69	\$ 68.12
Ancillary								
Ground Transportation	Trips	690.9	\$ 111.05	\$ 6.39	0.0	\$ 573.90	\$ 0.00	\$ 6.40
Air Transportation	Trips	31.1	1,322.70	3.43	0.1	7,212.25	0.06	3.49
Accommodations	Claims	16.9	470.76	0.66	-	-	-	0.66
DIME/Prosthetics	Procedures	1,304.5	99.68	10.84	-	-	-	10.84
Dental	Procedures	3,585.1	121.07	36.17	91.9	457.37	3.50	39.67
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		5,628.5	\$ 122.57	\$ 57.49	92.1	\$ 465.33	\$ 3.57	\$ 61.06
LTSS								
Hospice	Days	1.1	\$ 2,630.93	\$ 0.24	-	\$ 0.00	\$ 0.00	\$ 0.24
Nursing Home	Days	216.9	95.32	1.72	0.1	3,235.00	0.04	1.76
Skilled Nursing Facility	Days	15.1	578.04	0.73	-	-	-	0.73
HCBS	Procedures	9,163.7	165.85	126.65	0.2	370.00	0.01	126.65
Case Management	Procedures	347.3	225.06	6.51	3.8	242.55	0.08	6.59
Personal Care	Procedures	4,652.7	81.58	31.63	-	-	-	31.63
Subtotal - LTSS		14,396.7	\$ 139.60	\$ 167.48	4.1	\$ 353.14	\$ 0.12	\$ 167.60
Behavioral Health								
IP Psych Hospital - API	Days	15.4	\$ 1,500.70	\$ 1.93	-	\$ 0.00	\$ 0.00	\$ 1.93
IP Psych Hospital - All Other	Days	106.9	771.20	6.87	-	-	-	6.87
IP General Hospital - MH/SA	Days	20.9	2,691.76	4.69	-	-	-	4.69
OP General Hospital - MH/SA	Visits	1.9	57.05	0.01	-	-	-	0.01
Screening	Procedures	44.7	40.39	0.15	1.0	609.96	0.05	0.20
Assessment	Procedures	42.0	196.86	0.69	1.5	590.12	0.08	0.76
Crisis Services	Procedures	31.4	104.15	0.27	1.7	609.99	0.08	0.36
Medication Services	Procedures	59.2	25.40	0.13	0.4	607.73	0.02	0.15
Methadone Medication Services	Procedures	109.2	12.56	0.11	-	-	-	0.11
Other Opioid Medication Services	Procedures	0.3	20.72	0.00	-	-	-	0.00
Individual Therapy OP	Procedures	444.6	89.36	3.31	7.2	585.01	0.35	3.66
Family Therapy OP	Procedures	114.4	103.85	0.99	0.6	573.22	0.03	1.02
Group Therapy OP	Procedures	201.2	74.89	1.26	3.2	576.08	0.15	1.41
SBIRT	Procedures	0.5	38.83	0.00	0.5	612.00	0.02	0.03
Substance Abuse Residential	Days	67.5	238.62	1.34	33.4	481.68	1.34	2.68
Children's Residential	Days	640.5	199.57	10.65	22.4	522.98	0.97	11.63
RPTC - In State	Days	308.9	309.27	7.96	-	-	-	7.96
RPTC - Out of State	Days	245.4	365.27	7.47	-	-	-	7.47
Detoxification	Procedures	4.6	616.00	0.24	0.5	604.00	0.02	0.26
Medical Evaluation	Procedures	24.3	212.31	0.43	0.1	609.50	0.00	0.43
Psychological Testing	Procedures	126.7	263.56	2.78	-	-	-	2.78
Peer Support Services	Units	280.8	17.19	0.40	-	-	-	0.40
Psychosocial Rehabilitation Services	Procedures	1,461.0	179.70	21.88	8.3	609.02	0.42	22.30
BH Case Management	Units	998.3	16.06	1.34	6.2	105.92	0.05	1.39
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	33.8	169.17	0.48	-	-	-	0.48
Other Professional MH/SA	Visits	111.9	41.64	0.39	1.5	611.36	0.08	0.47
Subtotal - Behavioral Health		5,496.4	\$ 165.41	\$ 75.76	88.3	\$ 500.03	\$ 3.68	\$ 79.44
Total All Services		48,877.9	\$ 163.57	\$ 666.26	1,782.5	\$ 362.94	\$ 53.91	\$ 720.17

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year:		SFY 2017						
Population:		All Populations						
Rate Cell:		All Rate Cells						
Region:		Northern Southeast Region						
Tribal/Non-Tribal Members:		All						
Member Months:		143,993						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid
		Utilization per 1,000	Paid per Unit	PMPM	Utilization per 1,000	Paid per Unit	PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	355.8	\$ 3,104.68	\$ 92.05	87.2	\$ 3,162.74	\$ 22.97	\$ 115.02
Inpatient Maternity Delivery	Days	40.4	2,676.28	9.01	8.0	3,040.78	2.03	11.04
Inpatient Well Newborn	Days	18.0	2,818.93	4.23	3.3	3,052.82	0.83	5.06
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		414.2	\$ 3,050.46	\$ 105.29	98.4	\$ 3,149.20	\$ 25.83	\$ 131.12
Outpatient Hospital								
Outpatient Emergency Room	Visits	617.9	\$ 799.51	\$ 41.17	78.7	\$ 581.43	\$ 3.81	\$ 44.98
Outpatient Surgery	Visits	68.6	2,571.68	14.70	34.0	855.37	2.42	17.12
Outpatient Radiology	Procedures	234.9	403.02	7.89	60.0	569.27	2.85	10.74
Outpatient Pathology/Lab	Procedures	913.0	59.98	4.56	152.2	566.81	7.19	11.75
Outpatient Pharmacy	Procedures	265.3	249.54	5.52	12.1	586.71	0.59	6.11
Other Outpatient	Procedures	1,131.7	140.87	13.29	530.6	347.49	15.37	28.65
Subtotal - Outpatient Hospital		3,231.3	\$ 323.53	\$ 87.12	867.5	\$ 445.75	\$ 32.23	\$ 119.34
Professional								
Inpatient and Outpatient Surgery	Procedures	367.9	\$ 303.40	\$ 9.30	87.9	\$ 412.89	\$ 3.03	\$ 12.33
Anesthesia	Procedures	110.9	362.11	3.35	41.1	314.31	1.08	4.42
Inpatient Visits	Visits	409.4	258.85	8.83	95.8	243.08	1.94	10.77
Emergency Room	Visits	613.0	159.27	8.14	62.8	125.71	0.66	8.79
Office/Home Visits/Consults	Visits	1,715.0	108.30	15.48	332.9	125.92	3.49	18.97
Maternity	Procedures	37.3	612.15	1.90	7.3	910.34	0.56	2.46
Pathology/Lab	Procedures	1,099.3	27.01	2.47	62.9	33.30	0.17	2.65
Radiology	Procedures	943.0	68.18	5.36	138.4	50.05	0.58	5.93
Office Administered Drugs	Procedures	134.3	96.69	1.08	12.8	52.80	0.06	1.14
FQHC/RHC/Tribal Clinic	Visits	342.3	254.35	7.25	1,871.9	484.27	75.54	82.80
Physical Exams	Visits	190.2	144.25	2.29	17.0	99.31	0.14	2.43
Therapy	Visits	353.0	187.58	5.52	2.3	99.51	0.02	5.54
Vision	Visits	437.9	84.91	3.10	13.2	158.53	0.17	3.27
Other Professional	Procedures	647.6	80.54	4.35	75.2	73.25	0.46	4.81
Telemedicine	Procedures	5.8	53.58	0.03	44.2	248.69	0.92	0.94
Subtotal - Professional		7,406.8	\$ 127.08	\$ 78.44	2,865.7	\$ 371.88	\$ 88.81	\$ 167.25
Pharmacy								
Psychotropic Drugs	Scripts	531.6	\$ 51.38	\$ 2.28	159.1	\$ 10.96	\$ 0.15	\$ 2.42
Opioid Drugs	Scripts	536.9	71.58	3.20	116.4	17.52	0.17	3.37
All Other Drugs	Scripts	3,073.5	164.18	42.05	1,482.4	53.59	6.62	48.67
Subtotal - Pharmacy		4,142.0	\$ 137.70	\$ 47.53	1,757.9	\$ 47.35	\$ 6.94	\$ 54.47
Ancillary								
Ground Transportation	Trips	1,533.9	\$ 73.07	\$ 9.34	-	\$ 0.00	\$ 0.00	\$ 9.34
Air Transportation	Trips	597.3	920.87	45.83	-	-	-	45.83
Accommodations	Claims	332.3	322.32	8.92	-	-	-	8.92
DME/Prosthetics	Procedures	777.5	92.67	6.00	0.1	124.58	0.00	6.01
Dental	Procedures	1,772.8	157.98	23.34	813.9	438.16	29.72	53.05
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		5,013.8	\$ 223.65	\$ 93.44	814.0	\$ 438.13	\$ 29.72	\$ 123.16
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.12	-	\$ 0.00	\$ 0.00	\$ 0.12
Nursing Home	Days	520.6	111.67	4.84	6.3	826.95	0.43	5.28
Skilled Nursing Facility	Days	2,623.5	596.01	130.30	-	-	-	130.30
HCBS	Procedures	7,111.0	203.17	120.40	-	-	-	120.40
Case Management	Procedures	305.2	249.46	6.34	0.1	303.08	0.00	6.35
Personal Care	Procedures	2,485.5	61.62	12.76	-	-	-	12.76
Subtotal - LTSS		13,045.7	\$ 252.75	\$ 274.77	6.3	\$ 820.06	\$ 0.43	\$ 275.20
Behavioral Health								
IP Psych Hospital - API	Days	15.2	\$ 1,525.80	\$ 1.93	-	\$ 0.00	\$ 0.00	\$ 1.93
IP Psych Hospital - All Other	Days	45.1	749.95	2.82	-	-	-	2.82
IP General Hospital - MH/SA	Days	64.8	2,676.27	14.44	-	-	-	14.44
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	54.5	38.53	0.18	17.2	608.24	0.87	1.05
Assessment	Procedures	81.0	259.19	1.75	19.7	604.07	0.99	2.74
Crisis Services	Procedures	43.8	161.38	0.59	19.6	604.84	0.99	1.58
Medication Services	Procedures	879.5	31.73	2.33	-	-	-	2.33
Methadone Medication Services	Procedures	18.3	12.51	0.02	-	-	-	0.02
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	556.9	81.32	3.77	126.2	579.31	6.09	9.87
Family Therapy OP	Procedures	128.8	85.76	0.92	17.1	392.85	0.56	1.48
Group Therapy OP	Procedures	523.6	75.56	3.30	8.8	469.34	0.34	3.64
SBIRT	Procedures	1.5	43.80	0.01	0.8	608.20	0.04	0.05
Substance Abuse Residential	Days	434.9	205.95	7.46	87.1	577.48	4.19	11.65
Children's Residential	Days	738.2	187.23	11.52	23.3	420.16	0.81	12.33
RPTC - In State	Days	68.9	355.65	2.04	-	-	-	2.04
RPTC - Out of State	Days	250.7	375.26	7.84	-	-	-	7.84
Detoxification	Procedures	5.9	616.00	0.30	0.3	607.33	0.01	0.32
Medical Evaluation	Procedures	13.8	236.24	0.27	0.8	213.92	0.01	0.29
Psychological Testing	Procedures	41.6	414.98	1.44	1.0	143.56	0.01	1.45
Peer Support Services	Units	1.9	17.00	0.00	-	-	-	0.00
Psychosocial Rehabilitation Services	Procedures	3,060.2	196.46	50.10	148.6	609.06	7.54	57.64
BH Case Management	Units	1,035.7	16.10	1.39	28.2	230.01	0.54	1.93
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	25.5	82.85	0.18	23.6	593.04	1.17	1.34
Other Professional MH/SA	Visits	172.6	40.68	0.59	45.9	609.30	2.33	2.92
Subtotal - Behavioral Health		8,262.9	\$ 167.26	\$ 115.17	567.9	\$ 560.03	\$ 26.51	\$ 141.68
Total All Services		41,516.7	\$ 231.74	\$ 801.76	6,977.9	\$ 361.93	\$ 210.46	\$ 1,012.22

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year: SFY 2017
 Population: All Populations
 Rate Cell: All Rate Cells
 Region: Northern and Interior Region
 Tribal/Non-Tribal Members: All
 Member Months: 86,224

Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	200.8	\$ 2,928.28	\$ 49.01	173.4	\$ 3,296.83	\$ 47.64	\$ 96.65
Inpatient Maternity Delivery	Days	29.4	2,801.72	6.86	29.6	3,260.26	8.05	14.91
Inpatient Well Newborn	Days	11.3	2,715.01	2.55	16.4	3,150.47	4.31	6.86
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		241.5	\$ 2,902.93	\$ 58.41	219.5	\$ 3,280.94	\$ 60.01	\$ 118.42
Outpatient Hospital								
Outpatient Emergency Room	Visits	234.8	\$ 877.76	\$ 17.17	300.3	\$ 584.08	\$ 14.62	\$ 31.79
Outpatient Surgery	Visits	64.0	2,047.14	10.92	41.1	1,013.28	3.47	14.39
Outpatient Radiology	Procedures	157.7	394.29	5.18	96.6	553.07	4.45	9.63
Outpatient Pathology/Lab	Procedures	437.6	16.20	0.59	350.4	538.24	15.72	16.31
Outpatient Pharmacy	Procedures	53.7	140.71	0.63	50.7	530.60	2.24	2.87
Other Outpatient	Procedures	156.3	190.54	2.48	767.7	456.42	29.20	31.68
Subtotal - Outpatient Hospital		1,104.1	\$ 401.92	\$ 36.98	1,606.7	\$ 520.50	\$ 69.69	\$ 106.67
Professional								
Inpatient and Outpatient Surgery	Procedures	186.1	\$ 382.34	\$ 5.93	151.8	\$ 473.86	\$ 6.00	\$ 11.92
Anesthesia	Procedures	85.6	408.54	2.91	65.4	442.10	2.41	5.32
Inpatient Visits	Visits	248.0	259.30	5.36	138.3	312.40	3.60	8.96
Emergency Room	Visits	279.7	170.55	3.98	101.9	145.83	1.24	5.21
Office/Home Visits/Consults	Visits	739.4	115.55	7.12	706.3	103.13	6.07	13.19
Maternity	Procedures	19.5	829.91	1.35	26.6	1,015.77	2.25	3.60
Pathology/Lab	Procedures	534.0	29.47	1.31	219.6	20.46	0.37	1.69
Radiology	Procedures	566.0	138.09	6.51	255.0	47.29	1.00	7.52
Office Administered Drugs	Procedures	255.9	153.80	3.28	53.2	34.31	0.15	3.43
FQHC/RHC/Tribal Clinic	Visits	114.4	303.44	2.89	1,776.8	521.13	77.16	80.05
Physical Exams	Visits	79.6	166.47	1.10	74.6	117.19	0.73	1.83
Therapy	Visits	269.3	114.50	2.57	4.0	48.57	0.02	2.59
Vision	Visits	408.6	88.35	3.01	20.6	84.04	0.14	3.15
Other Professional	Procedures	470.4	81.90	3.21	128.0	81.89	0.87	4.08
Telemedicine	Procedures	1.3	184.18	0.02	75.7	256.89	1.62	1.64
Subtotal - Professional		4,257.8	\$ 142.48	\$ 50.55	3,797.9	\$ 327.47	\$ 103.64	\$ 154.20
Pharmacy								
Psychotropic Drugs	Scripts	126.9	\$ 58.17	\$ 0.62	143.9	\$ 56.35	\$ 0.68	\$ 1.29
Opioid Drugs	Scripts	158.8	80.76	1.07	208.3	21.04	0.37	1.43
All Other Drugs	Scripts	1,236.4	133.26	13.73	2,124.1	61.48	10.88	24.61
Subtotal - Pharmacy		1,522.1	\$ 121.52	\$ 15.41	2,476.3	\$ 57.78	\$ 11.92	\$ 27.34
Ancillary								
Ground Transportation	Trips	3,392.7	\$ 39.38	\$ 11.14	0.1	\$ 487.84	\$ 0.01	\$ 11.14
Air Transportation	Trips	1,234.7	895.85	92.18	0.1	11,729.45	0.14	92.31
Accommodations	Claims	1,029.6	229.84	19.72	-	-	-	19.72
DIME/Prosthetics	Procedures	604.4	80.34	4.05	0.4	32.91	0.00	4.05
Dental	Procedures	1,646.0	146.33	20.07	728.2	511.98	31.07	51.14
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		7,907.5	\$ 223.31	\$ 147.15	728.8	\$ 513.85	\$ 31.21	\$ 178.36
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.03	-	\$ 0.00	\$ 0.00	\$ 0.03
Nursing Home	Days	4.6	707.94	0.27	5.1	3,329.59	1.43	1.70
Skilled Nursing Facility	Days	140.3	645.99	7.55	-	-	-	7.55
HCBS	Procedures	978.1	172.43	14.05	0.7	504.10	0.03	14.08
Case Management	Procedures	57.8	203.48	0.98	12.4	315.45	0.33	1.30
Personal Care	Procedures	2,121.4	61.63	10.90	426.4	43.84	1.56	12.45
Subtotal - LTSS		3,302.1	\$ 122.78	\$ 33.79	444.7	\$ 90.18	\$ 3.34	\$ 37.13
Behavioral Health								
IP Psych Hospital - API	Days	30.5	\$ 1,336.01	\$ 3.39	-	\$ 0.00	\$ 0.00	\$ 3.39
IP Psych Hospital - All Other	Days	109.0	777.59	7.06	-	-	-	7.06
IP General Hospital - MH/SA	Days	29.5	2,760.08	6.79	1.1	3,247.50	0.30	7.09
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	7.9	72.03	0.05	4.0	544.67	0.18	0.23
Assessment	Procedures	8.6	213.38	0.15	8.9	595.96	0.44	0.60
Crisis Services	Procedures	5.7	223.74	0.11	4.3	608.03	0.22	0.32
Medication Services	Procedures	47.9	23.46	0.09	15.0	608.06	0.76	0.86
Methadone Medication Services	Procedures	13.6	12.50	0.01	-	-	-	0.01
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	105.9	119.14	1.05	24.8	581.26	1.20	2.25
Family Therapy OP	Procedures	22.0	119.02	0.22	6.5	601.23	0.33	0.55
Group Therapy OP	Procedures	60.5	73.13	0.37	4.0	610.17	0.21	0.57
SBIRT	Procedures	0.3	43.80	0.00	14.5	609.75	0.74	0.74
Substance Abuse Residential	Days	103.7	284.49	2.46	159.1	475.45	6.30	8.76
Children's Residential	Days	284.7	200.54	4.76	34.8	468.96	1.36	6.12
RPTC - In State	Days	75.7	312.59	1.97	-	-	-	1.97
RPTC - Out of State	Days	143.6	306.06	3.66	-	-	-	3.66
Detoxification	Procedures	1.7	616.00	0.09	27.8	608.72	1.41	1.50
Medical Evaluation	Procedures	2.8	227.37	0.05	4.9	611.17	0.25	0.30
Psychological Testing	Procedures	17.0	525.55	0.74	-	-	-	0.74
Peer Support Services	Units	7.2	17.00	0.01	-	-	-	0.01
Psychosocial Rehabilitation Services	Procedures	604.7	269.24	13.57	39.2	610.05	2.00	15.56
BH Case Management	Units	348.1	16.05	0.47	6.0	284.70	0.14	0.61
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	9.5	54.95	0.04	10.7	614.14	0.55	0.59
Other Professional MH/SA	Visits	18.6	44.82	0.07	13.9	609.76	0.71	0.78
Subtotal - Behavioral Health		2,058.8	\$ 275.03	\$ 47.19	379.7	\$ 540.19	\$ 17.09	\$ 64.28
Total All Services		20,393.9	\$ 229.18	\$ 389.48	9,653.6	\$ 369.07	\$ 296.91	\$ 686.39

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year: SFY 2017
Population: All Populations
Rate Cell: All Rate Cells
Region: Southern Southeast Region
Tribal/Non-Tribal Members: All
Member Months: 75,086

Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	272.0	\$ 3,932.84	\$ 89.15	55.8	\$ 3,243.59	\$ 15.08	\$ 104.22
Inpatient Maternity Delivery	Days	41.1	3,095.74	10.60	1.0	3,335.00	0.27	10.86
Inpatient Well Newborn	Days	25.7	3,008.23	6.45	0.6	3,335.00	0.18	6.63
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		338.8	\$ 3,761.14	\$ 106.19	57.4	\$ 3,246.14	\$ 15.52	\$ 121.71
Outpatient Hospital								
Outpatient Emergency Room	Visits	641.7	\$ 1,139.67	\$ 60.94	24.5	\$ 545.31	\$ 1.11	\$ 62.05
Outpatient Surgery	Visits	102.4	3,285.17	28.05	16.3	1,104.59	1.50	29.55
Outpatient Radiology	Procedures	445.1	501.34	18.60	18.5	528.76	0.82	19.41
Outpatient Pathology/Lab	Procedures	1,977.4	59.43	9.79	43.5	507.05	1.84	11.63
Outpatient Pharmacy	Procedures	227.7	382.56	7.26	2.6	590.98	0.13	7.39
Other Outpatient	Procedures	1,370.0	94.18	10.75	153.4	355.08	4.54	15.29
Subtotal - Outpatient Hospital		4,764.3	\$ 341.00	\$ 135.39	258.7	\$ 460.59	\$ 9.93	\$ 145.32
Professional								
Inpatient and Outpatient Surgery	Procedures	332.9	\$ 306.18	\$ 8.49	64.7	\$ 399.24	\$ 2.15	\$ 10.65
Anesthesia	Procedures	135.8	341.87	3.87	20.1	371.63	0.62	4.49
Inpatient Visits	Visits	356.4	184.88	5.49	44.9	284.81	1.07	6.56
Emergency Room	Visits	646.5	165.56	8.92	26.2	149.99	0.33	9.25
Office/Home Visits/Consults	Visits	2,297.9	114.62	21.95	132.2	106.60	1.17	23.12
Maternity	Procedures	45.9	669.93	2.56	0.5	1,031.14	0.04	2.60
Pathology/Lab	Procedures	1,015.5	22.47	1.90	10.1	79.31	0.07	1.97
Radiology	Procedures	1,158.8	70.98	6.85	85.0	46.04	0.33	7.18
Office Administered Drugs	Procedures	137.6	50.50	0.58	1.8	31.31	0.00	0.58
FQHC/RHC/Tribal Clinic	Visits	27.6	289.82	0.67	1,909.5	531.70	84.61	85.27
Physical Exams	Visits	273.3	145.70	3.32	0.6	81.82	0.00	3.32
Therapy	Visits	552.3	100.40	4.62	0.3	225.98	0.01	4.63
Vision	Visits	478.7	83.18	3.32	3.4	136.92	0.04	3.36
Other Professional	Procedures	617.9	94.92	4.89	58.3	71.86	0.35	5.24
Telemedicine	Procedures	27.2	196.99	0.45	24.6	286.23	0.59	1.03
Subtotal - Professional		8,104.2	\$ 115.31	\$ 77.87	2,382.2	\$ 460.28	\$ 91.37	\$ 169.25
Pharmacy								
Psychotropic Drugs	Scripts	628.6	\$ 53.11	\$ 2.78	255.2	\$ 6.46	\$ 0.14	\$ 2.92
Opioid Drugs	Scripts	703.4	69.83	4.09	292.6	8.21	0.20	4.29
All Other Drugs	Scripts	4,607.2	135.27	51.93	2,399.0	39.26	7.85	59.78
Subtotal - Pharmacy		5,939.1	\$ 118.82	\$ 58.81	2,946.9	\$ 33.33	\$ 8.19	\$ 66.99
Ancillary								
Ground Transportation	Trips	2,171.4	\$ 63.88	\$ 11.56	-	\$ 0.00	\$ 0.00	\$ 11.56
Air Transportation	Trips	584.1	1,154.71	56.21	-	-	-	56.21
Accommodations	Claims	401.1	340.85	11.39	-	-	-	11.39
DME/Prosthetics	Procedures	629.7	94.01	4.93	-	-	-	4.93
Dental	Procedures	2,789.5	104.18	24.22	588.4	456.97	22.41	46.63
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		6,575.8	\$ 197.66	\$ 108.31	588.4	\$ 456.97	\$ 22.41	\$ 130.72
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Nursing Home	Days	7.2	2,928.54	1.76	0.6	730.06	0.04	1.79
Skilled Nursing Facility	Days	1,129.9	868.84	81.81	-	-	-	81.81
HCBS	Procedures	4,872.7	179.46	72.87	-	-	-	72.87
Case Management	Procedures	233.2	274.93	5.34	-	-	-	5.34
Personal Care	Procedures	2,280.1	62.01	11.78	-	-	-	11.78
Subtotal - LTSS		8,523.1	\$ 244.36	\$ 173.56	0.6	\$ 730.06	\$ 0.04	\$ 173.60
Behavioral Health								
IP Psych Hospital - API	Days	3.0	\$ 1,705.42	\$ 0.43	-	\$ 0.00	\$ 0.00	\$ 0.43
IP Psych Hospital - All Other	Days	29.6	752.03	1.85	-	-	-	1.85
IP General Hospital - MH/SA	Days	45.9	2,594.30	9.92	-	-	-	9.92
OP General Hospital - MH/SA	Visits	0.6	20.80	0.00	-	-	-	0.00
Screening	Procedures	51.0	39.72	0.17	13.6	612.02	0.69	0.86
Assessment	Procedures	53.2	176.15	0.78	26.4	606.66	1.33	2.11
Crisis Services	Procedures	55.9	82.02	0.38	37.9	607.90	1.92	2.30
Medication Services	Procedures	138.9	26.57	0.31	-	-	-	0.31
Methadone Medication Services	Procedures	-	-	-	-	-	-	-
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	537.5	86.87	3.89	193.2	600.11	9.66	13.55
Family Therapy OP	Procedures	302.9	100.19	2.53	32.4	583.74	1.58	4.11
Group Therapy OP	Procedures	737.2	69.55	4.27	2.4	590.70	0.12	4.39
SBIRT	Procedures	0.3	44.45	0.00	26.2	607.54	1.33	1.33
Substance Abuse Residential	Days	460.1	262.27	10.06	53.1	580.61	2.57	12.62
Children's Residential	Days	2,050.1	187.73	32.07	329.1	574.35	15.75	47.82
RPTC - In State	Days	14.1	371.29	0.44	-	-	-	0.44
RPTC - Out of State	Days	53.1	371.86	1.64	-	-	-	1.64
Detoxification	Procedures	2.2	616.00	0.11	-	-	-	0.11
Medical Evaluation	Procedures	18.1	210.41	0.32	-	-	-	0.32
Psychological Testing	Procedures	20.8	383.16	0.66	5.4	588.75	0.27	0.93
Peer Support Services	Units	87.6	16.97	0.12	-	-	-	0.12
Psychosocial Rehabilitation Services	Procedures	3,248.4	200.69	54.33	233.5	608.45	11.84	66.17
BH Case Management	Units	1,588.3	16.03	2.12	79.4	310.73	2.06	4.18
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	50.3	72.41	0.30	5.1	605.84	0.26	0.56
Other Professional MH/SA	Visits	139.0	41.58	0.48	39.3	610.24	2.00	2.48
Subtotal - Behavioral Health		9,688.1	\$ 157.55	\$ 127.20	1,077.0	\$ 572.34	\$ 51.37	\$ 178.56
Total All Services		43,933.5	\$ 215.05	\$ 787.33	7,311.3	\$ 326.33	\$ 198.83	\$ 986.16

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year:		SFY 2017						
Population:		All Populations						
Rate Cell:		All Rate Cells						
Region:		Western Region						
Tribal/Non-Tribal Members:		All						
Member Months:		308,218						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	87.3	\$ 3,382.42	\$ 24.60	286.2	\$ 3,355.72	\$ 80.04	\$ 104.65
Inpatient Maternity Delivery	Days	4.6	2,889.05	1.10	70.4	3,261.35	19.14	20.24
Inpatient Well Newborn	Days	0.5	3,207.93	0.14	34.4	3,252.08	9.33	9.46
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal – Inpatient Hospital		92.4	\$ 3,357.13	\$ 25.84	391.1	\$ 3,329.60	\$ 108.51	\$ 134.35
Outpatient Hospital								
Outpatient Emergency Room	Visits	26.3	\$ 856.72	\$ 1.88	762.3	\$ 711.54	\$ 45.20	\$ 47.08
Outpatient Surgery	Visits	29.0	2,264.23	5.48	81.1	1,221.29	8.26	13.74
Outpatient Radiology	Procedures	8.5	304.50	0.22	220.1	542.44	9.95	10.16
Outpatient Pathology/Lab	Procedures	67.4	19.78	0.11	1,531.3	344.17	43.92	44.03
Outpatient Pharmacy	Procedures	20.3	355.93	0.60	150.0	344.83	4.31	4.91
Other Outpatient	Procedures	55.5	148.59	0.69	1,049.6	418.36	36.59	37.28
Subtotal – Outpatient Hospital		207.0	\$ 520.10	\$ 8.97	3,794.3	\$ 468.78	\$ 148.22	\$ 157.20
Professional								
Inpatient and Outpatient Surgery	Procedures	45.1	\$ 448.90	\$ 1.69	220.3	\$ 442.49	\$ 8.12	\$ 9.81
Anesthesia	Procedures	40.5	468.42	1.58	109.1	403.70	3.67	5.25
Inpatient Visits	Visits	124.2	378.27	3.91	255.6	272.06	5.80	9.71
Emergency Room	Visits	28.9	165.04	0.40	297.8	104.21	2.59	2.98
Office/Home Visits/Consults	Visits	135.6	132.13	1.49	2,137.8	102.56	18.27	19.77
Maternity	Procedures	7.6	417.90	0.27	39.7	1,083.59	3.58	3.85
Pathology/Lab	Procedures	73.1	33.74	0.21	597.7	16.24	0.81	1.01
Radiology	Procedures	112.1	203.77	1.90	357.7	42.25	1.26	3.16
Office Administered Drugs	Procedures	16.9	500.54	0.70	110.5	36.92	0.34	1.04
FQHC/RHC/Tribal Clinic	Visits	91.8	368.17	2.82	1,151.3	597.63	57.34	60.15
Physical Exams	Visits	8.8	157.35	0.12	228.5	124.12	2.36	2.48
Therapy	Visits	25.2	143.09	0.30	2.2	77.65	0.01	0.31
Vision	Visits	564.1	99.30	4.67	47.4	49.72	0.20	4.86
Other Professional	Procedures	253.8	78.25	1.65	191.2	74.27	1.18	2.84
Telemedicine	Procedures	1.3	186.82	0.02	315.8	341.63	8.99	9.01
Subtotal – Professional		1,528.9	\$ 170.54	\$ 21.73	6,062.6	\$ 226.68	\$ 114.52	\$ 136.25
Pharmacy								
Psychotropic Drugs	Scripts	31.4	\$ 21.82	\$ 0.06	168.1	\$ 28.09	\$ 0.39	\$ 0.45
Opioid Drugs	Scripts	15.5	58.11	0.08	181.5	18.26	0.28	0.35
All Other Drugs	Scripts	113.2	674.97	6.37	3,021.7	56.54	14.24	20.61
Subtotal – Pharmacy		160.1	\$ 487.24	\$ 6.50	3,371.3	\$ 53.06	\$ 14.91	\$ 21.41
Ancillary								
Ground Transportation	Trips	5,340.9	\$ 27.19	\$ 12.10	4.9	\$ 337.76	\$ 0.14	\$ 12.24
Air Transportation	Trips	1,936.9	610.06	98.47	7.1	8,032.70	4.74	103.21
Accommodations	Claims	720.3	328.47	19.72	-	-	-	19.72
DME/Prosthetics	Procedures	323.3	125.45	3.38	-	-	-	3.38
Dental	Procedures	930.1	120.06	9.31	884.2	523.72	38.59	47.89
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		9,251.5	\$ 185.44	\$ 142.97	896.2	\$ 582.07	\$ 43.47	\$ 186.44
LTSS								
Hospice	Days	0.9	\$ 197.00	\$ 0.02	-	\$ 0.00	\$ 0.00	\$ 0.02
Nursing Home	Days	-	-	-	5.5	2,686.84	1.22	1.22
Skilled Nursing Facility	Days	38.3	657.93	2.10	624.4	1,065.39	55.44	57.54
HCBS	Procedures	877.6	243.11	17.78	1.4	550.34	0.07	17.85
Case Management	Procedures	20.6	270.27	0.46	42.9	333.33	1.19	1.66
Personal Care	Procedures	530.1	80.30	3.55	-	-	-	3.55
Subtotal – LTSS		1,467.6	\$ 195.48	\$ 23.91	674.2	\$ 1,030.81	\$ 57.92	\$ 81.82
Behavioral Health								
IP Psych Hospital - API	Days	28.0	\$ 1,485.26	\$ 3.46	-	\$ 0.00	\$ 0.00	\$ 3.46
IP Psych Hospital - All Other	Days	127.4	752.89	8.00	-	-	-	8.00
IP General Hospital - MH/SA	Days	10.7	2,681.15	2.40	7.4	4,660.78	2.87	5.27
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	3.4	50.79	0.01	19.8	610.18	1.01	1.02
Assessment	Procedures	4.8	241.29	0.10	23.4	606.59	1.18	1.28
Crisis Services	Procedures	2.6	105.18	0.02	24.6	606.02	1.24	1.27
Medication Services	Procedures	66.4	21.29	0.12	4.5	603.28	0.23	0.34
Methadone Medication Services	Procedures	9.7	12.56	0.01	-	-	-	0.01
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	44.5	88.98	0.33	51.2	604.12	2.58	2.91
Family Therapy OP	Procedures	15.8	107.50	0.14	8.2	598.40	0.41	0.55
Group Therapy OP	Procedures	76.6	79.05	0.50	24.1	599.04	1.20	1.71
SBIRT	Procedures	-	-	-	15.1	609.35	0.77	0.77
Substance Abuse Residential	Days	18.8	267.05	0.42	272.3	283.54	6.43	6.85
Children's Residential	Days	232.5	223.37	4.33	243.0	458.89	9.29	13.62
RPTC - In State	Days	57.1	355.57	1.69	-	-	-	1.69
RPTC - Out of State	Days	146.3	381.10	4.65	-	-	-	4.65
Detoxification	Procedures	0.4	616.00	0.02	0.6	607.06	0.03	0.05
Medical Evaluation	Procedures	3.2	235.35	0.06	0.3	606.25	0.02	0.08
Psychological Testing	Procedures	11.2	618.89	0.58	3.6	473.32	0.14	0.72
Peer Support Services	Units	0.9	17.00	0.00	-	-	-	0.00
Psychosocial Rehabilitation Services	Procedures	390.2	238.14	7.74	247.3	607.65	12.52	20.27
BH Case Management	Units	135.4	16.06	0.18	20.1	170.27	0.28	0.47
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	1.6	76.43	0.01	5.6	606.43	0.28	0.29
Other Professional MH/SA	Visits	8.1	55.75	0.04	21.0	609.15	1.07	1.10
Subtotal – Behavioral Health		1,395.6	\$ 299.30	\$ 34.81	992.1	\$ 502.72	\$ 41.56	\$ 76.37
Total All Services		14,103.1	\$ 225.25	\$ 264.72	16,181.8	\$ 392.38	\$ 529.12	\$ 793.84

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year: SFY 2017
Population: All Populations
Rate Cell: All Rate Cells
Region: Statewide
Tribal/Non-Tribal Members: Tribal
Member Months: 900,813

Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	212.1	\$ 3,372.61	\$ 59.61	280.9	\$ 3,276.90	\$ 76.70	\$ 136.32
Inpatient Maternity Delivery	Days	20.4	2,941.41	5.00	44.2	3,240.54	11.94	16.95
Inpatient Well Newborn	Days	8.5	2,989.60	2.12	21.4	3,234.01	5.78	7.90
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		241.0	\$ 3,322.56	\$ 66.74	346.6	\$ 3,269.61	\$ 94.42	\$ 161.16
Outpatient Hospital								
Outpatient Emergency Room	Visits	337.7	\$ 771.20	\$ 21.70	581.1	\$ 610.83	\$ 29.58	\$ 51.28
Outpatient Surgery	Visits	43.6	2,559.66	9.31	72.4	1,064.48	6.42	15.73
Outpatient Radiology	Procedures	87.2	362.74	2.64	146.1	535.04	6.52	9.15
Outpatient Pathology/Lab	Procedures	363.8	28.58	0.87	872.0	409.95	29.79	30.66
Outpatient Pharmacy	Procedures	73.2	294.50	1.80	73.2	397.02	2.42	4.22
Other Outpatient	Procedures	314.6	141.54	3.71	970.8	380.81	30.81	34.52
Subtotal - Outpatient Hospital		1,220.1	\$ 393.59	\$ 40.02	2,715.6	\$ 466.35	\$ 105.54	\$ 145.55
Professional								
Inpatient and Outpatient Surgery	Procedures	176.5	\$ 357.01	\$ 5.25	225.3	\$ 413.18	\$ 7.76	\$ 13.01
Anesthesia	Procedures	70.1	422.35	2.47	99.5	407.55	3.38	5.85
Inpatient Visits	Visits	296.6	317.38	7.84	233.0	294.77	5.72	13.57
Emergency Room	Visits	360.5	169.71	5.10	427.1	137.38	4.89	9.99
Office/Home Visits/Consults	Visits	749.0	124.72	7.78	1,226.4	103.83	10.61	18.40
Maternity	Procedures	21.5	562.38	1.01	28.6	1,017.50	2.43	3.43
Pathology/Lab	Procedures	567.3	26.42	1.25	311.9	23.01	0.60	1.85
Radiology	Procedures	522.2	115.85	5.04	552.1	42.10	1.94	6.98
Office Administered Drugs	Procedures	87.4	147.23	1.07	55.2	36.22	0.17	1.24
FQHC/RHC/Tribal Clinic	Visits	120.2	325.89	3.26	2,127.4	546.55	96.89	100.16
Physical Exams	Visits	96.5	161.50	1.30	111.9	122.00	1.14	2.44
Therapy	Visits	642.4	137.28	7.35	7.3	45.55	0.03	7.38
Vision	Visits	483.2	86.65	3.49	32.5	93.13	0.25	3.74
Other Professional	Procedures	545.0	78.77	3.58	217.2	73.37	1.33	4.91
Telemedicine	Procedures	6.3	157.62	0.08	141.5	324.29	3.82	3.91
Subtotal - Professional		4,744.5	\$ 141.31	\$ 55.87	5,796.8	\$ 291.78	\$ 140.95	\$ 196.82
Pharmacy								
Psychotropic Drugs	Scripts	295.2	\$ 32.43	\$ 0.80	389.2	\$ 24.06	\$ 0.78	\$ 1.58
Opioid Drugs	Scripts	237.8	90.26	1.79	238.3	37.98	0.75	2.54
All Other Drugs	Scripts	1,329.3	141.98	15.73	3,429.2	69.90	19.98	35.70
Subtotal - Pharmacy		1,862.4	\$ 118.01	\$ 18.32	4,056.8	\$ 63.63	\$ 21.51	\$ 39.83
Ancillary								
Ground Transportation	Trips	3,035.8	\$ 44.22	\$ 11.19	1.8	\$ 347.90	\$ 0.05	\$ 11.24
Air Transportation	Trips	1,022.0	704.38	59.99	3.2	7,522.49	2.00	61.99
Accommodations	Claims	471.5	306.47	12.04	-	-	-	12.04
DIME/Prosthetics	Procedures	707.7	115.94	6.84	0.1	27.88	0.00	6.84
Dental	Procedures	1,453.9	129.89	15.74	837.9	487.34	34.03	49.77
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		6,691.0	\$ 189.74	\$ 105.80	843.0	\$ 513.54	\$ 36.08	\$ 141.87
LTSS								
Hospice	Days	0.3	\$ 3,231.93	\$ 0.09	-	\$ 0.00	\$ 0.00	\$ 0.09
Nursing Home	Days	13.1	845.79	0.92	9.1	2,690.00	2.04	2.96
Skilled Nursing Facility	Days	615.7	667.19	34.23	209.1	1,016.74	17.72	51.95
HCBS	Procedures	5,302.5	205.77	90.93	1.5	434.91	0.05	90.98
Case Management	Procedures	204.7	224.03	3.82	32.2	291.97	0.78	4.60
Personal Care	Procedures	1,511.5	81.52	10.27	40.8	43.84	0.15	10.42
Subtotal - LTSS		7,647.8	\$ 220.08	\$ 140.26	292.7	\$ 850.41	\$ 20.74	\$ 161.00
Behavioral Health								
IP Psych Hospital - API	Days	34.3	\$ 1,433.16	\$ 4.09	-	\$ 0.00	\$ 0.00	\$ 4.09
IP Psych Hospital - All Other	Days	160.7	754.02	10.10	-	-	-	10.10
IP General Hospital - MH/SA	Days	34.3	2,736.86	7.82	3.3	4,452.95	1.22	9.04
OP General Hospital - MH/SA	Visits	0.7	229.02	0.01	-	-	-	0.01
Screening	Procedures	22.7	40.46	0.08	15.9	608.01	0.80	0.88
Assessment	Procedures	29.9	214.15	0.53	23.4	602.91	1.18	1.71
Crisis Services	Procedures	28.8	139.59	0.33	36.3	608.10	1.84	2.17
Medication Services	Procedures	188.4	26.48	0.42	15.6	608.45	0.79	1.21
Methadone Medication Services	Procedures	176.8	12.56	0.19	-	-	-	0.19
Other Opioid Medication Services	Procedures	0.0	21.67	0.00	-	-	-	0.00
Individual Therapy OP	Procedures	270.5	90.81	2.05	113.7	593.05	5.62	7.66
Family Therapy OP	Procedures	81.5	102.60	0.70	14.9	570.98	0.71	1.41
Group Therapy OP	Procedures	260.5	77.46	1.68	28.1	591.16	1.38	3.07
SBIRT	Procedures	0.4	43.93	0.00	15.0	609.41	0.76	0.76
Substance Abuse Residential	Days	137.2	251.50	2.88	260.9	453.52	9.86	12.74
Children's Residential	Days	941.7	191.07	14.99	193.3	487.02	7.85	22.84
RPTC - In State	Days	197.5	335.20	5.52	-	-	-	5.52
RPTC - Out of State	Days	323.8	370.45	10.00	-	-	-	10.00
Detoxification	Procedures	7.0	616.00	0.36	12.4	609.17	0.63	0.99
Medical Evaluation	Procedures	11.1	230.38	0.21	3.1	592.54	0.15	0.36
Psychological Testing	Procedures	42.0	475.86	1.66	1.9	492.60	0.08	1.74
Peer Support Services	Units	102.0	17.05	0.15	0.0	301.50	0.00	0.15
Psychosocial Rehabilitation Services	Procedures	1,654.5	209.35	28.86	375.3	608.79	19.04	47.91
BH Case Management	Units	780.9	16.07	1.05	78.6	265.56	1.74	2.79
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	11.5	90.99	0.09	9.8	587.81	0.48	0.57
Other Professional MH/SA	Visits	69.3	41.16	0.24	33.0	607.34	1.67	1.91
Subtotal - Behavioral Health		5,568.1	\$ 202.58	\$ 94.00	1,234.5	\$ 542.37	\$ 55.80	\$ 149.80
Total All Services		27,974.9	\$ 223.48	\$ 521.00	15,286.0	\$ 372.92	\$ 475.04	\$ 996.03

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year:		SFY 2017						
Population:		All Populations						
Rate Cell:		All Rate Cells						
Region:		Anchorage Municipality						
Tribal/Non-Tribal Members:		Tribal						
Member Months:		208,704						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	338.0	\$ 3,456.54	\$ 97.35	492.5	\$ 3,229.43	\$ 132.55	\$ 229.90
Inpatient Maternity Delivery	Days	14.9	3,043.51	3.79	43.0	3,233.24	11.57	15.36
Inpatient Well Newborn	Days	6.0	3,042.27	1.53	20.3	3,261.61	5.52	7.05
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		359.0	\$ 3,432.37	\$ 102.67	555.8	\$ 3,230.90	\$ 149.64	\$ 252.31
Outpatient Hospital								
Outpatient Emergency Room	Visits	471.8	\$ 642.30	\$ 25.25	986.5	\$ 517.72	\$ 42.56	\$ 67.81
Outpatient Surgery	Visits	33.5	2,406.97	6.71	79.2	992.40	6.55	13.26
Outpatient Radiology	Procedures	42.2	290.46	1.02	140.1	507.14	5.92	6.94
Outpatient Pathology/Lab	Procedures	390.5	19.20	0.62	817.7	486.01	33.12	33.74
Outpatient Pharmacy	Procedures	96.1	379.00	3.03	35.4	454.31	1.34	4.38
Other Outpatient	Procedures	360.6	129.32	3.89	1,331.2	298.42	33.11	36.99
Subtotal - Outpatient Hospital		1,394.6	\$ 348.76	\$ 40.53	3,390.1	\$ 433.94	\$ 122.59	\$ 163.12
Professional								
Inpatient and Outpatient Surgery	Procedures	256.6	\$ 360.74	\$ 7.71	336.2	\$ 376.25	\$ 10.54	\$ 18.26
Anesthesia	Procedures	78.1	386.24	2.51	138.1	412.49	4.75	7.26
Inpatient Visits	Visits	522.3	318.58	13.86	366.2	326.52	9.96	23.83
Emergency Room	Visits	510.6	175.12	7.45	1,133.6	148.49	14.03	21.48
Office/Home Visits/Consults	Visits	986.9	126.37	10.39	727.6	105.37	6.39	16.78
Maternity	Procedures	24.0	501.33	1.00	29.2	836.61	2.03	3.04
Pathology/Lab	Procedures	899.3	25.04	1.88	102.9	72.14	0.62	2.50
Radiology	Procedures	740.9	132.15	8.16	1,246.4	40.39	4.19	12.35
Office Administered Drugs	Procedures	110.3	122.25	1.12	8.3	26.49	0.02	1.14
FQHC/RHC/Tribal Clinic	Visits	91.1	406.74	3.09	2,608.4	546.60	118.81	121.90
Physical Exams	Visits	135.6	162.04	1.83	36.5	147.88	0.45	2.28
Therapy	Visits	1,196.2	131.69	13.13	19.3	36.55	0.06	13.19
Vision	Visits	423.5	70.30	2.48	34.7	140.99	0.41	2.89
Other Professional	Procedures	944.0	65.63	5.16	378.4	68.02	2.14	7.31
Telemedicine	Procedures	7.8	149.49	0.10	21.7	348.36	0.63	0.73
Subtotal - Professional		6,927.3	\$ 138.39	\$ 79.89	7,187.5	\$ 292.24	\$ 175.04	\$ 254.93
Pharmacy								
Psychotropic Drugs	Scripts	581.6	\$ 29.18	\$ 1.41	867.2	\$ 23.07	\$ 1.67	\$ 3.08
Opioid Drugs	Scripts	313.4	92.44	2.41	321.8	70.85	1.90	4.31
All Other Drugs	Scripts	1,943.1	110.37	17.87	5,220.5	84.63	36.82	54.69
Subtotal - Pharmacy		2,838.1	\$ 91.75	\$ 21.70	6,409.5	\$ 75.61	\$ 40.38	\$ 62.08
Ancillary								
Ground Transportation	Trips	1,117.0	\$ 118.19	\$ 11.00	0.4	\$ 357.41	\$ 0.01	\$ 11.01
Air Transportation	Trips	135.0	966.63	10.87	0.5	7,993.09	0.34	11.22
Accommodations	Claims	68.4	367.26	2.09	-	-	-	2.09
DIME/Prosthetics	Procedures	1,322.7	117.06	12.90	-	-	-	12.90
Dental	Procedures	1,885.0	138.41	21.74	565.1	485.93	22.88	44.62
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		4,528.0	\$ 155.33	\$ 58.61	566.0	\$ 492.70	\$ 23.24	\$ 81.85
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.27	-	\$ 0.00	\$ 0.00	\$ 0.27
Nursing Home	Days	40.8	680.35	2.31	16.7	3,152.25	4.38	6.69
Skilled Nursing Facility	Days	699.7	538.10	31.38	44.3	761.34	2.81	34.18
HCBS	Procedures	11,560.6	199.26	191.97	3.7	373.13	0.12	192.08
Case Management	Procedures	396.4	213.85	7.06	51.8	242.24	1.05	8.11
Personal Care	Procedures	2,038.2	88.64	15.06	-	-	-	15.06
Subtotal - LTSS		14,735.8	\$ 201.99	\$ 248.04	116.5	\$ 860.26	\$ 8.35	\$ 256.39
Behavioral Health								
IP Psych Hospital - API	Days	53.5	\$ 1,369.35	\$ 6.11	-	\$ 0.00	\$ 0.00	\$ 6.11
IP Psych Hospital - All Other	Days	295.8	752.48	18.55	-	-	-	18.55
IP General Hospital - MH/SA	Days	47.1	2,759.41	10.83	2.7	3,932.02	0.89	11.71
OP General Hospital - MH/SA	Visits	0.1	16.70	0.00	-	-	-	0.00
Screening	Procedures	31.9	39.93	0.11	15.6	607.90	0.79	0.90
Assessment	Procedures	46.1	199.25	0.76	20.9	597.44	1.04	1.80
Crisis Services	Procedures	65.9	133.71	0.73	49.3	609.79	2.51	3.24
Medication Services	Procedures	259.2	27.87	0.60	19.4	605.50	0.98	1.58
Methadone Medication Services	Procedures	599.4	12.57	0.63	-	-	-	0.63
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	371.7	91.60	2.84	171.8	588.31	8.42	11.26
Family Therapy OP	Procedures	110.9	102.07	0.94	21.0	590.68	1.03	1.98
Group Therapy OP	Procedures	297.8	77.35	1.92	64.7	588.79	3.17	5.09
SBIRT	Procedures	1.0	43.95	0.00	4.3	610.45	0.22	0.22
Substance Abuse Residential	Days	212.1	254.85	4.50	165.1	444.97	6.12	10.63
Children's Residential	Days	1,394.7	182.27	21.18	178.9	510.19	7.61	28.79
RPTC - In State	Days	505.3	322.75	13.59	-	-	-	13.59
RPTC - Out of State	Days	541.5	370.07	16.70	-	-	-	16.70
Detoxification	Procedures	19.3	616.00	0.99	2.2	605.00	0.11	1.10
Medical Evaluation	Procedures	20.8	224.99	0.39	0.3	531.83	0.01	0.40
Psychological Testing	Procedures	80.6	481.01	3.23	0.2	612.75	0.01	3.24
Peer Support Services	Units	192.6	16.97	0.27	-	-	-	0.27
Psychosocial Rehabilitation Services	Procedures	2,233.9	200.33	37.29	578.0	608.31	29.30	66.59
BH Case Management	Units	1,241.6	16.07	1.66	90.7	224.72	1.70	3.36
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	8.9	85.21	0.06	2.2	575.84	0.11	0.17
Other Professional MH/SA	Visits	107.3	39.30	0.35	35.3	618.73	1.82	2.17
Subtotal - Behavioral Health		8,739.2	\$ 198.09	\$ 144.26	1,422.8	\$ 555.36	\$ 65.85	\$ 210.11
Total All Services		39,522.0	\$ 211.24	\$ 695.71	19,648.1	\$ 357.34	\$ 585.09	\$ 1,280.80

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year: SFY 2017
Population: All Populations
Rate Cell: All Rate Cells
Region: Fairbanks North Star Borough
Tribal/Non-Tribal Members: Tribal
Member Months: 57,856

Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	325.0	\$ 2,636.22	\$ 71.40	55.4	\$ 3,219.05	\$ 14.86	\$ 86.26
Inpatient Maternity Delivery	Days	67.4	2,748.19	15.44	2.5	3,612.92	0.75	16.19
Inpatient Well Newborn	Days	23.6	2,677.84	5.28	1.0	3,962.00	0.34	5.62
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		416.1	\$ 2,656.72	\$ 92.11	58.9	\$ 3,248.77	\$ 15.95	\$ 108.06
Outpatient Hospital								
Outpatient Emergency Room	Visits	873.6	\$ 807.48	\$ 58.79	78.4	\$ 532.21	\$ 3.48	\$ 62.26
Outpatient Surgery	Visits	79.6	1,906.99	12.66	19.7	1,038.05	1.70	14.36
Outpatient Radiology	Procedures	238.3	335.26	6.66	35.1	504.61	1.47	8.13
Outpatient Pathology/Lab	Procedures	797.7	16.32	1.09	93.3	468.55	3.64	4.73
Outpatient Pharmacy	Procedures	150.4	147.66	1.85	8.3	457.88	0.32	2.17
Other Outpatient	Procedures	449.0	176.48	6.60	236.2	365.79	7.20	13.81
Subtotal - Outpatient Hospital		2,588.7	\$ 406.26	\$ 87.64	471.0	\$ 453.92	\$ 17.82	\$ 105.46
Professional								
Inpatient and Outpatient Surgery	Procedures	334.3	\$ 331.90	\$ 9.25	110.1	\$ 502.02	\$ 4.61	\$ 13.85
Anesthesia	Procedures	125.5	421.34	4.41	33.2	453.50	1.25	5.66
Inpatient Visits	Visits	483.5	287.17	11.57	54.5	339.09	1.54	13.11
Emergency Room	Visits	960.3	171.56	13.73	74.3	146.50	0.91	14.64
Office/Home Visits/Consults	Visits	1,446.7	122.09	14.72	266.1	106.64	2.36	17.08
Maternity	Procedures	36.9	655.73	2.02	19.9	1,284.46	2.13	4.15
Pathology/Lab	Procedures	730.7	28.64	1.74	51.6	37.50	0.16	1.91
Radiology	Procedures	923.0	56.17	4.32	149.5	44.69	0.56	4.88
Office Administered Drugs	Procedures	203.1	52.61	0.89	13.9	28.16	0.03	0.92
FQHC/RHC/Tribal Clinic	Visits	108.1	274.41	2.47	4,034.8	517.51	174.00	176.47
Physical Exams	Visits	194.6	173.86	2.82	15.1	105.53	0.13	2.95
Therapy	Visits	2,141.3	88.27	15.75	10.2	37.68	0.03	15.78
Vision	Visits	474.6	81.21	3.21	8.9	145.58	0.11	3.32
Other Professional	Procedures	727.6	89.69	5.44	66.4	109.65	0.61	6.04
Telemedicine	Procedures	12.4	185.64	0.19	57.5	225.46	1.08	1.27
Subtotal - Professional		8,902.5	\$ 124.72	\$ 92.53	4,966.1	\$ 457.95	\$ 189.52	\$ 282.04
Pharmacy								
Psychotropic Drugs	Scripts	401.3	\$ 33.74	\$ 1.13	470.8	\$ 28.09	\$ 1.10	\$ 2.23
Opioid Drugs	Scripts	397.2	107.63	3.56	258.0	51.87	1.12	4.68
All Other Drugs	Scripts	2,199.4	114.30	20.95	3,386.6	74.88	21.13	42.08
Subtotal - Pharmacy		2,997.9	\$ 102.63	\$ 25.64	4,115.5	\$ 68.08	\$ 23.35	\$ 48.99
Ancillary								
Ground Transportation	Trips	1,529.2	\$ 71.81	\$ 9.15	0.2	\$ 286.85	\$ 0.00	\$ 9.16
Air Transportation	Trips	372.9	757.57	23.54	0.2	5,988.65	0.10	23.65
Accommodations	Claims	220.9	246.91	4.55	-	-	-	4.55
DME/Prosthetics	Procedures	713.9	110.89	6.60	0.2	44.63	0.00	6.60
Dental	Procedures	2,285.9	135.47	25.81	731.5	444.17	27.08	52.88
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		5,122.9	\$ 163.13	\$ 69.64	732.2	\$ 445.58	\$ 27.19	\$ 96.83
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.12	-	\$ 0.00	\$ 0.00	\$ 0.12
Nursing Home	Days	-	-	-	16.4	3,335.00	4.55	4.55
Skilled Nursing Facility	Days	1,420.4	706.99	83.68	-	-	-	83.68
HCBS	Procedures	6,005.4	216.44	108.32	-	-	-	108.32
Case Management	Procedures	316.3	209.09	5.51	0.2	303.08	0.01	5.52
Personal Care	Procedures	1,726.5	94.54	13.60	-	-	-	13.60
Subtotal - LTSS		9,468.6	\$ 267.70	\$ 211.23	16.6	\$ 3,297.10	\$ 4.56	\$ 215.79
Behavioral Health								
IP Psych Hospital - API	Days	8.7	\$ 1,490.31	\$ 1.08	-	\$ 0.00	\$ 0.00	\$ 1.08
IP Psych Hospital - All Other	Days	214.5	753.77	13.47	-	-	-	13.47
IP General Hospital - MH/SA	Days	122.6	2,715.65	27.74	-	-	-	27.74
OP General Hospital - MH/SA	Visits	0.8	2,270.65	0.16	-	-	-	0.16
Screening	Procedures	26.5	38.18	0.08	6.2	609.93	0.32	0.40
Assessment	Procedures	39.0	215.32	0.70	27.2	598.66	1.36	2.06
Crisis Services	Procedures	59.9	231.63	1.16	7.1	609.12	0.36	1.51
Medication Services	Procedures	445.9	20.20	0.75	128.8	611.00	6.56	7.31
Methadone Medication Services	Procedures	484.9	12.54	0.51	-	-	-	0.51
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	549.6	98.44	4.51	70.3	580.47	3.40	7.91
Family Therapy OP	Procedures	153.7	99.58	1.28	6.8	606.61	0.35	1.62
Group Therapy OP	Procedures	422.9	82.57	2.91	1.5	566.43	0.07	2.98
SBIRT	Procedures	-	-	-	82.8	609.87	4.21	4.21
Substance Abuse Residential	Days	98.9	279.87	2.31	909.7	610.16	46.26	48.56
Children's Residential	Days	1,790.8	189.10	28.22	55.4	572.79	2.64	30.86
RPTC - In State	Days	134.8	356.20	4.00	-	-	-	4.00
RPTC - Out of State	Days	730.5	375.93	22.88	-	-	-	22.88
Detoxification	Procedures	1.2	616.00	0.06	142.1	609.55	7.22	7.28
Medical Evaluation	Procedures	12.2	273.23	0.28	35.9	609.91	1.82	2.10
Psychological Testing	Procedures	40.0	370.20	1.23	1.7	421.58	0.06	1.29
Peer Support Services	Units	364.2	17.00	0.52	-	-	-	0.52
Psychosocial Rehabilitation Services	Procedures	3,092.1	232.68	59.96	1,020.7	610.04	51.89	111.84
BH Case Management	Units	1,749.3	16.05	2.34	161.2	474.69	6.38	8.71
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	36.5	62.35	0.19	3.5	615.24	0.18	0.37
Other Professional MH/SA	Visits	106.6	49.66	0.44	61.0	610.36	3.10	3.54
Subtotal - Behavioral Health		10,686.5	\$ 198.51	\$ 176.78	2,721.7	\$ 600.31	\$ 136.15	\$ 312.93
Total All Services		40,183.2	\$ 225.64	\$ 755.57	13,081.9	\$ 380.25	\$ 414.53	\$ 1,170.10

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year: SFY 2017
 Population: All Populations
 Rate Cell: All Rate Cells
 Region: Gulf Coast/Aleutian Region
 Tribal/Non-Tribal Members: Tribal
 Member Months: 63,760

Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	103.9	\$ 3,523.90	\$ 30.51	254.1	\$ 3,228.56	\$ 68.36	\$ 98.87
Inpatient Maternity Delivery	Days	8.5	3,503.11	2.47	45.9	3,245.23	12.42	14.89
Inpatient Well Newborn	Days	4.5	3,549.24	1.34	23.3	3,292.26	6.40	7.74
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		116.9	\$ 3,523.37	\$ 34.32	323.3	\$ 3,235.53	\$ 87.18	\$ 121.50
Outpatient Hospital								
Outpatient Emergency Room	Visits	109.3	\$ 1,148.71	\$ 10.47	378.1	\$ 565.77	\$ 17.83	\$ 28.29
Outpatient Surgery	Visits	32.9	2,756.92	7.57	142.1	923.50	10.94	18.50
Outpatient Radiology	Procedures	90.9	305.59	2.31	163.7	549.09	7.49	9.81
Outpatient Pathology/Lab	Procedures	211.7	15.45	0.27	804.6	546.82	36.66	36.94
Outpatient Pharmacy	Procedures	72.6	353.17	2.14	80.4	586.60	3.93	6.07
Other Outpatient	Procedures	242.0	221.05	4.46	1,441.8	453.88	54.54	58.99
Subtotal - Outpatient Hospital		759.6	\$ 429.99	\$ 27.22	3,010.7	\$ 523.65	\$ 131.38	\$ 158.60
Professional								
Inpatient and Outpatient Surgery	Procedures	96.2	\$ 461.72	\$ 3.70	278.9	\$ 378.38	\$ 8.79	\$ 12.50
Anesthesia	Procedures	49.9	442.62	1.84	121.0	400.65	4.04	5.88
Inpatient Visits	Visits	137.0	324.07	3.70	222.8	276.62	5.14	8.84
Emergency Room	Visits	112.0	179.51	1.68	212.1	136.46	2.41	4.09
Office/Home Visits/Consults	Visits	297.9	131.22	3.26	2,020.6	100.98	17.00	20.26
Maternity	Procedures	8.7	508.42	0.37	29.9	1,022.11	2.55	2.92
Pathology/Lab	Procedures	261.4	22.42	0.49	573.5	20.28	0.97	1.46
Radiology	Procedures	334.1	242.39	6.75	499.1	43.62	1.81	8.56
Office Administered Drugs	Procedures	42.9	137.94	0.49	96.5	34.79	0.28	0.77
FQHC/RHC/Tribal Clinic	Visits	158.7	327.25	4.33	1,710.0	559.39	79.72	84.04
Physical Exams	Visits	25.2	154.69	0.33	166.4	100.72	1.40	1.72
Therapy	Visits	136.6	124.71	1.42	3.2	107.93	0.03	1.45
Vision	Visits	413.5	90.58	3.12	26.9	124.74	0.28	3.40
Other Professional	Procedures	287.6	119.57	2.87	225.1	84.72	1.59	4.45
Telemedicine	Procedures	4.0	172.41	0.06	103.9	273.94	2.37	2.43
Subtotal - Professional		2,365.6	\$ 174.43	\$ 34.38	6,290.0	\$ 244.92	\$ 128.38	\$ 162.76
Pharmacy								
Psychotropic Drugs	Scripts	164.1	\$ 37.81	\$ 0.52	233.0	\$ 17.59	\$ 0.34	\$ 0.86
Opioid Drugs	Scripts	111.4	76.63	0.71	196.9	21.86	0.36	1.07
All Other Drugs	Scripts	940.8	150.21	11.78	2,404.7	74.29	14.89	26.66
Subtotal - Pharmacy		1,216.4	\$ 128.31	\$ 13.01	2,834.6	\$ 65.99	\$ 15.59	\$ 28.59
Ancillary								
Ground Transportation	Trips	2,833.2	\$ 42.41	\$ 10.01	-	\$ 0.00	\$ 0.00	\$ 10.01
Air Transportation	Trips	1,333.1	741.87	82.41	9.0	4,893.29	3.68	86.10
Accommodations	Claims	643.9	336.58	18.06	-	-	-	18.06
DIME/Prosthetics	Procedures	558.2	116.67	5.43	0.9	24.36	0.00	5.43
Dental	Procedures	804.0	135.92	9.11	1,211.9	460.33	46.49	55.59
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		6,172.4	\$ 243.06	\$ 125.02	1,221.8	\$ 492.77	\$ 50.17	\$ 175.19
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Nursing Home	Days	5.1	638.76	0.27	9.6	1,432.61	1.15	1.42
Skilled Nursing Facility	Days	719.5	885.88	53.12	-	-	-	53.12
HCBS	Procedures	3,005.8	265.00	66.38	-	-	-	66.38
Case Management	Procedures	162.0	204.02	2.76	46.1	305.23	1.17	3.93
Personal Care	Procedures	2,748.4	82.57	18.91	-	-	-	18.91
Subtotal - LTSS		6,640.8	\$ 255.57	\$ 141.43	55.7	\$ 499.47	\$ 2.32	\$ 143.75
Behavioral Health								
IP Psych Hospital - API	Days	57.0	\$ 1,484.47	\$ 7.05	-	\$ 0.00	\$ 0.00	\$ 7.05
IP Psych Hospital - All Other	Days	56.8	754.94	3.58	-	-	-	3.58
IP General Hospital - MH/SA	Days	35.0	2,901.48	8.46	0.4	3,335.00	0.10	8.57
OP General Hospital - MH/SA	Visits	7.2	55.56	0.03	-	-	-	0.03
Screening	Procedures	11.7	37.78	0.04	10.4	610.80	0.53	0.56
Assessment	Procedures	15.2	198.40	0.25	37.6	608.41	1.91	2.16
Crisis Services	Procedures	6.4	84.21	0.04	112.5	608.94	5.71	5.76
Medication Services	Procedures	54.8	34.75	0.16	0.9	603.00	0.05	0.21
Methadone Medication Services	Procedures	1.5	12.50	0.00	-	-	-	0.00
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	108.6	87.35	0.79	135.9	603.64	6.84	7.63
Family Therapy OP	Procedures	36.3	108.98	0.33	25.0	602.76	1.26	1.59
Group Therapy OP	Procedures	132.5	80.32	0.89	24.3	609.25	1.23	2.12
SBIRT	Procedures	-	-	-	1.1	613.83	0.06	0.06
Substance Abuse Residential	Days	9.0	291.56	0.22	483.3	559.92	22.55	22.77
Children's Residential	Days	320.7	191.11	5.11	395.6	493.08	16.26	21.36
RPTC - In State	Days	264.2	350.72	7.72	-	-	-	7.72
RPTC - Out of State	Days	148.5	377.22	4.67	-	-	-	4.67
Detoxification	Procedures	6.8	616.00	0.35	0.2	603.00	0.01	0.36
Medical Evaluation	Procedures	6.8	234.16	0.13	0.4	412.08	0.01	0.15
Psychological Testing	Procedures	24.8	628.02	1.30	-	-	-	1.30
Peer Support Services	Units	-	-	-	-	-	-	-
Psychosocial Rehabilitation Services	Procedures	433.6	195.37	7.06	271.0	610.21	13.78	20.84
BH Case Management	Units	154.0	16.09	0.21	160.9	281.22	3.77	3.98
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	7.7	98.19	0.06	46.9	567.54	2.22	2.28
Other Professional MH/SA	Visits	23.5	39.03	0.08	41.4	558.03	1.93	2.00
Subtotal - Behavioral Health		1,922.7	\$ 302.90	\$ 48.53	1,747.9	\$ 536.92	\$ 78.21	\$ 126.74
Total All Services		19,194.3	\$ 265.02	\$ 423.91	15,484.1	\$ 382.25	\$ 493.23	\$ 917.14

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year: SFY 2017
Population: All Populations
Rate Cell: All Rate Cells
Region: Kenai Peninsula Borough
Tribal/Non-Tribal Members: Tribal
Member Months: 40,689

Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	333.0	\$ 3,989.03	\$ 110.69	105.3	\$ 3,275.44	\$ 28.74	\$ 139.42
Inpatient Maternity Delivery	Days	39.2	3,616.82	11.82	18.0	2,998.36	4.50	16.32
Inpatient Well Newborn	Days	23.9	3,875.44	7.71	8.3	3,216.22	2.21	9.93
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		396.1	\$ 3,945.32	\$ 130.22	131.5	\$ 3,233.83	\$ 35.45	\$ 165.67
Outpatient Hospital								
Outpatient Emergency Room	Visits	557.1	\$ 968.84	\$ 44.98	147.2	\$ 569.49	\$ 6.98	\$ 51.96
Outpatient Surgery	Visits	85.2	3,410.81	24.23	40.7	1,027.10	3.48	27.71
Outpatient Radiology	Procedures	313.2	349.42	9.12	56.9	502.05	2.38	11.50
Outpatient Pathology/Lab	Procedures	875.9	26.33	1.92	255.7	460.17	9.81	11.73
Outpatient Pharmacy	Procedures	114.1	68.92	0.66	15.9	490.70	0.65	1.31
Other Outpatient	Procedures	890.1	120.11	8.91	369.2	366.51	11.28	20.19
Subtotal - Outpatient Hospital		2,835.7	\$ 380.06	\$ 89.81	885.7	\$ 468.58	\$ 34.58	\$ 124.40
Professional								
Inpatient and Outpatient Surgery	Procedures	376.3	\$ 359.86	\$ 11.29	115.9	\$ 384.22	\$ 3.71	\$ 15.00
Anesthesia	Procedures	123.3	432.30	4.44	45.1	428.67	1.61	6.05
Inpatient Visits	Visits	378.7	293.77	9.27	92.6	291.43	2.25	11.52
Emergency Room	Visits	583.4	171.18	8.32	149.2	148.03	1.84	10.16
Office/Home Visits/Consults	Visits	1,928.8	131.01	21.06	592.5	101.08	4.99	26.05
Maternity	Procedures	35.4	976.69	2.88	8.3	988.46	0.68	3.56
Pathology/Lab	Procedures	1,461.6	25.36	3.09	135.4	29.37	0.33	3.42
Radiology	Procedures	986.2	65.36	5.37	285.2	46.91	1.11	6.49
Office Administered Drugs	Procedures	202.0	141.76	2.39	15.9	32.52	0.04	2.43
FQHC/RHC/Tribal Clinic	Visits	347.1	296.28	8.57	1,665.1	555.27	77.05	85.62
Physical Exams	Visits	231.5	158.64	3.06	41.9	106.98	0.37	3.43
Therapy	Visits	1,603.8	165.52	22.12	0.3	90.50	0.00	22.12
Vision	Visits	516.4	100.28	4.32	16.5	108.63	0.15	4.47
Other Professional	Procedures	712.5	96.91	5.75	139.5	80.34	0.93	6.69
Telemedicine	Procedures	15.3	106.44	0.14	52.8	236.42	1.04	1.18
Subtotal - Professional		9,502.4	\$ 141.52	\$ 112.06	3,356.2	\$ 343.68	\$ 96.12	\$ 208.18
Pharmacy								
Psychotropic Drugs	Scripts	685.7	\$ 37.20	\$ 2.13	66.4	\$ 15.25	\$ 0.08	\$ 2.21
Opioid Drugs	Scripts	741.1	91.31	5.64	72.3	22.20	0.13	5.77
All Other Drugs	Scripts	4,039.0	110.49	37.19	896.9	138.35	10.34	47.53
Subtotal - Pharmacy		5,465.8	\$ 98.70	\$ 44.95	1,035.5	\$ 122.36	\$ 10.56	\$ 55.51
Ancillary								
Ground Transportation	Trips	1,553.1	\$ 71.77	\$ 9.29	0.3	\$ 286.85	\$ 0.01	\$ 9.30
Air Transportation	Trips	440.6	681.61	25.03	0.3	11,729.45	0.29	25.32
Accommodations	Claims	191.4	326.96	5.22	-	-	-	5.22
DIME/Prosthetics	Procedures	1,072.9	116.29	10.40	0.3	13.60	0.00	10.40
Dental	Procedures	2,013.1	114.78	19.26	820.2	400.92	27.40	46.66
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		5,271.2	\$ 157.50	\$ 69.18	821.1	\$ 404.81	\$ 27.70	\$ 96.88
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Nursing Home	Days	0.3	638.76	0.02	0.6	3,335.00	0.16	0.18
Skilled Nursing Facility	Days	1,592.0	767.47	101.82	103.2	1,042.66	8.97	110.79
HCBS	Procedures	8,840.0	221.42	163.11	-	-	-	163.11
Case Management	Procedures	424.4	238.06	8.42	5.0	357.47	0.15	8.57
Personal Care	Procedures	2,703.9	82.24	18.53	-	-	-	18.53
Subtotal - LTSS		13,560.6	\$ 258.30	\$ 291.89	108.8	\$ 1,023.52	\$ 9.28	\$ 301.18
Behavioral Health								
IP Psych Hospital - API	Days	24.2	\$ 1,485.36	\$ 2.99	-	\$ 0.00	\$ 0.00	\$ 2.99
IP Psych Hospital - All Other	Days	46.3	751.61	2.90	-	-	-	2.90
IP General Hospital - MH/SA	Days	33.6	2,835.62	7.94	-	-	-	7.94
OP General Hospital - MH/SA	Visits	2.9	109.59	0.03	-	-	-	0.03
Screening	Procedures	39.5	38.49	0.13	14.2	611.40	0.72	0.85
Assessment	Procedures	47.5	206.26	0.82	14.7	597.96	0.73	1.55
Crisis Services	Procedures	8.6	130.18	0.09	40.1	608.10	2.03	2.13
Medication Services	Procedures	16.8	67.44	0.09	-	-	-	0.09
Methodone Medication Services	Procedures	-	-	-	-	-	-	-
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	456.0	90.43	3.44	250.4	600.17	12.52	15.96
Family Therapy OP	Procedures	130.1	111.02	1.20	6.5	609.50	0.33	1.53
Group Therapy OP	Procedures	328.0	81.05	2.22	19.2	606.29	0.97	3.18
SBIRT	Procedures	-	-	-	0.6	609.50	0.03	0.03
Substance Abuse Residential	Days	299.1	207.50	5.17	60.2	573.07	2.87	8.04
Children's Residential	Days	983.6	214.06	17.55	109.4	522.78	4.77	22.31
RPTC - In State	Days	260.7	353.41	7.68	-	-	-	7.68
RPTC - Out of State	Days	517.9	359.99	15.54	-	-	-	15.54
Detoxification	Procedures	12.1	616.00	0.62	-	-	-	0.62
Medical Evaluation	Procedures	8.6	211.61	0.15	-	-	-	0.15
Psychological Testing	Procedures	64.9	498.43	2.69	-	-	-	2.69
Peer Support Services	Units	2.4	17.00	0.00	0.6	301.50	0.01	0.02
Psychosocial Rehabilitation Services	Procedures	2,816.2	195.79	45.95	833.7	610.46	42.41	88.36
BH Case Management	Units	1,896.7	16.03	2.53	421.2	208.14	7.30	9.84
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	5.9	68.37	0.03	0.6	603.00	0.03	0.06
Other Professional MH/SA	Visits	99.1	40.02	0.33	29.5	610.93	1.50	1.83
Subtotal - Behavioral Health		8,100.4	\$ 177.92	\$ 120.10	1,800.8	\$ 508.07	\$ 76.24	\$ 196.34
Total All Services		45,132.1	\$ 228.19	\$ 858.23	8,139.6	\$ 427.45	\$ 289.94	\$ 1,148.17

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year: SFY 2017
Population: All Populations
Rate Cell: All Rate Cells
Region: MatSu Borough
Tribal/Non-Tribal Members: Tribal
Member Months: 61,955

Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	224.3	\$ 3,111.95	\$ 58.17	133.6	\$ 3,269.80	\$ 36.42	\$ 94.58
Inpatient Maternity Delivery	Days	26.7	2,785.50	6.20	32.2	3,182.47	8.53	14.73
Inpatient Well Newborn	Days	12.6	3,009.58	3.16	17.6	3,284.45	4.82	7.98
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		263.6	\$ 3,073.96	\$ 67.53	183.4	\$ 3,255.90	\$ 49.77	\$ 117.29
Outpatient Hospital								
Outpatient Emergency Room	Visits	498.2	\$ 557.65	\$ 23.15	258.6	\$ 528.25	\$ 11.38	\$ 34.53
Outpatient Surgery	Visits	49.6	2,697.28	11.15	50.9	940.26	3.99	15.14
Outpatient Radiology	Procedures	75.0	175.82	1.10	69.7	502.57	2.92	4.02
Outpatient Pathology/Lab	Procedures	509.0	15.21	0.65	515.0	490.86	21.07	21.71
Outpatient Pharmacy	Procedures	78.1	130.84	0.85	7.9	482.55	0.32	1.17
Other Outpatient	Procedures	200.1	134.01	2.23	438.1	384.41	14.03	16.27
Subtotal - Outpatient Hospital		1,409.9	\$ 333.01	\$ 39.12	1,340.3	\$ 480.92	\$ 53.72	\$ 92.84
Professional								
Inpatient and Outpatient Surgery	Procedures	299.4	\$ 320.84	\$ 8.01	126.9	\$ 398.80	\$ 4.22	\$ 12.22
Anesthesia	Procedures	77.7	442.69	2.87	61.2	449.49	2.29	5.16
Inpatient Visits	Visits	389.3	289.23	9.38	111.6	246.19	2.29	11.67
Emergency Room	Visits	546.8	159.04	7.25	265.9	146.53	3.25	10.49
Office/Home Visits/Consults	Visits	1,686.6	121.05	17.01	343.4	114.33	3.27	20.29
Maternity	Procedures	42.4	566.06	2.00	17.4	997.78	1.45	3.45
Pathology/Lab	Procedures	1,434.5	25.56	3.06	57.3	61.62	0.29	3.35
Radiology	Procedures	769.9	74.81	4.80	489.8	44.09	1.80	6.60
Office Administered Drugs	Procedures	187.7	150.04	2.35	4.8	36.00	0.01	2.36
FQHC/RHC/Tribal Clinic	Visits	248.1	247.30	5.11	1,873.4	575.01	89.77	94.88
Physical Exams	Visits	218.3	165.09	3.00	25.6	145.84	0.31	3.31
Therapy	Visits	1,205.5	199.52	20.04	7.2	32.23	0.02	20.06
Vision	Visits	517.0	78.77	3.39	18.8	157.88	0.25	3.64
Other Professional	Procedures	708.3	93.89	5.54	153.0	63.01	0.80	6.35
Telemedicine	Procedures	8.7	170.40	0.12	6.2	354.70	0.18	0.31
Subtotal - Professional		8,340.2	\$ 135.16	\$ 93.94	3,562.5	\$ 371.22	\$ 110.21	\$ 204.14
Pharmacy								
Psychotropic Drugs	Scripts	656.4	\$ 30.15	\$ 1.65	390.9	\$ 29.77	\$ 0.97	\$ 2.62
Opioid Drugs	Scripts	420.5	107.61	3.77	123.6	63.36	0.65	4.42
All Other Drugs	Scripts	2,643.8	101.19	22.29	2,504.4	84.12	17.56	39.85
Subtotal - Pharmacy		3,720.7	\$ 89.38	\$ 27.71	3,018.8	\$ 76.23	\$ 19.18	\$ 46.89
Ancillary								
Ground Transportation	Trips	592.5	\$ 135.79	\$ 6.70	0.2	\$ 573.90	\$ 0.01	\$ 6.71
Air Transportation	Trips	77.9	1,039.88	6.75	0.6	7,212.25	0.35	7.10
Accommodations	Claims	36.6	410.76	1.25	-	-	-	1.25
DIME/Prosthetics	Procedures	947.1	120.14	9.48	-	-	-	9.48
Dental	Procedures	2,122.0	107.79	19.06	478.8	458.53	18.30	37.36
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		3,776.1	\$ 137.43	\$ 43.25	479.6	\$ 466.76	\$ 18.65	\$ 61.90
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.08	-	\$ 0.00	\$ 0.00	\$ 0.08
Nursing Home	Days	14.7	1,540.03	1.89	0.8	3,235.00	0.21	2.10
Skilled Nursing Facility	Days	25.0	971.73	2.02	-	-	-	2.02
HCBS	Procedures	10,908.1	198.33	180.28	1.0	370.00	0.03	180.31
Case Management	Procedures	363.7	219.53	6.65	19.9	242.58	0.40	7.06
Personal Care	Procedures	2,098.2	88.33	15.44	-	-	-	15.44
Subtotal - LTSS		13,409.8	\$ 184.67	\$ 206.37	21.7	\$ 355.14	\$ 0.64	\$ 207.01
Behavioral Health								
IP Psych Hospital - API	Days	28.9	\$ 1,496.25	\$ 3.60	-	\$ 0.00	\$ 0.00	\$ 3.60
IP Psych Hospital - All Other	Days	191.0	755.74	12.03	-	-	-	12.03
IP General Hospital - MH/SA	Days	24.0	2,642.78	5.29	-	-	-	5.29
OP General Hospital - MH/SA	Visits	0.2	60.85	0.00	-	-	-	0.00
Screening	Procedures	54.2	39.17	0.18	4.1	610.43	0.21	0.38
Assessment	Procedures	53.8	200.24	0.90	7.2	587.32	0.35	1.25
Crisis Services	Procedures	50.0	101.37	0.42	8.1	609.73	0.41	0.84
Medication Services	Procedures	126.1	21.41	0.22	1.0	610.80	0.05	0.27
Methadone Medication Services	Procedures	36.0	12.58	0.04	-	-	-	0.04
Other Opioid Medication Services	Procedures	0.6	21.67	0.00	-	-	-	0.00
Individual Therapy OP	Procedures	534.2	93.68	4.17	25.4	581.30	1.23	5.40
Family Therapy OP	Procedures	147.2	107.17	1.31	2.9	571.24	0.14	1.45
Group Therapy OP	Procedures	418.9	80.04	2.79	12.6	571.42	0.60	3.39
SBIRT	Procedures	-	-	-	2.5	612.00	0.13	0.13
Substance Abuse Residential	Days	96.3	291.37	2.34	119.7	471.25	4.70	7.04
Children's Residential	Days	2,175.1	194.60	35.27	120.5	522.98	5.25	40.52
RPTC - In State	Days	183.2	372.39	5.69	-	-	-	5.69
RPTC - Out of State	Days	359.3	377.38	11.30	-	-	-	11.30
Detoxification	Procedures	4.8	616.00	0.25	0.8	603.00	0.04	0.29
Medical Evaluation	Procedures	26.7	213.26	0.48	0.2	603.00	0.01	0.48
Psychological Testing	Procedures	109.4	376.37	3.43	-	-	-	3.43
Peer Support Services	Units	460.8	17.21	0.66	-	-	-	0.66
Psychosocial Rehabilitation Services	Procedures	2,770.9	207.35	47.88	36.6	608.23	1.86	49.73
BH Case Management	Units	1,175.5	16.06	1.57	9.3	241.67	0.19	1.76
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	37.6	149.46	0.47	-	-	-	0.47
Other Professional MH/SA	Visits	150.1	36.21	0.45	6.2	611.13	0.32	0.77
Subtotal - Behavioral Health		9,214.9	\$ 183.28	\$ 140.74	357.0	\$ 520.18	\$ 15.47	\$ 156.22
Total All Services		40,135.3	\$ 184.97	\$ 618.66	8,963.3	\$ 358.31	\$ 267.63	\$ 886.30

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year: SFY 2017
 Population: All Populations
 Rate Cell: All Rate Cells
 Region: Northern Southeast Region
 Tribal/Non-Tribal Members: Tribal
 Member Months: 66,518

Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	311.6	\$ 2,933.67	\$ 76.17	180.2	\$ 3,200.94	\$ 48.07	\$ 124.24
Inpatient Maternity Delivery	Days	44.9	2,656.27	9.94	13.5	3,062.00	3.45	13.40
Inpatient Well Newborn	Days	18.0	2,600.48	3.91	5.8	2,997.34	1.44	5.35
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		374.5	\$ 2,884.35	\$ 90.02	199.5	\$ 3,185.63	\$ 52.97	\$ 142.99
Outpatient Hospital								
Outpatient Emergency Room	Visits	712.9	\$ 758.25	\$ 45.05	144.9	\$ 577.78	\$ 6.97	\$ 52.02
Outpatient Surgery	Visits	47.1	2,471.91	9.70	63.9	888.89	4.73	14.43
Outpatient Radiology	Procedures	149.2	421.42	5.24	104.1	565.43	4.90	10.14
Outpatient Pathology/Lab	Procedures	472.8	63.39	2.50	259.2	561.02	12.12	14.62
Outpatient Pharmacy	Procedures	112.8	403.58	3.79	21.1	591.94	1.04	4.83
Other Outpatient	Procedures	856.7	148.74	10.62	894.6	354.50	26.43	37.05
Subtotal - Outpatient Hospital		2,351.5	\$ 392.41	\$ 76.90	1,487.8	\$ 453.29	\$ 56.20	\$ 133.10
Professional								
Inpatient and Outpatient Surgery	Procedures	256.2	\$ 284.01	\$ 6.06	177.0	\$ 420.60	\$ 6.20	\$ 12.27
Anesthesia	Procedures	82.1	412.75	2.82	81.2	322.22	2.18	5.00
Inpatient Visits	Visits	294.2	362.74	8.89	197.4	247.40	4.07	12.96
Emergency Room	Visits	709.7	160.25	9.48	122.0	127.14	1.29	10.77
Office/Home Visits/Consults	Visits	1,000.3	115.32	9.61	629.6	117.28	6.15	15.77
Maternity	Procedures	39.5	417.93	1.38	11.5	1,029.75	0.99	2.37
Pathology/Lab	Procedures	645.7	27.42	1.48	121.2	33.63	0.34	1.81
Radiology	Procedures	804.2	75.77	5.08	277.5	46.10	1.07	6.14
Office Administered Drugs	Procedures	80.8	58.64	0.39	20.2	50.97	0.09	0.48
FQHC/RHC/Tribal Clinic	Visits	218.8	267.92	4.89	3,429.4	493.74	141.10	145.99
Physical Exams	Visits	120.9	145.86	1.47	34.6	98.24	0.28	1.75
Therapy	Visits	280.3	245.36	5.73	4.0	87.64	0.03	5.76
Vision	Visits	412.8	71.91	2.47	25.3	156.14	0.33	2.80
Other Professional	Procedures	624.9	76.74	4.00	150.8	76.36	0.96	4.96
Telemedicine	Procedures	6.1	54.41	0.03	93.6	250.22	1.95	1.98
Subtotal - Professional		5,576.6	\$ 137.24	\$ 63.78	5,375.3	\$ 372.90	\$ 167.04	\$ 230.82
Pharmacy								
Psychotropic Drugs	Scripts	286.8	\$ 40.64	\$ 0.97	302.9	\$ 10.83	\$ 0.27	\$ 1.24
Opioid Drugs	Scripts	438.6	79.99	2.92	227.7	16.91	0.32	3.24
All Other Drugs	Scripts	1,752.2	216.37	31.59	2,878.3	55.15	13.23	44.82
Subtotal - Pharmacy		2,477.6	\$ 171.89	\$ 35.49	3,408.9	\$ 48.66	\$ 13.82	\$ 49.31
Ancillary								
Ground Transportation	Trips	1,937.5	\$ 70.46	\$ 11.38	-	\$ 0.00	\$ 0.00	\$ 11.38
Air Transportation	Trips	735.9	911.43	55.89	-	-	-	55.89
Accommodations	Claims	426.5	301.37	10.71	-	-	-	10.71
DIME/Prosthetics	Procedures	697.6	90.96	5.29	-	-	-	5.29
Dental	Procedures	1,263.0	164.16	17.28	1,308.8	450.57	49.14	66.42
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		5,060.5	\$ 238.42	\$ 100.54	1,308.8	\$ 450.57	\$ 49.14	\$ 149.69
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.04	-	\$ 0.00	\$ 0.00	\$ 0.04
Nursing Home	Days	22.6	659.97	1.24	13.5	826.95	0.93	2.17
Skilled Nursing Facility	Days	2,369.9	619.24	122.30	-	-	-	122.30
HCBS	Procedures	5,681.4	188.41	89.20	-	-	-	89.20
Case Management	Procedures	272.4	246.56	5.60	0.2	303.08	0.00	5.60
Personal Care	Procedures	2,541.3	58.04	12.29	-	-	-	12.29
Subtotal - LTSS		10,887.6	\$ 254.23	\$ 230.66	13.7	\$ 820.06	\$ 0.94	\$ 231.60
Behavioral Health								
IP Psych Hospital - API	Days	20.7	\$ 1,518.94	\$ 2.63	-	\$ 0.00	\$ 0.00	\$ 2.63
IP Psych Hospital - All Other	Days	62.8	747.25	3.91	-	-	-	3.91
IP General Hospital - MH/SA	Days	40.2	2,594.62	8.70	-	-	-	8.70
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	51.4	39.52	0.17	28.9	608.12	1.46	1.63
Assessment	Procedures	77.2	259.62	1.67	32.3	603.37	1.62	3.29
Crisis Services	Procedures	37.7	151.44	0.48	34.3	604.43	1.73	2.20
Medication Services	Procedures	721.2	31.14	1.87	-	-	-	1.87
Methadone Medication Services	Procedures	39.7	12.51	0.04	-	-	-	0.04
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	564.7	82.72	3.89	188.0	581.32	9.11	13.00
Family Therapy OP	Procedures	116.4	88.61	0.86	24.0	403.99	0.81	1.67
Group Therapy OP	Procedures	617.7	77.59	3.99	13.2	528.51	0.58	4.57
SBIRT	Procedures	1.6	43.80	0.01	1.1	607.33	0.05	0.06
Substance Abuse Residential	Days	347.8	232.11	6.73	149.7	569.61	7.11	13.83
Children's Residential	Days	1,008.1	176.29	14.81	50.3	420.16	1.76	16.57
RPTC - In State	Days	25.6	371.29	0.79	-	-	-	0.79
RPTC - Out of State	Days	352.3	378.55	11.11	-	-	-	11.11
Detoxification	Procedures	8.1	616.00	0.42	0.4	603.00	0.02	0.43
Medical Evaluation	Procedures	13.2	245.56	0.27	1.4	207.60	0.02	0.29
Psychological Testing	Procedures	37.2	516.60	1.60	1.1	226.38	0.02	1.62
Peer Support Services	Units	1.4	17.00	0.00	-	-	-	0.00
Psychosocial Rehabilitation Services	Procedures	3,301.5	193.93	53.36	163.4	608.65	8.29	61.65
BH Case Management	Units	882.0	16.18	1.19	41.5	227.11	0.79	1.97
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	20.0	74.67	0.12	37.5	589.09	1.84	1.97
Other Professional MH/SA	Visits	159.3	41.51	0.55	71.4	609.04	3.63	4.18
Subtotal - Behavioral Health		8,507.9	\$ 168.08	\$ 119.17	838.5	\$ 555.82	\$ 38.84	\$ 158.00
Total All Services		35,236.3	\$ 244.03	\$ 716.56	12,632.5	\$ 359.97	\$ 378.95	\$ 1,095.50

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year: SFY 2017
 Population: All Populations
 Rate Cell: All Rate Cells
 Region: Northern and Interior Region
 Tribal/Non-Tribal Members: Tribal
 Member Months: 61,830

Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	177.2	\$ 3,166.80	\$ 46.76	237.6	\$ 3,297.33	\$ 65.27	\$ 112.04
Inpatient Maternity Delivery	Days	25.8	2,761.36	5.94	41.0	3,260.50	11.13	17.07
Inpatient Well Newborn	Days	10.1	2,757.87	2.32	22.3	3,148.26	5.86	8.17
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		213.1	\$ 3,098.32	\$ 55.02	300.8	\$ 3,281.26	\$ 82.26	\$ 137.28
Outpatient Hospital								
Outpatient Emergency Room	Visits	251.7	\$ 852.50	\$ 17.88	410.9	\$ 583.70	\$ 19.99	\$ 37.87
Outpatient Surgery	Visits	59.2	2,014.53	9.94	56.7	1,002.84	4.74	14.67
Outpatient Radiology	Procedures	126.2	438.98	4.61	131.0	551.90	6.03	10.64
Outpatient Pathology/Lab	Procedures	348.8	14.83	0.43	475.5	540.43	21.41	21.85
Outpatient Pharmacy	Procedures	57.4	158.66	0.76	69.1	529.44	3.05	3.81
Other Outpatient	Procedures	123.6	185.76	1.91	1,029.6	457.13	39.22	41.14
Subtotal - Outpatient Hospital		966.9	\$ 441.07	\$ 35.54	2,172.7	\$ 521.54	\$ 94.43	\$ 129.97
Professional								
Inpatient and Outpatient Surgery	Procedures	112.4	\$ 433.50	\$ 4.06	205.9	\$ 476.85	\$ 8.18	\$ 12.24
Anesthesia	Procedures	68.9	439.15	2.52	89.3	449.31	3.34	5.86
Inpatient Visits	Visits	236.4	262.00	5.16	186.3	316.20	4.91	10.07
Emergency Room	Visits	300.2	173.07	4.33	139.3	147.82	1.72	6.05
Office/Home Visits/Consults	Visits	312.7	126.69	3.30	963.4	103.11	8.28	11.58
Maternity	Procedures	11.5	760.91	0.73	36.7	1,010.00	3.09	3.81
Pathology/Lab	Procedures	238.3	49.30	0.98	298.5	20.83	0.52	1.50
Radiology	Procedures	469.3	183.28	7.17	347.8	47.84	1.39	8.55
Office Administered Drugs	Procedures	117.6	234.68	2.30	73.4	34.41	0.21	2.51
FQHC/RHC/Tribal Clinic	Visits	22.3	310.59	0.58	2,316.0	525.44	101.41	101.99
Physical Exams	Visits	46.8	171.10	0.67	101.5	116.37	0.98	1.65
Therapy	Visits	209.0	113.96	1.99	5.4	48.44	0.02	2.01
Vision	Visits	352.4	76.73	2.25	27.2	87.43	0.20	2.45
Other Professional	Procedures	343.5	82.60	2.36	176.6	82.64	1.22	3.58
Telemedicine	Procedures	0.8	176.83	0.01	103.8	255.59	2.21	2.22
Subtotal - Professional		2,842.1	\$ 162.16	\$ 38.41	5,071.1	\$ 325.78	\$ 137.67	\$ 176.08
Pharmacy								
Psychotropic Drugs	Scripts	50.8	\$ 35.89	\$ 0.15	193.3	\$ 58.12	\$ 0.94	\$ 1.09
Opioid Drugs	Scripts	113.7	98.86	0.94	283.6	21.02	0.50	1.43
All Other Drugs	Scripts	458.2	212.12	8.10	2,838.2	62.57	14.80	22.90
Subtotal - Pharmacy		622.8	\$ 177.05	\$ 9.19	3,315.1	\$ 58.75	\$ 16.23	\$ 25.42
Ancillary								
Ground Transportation	Trips	4,405.0	\$ 37.64	\$ 13.82	0.2	\$ 487.84	\$ 0.01	\$ 13.83
Air Transportation	Trips	1,640.0	893.72	122.14	0.2	11,729.45	0.19	122.33
Accommodations	Claims	1,332.9	219.53	24.38	-	-	-	24.38
DIME/Prosthetics	Procedures	348.2	97.44	2.83	0.6	32.91	0.00	2.83
Dental	Procedures	1,060.8	167.22	14.78	990.2	514.83	42.48	57.26
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		8,787.0	\$ 243.02	\$ 177.95	991.2	\$ 516.74	\$ 42.68	\$ 220.63
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.05	-	\$ 0.00	\$ 0.00	\$ 0.05
Nursing Home	Days	-	-	-	7.2	3,329.59	1.99	1.99
Skilled Nursing Facility	Days	149.8	632.28	7.89	-	-	-	7.89
HCBS	Procedures	685.3	210.35	12.01	1.0	504.10	0.04	12.05
Case Management	Procedures	26.8	269.85	0.60	16.5	316.03	0.43	1.04
Personal Care	Procedures	575.3	74.04	3.55	594.7	43.84	2.17	5.72
Subtotal - LTSS		1,437.2	\$ 201.27	\$ 24.11	619.3	\$ 89.91	\$ 4.64	\$ 28.75
Behavioral Health								
IP Psych Hospital - API	Days	42.5	\$ 1,336.01	\$ 4.73	-	\$ 0.00	\$ 0.00	\$ 4.73
IP Psych Hospital - All Other	Days	139.0	771.27	8.93	-	-	-	8.93
IP General Hospital - MH/SA	Days	34.9	2,751.09	8.01	1.6	3,247.50	0.42	8.43
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	7.6	68.48	0.04	5.6	544.67	0.26	0.30
Assessment	Procedures	8.9	215.96	0.16	11.3	595.01	0.56	0.72
Crisis Services	Procedures	1.2	95.83	0.01	6.0	608.03	0.30	0.31
Medication Services	Procedures	54.3	23.27	0.11	19.6	608.28	0.99	1.10
Methadone Medication Services	Procedures	19.0	12.50	0.02	-	-	-	0.02
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	68.9	98.77	0.57	27.4	572.98	1.31	1.87
Family Therapy OP	Procedures	24.3	121.47	0.25	5.2	614.07	0.27	0.51
Group Therapy OP	Procedures	73.8	72.15	0.44	5.6	610.17	0.29	0.73
SBIRT	Procedures	0.4	43.80	0.00	19.4	609.63	0.99	0.99
Substance Abuse Residential	Days	144.6	284.49	3.43	214.5	471.07	8.42	11.85
Children's Residential	Days	355.7	190.64	5.65	48.5	468.96	1.90	7.55
RPTC - In State	Days	105.6	312.59	2.75	-	-	-	2.75
RPTC - Out of State	Days	199.3	304.63	5.06	-	-	-	5.06
Detoxification	Procedures	2.3	616.00	0.12	36.3	609.05	1.84	1.96
Medical Evaluation	Procedures	1.9	256.00	0.04	6.4	611.27	0.33	0.37
Psychological Testing	Procedures	15.7	533.98	0.70	-	-	-	0.70
Peer Support Services	Units	10.1	17.00	0.01	-	-	-	0.01
Psychosocial Rehabilitation Services	Procedures	671.7	267.55	14.98	37.8	609.40	1.92	16.90
BH Case Management	Units	350.5	16.06	0.47	5.2	340.30	0.15	0.62
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	2.9	52.21	0.01	14.8	614.29	0.76	0.77
Other Professional MH/SA	Visits	17.3	40.83	0.06	17.7	609.86	0.90	0.96
Subtotal - Behavioral Health		2,352.4	\$ 288.47	\$ 56.55	482.9	\$ 536.43	\$ 21.59	\$ 78.14
Total All Services		17,221.5	\$ 276.47	\$ 396.76	12,953.1	\$ 370.10	\$ 399.50	\$ 796.26

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year: SFY 2017
Population: All Populations
Rate Cell: All Rate Cells
Region: Southern Southeast Region
Tribal/Non-Tribal Members: Tribal
Member Months: 37,138

Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	272.4	\$ 4,620.13	\$ 104.87	111.2	\$ 3,242.84	\$ 30.04	\$ 134.91
Inpatient Maternity Delivery	Days	44.9	3,242.55	12.14	1.9	3,335.00	0.54	12.68
Inpatient Well Newborn	Days	28.8	2,889.33	6.92	1.3	3,335.00	0.36	7.28
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		346.1	\$ 4,297.51	\$ 123.93	114.4	\$ 3,245.45	\$ 30.94	\$ 154.87
Outpatient Hospital								
Outpatient Emergency Room	Visits	663.7	\$ 1,124.68	\$ 62.20	47.5	\$ 543.36	\$ 2.15	\$ 64.35
Outpatient Surgery	Visits	96.0	4,056.36	32.44	32.3	1,111.24	2.99	35.43
Outpatient Radiology	Procedures	343.5	474.79	13.59	35.5	526.53	1.56	15.15
Outpatient Pathology/Lab	Procedures	1,262.4	57.92	6.09	76.9	496.93	3.18	9.28
Outpatient Pharmacy	Procedures	155.4	368.45	4.77	4.8	592.18	0.24	5.01
Other Outpatient	Procedures	983.3	108.85	8.92	291.8	352.87	8.58	17.50
Subtotal - Outpatient Hospital		3,504.3	\$ 438.39	\$ 128.02	488.9	\$ 459.16	\$ 18.71	\$ 146.72
Professional								
Inpatient and Outpatient Surgery	Procedures	257.9	\$ 321.47	\$ 6.91	125.4	\$ 406.70	\$ 4.25	\$ 11.16
Anesthesia	Procedures	129.2	364.13	3.92	38.1	382.89	1.22	5.14
Inpatient Visits	Visits	303.1	228.46	5.77	86.9	288.66	2.09	7.86
Emergency Room	Visits	657.2	168.19	9.21	52.3	150.33	0.66	9.87
Office/Home Visits/Consults	Visits	1,594.3	122.38	16.26	247.8	111.17	2.30	18.56
Maternity	Procedures	52.7	637.45	2.80	1.0	1,031.14	0.08	2.88
Pathology/Lab	Procedures	1,041.4	21.70	1.88	17.8	86.47	0.13	2.01
Radiology	Procedures	1,060.5	88.78	7.85	167.1	45.27	0.63	8.48
Office Administered Drugs	Procedures	105.0	69.44	0.61	3.6	31.31	0.01	0.62
FQHC/RHC/Tribal Clinic	Visits	17.1	305.91	0.44	3,344.3	535.35	149.20	149.64
Physical Exams	Visits	258.8	155.24	3.35	1.0	86.27	0.01	3.36
Therapy	Visits	465.3	98.12	3.80	-	-	-	3.80
Vision	Visits	502.8	80.37	3.37	6.8	136.92	0.08	3.44
Other Professional	Procedures	586.5	97.36	4.76	117.0	72.39	0.71	5.46
Telemedicine	Procedures	29.1	198.37	0.48	43.6	260.00	0.95	1.43
Subtotal - Professional		7,060.9	\$ 121.35	\$ 71.40	4,252.6	\$ 457.96	\$ 162.29	\$ 233.69
Pharmacy								
Psychotropic Drugs	Scripts	301.2	\$ 49.14	\$ 1.23	503.1	\$ 6.49	\$ 0.27	\$ 1.51
Opioid Drugs	Scripts	600.0	66.28	3.31	578.7	8.31	0.40	3.72
All Other Drugs	Scripts	2,750.4	124.32	28.50	4,719.5	39.14	15.39	43.89
Subtotal - Pharmacy		3,651.6	\$ 108.59	\$ 33.04	5,801.3	\$ 33.23	\$ 16.07	\$ 49.11
Ancillary								
Ground Transportation	Trips	2,794.4	\$ 61.12	\$ 14.23	-	\$ 0.00	\$ 0.00	\$ 14.23
Air Transportation	Trips	620.7	1,267.21	65.55	-	-	-	65.55
Accommodations	Claims	456.6	348.41	13.26	-	-	-	13.26
DIME/Prosthetics	Procedures	480.8	120.52	4.83	-	-	-	4.83
Dental	Procedures	2,353.3	98.77	19.37	970.3	465.74	37.66	57.03
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		6,705.8	\$ 209.79	\$ 117.23	970.3	\$ 465.74	\$ 37.66	\$ 154.90
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Nursing Home	Days	14.5	2,928.54	3.55	1.3	730.06	0.08	3.63
Skilled Nursing Facility	Days	990.0	835.31	68.92	-	-	-	68.92
HCBS	Procedures	3,090.3	175.90	45.30	-	-	-	45.30
Case Management	Procedures	210.0	279.84	4.90	-	-	-	4.90
Personal Care	Procedures	1,648.9	57.97	7.97	-	-	-	7.97
Subtotal - LTSS		5,953.9	\$ 263.28	\$ 130.63	1.3	\$ 730.06	\$ 0.08	\$ 130.71
Behavioral Health								
IP Psych Hospital - API	Days	4.5	\$ 1,559.63	\$ 0.59	-	\$ 0.00	\$ 0.00	\$ 0.59
IP Psych Hospital - All Other	Days	45.9	748.93	2.86	-	-	-	2.86
IP General Hospital - MH/SA	Days	20.4	2,846.80	4.83	-	-	-	4.83
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	43.9	38.11	0.14	23.3	612.75	1.19	1.33
Assessment	Procedures	47.5	180.31	0.71	45.9	606.33	2.32	3.03
Crisis Services	Procedures	39.1	75.78	0.25	68.5	607.92	3.47	3.72
Medication Services	Procedures	199.0	21.28	0.35	-	-	-	0.35
Methadone Medication Services	Procedures	-	-	-	-	-	-	-
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	549.3	87.30	4.00	336.0	600.03	16.80	20.80
Family Therapy OP	Procedures	287.9	102.14	2.45	59.5	581.19	2.88	5.33
Group Therapy OP	Procedures	843.0	68.35	4.80	4.8	590.70	0.24	5.04
SBIRT	Procedures	0.3	45.11	0.00	48.1	607.38	2.44	2.44
Substance Abuse Residential	Days	506.0	252.73	10.66	101.1	579.25	4.88	15.54
Children's Residential	Days	2,634.7	192.42	42.25	409.4	530.71	18.11	60.35
RPTC - In State	Days	-	-	-	-	-	-	-
RPTC - Out of State	Days	74.3	353.76	2.19	-	-	-	2.19
Detoxification	Procedures	4.5	616.00	0.23	-	-	-	0.23
Medical Evaluation	Procedures	13.2	241.27	0.27	-	-	-	0.27
Psychological Testing	Procedures	22.3	315.23	0.59	10.7	588.32	0.52	1.11
Peer Support Services	Units	26.5	17.14	0.04	-	-	-	0.04
Psychosocial Rehabilitation Services	Procedures	4,059.7	207.44	70.18	450.4	608.53	22.84	93.02
BH Case Management	Units	1,648.6	16.03	2.20	150.6	314.55	3.95	6.15
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	36.8	70.24	0.22	1.6	610.80	0.08	0.30
Other Professional MH/SA	Visits	133.4	41.79	0.46	65.9	610.52	3.35	3.82
Subtotal - Behavioral Health		11,241.1	\$ 160.41	\$ 150.27	1,775.9	\$ 561.33	\$ 83.07	\$ 233.34
Total All Services		38,463.5	\$ 235.40	\$ 754.53	13,404.7	\$ 312.26	\$ 348.81	\$ 1,103.34

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year:		SFY 2017						
Population:		All Populations						
Rate Cell:		All Rate Cells						
Region:		Western Region						
Tribal/Non-Tribal Members:		Tribal						
Member Months:		302,363						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	85.5	\$ 3,408.48	\$ 24.29	289.3	\$ 3,353.09	\$ 80.83	\$ 105.12
Inpatient Maternity Delivery	Days	4.4	2,902.78	1.06	71.4	3,258.82	19.38	20.43
Inpatient Well Newborn	Days	0.4	3,330.90	0.11	34.0	3,225.06	9.14	9.25
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		90.3	\$ 3,383.69	\$ 25.46	394.7	\$ 3,325.01	\$ 109.35	\$ 134.81
Outpatient Hospital								
Outpatient Emergency Room	Visits	23.4	\$ 908.95	\$ 1.77	761.2	\$ 712.11	\$ 45.17	\$ 46.94
Outpatient Surgery	Visits	28.8	2,240.67	5.38	81.7	1,220.64	8.31	13.69
Outpatient Radiology	Procedures	7.5	265.59	0.17	221.4	544.19	10.04	10.21
Outpatient Pathology/Lab	Procedures	64.4	20.01	0.11	1,542.3	345.38	44.39	44.50
Outpatient Pharmacy	Procedures	20.7	356.59	0.61	151.9	344.75	4.36	4.98
Other Outpatient	Procedures	56.2	147.48	0.69	1,041.6	423.69	36.78	37.47
Subtotal - Outpatient Hospital		200.9	\$ 521.33	\$ 8.73	3,800.1	\$ 470.68	\$ 149.05	\$ 157.78
Professional								
Inpatient and Outpatient Surgery	Procedures	41.4	\$ 462.81	\$ 1.60	221.3	\$ 443.45	\$ 8.18	\$ 9.78
Anesthesia	Procedures	39.8	475.92	1.58	110.0	404.26	3.70	5.28
Inpatient Visits	Visits	120.6	389.22	3.91	256.3	274.56	5.87	9.78
Emergency Room	Visits	25.5	169.41	0.36	294.8	104.85	2.58	2.94
Office/Home Visits/Consults	Visits	125.6	134.48	1.41	2,158.6	102.83	18.50	19.90
Maternity	Procedures	7.5	395.96	0.25	40.2	1,085.22	3.63	3.88
Pathology/Lab	Procedures	65.0	35.15	0.19	607.7	16.17	0.82	1.01
Radiology	Procedures	103.7	218.16	1.89	359.3	42.50	1.27	3.16
Office Administered Drugs	Procedures	16.0	534.45	0.71	112.6	36.91	0.35	1.06
FQHC/RHC/Tribal Clinic	Visits	88.6	373.48	2.76	1,158.2	597.72	57.69	60.44
Physical Exams	Visits	7.5	158.43	0.10	230.8	123.76	2.38	2.48
Therapy	Visits	25.4	143.32	0.30	2.2	78.11	0.01	0.32
Vision	Visits	569.0	99.41	4.71	47.3	49.78	0.20	4.91
Other Professional	Procedures	251.5	76.01	1.59	191.8	74.27	1.19	2.78
Telemedicine	Procedures	1.3	186.82	0.02	318.0	342.34	9.07	9.09
Subtotal - Professional		1,488.4	\$ 172.33	\$ 21.37	6,109.0	\$ 226.74	\$ 115.43	\$ 136.80
Pharmacy								
Psychotropic Drugs	Scripts	29.4	\$ 22.73	\$ 0.06	164.9	\$ 28.86	\$ 0.40	\$ 0.45
Opioid Drugs	Scripts	13.3	51.82	0.06	182.8	17.94	0.27	0.33
All Other Drugs	Scripts	97.7	780.17	6.35	3,030.8	55.83	14.10	20.45
Subtotal - Pharmacy		140.5	\$ 552.28	\$ 6.47	3,378.5	\$ 52.47	\$ 14.77	\$ 21.24
Ancillary								
Ground Transportation	Trips	5,382.7	\$ 27.14	\$ 12.17	4.8	\$ 345.33	\$ 0.14	\$ 12.31
Air Transportation	Trips	1,950.5	610.72	99.27	7.0	8,181.68	4.76	104.03
Accommodations	Claims	723.8	328.67	19.82	-	-	-	19.82
DIME/Prosthetics	Procedures	319.0	127.23	3.38	-	-	-	3.38
Dental	Procedures	934.0	119.73	9.32	892.7	524.81	39.04	48.36
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		9,310.0	\$ 185.56	\$ 143.96	904.5	\$ 582.98	\$ 43.94	\$ 187.91
LTSS								
Hospice	Days	1.0	\$ 197.00	\$ 0.02	-	\$ 0.00	\$ 0.00	\$ 0.02
Nursing Home	Days	-	-	-	5.6	2,686.84	1.24	1.24
Skilled Nursing Facility	Days	34.9	693.92	2.02	578.6	1,029.61	49.64	51.66
HCBS	Procedures	840.5	244.56	17.13	1.4	549.02	0.06	17.19
Case Management	Procedures	18.7	270.41	0.42	42.1	332.89	1.17	1.59
Personal Care	Procedures	513.3	82.81	3.54	-	-	-	3.54
Subtotal - LTSS		1,408.3	\$ 197.06	\$ 23.13	627.7	\$ 996.43	\$ 52.12	\$ 75.25
Behavioral Health								
IP Psych Hospital - API	Days	28.5	\$ 1,485.26	\$ 3.53	-	\$ 0.00	\$ 0.00	\$ 3.53
IP Psych Hospital - All Other	Days	128.3	753.19	8.06	-	-	-	8.06
IP General Hospital - MH/SA	Days	10.9	2,686.22	2.44	7.5	4,645.34	2.90	5.35
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	3.4	50.69	0.01	20.0	610.16	1.02	1.03
Assessment	Procedures	4.7	244.22	0.10	23.7	606.54	1.20	1.29
Crisis Services	Procedures	2.7	105.18	0.02	24.7	605.99	1.25	1.27
Medication Services	Procedures	63.1	20.96	0.11	4.0	602.94	0.20	0.31
Methadone Medication Services	Procedures	-	-	-	-	-	-	-
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	44.5	88.80	0.33	50.8	604.04	2.56	2.89
Family Therapy OP	Procedures	15.6	107.42	0.14	8.3	598.37	0.41	0.55
Group Therapy OP	Procedures	77.1	79.49	0.51	23.9	599.22	1.19	1.70
SBIRT	Procedures	-	-	-	14.9	609.33	0.76	0.76
Substance Abuse Residential	Days	13.5	274.69	0.31	265.5	285.20	6.31	6.62
Children's Residential	Days	236.4	222.38	4.38	247.7	458.89	9.47	13.85
RPTC - In State	Days	58.2	355.57	1.73	-	-	-	1.73
RPTC - Out of State	Days	149.1	381.10	4.74	-	-	-	4.74
Detoxification	Procedures	0.4	616.00	0.02	0.6	607.33	0.03	0.05
Medical Evaluation	Procedures	3.3	235.09	0.06	0.3	606.25	0.02	0.08
Psychological Testing	Procedures	11.2	625.99	0.58	3.6	476.40	0.14	0.73
Peer Support Services	Units	1.0	17.00	0.00	-	-	-	0.00
Psychosocial Rehabilitation Services	Procedures	395.2	239.23	7.88	248.1	607.58	12.56	20.44
BH Case Management	Units	138.0	16.06	0.18	19.6	175.93	0.29	0.47
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	1.5	78.28	0.01	5.6	606.41	0.28	0.29
Other Professional MH/SA	Visits	8.0	56.29	0.04	20.9	609.12	1.06	1.10
Subtotal - Behavioral Health		1,394.5	\$ 302.70	\$ 35.18	989.7	\$ 504.98	\$ 41.65	\$ 76.83
Total All Services		14,033.0	\$ 226.01	\$ 264.30	16,204.1	\$ 389.76	\$ 526.31	\$ 790.61

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year: SFY 2017
Population: All Populations
Rate Cell: All Rate Cells
Region: Statewide
Tribal/Non-Tribal Members: Non-Tribal
Member Months: 1,371,903

Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	369.9	\$ 3,082.39	\$ 95.01	4.4	\$ 3,226.77	\$ 1.19	\$ 96.21
Inpatient Maternity Delivery	Days	50.0	2,893.31	12.07	1.0	3,235.27	0.27	12.33
Inpatient Well Newborn	Days	26.4	2,972.24	6.54	0.4	3,775.48	0.12	6.66
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		446.3	\$ 3,054.68	\$ 113.62	5.8	\$ 3,265.36	\$ 1.58	\$ 115.20
Outpatient Hospital								
Outpatient Emergency Room	Visits	594.1	\$ 692.77	\$ 34.30	11.0	\$ 595.09	\$ 0.55	\$ 34.85
Outpatient Surgery	Visits	95.4	2,449.80	19.49	1.3	861.41	0.10	19.58
Outpatient Radiology	Procedures	221.3	323.70	5.97	3.3	524.34	0.14	6.11
Outpatient Pathology/Lab	Procedures	1,204.4	23.28	2.34	14.8	444.70	0.55	2.88
Outpatient Pharmacy	Procedures	169.7	219.64	3.11	1.0	477.76	0.04	3.14
Other Outpatient	Procedures	944.6	112.75	8.87	42.0	272.14	0.95	9.83
Subtotal - Outpatient Hospital		3,229.6	\$ 275.23	\$ 74.07	73.4	\$ 380.20	\$ 2.33	\$ 76.40
Professional								
Inpatient and Outpatient Surgery	Procedures	595.2	\$ 325.74	\$ 16.16	5.2	\$ 326.56	\$ 0.14	\$ 16.30
Anesthesia	Procedures	162.8	387.48	5.26	2.0	340.92	0.06	5.31
Inpatient Visits	Visits	537.2	227.60	10.19	6.5	210.60	0.11	10.30
Emergency Room	Visits	639.4	164.74	8.78	11.0	121.80	0.11	8.89
Office/Home Visits/Consults	Visits	2,937.7	112.74	27.60	19.6	110.15	0.18	27.78
Maternity	Procedures	57.8	661.23	3.18	1.0	744.26	0.06	3.24
Pathology/Lab	Procedures	2,194.0	22.93	4.19	3.0	33.32	0.01	4.20
Radiology	Procedures	1,415.0	87.14	10.27	15.2	37.63	0.05	10.32
Office Administered Drugs	Procedures	425.4	170.49	6.04	0.7	43.91	0.00	6.05
FQHC/RHC/Tribal Clinic	Visits	551.7	249.47	11.47	123.7	481.13	4.96	16.43
Physical Exams	Visits	409.1	156.67	5.34	1.2	133.70	0.01	5.35
Therapy	Visits	1,358.0	133.37	15.09	1.2	116.14	0.01	15.10
Vision	Visits	599.5	99.54	4.97	0.9	107.35	0.01	4.98
Other Professional	Procedures	1,236.3	82.53	8.50	5.5	38.18	0.02	8.52
Telemedicine	Procedures	10.1	151.87	0.13	1.5	298.85	0.04	0.16
Subtotal - Professional		13,129.1	\$ 125.38	\$ 137.18	198.1	\$ 349.52	\$ 5.77	\$ 142.95
Pharmacy								
Psychotropic Drugs	Scripts	891.7	\$ 41.77	\$ 3.10	9.5	\$ 37.05	\$ 0.03	\$ 3.13
Opioid Drugs	Scripts	660.4	68.80	3.79	5.0	20.33	0.01	3.80
All Other Drugs	Scripts	5,398.1	121.38	54.60	73.7	75.92	0.47	55.07
Subtotal - Pharmacy		6,950.3	\$ 106.17	\$ 61.49	88.2	\$ 68.60	\$ 0.50	\$ 61.99
Ancillary								
Ground Transportation	Trips	826.3	\$ 83.36	\$ 5.74	0.1	\$ 208.88	\$ 0.00	\$ 5.74
Air Transportation	Trips	124.1	843.20	8.72	0.1	4,503.99	0.03	8.74
Accommodations	Claims	60.1	369.69	1.85	-	-	-	1.85
DIME/Prosthetics	Procedures	1,333.7	88.06	9.79	0.0	124.58	0.00	9.79
Dental	Procedures	3,603.8	128.59	38.62	49.2	392.39	1.61	40.23
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		5,948.0	\$ 130.56	\$ 64.71	49.4	\$ 397.95	\$ 1.64	\$ 66.35
LTSS								
Hospice	Days	2.8	\$ 1,159.33	\$ 0.27	-	\$ 0.00	\$ 0.00	\$ 0.27
Nursing Home	Days	117.0	166.28	1.62	0.1	3,316.82	0.03	1.65
Skilled Nursing Facility	Days	1,135.9	630.46	59.68	12.8	1,422.65	1.51	61.19
HCBS	Procedures	9,195.3	168.15	128.85	0.0	471.68	0.00	128.85
Case Management	Procedures	371.2	229.27	7.09	1.8	304.01	0.05	7.14
Personal Care	Procedures	6,617.8	79.02	43.58	-	-	-	43.58
Subtotal - LTSS		17,439.9	\$ 165.89	\$ 241.09	14.7	\$ 1,294.52	\$ 1.59	\$ 242.68
Behavioral Health								
IP Psych Hospital - API	Days	10.3	\$ 1,437.30	\$ 1.24	-	\$ 0.00	\$ 0.00	\$ 1.24
IP Psych Hospital - All Other	Days	73.3	757.32	4.63	-	-	-	4.63
IP General Hospital - MH/SA	Days	35.2	2,663.35	7.82	0.0	7,577.80	0.01	7.83
OP General Hospital - MH/SA	Visits	1.5	151.67	0.02	-	-	-	0.02
Screening	Procedures	30.9	42.49	0.11	1.4	609.46	0.07	0.18
Assessment	Procedures	38.9	199.59	0.65	2.2	608.96	0.11	0.76
Crisis Services	Procedures	47.3	183.91	0.72	1.6	609.18	0.08	0.81
Medication Services	Procedures	184.1	29.94	0.46	2.0	606.50	0.10	0.56
Methadone Medication Services	Procedures	281.6	12.56	0.29	-	-	-	0.29
Other Opioid Medication Services	Procedures	0.0	52.00	0.00	-	-	-	0.00
Individual Therapy OP	Procedures	415.8	89.20	3.09	22.0	585.15	1.07	4.16
Family Therapy OP	Procedures	106.0	97.89	0.86	2.6	543.06	0.12	0.98
Group Therapy OP	Procedures	178.5	73.73	1.10	3.8	510.46	0.16	1.26
SBIRT	Procedures	0.5	44.96	0.00	0.4	610.63	0.02	0.02
Substance Abuse Residential	Days	113.1	222.10	2.09	37.8	546.80	1.72	3.81
Children's Residential	Days	408.2	197.83	6.73	15.8	517.68	0.68	7.41
RPTC - In State	Days	242.3	314.85	6.36	-	-	-	6.36
RPTC - Out of State	Days	160.6	362.91	4.86	-	-	-	4.86
Detoxification	Procedures	5.4	616.00	0.28	1.3	603.68	0.07	0.34
Medical Evaluation	Procedures	20.7	212.17	0.37	0.2	555.12	0.01	0.37
Psychological Testing	Procedures	78.4	268.91	1.76	0.1	195.60	0.00	1.76
Peer Support Services	Units	69.1	17.15	0.10	-	-	-	0.10
Psychosocial Rehabilitation Services	Procedures	1,390.0	177.11	20.52	68.1	609.72	3.46	23.98
BH Case Management	Units	1,062.3	16.05	1.42	15.6	268.40	0.35	1.77
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	22.3	108.46	0.20	1.0	604.77	0.05	0.25
Other Professional MH/SA	Visits	94.7	42.11	0.33	4.9	612.69	0.25	0.58
Subtotal - Behavioral Health		5,071.1	\$ 156.18	\$ 66.00	180.8	\$ 553.10	\$ 8.34	\$ 74.34
Total All Services		52,214.4	\$ 174.24	\$ 758.16	610.5	\$ 427.42	\$ 21.74	\$ 779.91

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year: SFY 2017
Population: All Populations
Rate Cell: All Rate Cells
Region: Anchorage Municipality
Tribal/Non-Tribal Members: Non-Tribal
Member Months: 618,026

Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	424.5	\$ 3,043.66	\$ 107.67	4.8	\$ 3,277.99	\$ 1.30	\$ 108.97
Inpatient Maternity Delivery	Days	53.9	2,859.14	12.85	1.2	3,225.96	0.31	13.16
Inpatient Well Newborn	Days	29.4	2,844.84	6.98	0.1	3,263.57	0.04	7.02
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		507.9	\$ 3,012.54	\$ 127.50	6.1	\$ 3,267.66	\$ 1.65	\$ 129.15
Outpatient Hospital								
Outpatient Emergency Room	Visits	696.7	\$ 574.65	\$ 33.36	10.6	\$ 530.27	\$ 0.47	\$ 33.83
Outpatient Surgery	Visits	85.7	1,979.57	14.14	0.8	892.37	0.06	14.19
Outpatient Radiology	Procedures	78.5	313.78	2.05	1.5	498.60	0.06	2.12
Outpatient Pathology/Lab	Procedures	1,045.4	16.92	1.47	7.4	485.15	0.30	1.77
Outpatient Pharmacy	Procedures	140.8	265.84	3.12	0.4	434.80	0.01	3.13
Other Outpatient	Procedures	973.1	106.98	8.67	34.5	211.22	0.61	9.28
Subtotal - Outpatient Hospital		3,020.1	\$ 249.60	\$ 62.82	55.1	\$ 328.27	\$ 1.51	\$ 64.32
Professional								
Inpatient and Outpatient Surgery	Procedures	589.4	\$ 321.63	\$ 15.80	5.1	\$ 295.43	\$ 0.13	\$ 15.92
Anesthesia	Procedures	165.7	384.86	5.31	1.8	373.31	0.06	5.37
Inpatient Visits	Visits	629.9	236.97	12.44	7.1	193.24	0.12	12.55
Emergency Room	Visits	748.4	166.32	10.37	15.7	137.46	0.18	10.55
Office/Home Visits/Consults	Visits	2,783.7	110.92	25.73	11.2	92.39	0.09	25.82
Maternity	Procedures	61.2	621.46	3.17	1.0	661.19	0.06	3.23
Pathology/Lab	Procedures	2,207.4	21.73	4.00	1.6	57.22	0.01	4.01
Radiology	Procedures	1,487.7	81.13	10.06	21.1	32.43	0.06	10.11
Office Administered Drugs	Procedures	431.7	186.03	6.69	0.4	22.39	0.00	6.69
FQHC/RHC/Tribal Clinic	Visits	479.7	256.66	10.26	43.6	430.52	1.57	11.82
Physical Exams	Visits	514.7	154.40	6.62	0.4	118.67	0.00	6.63
Therapy	Visits	1,341.5	123.91	13.85	0.8	26.25	0.00	13.85
Vision	Visits	588.4	95.99	4.71	0.7	132.93	0.01	4.71
Other Professional	Procedures	1,472.0	79.11	9.70	7.0	36.82	0.02	9.73
Telemedicine	Procedures	7.8	157.30	0.10	0.0	118.70	0.00	0.10
Subtotal - Professional		13,509.1	\$ 123.31	\$ 138.82	117.6	\$ 233.17	\$ 2.28	\$ 141.10
Pharmacy								
Psychotropic Drugs	Scripts	954.5	\$ 35.95	\$ 2.86	8.2	\$ 80.08	\$ 0.05	\$ 2.91
Opioid Drugs	Scripts	551.9	64.16	2.95	3.7	12.95	0.00	2.96
All Other Drugs	Scripts	5,407.0	114.35	51.52	57.0	67.24	0.32	51.84
Subtotal - Pharmacy		6,913.4	\$ 99.52	\$ 57.33	68.9	\$ 65.81	\$ 0.38	\$ 57.71
Ancillary								
Ground Transportation	Trips	598.4	\$ 97.20	\$ 4.85	0.0	\$ 116.05	\$ 0.00	\$ 4.85
Air Transportation	Trips	19.2	1,422.36	2.28	0.0	2,326.29	0.00	2.28
Accommodations	Claims	10.9	465.34	0.42	-	-	-	0.42
DIME/Prosthetics	Procedures	1,477.5	85.09	10.48	-	-	-	10.48
Dental	Procedures	3,967.8	127.57	42.18	5.2	400.87	0.17	42.35
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		6,073.8	\$ 118.95	\$ 60.20	5.2	\$ 406.99	\$ 0.18	\$ 60.38
LTSS								
Hospice	Days	5.3	\$ 861.26	\$ 0.38	-	\$ 0.00	\$ 0.00	\$ 0.38
Nursing Home	Days	6.3	1,645.30	0.87	0.2	3,316.82	0.06	0.93
Skilled Nursing Facility	Days	1,041.6	549.25	47.68	-	-	-	47.68
HCBS	Procedures	10,831.6	162.49	146.67	0.0	370.00	0.00	146.68
Case Management	Procedures	406.1	228.80	7.74	0.6	261.78	0.01	7.76
Personal Care	Procedures	9,000.5	75.38	56.54	-	-	-	56.54
Subtotal - LTSS		21,291.4	\$ 146.47	\$ 259.88	0.9	\$ 997.04	\$ 0.07	\$ 259.95
Behavioral Health								
IP Psych Hospital - API	Days	14.9	\$ 1,405.48	\$ 1.75	-	\$ 0.00	\$ 0.00	\$ 1.75
IP Psych Hospital - All Other	Days	92.8	749.00	5.79	-	-	-	5.79
IP General Hospital - MH/SA	Days	29.9	2,669.01	6.65	-	-	-	6.65
OP General Hospital - MH/SA	Visits	0.2	1,217.58	0.02	-	-	-	0.02
Screening	Procedures	21.6	45.79	0.08	0.8	609.19	0.04	0.12
Assessment	Procedures	32.7	186.32	0.51	1.3	609.22	0.07	0.58
Crisis Services	Procedures	31.8	127.39	0.34	1.2	611.87	0.06	0.40
Medication Services	Procedures	171.4	28.95	0.41	2.0	605.04	0.10	0.51
Methadone Medication Services	Procedures	459.1	12.57	0.48	-	-	-	0.48
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	355.7	87.77	2.60	14.8	575.80	0.71	3.31
Family Therapy OP	Procedures	100.0	98.45	0.82	1.9	596.79	0.09	0.91
Group Therapy OP	Procedures	137.5	69.73	0.80	5.4	489.98	0.22	1.02
SBIRT	Procedures	0.7	47.49	0.00	0.0	603.00	0.00	0.00
Substance Abuse Residential	Days	70.0	270.86	1.58	25.1	521.89	1.09	2.67
Children's Residential	Days	472.6	193.42	7.62	6.0	551.70	0.28	7.89
RPTC - In State	Days	317.9	313.27	8.30	-	-	-	8.30
RPTC - Out of State	Days	182.1	359.86	5.46	-	-	-	5.46
Detoxification	Procedures	8.0	616.00	0.41	0.0	603.00	0.00	0.41
Medical Evaluation	Procedures	25.6	209.43	0.45	-	-	-	0.45
Psychological Testing	Procedures	88.6	247.30	1.83	0.0	603.00	0.00	1.83
Peer Support Services	Units	33.5	17.11	0.05	-	-	-	0.05
Psychosocial Rehabilitation Services	Procedures	1,094.0	183.53	16.73	45.1	608.85	2.29	19.02
BH Case Management	Units	915.8	16.03	1.22	7.4	199.57	0.12	1.35
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	10.3	105.61	0.09	0.1	603.00	0.00	0.09
Other Professional MH/SA	Visits	75.4	41.40	0.26	2.8	619.87	0.14	0.40
Subtotal - Behavioral Health		4,742.0	\$ 162.58	\$ 64.25	114.0	\$ 550.27	\$ 5.23	\$ 69.47
Total All Services		56,057.7	\$ 165.00	\$ 770.80	367.8	\$ 368.62	\$ 11.30	\$ 782.10

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year:		SFY 2017						
Population:		All Populations						
Rate Cell:		All Rate Cells						
Region:		Fairbanks North Star Borough						
Tribal/Non-Tribal Members:		Non-Tribal						
Member Months:		136,425						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid
		Utilization per 1,000	Paid per Unit	PMPM	Utilization per 1,000	Paid per Unit	PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	284.2	\$ 2,998.63	\$ 71.02	0.4	\$ 3,235.00	\$ 0.12	\$ 71.14
Inpatient Maternity Delivery	Days	62.2	2,524.88	13.08	-	-	-	13.08
Inpatient Well Newborn	Days	21.4	2,661.34	4.74	-	-	-	4.74
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal – Inpatient Hospital		367.8	\$ 2,898.92	\$ 88.84	0.4	\$ 3,235.00	\$ 0.12	\$ 88.96
Outpatient Hospital								
Outpatient Emergency Room	Visits	636.0	\$ 809.14	\$ 42.89	0.8	\$ 537.11	\$ 0.04	\$ 42.92
Outpatient Surgery	Visits	88.4	2,487.88	18.33	0.2	572.85	0.01	18.34
Outpatient Radiology	Procedures	414.6	279.92	9.67	0.2	551.60	0.01	9.68
Outpatient Pathology/Lab	Procedures	1,494.1	16.83	2.10	1.2	515.64	0.05	2.15
Outpatient Pharmacy	Procedures	144.3	114.77	1.38	-	-	-	1.38
Other Outpatient	Procedures	639.3	131.73	7.02	2.7	325.16	0.07	7.09
Subtotal – Outpatient Hospital		3,416.7	\$ 285.81	\$ 81.38	5.1	\$ 420.38	\$ 0.18	\$ 81.56
Professional								
Inpatient and Outpatient Surgery	Procedures	509.2	\$ 303.57	\$ 12.88	1.2	\$ 684.30	\$ 0.07	\$ 12.95
Anesthesia	Procedures	154.6	392.85	5.06	0.1	827.73	0.01	5.07
Inpatient Visits	Visits	408.2	226.33	7.70	1.1	121.57	0.01	7.71
Emergency Room	Visits	668.1	163.80	9.12	0.9	88.50	0.01	9.13
Office/Home Visits/Consults	Visits	2,788.1	113.68	26.41	1.8	111.08	0.02	26.43
Maternity	Procedures	64.0	719.56	3.84	0.4	945.20	0.03	3.87
Pathology/Lab	Procedures	1,305.1	25.42	2.76	0.3	30.25	0.00	2.77
Radiology	Procedures	1,175.2	61.34	6.01	3.0	25.07	0.01	6.01
Office Administered Drugs	Procedures	489.6	141.50	5.77	-	-	-	5.77
FQHC/RHC/Tribal Clinic	Visits	578.3	242.56	11.69	34.5	514.12	1.48	13.17
Physical Exams	Visits	370.4	170.45	5.26	0.6	109.00	0.01	5.27
Therapy	Visits	1,959.2	99.78	16.29	-	-	-	16.29
Vision	Visits	695.9	105.96	6.14	-	-	-	6.14
Other Professional	Procedures	999.1	86.11	7.17	0.5	9.00	0.00	7.17
Telemedicine	Procedures	14.6	187.46	0.23	0.7	207.64	0.01	0.24
Subtotal – Professional		12,179.7	\$ 124.48	\$ 126.34	45.0	\$ 437.15	\$ 1.64	\$ 127.98
Pharmacy								
Psychotropic Drugs	Scripts	750.6	\$ 54.51	\$ 3.41	5.5	\$ 14.23	\$ 0.01	\$ 3.42
Opioid Drugs	Scripts	595.1	53.78	2.67	0.8	3.13	0.00	2.67
All Other Drugs	Scripts	4,951.7	110.15	45.45	28.8	71.10	0.17	45.62
Subtotal – Pharmacy		6,297.3	\$ 98.19	\$ 51.53	35.0	\$ 60.71	\$ 0.18	\$ 51.70
Ancillary								
Ground Transportation	Trips	696.9	\$ 68.22	\$ 3.96	-	\$ 0.00	\$ 0.00	\$ 3.96
Air Transportation	Trips	140.4	758.37	8.87	-	-	-	8.87
Accommodations	Claims	43.0	343.31	1.23	-	-	-	1.23
DME/Prosthetics	Procedures	765.5	94.75	6.04	-	-	-	6.04
Dental	Procedures	3,363.2	152.60	42.77	3.2	526.94	0.14	42.91
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		5,009.0	\$ 150.64	\$ 62.88	3.2	\$ 526.94	\$ 0.14	\$ 63.02
LTSS								
Hospice	Days	1.4	\$ 2,865.21	\$ 0.34	-	\$ 0.00	\$ 0.00	\$ 0.34
Nursing Home	Days	-	-	-	-	-	-	-
Skilled Nursing Facility	Days	1,387.1	721.27	83.38	-	-	-	83.38
HCBS	Procedures	5,816.8	201.59	97.72	-	-	-	97.72
Case Management	Procedures	299.3	219.51	5.48	-	-	-	5.48
Personal Care	Procedures	2,125.1	86.21	15.27	-	-	-	15.27
Subtotal – LTSS		9,629.8	\$ 251.93	\$ 202.17	-	\$ 0.00	\$ 0.00	\$ 202.17
Behavioral Health								
IP Psych Hospital - API	Days	1.6	\$ 1,438.58	\$ 0.19	-	\$ 0.00	\$ 0.00	\$ 0.19
IP Psych Hospital - All Other	Days	81.0	750.55	5.07	-	-	-	5.07
IP General Hospital - MH/SA	Days	81.9	2,533.25	17.29	-	-	-	17.29
OP General Hospital - MH/SA	Visits	0.1	3,633.04	0.03	-	-	-	0.03
Screening	Procedures	22.7	44.44	0.08	1.1	610.58	0.05	0.14
Assessment	Procedures	33.4	192.89	0.54	1.4	612.75	0.07	0.61
Crisis Services	Procedures	204.1	263.33	4.48	0.8	608.78	0.04	4.52
Medication Services	Procedures	189.8	22.33	0.35	8.2	608.31	0.41	0.77
Methadone Medication Services	Procedures	478.9	12.55	0.50	-	-	-	0.50
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	462.8	100.95	3.89	1.8	607.33	0.09	3.99
Family Therapy OP	Procedures	127.6	89.19	0.95	-	-	-	0.95
Group Therapy OP	Procedures	121.4	70.20	0.71	0.7	607.88	0.04	0.75
SBIRT	Procedures	-	-	-	0.7	616.00	0.04	0.04
Substance Abuse Residential	Days	39.6	285.13	0.94	148.4	606.22	7.50	8.44
Children's Residential	Days	363.8	192.82	5.85	-	-	-	5.85
RPTC - In State	Days	108.5	318.93	2.88	-	-	-	2.88
RPTC - Out of State	Days	167.5	358.80	5.01	-	-	-	5.01
Detoxification	Procedures	-	-	-	10.6	603.31	0.54	0.54
Medical Evaluation	Procedures	15.0	229.94	0.29	1.3	608.20	0.07	0.36
Psychological Testing	Procedures	22.4	471.44	0.88	-	-	-	0.88
Peer Support Services	Units	19.4	17.00	0.03	-	-	-	0.03
Psychosocial Rehabilitation Services	Procedures	1,321.7	196.86	21.68	78.5	608.89	3.98	25.66
BH Case Management	Units	1,239.4	16.05	1.66	13.9	430.73	0.50	2.16
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	50.0	63.94	0.27	0.3	616.00	0.01	0.28
Other Professional MH/SA	Visits	101.2	45.85	0.39	2.7	611.39	0.14	0.53
Subtotal – Behavioral Health		5,253.6	\$ 168.90	\$ 73.94	270.4	\$ 598.09	\$ 13.48	\$ 87.42
Total All Services		42,154.0	\$ 195.59	\$ 687.08	359.1	\$ 525.60	\$ 15.73	\$ 702.81

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year: SFY 2017
Population: All Populations
Rate Cell: All Rate Cells
Region: Gulf Coast/Aleutian Region
Tribal/Non-Tribal Members: Non-Tribal
Member Months: 46,653

Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	286.3	\$ 3,282.87	\$ 78.32	6.7	\$ 3,139.42	\$ 1.75	\$ 80.07
Inpatient Maternity Delivery	Days	43.7	3,397.01	12.38	-	-	-	12.38
Inpatient Well Newborn	Days	31.6	3,647.76	9.62	-	-	-	9.62
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		361.6	\$ 3,328.59	\$ 100.31	6.7	\$ 3,139.42	\$ 1.75	\$ 102.06
Outpatient Hospital								
Outpatient Emergency Room	Visits	313.0	\$ 1,128.39	\$ 29.44	12.1	\$ 554.64	\$ 0.56	\$ 29.99
Outpatient Surgery	Visits	77.4	3,427.07	22.11	4.9	769.92	0.31	22.42
Outpatient Radiology	Procedures	376.8	380.22	11.94	6.2	554.30	0.29	12.22
Outpatient Pathology/Lab	Procedures	845.7	13.65	0.96	39.9	507.14	1.68	2.65
Outpatient Pharmacy	Procedures	326.1	275.04	7.48	2.8	574.14	0.14	7.61
Other Outpatient	Procedures	1,171.9	144.06	14.07	83.3	333.76	2.32	16.39
Subtotal - Outpatient Hospital		3,111.0	\$ 331.69	\$ 85.99	149.2	\$ 425.96	\$ 5.30	\$ 91.29
Professional								
Inpatient and Outpatient Surgery	Procedures	396.1	\$ 385.36	\$ 12.72	10.3	\$ 174.19	\$ 0.15	\$ 12.87
Anesthesia	Procedures	135.6	385.81	4.36	3.3	275.61	0.08	4.43
Inpatient Visits	Visits	380.4	210.49	6.67	11.6	309.45	0.30	6.97
Emergency Room	Visits	300.7	163.65	4.10	7.7	75.01	0.05	4.15
Office/Home Visits/Consults	Visits	2,153.7	115.46	20.72	68.9	82.31	0.47	21.19
Maternity	Procedures	51.2	726.28	3.10	1.3	1,173.91	0.13	3.22
Pathology/Lab	Procedures	1,768.6	16.53	2.44	15.2	6.73	0.01	2.44
Radiology	Procedures	1,101.1	120.00	11.01	16.5	23.87	0.03	11.04
Office Administered Drugs	Procedures	295.5	81.59	2.01	1.5	32.65	0.00	2.01
FQHC/RHC/Tribal Clinic	Visits	959.9	284.51	22.76	430.6	538.06	19.31	42.07
Physical Exams	Visits	190.9	141.88	2.26	3.9	116.18	0.04	2.29
Therapy	Visits	281.1	112.53	2.64	20.6	165.66	0.28	2.92
Vision	Visits	660.8	98.40	5.42	1.0	83.26	0.01	5.43
Other Professional	Procedures	933.4	61.37	4.77	11.8	22.96	0.02	4.80
Telemedicine	Procedures	2.8	107.14	0.03	1.8	264.85	0.04	0.07
Subtotal - Professional		9,611.9	\$ 131.08	\$ 105.00	606.0	\$ 414.14	\$ 20.91	\$ 125.91
Pharmacy								
Psychotropic Drugs	Scripts	531.7	\$ 19.31	\$ 0.86	15.7	\$ 4.62	\$ 0.01	\$ 0.86
Opioid Drugs	Scripts	413.3	45.47	1.57	18.5	32.97	0.05	1.62
All Other Drugs	Scripts	3,972.2	97.11	32.14	98.3	251.08	2.06	34.20
Subtotal - Pharmacy		4,917.2	\$ 84.35	\$ 34.57	132.5	\$ 191.39	\$ 2.11	\$ 36.68
Ancillary								
Ground Transportation	Trips	1,409.5	\$ 40.83	\$ 4.80	-	\$ 0.00	\$ 0.00	\$ 4.80
Air Transportation	Trips	545.0	611.20	27.76	-	-	-	27.76
Accommodations	Claims	246.4	403.17	8.28	-	-	-	8.28
DIME/Prosthetics	Procedures	658.0	77.43	4.25	-	-	-	4.25
Dental	Procedures	2,887.2	111.85	26.91	151.5	315.45	3.98	30.90
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		5,746.2	\$ 150.35	\$ 71.99	151.5	\$ 315.45	\$ 3.98	\$ 75.98
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Nursing Home	Days	63.8	730.06	3.88	-	-	-	3.88
Skilled Nursing Facility	Days	2,854.8	895.69	213.09	-	-	-	213.09
HCBS	Procedures	6,124.0	201.84	103.00	-	-	-	103.00
Case Management	Procedures	172.6	261.79	3.77	33.2	303.08	0.84	4.60
Personal Care	Procedures	4,498.7	65.00	24.37	-	-	-	24.37
Subtotal - LTSS		13,714.0	\$ 304.60	\$ 348.10	33.2	\$ 303.08	\$ 0.84	\$ 348.94
Behavioral Health								
IP Psych Hospital - API	Days	0.8	\$ 1,894.32	\$ 0.12	-	\$ 0.00	\$ 0.00	\$ 0.12
IP Psych Hospital - All Other	Days	17.2	750.15	1.08	-	-	-	1.08
IP General Hospital - MH/SA	Days	26.2	3,152.64	6.89	-	-	-	6.89
OP General Hospital - MH/SA	Visits	4.6	57.67	0.02	-	-	-	0.02
Screening	Procedures	27.8	44.38	0.10	3.9	609.93	0.20	0.30
Assessment	Procedures	37.3	183.28	0.57	10.3	609.83	0.52	1.09
Crisis Services	Procedures	15.4	86.30	0.11	5.9	606.96	0.30	0.41
Medication Services	Procedures	306.6	27.14	0.69	0.3	616.00	0.01	0.71
Methadone Medication Services	Procedures	-	-	-	-	-	-	-
Other Opioid Medication Services	Procedures	0.3	179.98	0.00	-	-	-	0.00
Individual Therapy OP	Procedures	316.9	90.12	2.38	61.5	544.56	2.79	5.17
Family Therapy OP	Procedures	27.5	98.91	0.23	12.1	598.33	0.60	0.83
Group Therapy OP	Procedures	122.2	61.50	0.63	3.9	590.27	0.19	0.82
SBIRT	Procedures	-	-	-	-	-	-	-
Substance Abuse Residential	Days	-	-	-	77.4	572.57	3.69	3.69
Children's Residential	Days	356.8	213.23	6.34	80.3	571.55	3.82	10.16
RPTC - In State	Days	179.5	361.58	5.41	-	-	-	5.41
RPTC - Out of State	Days	32.9	517.36	1.42	-	-	-	1.42
Detoxification	Procedures	-	-	-	0.5	616.00	0.03	0.03
Medical Evaluation	Procedures	6.2	173.80	0.09	-	-	-	0.09
Psychological Testing	Procedures	22.6	437.41	0.83	0.3	192.76	0.00	0.83
Peer Support Services	Units	-	-	-	-	-	-	-
Psychosocial Rehabilitation Services	Procedures	1,020.1	88.97	7.56	120.4	611.67	6.14	13.70
BH Case Management	Units	424.9	16.34	0.58	22.1	242.63	0.45	1.03
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	4.6	123.68	0.05	1.0	609.50	0.05	0.10
Other Professional MH/SA	Visits	70.0	39.66	0.23	13.9	611.43	0.71	0.94
Subtotal - Behavioral Health		3,020.5	\$ 140.37	\$ 35.33	413.6	\$ 565.87	\$ 19.50	\$ 54.83
Total All Services		40,482.4	\$ 231.60	\$ 781.30	1,492.6	\$ 437.32	\$ 54.40	\$ 835.69

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year:		SFY 2017						
Population:		All Populations						
Rate Cell:		All Rate Cells						
Region:		Kenai Peninsula Borough						
Tribal/Non-Tribal Members:		Non-Tribal						
Member Months:		153,326						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid
		Utilization per 1,000	Paid per Unit	PMPM	Utilization per 1,000	Paid per Unit	PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	344.4	\$ 3,238.54	\$ 92.94	0.1	\$ 1,316.00	\$ 0.01	\$ 92.94
Inpatient Maternity Delivery	Days	48.3	3,426.94	13.79	0.5	3,335.00	0.13	13.92
Inpatient Well Newborn	Days	24.3	3,650.72	7.40	-	-	-	7.40
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal – Inpatient Hospital		417.0	\$ 3,284.41	\$ 114.13	0.5	\$ 3,046.57	\$ 0.14	\$ 114.27
Outpatient Hospital								
Outpatient Emergency Room	Visits	570.7	\$ 974.80	\$ 46.36	1.3	\$ 907.95	\$ 0.09	\$ 46.46
Outpatient Surgery	Visits	124.0	2,924.35	30.23	0.2	873.07	0.02	30.25
Outpatient Radiology	Procedures	528.0	351.47	15.46	0.5	521.72	0.02	15.49
Outpatient Pathology/Lab	Procedures	1,612.5	26.67	3.58	2.3	522.78	0.10	3.68
Outpatient Pharmacy	Procedures	202.2	191.53	3.23	0.9	491.82	0.04	3.26
Other Outpatient	Procedures	1,644.1	96.45	13.21	7.5	327.42	0.21	13.42
Subtotal – Outpatient Hospital		4,681.6	\$ 287.29	\$ 112.08	12.7	\$ 449.39	\$ 0.47	\$ 112.56
Professional								
Inpatient and Outpatient Surgery	Procedures	679.3	\$ 345.36	\$ 19.55	0.8	\$ 224.01	\$ 0.01	\$ 19.56
Anesthesia	Procedures	178.8	361.23	5.38	0.4	347.70	0.01	5.39
Inpatient Visits	Visits	502.4	207.13	8.67	0.8	78.89	0.01	8.68
Emergency Room	Visits	588.9	164.34	8.07	1.3	84.87	0.01	8.07
Office/Home Visits/Consults	Visits	3,379.2	113.70	32.02	4.1	185.25	0.06	32.08
Maternity	Procedures	44.1	880.86	3.23	0.2	1,167.82	0.02	3.26
Pathology/Lab	Procedures	2,475.4	26.69	5.51	0.4	16.42	0.00	5.51
Radiology	Procedures	1,580.8	106.21	13.99	3.6	34.01	0.01	14.00
Office Administered Drugs	Procedures	425.4	138.13	4.90	0.2	54.54	0.00	4.90
FQHC/RHC/Tribal Clinic	Visits	905.8	252.26	19.04	202.9	520.20	8.80	27.84
Physical Exams	Visits	285.5	151.70	3.61	0.2	87.19	0.00	3.61
Therapy	Visits	1,796.4	150.56	22.54	-	-	-	22.54
Vision	Visits	575.7	109.14	5.24	0.5	151.28	0.01	5.24
Other Professional	Procedures	1,192.1	81.25	8.07	1.1	21.00	0.00	8.07
Telemedicine	Procedures	24.5	138.49	0.28	0.5	418.16	0.02	0.30
Subtotal – Professional		14,634.1	\$ 131.28	\$ 160.09	216.9	\$ 495.69	\$ 8.96	\$ 169.05
Pharmacy								
Psychotropic Drugs	Scripts	832.1	\$ 40.76	\$ 2.83	0.4	\$ 9.87	\$ 0.00	\$ 2.83
Opioid Drugs	Scripts	972.1	69.94	5.67	0.4	4.98	0.00	5.67
All Other Drugs	Scripts	6,093.6	137.57	69.86	9.7	345.53	0.28	70.14
Subtotal – Pharmacy		7,897.8	\$ 119.05	\$ 78.35	10.5	\$ 320.29	\$ 0.28	\$ 78.63
Ancillary								
Ground Transportation	Trips	1,427.8	\$ 72.01	\$ 8.57	0.1	\$ 573.90	\$ 0.00	\$ 8.57
Air Transportation	Trips	248.2	605.89	12.53	0.1	11,729.45	0.08	12.61
Accommodations	Claims	83.6	346.64	2.41	-	-	-	2.41
DME/Prosthetics	Procedures	1,800.4	87.07	13.06	-	-	-	13.06
Dental	Procedures	2,993.1	124.16	30.97	86.7	380.66	2.75	33.72
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		6,553.0	\$ 123.69	\$ 67.54	86.9	\$ 391.05	\$ 2.83	\$ 70.38
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Nursing Home	Days	54.1	593.68	2.68	-	-	-	2.68
Skilled Nursing Facility	Days	2,063.2	628.19	108.01	-	-	-	108.01
HCBS	Procedures	9,805.2	167.02	136.47	-	-	-	136.47
Case Management	Procedures	497.3	225.39	9.34	-	-	-	9.34
Personal Care	Procedures	7,431.3	101.84	63.07	-	-	-	63.07
Subtotal – LTSS		19,851.1	\$ 193.17	\$ 319.56	-	\$ 0.00	\$ 0.00	\$ 319.56
Behavioral Health								
IP Psych Hospital - API	Days	3.1	\$ 1,300.58	\$ 0.34	-	\$ 0.00	\$ 0.00	\$ 0.34
IP Psych Hospital - All Other	Days	22.5	754.26	1.42	-	-	-	1.42
IP General Hospital - MH/SA	Days	14.4	2,910.70	3.49	-	-	-	3.49
OP General Hospital - MH/SA	Visits	6.5	55.61	0.03	-	-	-	0.03
Screening	Procedures	40.5	39.81	0.13	1.7	611.27	0.09	0.22
Assessment	Procedures	46.6	205.55	0.80	2.5	611.13	0.13	0.93
Crisis Services	Procedures	14.2	121.62	0.14	0.5	616.00	0.02	0.17
Medication Services	Procedures	69.1	46.59	0.27	-	-	-	0.27
Methadone Medication Services	Procedures	-	-	-	-	-	-	-
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	583.8	87.98	4.28	53.9	608.59	2.73	7.01
Family Therapy OP	Procedures	81.1	106.68	0.72	2.7	607.59	0.13	0.86
Group Therapy OP	Procedures	242.3	91.04	1.84	5.1	599.08	0.25	2.09
SBIRT	Procedures	-	-	-	-	-	-	-
Substance Abuse Residential	Days	213.8	160.55	2.86	11.6	628.61	0.61	3.47
Children's Residential	Days	160.4	233.63	3.12	26.5	201.20	0.44	3.57
RPTC - In State	Days	76.7	376.11	2.40	-	-	-	2.40
RPTC - Out of State	Days	64.1	380.68	2.03	-	-	-	2.03
Detoxification	Procedures	4.1	616.00	0.21	-	-	-	0.21
Medical Evaluation	Procedures	10.9	223.00	0.20	0.1	221.17	0.00	0.20
Psychological Testing	Procedures	54.7	368.19	1.68	-	-	-	1.68
Peer Support Services	Units	3.2	17.00	0.00	-	-	-	0.00
Psychosocial Rehabilitation Services	Procedures	2,354.0	158.53	31.10	226.5	610.32	11.52	42.62
BH Case Management	Units	1,858.5	16.05	2.49	66.9	314.20	1.75	4.24
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	18.6	72.89	0.11	-	-	-	0.11
Other Professional MH/SA	Visits	116.2	40.99	0.40	7.7	609.90	0.39	0.79
Subtotal – Behavioral Health		6,059.6	\$ 118.97	\$ 60.08	405.6	\$ 534.84	\$ 18.08	\$ 78.15
Total All Services		60,094.2	\$ 182.08	\$ 911.84	733.1	\$ 503.55	\$ 30.76	\$ 942.60

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year: SFY 2017
 Population: All Populations
 Rate Cell: All Rate Cells
 Region: MatSu Borough
 Tribal/Non-Tribal Members: Non-Tribal
 Member Months: 271,802

Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	338.4	\$ 3,086.76	\$ 87.05	4.1	\$ 3,272.34	\$ 1.11	\$ 88.16
Inpatient Maternity Delivery	Days	44.6	2,880.07	10.70	0.6	3,292.14	0.17	10.87
Inpatient Well Newborn	Days	26.6	2,918.33	6.47	0.0	3,235.00	0.01	6.49
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		409.6	\$ 3,053.31	\$ 104.23	4.7	\$ 3,274.58	\$ 1.29	\$ 105.51
Outpatient Hospital								
Outpatient Emergency Room	Visits	459.0	\$ 623.21	\$ 23.84	2.2	\$ 515.14	\$ 0.09	\$ 23.93
Outpatient Surgery	Visits	111.5	2,797.76	26.00	0.2	771.54	0.01	26.02
Outpatient Radiology	Procedures	181.2	198.89	3.00	0.9	485.66	0.04	3.04
Outpatient Pathology/Lab	Procedures	1,090.2	15.73	1.43	6.3	467.29	0.24	1.67
Outpatient Pharmacy	Procedures	135.5	125.55	1.42	0.3	369.80	0.01	1.43
Other Outpatient	Procedures	449.8	136.72	5.12	6.9	307.64	0.18	5.30
Subtotal - Outpatient Hospital		2,427.2	\$ 300.66	\$ 60.81	16.9	\$ 411.14	\$ 0.58	\$ 61.39
Professional								
Inpatient and Outpatient Surgery	Procedures	729.5	\$ 328.64	\$ 19.98	2.5	\$ 503.67	\$ 0.10	\$ 20.08
Anesthesia	Procedures	171.4	428.30	6.12	1.1	524.77	0.05	6.17
Inpatient Visits	Visits	489.6	228.88	9.34	2.3	334.35	0.07	9.40
Emergency Room	Visits	540.7	163.27	7.36	2.9	123.53	0.03	7.39
Office/Home Visits/Consults	Visits	3,563.6	116.43	34.58	4.8	99.04	0.04	34.62
Maternity	Procedures	67.1	588.02	3.29	0.6	843.70	0.04	3.33
Pathology/Lab	Procedures	3,011.5	22.80	5.72	0.7	33.08	0.00	5.72
Radiology	Procedures	1,524.8	104.38	13.26	6.8	45.23	0.03	13.29
Office Administered Drugs	Procedures	498.0	197.62	8.20	0.1	32.65	0.00	8.20
FQHC/RHC/Tribal Clinic	Visits	558.3	222.82	10.37	41.2	489.34	1.68	12.05
Physical Exams	Visits	386.6	164.35	5.29	0.4	75.60	0.00	5.30
Therapy	Visits	1,512.8	164.06	20.68	0.2	6.31	0.00	20.68
Vision	Visits	649.6	100.51	5.44	0.2	73.29	0.00	5.44
Other Professional	Procedures	1,199.1	92.78	9.27	1.9	24.69	0.00	9.27
Telemedicine	Procedures	5.7	126.21	0.06	-	-	-	0.06
Subtotal - Professional		14,908.3	\$ 127.95	\$ 158.96	65.8	\$ 373.81	\$ 2.05	\$ 161.01
Pharmacy								
Psychotropic Drugs	Scripts	1,017.6	\$ 46.94	\$ 3.98	3.1	\$ 11.07	\$ 0.00	\$ 3.98
Opioid Drugs	Scripts	843.8	82.39	5.79	0.8	1.66	0.00	5.79
All Other Drugs	Scripts	5,942.9	127.28	63.03	23.6	77.25	0.15	63.19
Subtotal - Pharmacy		7,804.3	\$ 111.95	\$ 72.81	27.5	\$ 67.62	\$ 0.15	\$ 72.96
Ancillary								
Ground Transportation	Trips	713.4	\$ 106.37	\$ 6.32	-	\$ 0.00	\$ 0.00	\$ 6.32
Air Transportation	Trips	20.4	1,568.26	2.67	-	-	-	2.67
Accommodations	Claims	12.4	511.11	0.53	-	-	-	0.53
DIME/Prosthetics	Procedures	1,385.9	96.50	11.14	-	-	-	11.14
Dental	Procedures	3,918.6	122.71	40.07	3.8	423.64	0.13	40.20
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		6,050.7	\$ 120.46	\$ 60.74	3.8	\$ 423.64	\$ 0.13	\$ 60.87
LTSS								
Hospice	Days	1.3	\$ 2,474.08	\$ 0.27	-	\$ 0.00	\$ 0.00	\$ 0.27
Nursing Home	Days	263.0	76.89	1.68	-	-	-	1.68
Skilled Nursing Facility	Days	12.9	404.11	0.43	-	-	-	0.43
HCBS	Procedures	8,766.0	156.63	114.42	-	-	-	114.42
Case Management	Procedures	343.6	226.40	6.48	0.1	240.77	0.00	6.48
Personal Care	Procedures	5,234.9	80.97	35.32	-	-	-	35.32
Subtotal - LTSS		14,621.7	\$ 130.18	\$ 158.62	0.1	\$ 240.77	\$ 0.00	\$ 158.62
Behavioral Health								
IP Psych Hospital - API	Days	12.4	\$ 1,503.07	\$ 1.55	-	\$ 0.00	\$ 0.00	\$ 1.55
IP Psych Hospital - All Other	Days	87.8	778.87	5.70	-	-	-	5.70
IP General Hospital - MH/SA	Days	20.2	2,705.05	4.55	-	-	-	4.55
OP General Hospital - MH/SA	Visits	2.3	56.98	0.01	-	-	-	0.01
Screening	Procedures	42.5	40.75	0.14	0.3	608.57	0.02	0.16
Assessment	Procedures	39.3	195.81	0.64	0.3	607.33	0.01	0.65
Crisis Services	Procedures	27.2	105.31	0.24	0.2	612.75	0.01	0.25
Medication Services	Procedures	44.0	28.01	0.10	0.3	605.17	0.01	0.12
Methadone Medication Services	Procedures	125.9	12.56	0.13	-	-	-	0.13
Other Opioid Medication Services	Procedures	0.2	20.00	0.00	-	-	-	0.00
Individual Therapy OP	Procedures	424.2	88.11	3.12	3.0	592.15	0.15	3.26
Family Therapy OP	Procedures	106.9	102.81	0.92	0.0	603.00	0.00	0.92
Group Therapy OP	Procedures	151.5	71.64	0.90	1.1	588.71	0.05	0.96
SBIRT	Procedures	0.6	38.83	0.00	-	-	-	0.00
Substance Abuse Residential	Days	61.0	219.63	1.12	13.7	502.48	0.57	1.69
Children's Residential	Days	290.7	208.04	5.04	-	-	-	5.04
RPTC - In State	Days	337.6	301.46	8.48	-	-	-	8.48
RPTC - Out of State	Days	219.4	360.75	6.60	-	-	-	6.60
Detoxification	Procedures	4.6	616.00	0.24	0.4	604.44	0.02	0.26
Medical Evaluation	Procedures	23.8	212.07	0.42	0.0	616.00	0.00	0.42
Psychological Testing	Procedures	130.6	242.03	2.63	-	-	-	2.63
Peer Support Services	Units	239.8	17.18	0.34	-	-	-	0.34
Psychosocial Rehabilitation Services	Procedures	1,162.4	164.67	15.95	1.9	612.60	0.09	16.05
BH Case Management	Units	957.9	16.06	1.28	5.5	53.79	0.02	1.31
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	32.9	174.30	0.48	-	-	-	0.48
Other Professional MH/SA	Visits	103.2	43.44	0.37	0.4	612.10	0.02	0.40
Subtotal - Behavioral Health		4,648.8	\$ 157.34	\$ 60.95	27.1	\$ 439.45	\$ 0.99	\$ 61.94
Total All Services		50,870.7	\$ 159.73	\$ 677.11	145.7	\$ 427.86	\$ 5.20	\$ 682.31

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year: SFY 2017
Population: All Populations
Rate Cell: All Rate Cells
Region: Northern Southeast Region
Tribal/Non-Tribal Members: Non-Tribal
Member Months: 77,475

Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	393.7	\$ 3,220.87	\$ 105.68	7.3	\$ 2,350.85	\$ 1.43	\$ 107.11
Inpatient Maternity Delivery	Days	36.6	2,697.39	8.22	3.3	2,965.00	0.80	9.02
Inpatient Well Newborn	Days	18.0	3,007.25	4.50	1.1	3,306.43	0.30	4.80
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		448.3	\$ 3,169.62	\$ 118.40	11.6	\$ 2,612.00	\$ 2.53	\$ 120.93
Outpatient Hospital								
Outpatient Emergency Room	Visits	536.2	\$ 846.60	\$ 37.83	21.8	\$ 602.18	\$ 1.10	\$ 38.93
Outpatient Surgery	Visits	87.0	2,618.01	18.99	8.4	635.61	0.44	19.43
Outpatient Radiology	Procedures	308.5	395.38	10.17	22.1	584.74	1.08	11.25
Outpatient Pathology/Lab	Procedures	1,290.8	58.91	6.34	60.3	588.18	2.95	9.29
Outpatient Pharmacy	Procedures	396.2	211.91	7.00	4.3	564.87	0.20	7.20
Other Outpatient	Procedures	1,367.8	136.64	15.58	218.1	322.78	5.87	21.44
Subtotal - Outpatient Hospital		3,986.7	\$ 286.65	\$ 95.90	335.0	\$ 416.98	\$ 11.64	\$ 107.54
Professional								
Inpatient and Outpatient Surgery	Procedures	463.7	\$ 312.59	\$ 12.08	11.5	\$ 310.77	\$ 0.30	\$ 12.38
Anesthesia	Procedures	135.7	335.81	3.80	6.7	231.53	0.13	3.93
Inpatient Visits	Visits	508.3	207.22	8.78	8.7	158.55	0.11	8.89
Emergency Room	Visits	530.0	158.14	6.98	11.9	113.19	0.11	7.10
Office/Home Visits/Consults	Visits	2,328.6	105.71	20.51	78.2	185.60	1.21	21.72
Maternity	Procedures	35.3	798.70	2.35	3.7	591.89	0.18	2.53
Pathology/Lab	Procedures	1,488.8	26.86	3.33	12.9	30.59	0.03	3.37
Radiology	Procedures	1,062.1	63.25	5.60	19.1	99.41	0.16	5.76
Office Administered Drugs	Procedures	180.1	111.35	1.67	6.4	57.80	0.03	1.70
FQHC/RHC/Tribal Clinic	Visits	448.3	248.67	9.29	534.7	432.08	19.25	28.54
Physical Exams	Visits	249.7	143.58	2.99	1.9	116.46	0.02	3.01
Therapy	Visits	415.4	154.11	5.33	0.9	143.03	0.01	5.35
Vision	Visits	459.4	94.94	3.63	2.8	177.15	0.04	3.68
Other Professional	Procedures	667.1	83.59	4.65	10.2	33.83	0.03	4.68
Telemedicine	Procedures	5.6	52.79	0.02	1.7	176.77	0.03	0.05
Subtotal - Professional		8,978.2	\$ 121.66	\$ 91.02	711.1	\$ 365.23	\$ 21.64	\$ 112.67
Pharmacy								
Psychotropic Drugs	Scripts	741.8	\$ 54.95	\$ 3.40	35.6	\$ 11.91	\$ 0.04	\$ 3.43
Opioid Drugs	Scripts	621.3	66.48	3.44	20.9	23.24	0.04	3.48
All Other Drugs	Scripts	4,207.9	145.52	51.03	283.9	40.05	0.95	51.98
Subtotal - Pharmacy		5,570.9	\$ 124.65	\$ 57.87	340.4	\$ 36.07	\$ 1.02	\$ 58.89
Ancillary								
Ground Transportation	Trips	1,187.4	\$ 76.74	\$ 7.59	-	\$ 0.00	\$ 0.00	\$ 7.59
Air Transportation	Trips	478.3	933.34	37.20	-	-	-	37.20
Accommodations	Claims	251.4	352.84	7.39	-	-	-	7.39
DME/Prosthetics	Procedures	846.2	93.89	6.62	0.2	124.58	0.00	6.62
Dental	Procedures	2,210.4	154.94	28.54	388.9	402.29	13.04	41.58
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		4,973.7	\$ 210.74	\$ 87.35	389.1	\$ 402.18	\$ 13.04	\$ 100.39
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.19	-	\$ 0.00	\$ 0.00	\$ 0.19
Nursing Home	Days	948.2	100.48	7.94	-	-	-	7.94
Skilled Nursing Facility	Days	2,841.1	579.38	137.17	-	-	-	137.17
HCBS	Procedures	8,338.5	211.81	147.18	-	-	-	147.18
Case Management	Procedures	333.3	251.50	6.99	-	-	-	6.99
Personal Care	Procedures	2,437.5	64.82	13.17	-	-	-	13.17
Subtotal - LTSS		14,898.7	\$ 251.81	\$ 312.64	-	\$ 0.00	\$ 0.00	\$ 312.64
Behavioral Health								
IP Psych Hospital - API	Days	10.4	\$ 1,537.57	\$ 1.33	-	\$ 0.00	\$ 0.00	\$ 1.33
IP Psych Hospital - All Other	Days	29.9	754.83	1.88	-	-	-	1.88
IP General Hospital - MH/SA	Days	85.8	2,709.13	19.37	-	-	-	19.37
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	57.2	37.77	0.18	7.1	608.65	0.36	0.54
Assessment	Procedures	84.3	258.84	1.82	8.8	606.27	0.45	2.26
Crisis Services	Procedures	49.1	167.93	0.69	7.0	606.59	0.35	1.04
Medication Services	Procedures	1,015.5	32.09	2.72	-	-	-	2.72
Methadone Medication Services	Procedures	-	-	-	-	-	-	-
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	550.3	80.09	3.67	73.1	574.87	3.50	7.18
Family Therapy OP	Procedures	139.6	83.73	0.97	11.2	372.26	0.35	1.32
Group Therapy OP	Procedures	442.8	73.13	2.70	5.0	334.34	0.14	2.84
SBIRT	Procedures	1.4	43.80	0.01	0.6	609.50	0.03	0.04
Substance Abuse Residential	Days	509.6	190.63	8.10	33.3	607.86	1.69	9.78
Children's Residential	Days	506.5	205.94	8.69	-	-	-	8.69
RPTC - In State	Days	106.1	352.41	3.12	-	-	-	3.12
RPTC - Out of State	Days	163.4	369.16	5.03	-	-	-	5.03
Detoxification	Procedures	4.0	616.00	0.21	0.2	616.00	0.01	0.21
Medical Evaluation	Procedures	14.2	228.85	0.27	0.3	239.19	0.01	0.28
Psychological Testing	Procedures	45.4	343.54	1.30	0.9	60.74	0.00	1.30
Peer Support Services	Units	2.3	17.00	0.00	-	-	-	0.00
Psychosocial Rehabilitation Services	Procedures	2,852.9	198.97	47.30	135.8	609.48	6.90	54.20
BH Case Management	Units	1,167.7	16.05	1.56	16.7	236.19	0.33	1.89
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	30.2	87.50	0.22	11.6	604.01	0.58	0.80
Other Professional MH/SA	Visits	184.0	40.06	0.61	24.0	609.96	1.22	1.83
Subtotal - Behavioral Health		8,052.6	\$ 166.52	\$ 111.74	335.6	\$ 569.06	\$ 15.92	\$ 127.66
Total All Services		46,908.9	\$ 223.82	\$ 874.92	2,122.9	\$ 371.90	\$ 65.79	\$ 940.71

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year: SFY 2017
 Population: All Populations
 Rate Cell: All Rate Cells
 Region: Northern and Interior Region
 Tribal/Non-Tribal Members: Non-Tribal
 Member Months: 24,394

Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	260.7	\$ 2,517.38	\$ 54.70	10.8	\$ 3,269.09	\$ 2.95	\$ 57.64
Inpatient Maternity Delivery	Days	38.4	2,870.54	9.18	1.0	3,235.00	0.27	9.44
Inpatient Well Newborn	Days	14.3	2,638.16	3.14	1.5	3,235.00	0.40	3.53
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		313.4	\$ 2,566.13	\$ 67.01	13.3	\$ 3,262.78	\$ 3.61	\$ 70.62
Outpatient Hospital								
Outpatient Emergency Room	Visits	191.9	\$ 961.76	\$ 15.38	20.2	\$ 603.94	\$ 1.02	\$ 16.39
Outpatient Surgery	Visits	76.2	2,111.31	13.42	1.5	2,028.95	0.25	13.67
Outpatient Radiology	Procedures	237.6	334.15	6.62	9.3	594.64	0.46	7.08
Outpatient Pathology/Lab	Procedures	662.6	18.02	1.00	33.5	459.12	1.28	2.28
Outpatient Pharmacy	Procedures	44.3	81.65	0.30	3.9	582.11	0.19	0.49
Other Outpatient	Procedures	239.1	196.80	3.92	103.8	438.51	3.79	7.71
Subtotal - Outpatient Hospital		1,451.7	\$ 335.82	\$ 40.63	172.2	\$ 487.29	\$ 6.99	\$ 47.62
Professional								
Inpatient and Outpatient Surgery	Procedures	372.9	\$ 343.26	\$ 10.67	14.8	\$ 368.19	\$ 0.45	\$ 11.12
Anesthesia	Procedures	127.9	366.75	3.91	4.9	110.49	0.05	3.95
Inpatient Visits	Visits	277.4	253.46	5.86	16.7	205.32	0.29	6.15
Emergency Room	Visits	227.8	162.13	3.08	6.9	44.16	0.03	3.10
Office/Home Visits/Consults	Visits	1,821.1	110.70	16.80	54.6	104.33	0.47	17.27
Maternity	Procedures	39.8	880.17	2.92	1.0	1,560.71	0.13	3.05
Pathology/Lab	Procedures	1,283.5	20.14	2.15	19.7	6.36	0.01	2.16
Radiology	Procedures	811.2	71.82	4.86	19.7	22.47	0.04	4.89
Office Administered Drugs	Procedures	606.6	114.05	5.76	2.0	24.58	0.00	5.77
FQHC/RHC/Tribal Clinic	Visits	347.8	302.28	8.76	410.3	459.36	15.71	24.47
Physical Exams	Visits	162.8	163.09	2.21	6.4	150.37	0.08	2.29
Therapy	Visits	422.1	115.17	4.05	0.5	52.23	0.00	4.05
Vision	Visits	551.0	107.19	4.92	3.9	24.80	0.01	4.93
Other Professional	Procedures	792.0	81.14	5.36	4.9	13.98	0.01	5.36
Telemedicine	Procedures	2.5	190.05	0.04	4.4	334.17	0.12	0.16
Subtotal - Professional		7,846.3	\$ 124.41	\$ 81.35	570.6	\$ 365.65	\$ 17.39	\$ 98.74
Pharmacy								
Psychotropic Drugs	Scripts	319.8	\$ 67.15	\$ 1.79	18.7	\$ 9.98	\$ 0.02	\$ 1.80
Opioid Drugs	Scripts	273.0	61.64	1.40	17.7	21.72	0.03	1.43
All Other Drugs	Scripts	3,208.9	104.72	28.00	313.9	36.44	0.95	28.96
Subtotal - Pharmacy		3,801.7	\$ 98.47	\$ 31.19	350.3	\$ 34.28	\$ 1.00	\$ 32.19
Ancillary								
Ground Transportation	Trips	826.9	\$ 62.91	\$ 4.33	-	\$ 0.00	\$ 0.00	\$ 4.33
Air Transportation	Trips	207.6	938.50	16.24	-	-	-	16.24
Accommodations	Claims	260.7	363.51	7.90	-	-	-	7.90
DIME/Prosthetics	Procedures	1,253.9	68.30	7.14	-	-	-	7.14
Dental	Procedures	3,129.2	128.37	33.48	64.0	400.16	2.13	35.61
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		5,678.4	\$ 145.99	\$ 69.08	64.0	\$ 400.16	\$ 2.13	\$ 71.21
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Nursing Home	Days	16.2	707.94	0.96	-	-	-	0.96
Skilled Nursing Facility	Days	116.1	690.83	6.68	-	-	-	6.68
HCBS	Procedures	1,720.3	134.14	19.23	-	-	-	19.23
Case Management	Procedures	136.3	170.41	1.94	2.0	303.08	0.05	1.98
Personal Care	Procedures	6,040.4	58.64	29.52	-	-	-	29.52
Subtotal - LTSS		8,029.3	\$ 87.16	\$ 58.32	2.0	\$ 303.08	\$ 0.05	\$ 58.37
Behavioral Health								
IP Psych Hospital - API	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
IP Psych Hospital - All Other	Days	33.0	845.13	2.32	-	-	-	2.32
IP General Hospital - MH/SA	Days	15.7	2,810.63	3.69	-	-	-	3.69
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	8.9	79.72	0.06	-	-	-	0.06
Assessment	Procedures	7.9	205.97	0.14	3.0	605.17	0.15	0.28
Crisis Services	Procedures	17.2	245.66	0.35	-	-	-	0.35
Medication Services	Procedures	31.5	24.30	0.06	3.4	604.86	0.17	0.24
Methadone Medication Services	Procedures	-	-	-	-	-	-	-
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	199.7	136.95	2.28	18.2	612.84	0.93	3.21
Family Therapy OP	Procedures	16.2	109.78	0.15	9.8	583.90	0.48	0.63
Group Therapy OP	Procedures	27.1	79.93	0.18	-	-	-	0.18
SBIRT	Procedures	-	-	-	2.0	612.75	0.10	0.10
Substance Abuse Residential	Days	-	-	-	18.7	603.00	0.94	0.94
Children's Residential	Days	104.8	285.68	2.49	-	-	-	2.49
RPTC - In State	Days	-	-	-	-	-	-	-
RPTC - Out of State	Days	2.5	600.00	0.12	-	-	-	0.12
Detoxification	Procedures	-	-	-	6.4	604.00	0.32	0.32
Medical Evaluation	Procedures	4.9	198.74	0.08	1.0	609.50	0.05	0.13
Psychological Testing	Procedures	20.2	508.90	0.86	-	-	-	0.86
Peer Support Services	Units	-	-	-	-	-	-	-
Psychosocial Rehabilitation Services	Procedures	434.9	275.87	10.00	42.8	611.52	2.18	12.18
BH Case Management	Units	341.9	16.03	0.46	7.9	190.88	0.13	0.58
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	26.1	55.73	0.12	0.5	603.00	0.02	0.15
Other Professional MH/SA	Visits	22.1	52.70	0.10	4.4	608.78	0.22	0.32
Subtotal - Behavioral Health		1,314.4	\$ 214.11	\$ 23.45	118.1	\$ 579.13	\$ 5.70	\$ 29.15
Total All Services		28,435.1	\$ 156.58	\$ 371.04	1,290.3	\$ 342.90	\$ 36.87	\$ 407.91

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year: SFY 2017
 Population: All Populations
 Rate Cell: All Rate Cells
 Region: Southern Southeast Region
 Tribal/Non-Tribal Members: Non-Tribal
 Member Months: 37,948

Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	271.6	\$ 3,258.35	\$ 73.76	1.6	\$ 3,295.00	\$ 0.43	\$ 74.19
Inpatient Maternity Delivery	Days	37.3	2,922.81	9.09	-	-	-	9.09
Inpatient Well Newborn	Days	22.8	3,155.20	5.99	-	-	-	5.99
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		331.7	\$ 3,213.53	\$ 88.83	1.6	\$ 3,295.00	\$ 0.43	\$ 89.27
Outpatient Hospital								
Outpatient Emergency Room	Visits	620.1	\$ 1,155.36	\$ 59.70	1.9	\$ 593.17	\$ 0.09	\$ 59.80
Outpatient Surgery	Visits	108.8	2,619.34	23.74	0.6	771.85	0.04	23.79
Outpatient Radiology	Procedures	544.5	517.73	23.49	1.9	569.58	0.09	23.58
Outpatient Pathology/Lab	Procedures	2,677.1	60.12	13.41	10.8	577.87	0.52	13.93
Outpatient Pharmacy	Procedures	298.5	389.76	9.70	0.3	572.85	0.02	9.71
Other Outpatient	Procedures	1,748.4	86.11	12.55	18.0	390.17	0.59	13.13
Subtotal - Outpatient Hospital		5,997.5	\$ 285.32	\$ 142.60	33.5	\$ 480.94	\$ 1.34	\$ 143.94
Professional								
Inpatient and Outpatient Surgery	Procedures	406.3	\$ 296.68	\$ 10.05	5.4	\$ 228.98	\$ 0.10	\$ 10.15
Anesthesia	Procedures	142.3	322.07	3.82	2.5	205.56	0.04	3.86
Inpatient Visits	Visits	408.6	153.24	5.22	3.8	198.38	0.06	5.28
Emergency Room	Visits	635.9	162.89	8.63	0.6	122.55	0.01	8.64
Office/Home Visits/Consults	Visits	2,986.4	110.56	27.51	19.0	48.25	0.08	27.59
Maternity	Procedures	39.2	712.63	2.33	-	-	-	2.33
Pathology/Lab	Procedures	990.1	23.26	1.92	2.5	30.04	0.01	1.93
Radiology	Procedures	1,255.1	56.26	5.88	4.7	72.40	0.03	5.91
Office Administered Drugs	Procedures	169.5	39.02	0.55	-	-	-	0.55
FQHC/RHC/Tribal Clinic	Visits	37.9	282.71	0.89	505.3	508.02	21.39	22.29
Physical Exams	Visits	287.4	137.30	3.29	0.3	68.45	0.00	3.29
Therapy	Visits	637.5	102.02	5.42	0.6	225.98	0.01	5.43
Vision	Visits	455.0	86.22	3.27	-	-	-	3.27
Other Professional	Procedures	648.6	92.76	5.01	0.9	8.53	0.00	5.01
Telemedicine	Procedures	25.3	195.43	0.41	6.0	472.59	0.24	0.65
Subtotal - Professional		9,125.2	\$ 110.74	\$ 84.21	551.8	\$ 477.78	\$ 21.97	\$ 106.18
Pharmacy								
Psychotropic Drugs	Scripts	949.0	\$ 54.34	\$ 4.30	12.6	\$ 4.98	\$ 0.01	\$ 4.30
Opioid Drugs	Scripts	804.5	72.42	4.85	12.6	3.41	0.00	4.86
All Other Drugs	Scripts	6,424.4	139.85	74.87	128.1	43.54	0.46	75.34
Subtotal - Pharmacy		8,177.8	\$ 123.29	\$ 84.02	153.4	\$ 37.05	\$ 0.47	\$ 84.50
Ancillary								
Ground Transportation	Trips	1,561.8	\$ 68.72	\$ 8.94	-	\$ 0.00	\$ 0.00	\$ 8.94
Air Transportation	Trips	548.3	1,030.09	47.07	-	-	-	47.07
Accommodations	Claims	346.9	331.10	9.57	-	-	-	9.57
DIME/Prosthetics	Procedures	775.4	77.93	5.04	-	-	-	5.04
Dental	Procedures	3,216.3	108.06	28.96	214.7	418.20	7.48	36.45
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		6,448.7	\$ 185.31	\$ 99.58	214.7	\$ 418.20	\$ 7.48	\$ 107.06
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Nursing Home	Days	-	-	-	-	-	-	-
Skilled Nursing Facility	Days	1,266.8	894.49	94.43	-	-	-	94.43
HCBS	Procedures	6,616.9	181.08	99.85	-	-	-	99.85
Case Management	Procedures	255.8	270.98	5.78	-	-	-	5.78
Personal Care	Procedures	2,897.9	64.25	15.52	-	-	-	15.52
Subtotal - LTSS		11,037.4	\$ 234.37	\$ 215.57	-	\$ 0.00	\$ 0.00	\$ 215.57
Behavioral Health								
IP Psych Hospital - API	Days	1.6	\$ 2,113.65	\$ 0.28	-	\$ 0.00	\$ 0.00	\$ 0.28
IP Psych Hospital - All Other	Days	13.6	762.29	0.86	-	-	-	0.86
IP General Hospital - MH/SA	Days	70.8	2,523.29	14.89	-	-	-	14.89
OP General Hospital - MH/SA	Visits	1.3	20.80	0.00	-	-	-	0.00
Screening	Procedures	57.9	40.92	0.20	4.1	608.00	0.21	0.41
Assessment	Procedures	58.8	172.85	0.85	7.3	608.65	0.37	1.22
Crisis Services	Procedures	72.4	85.32	0.51	7.9	607.68	0.40	0.92
Medication Services	Procedures	80.0	39.43	0.26	-	-	-	0.26
Methadone Medication Services	Procedures	-	-	-	-	-	-	-
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	525.9	86.43	3.79	53.4	600.60	2.67	6.46
Family Therapy OP	Procedures	317.5	98.47	2.61	6.0	608.47	0.30	2.91
Group Therapy OP	Procedures	633.7	71.12	3.76	-	-	-	3.76
SBIRT	Procedures	0.3	43.80	0.00	4.7	609.07	0.24	0.24
Substance Abuse Residential	Days	415.2	273.64	9.47	6.0	603.00	0.30	9.77
Children's Residential	Days	1,478.0	179.55	22.12	250.4	644.15	13.44	35.56
RPTC - In State	Days	27.8	371.29	0.86	-	-	-	0.86
RPTC - Out of State	Days	32.3	412.69	1.11	-	-	-	1.11
Detoxification	Procedures	-	-	-	-	-	-	-
Medical Evaluation	Procedures	22.8	192.84	0.37	-	-	-	0.37
Psychological Testing	Procedures	19.3	460.00	0.74	0.3	603.00	0.02	0.76
Peer Support Services	Units	147.4	16.94	0.21	-	-	-	0.21
Psychosocial Rehabilitation Services	Procedures	2,454.5	189.75	38.81	21.2	606.69	1.07	39.88
BH Case Management	Units	1,529.2	16.03	2.04	9.8	253.29	0.21	2.25
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	63.6	73.65	0.39	8.5	604.93	0.43	0.82
Other Professional MH/SA	Visits	144.5	41.40	0.50	13.3	608.88	0.67	1.17
Subtotal - Behavioral Health		8,168.3	\$ 153.70	\$ 104.62	393.1	\$ 621.02	\$ 20.34	\$ 124.96
Total All Services		49,286.6	\$ 199.51	\$ 819.44	1,348.1	\$ 463.30	\$ 52.05	\$ 871.48

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix B - Detailed Summaries - Composite Population by Region

Fiscal Year: SFY 2017
 Population: All Populations
 Rate Cell: All Rate Cells
 Region: Western Region
 Tribal/Non-Tribal Members: Non-Tribal
 Member Months: 5,855

Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	178.3	\$ 2,736.89	\$ 40.67	129.1	\$ 3,660.06	\$ 39.39	\$ 80.06
Inpatient Maternity Delivery	Days	14.3	2,673.39	3.20	22.5	3,675.25	6.91	10.10
Inpatient Well Newborn	Days	6.1	2,798.02	1.43	55.3	4,109.88	18.95	20.39
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		198.8	\$ 2,734.20	\$ 45.30	207.0	\$ 3,781.96	\$ 65.24	\$ 110.55
Outpatient Hospital								
Outpatient Emergency Room	Visits	176.3	\$ 498.98	\$ 7.33	819.9	\$ 683.95	\$ 46.73	\$ 54.06
Outpatient Surgery	Visits	41.0	3,119.28	10.66	51.2	1,274.60	5.44	16.10
Outpatient Radiology	Procedures	59.4	559.44	2.77	151.7	410.25	5.19	7.96
Outpatient Pathology/Lab	Procedures	223.4	16.35	0.30	961.3	243.86	19.54	19.84
Outpatient Pharmacy	Procedures	2.0	12.55	0.00	51.2	357.30	1.53	1.53
Other Outpatient	Procedures	20.5	306.79	0.52	1,461.4	222.43	27.09	27.61
Subtotal - Outpatient Hospital		522.7	\$ 495.63	\$ 21.59	3,496.8	\$ 362.08	\$ 105.51	\$ 127.10
Professional								
Inpatient and Outpatient Surgery	Procedures	237.8	\$ 323.89	\$ 6.42	168.1	\$ 377.62	\$ 5.29	\$ 11.71
Anesthesia	Procedures	79.9	275.81	1.84	61.5	352.19	1.80	3.64
Inpatient Visits	Visits	307.5	156.25	4.00	219.3	121.14	2.21	6.22
Emergency Room	Visits	202.9	136.61	2.31	448.9	82.51	3.09	5.40
Office/Home Visits/Consults	Visits	651.8	108.73	5.91	1,067.9	75.04	6.68	12.58
Maternity	Procedures	14.3	1,010.23	1.21	14.3	848.31	1.01	2.22
Pathology/Lab	Procedures	489.9	24.07	0.98	82.0	43.01	0.29	1.28
Radiology	Procedures	543.2	61.90	2.80	276.7	25.76	0.59	3.40
Office Administered Drugs	Procedures	65.6	74.54	0.41	6.1	46.24	0.02	0.43
FQHC/RHC/Tribal Clinic	Visits	258.3	274.04	5.90	797.3	591.15	39.28	45.18
Physical Exams	Visits	77.9	151.99	0.99	110.7	163.41	1.51	2.49
Therapy	Visits	14.3	121.86	0.15	2.0	52.23	0.01	0.15
Vision	Visits	311.6	89.23	2.32	51.2	46.80	0.20	2.52
Other Professional	Procedures	368.9	157.35	4.84	155.8	74.62	0.97	5.81
Telemedicine	Procedures	-	-	-	200.9	283.18	4.74	4.74
Subtotal - Professional		3,623.9	\$ 132.65	\$ 40.06	3,662.8	\$ 221.80	\$ 67.70	\$ 107.76
Pharmacy								
Psychotropic Drugs	Scripts	131.2	\$ 11.29	\$ 0.12	334.1	\$ 8.35	\$ 0.23	\$ 0.36
Opioid Drugs	Scripts	127.1	92.21	0.98	116.8	43.79	0.43	1.40
All Other Drugs	Scripts	914.2	94.24	7.18	2,547.8	100.17	21.27	28.45
Subtotal - Pharmacy		1,172.4	\$ 84.74	\$ 8.28	2,998.7	\$ 87.75	\$ 21.93	\$ 30.21
Ancillary								
Ground Transportation	Trips	3,183.2	\$ 31.56	\$ 8.37	10.2	\$ 154.45	\$ 0.13	\$ 8.50
Air Transportation	Trips	1,231.9	556.06	57.08	12.3	3,662.70	3.75	60.84
Accommodations	Claims	543.2	314.36	14.23	-	-	-	14.23
DIME/Prosthetics	Procedures	541.1	71.31	3.22	-	-	-	3.22
Dental	Procedures	729.7	141.85	8.63	442.7	410.46	15.14	23.77
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		6,229.0	\$ 176.32	\$ 91.52	465.3	\$ 490.78	\$ 19.03	\$ 110.55
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Nursing Home	Days	-	-	-	-	-	-	-
Skilled Nursing Facility	Days	213.2	353.41	6.28	2,992.6	1,422.65	354.78	361.06
HCBS	Procedures	2,797.8	220.53	51.42	4.1	573.37	0.20	51.61
Case Management	Procedures	118.9	269.11	2.67	82.0	345.08	2.36	5.02
Personal Care	Procedures	1,395.8	32.64	3.80	-	-	-	3.80
Subtotal - LTSS		4,525.7	\$ 170.11	\$ 64.16	3,078.6	\$ 1,392.82	\$ 357.33	\$ 421.49
Behavioral Health								
IP Psych Hospital - API	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
IP Psych Hospital - All Other	Days	79.9	728.41	4.85	-	-	-	4.85
IP General Hospital - MH/SA	Days	2.0	1,288.00	0.22	2.0	7,577.80	1.29	1.51
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	6.1	53.79	0.03	12.3	611.67	0.63	0.65
Assessment	Procedures	10.2	172.05	0.15	12.3	611.67	0.63	0.77
Crisis Services	Procedures	-	-	-	22.5	607.73	1.14	1.14
Medication Services	Procedures	233.7	25.84	0.50	28.7	605.79	1.45	1.95
Methadone Medication Services	Procedures	508.3	12.56	0.53	-	-	-	0.53
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	45.1	98.34	0.37	71.7	607.09	3.63	4.00
Family Therapy OP	Procedures	24.6	110.28	0.23	2.0	603.00	0.10	0.33
Group Therapy OP	Procedures	51.2	45.00	0.19	36.9	593.19	1.82	2.02
SBIRT	Procedures	-	-	-	26.6	610.00	1.35	1.35
Substance Abuse Residential	Days	295.2	249.08	6.13	619.0	246.81	12.73	18.86
Children's Residential	Days	30.7	616.00	1.58	-	-	-	1.58
RPTC - In State	Days	-	-	-	-	-	-	-
RPTC - Out of State	Days	-	-	-	-	-	-	-
Detoxification	Procedures	-	-	-	2.0	603.00	0.10	0.10
Medical Evaluation	Procedures	2.0	257.20	0.04	-	-	-	0.04
Psychological Testing	Procedures	10.2	218.91	0.19	2.0	192.76	0.03	0.22
Peer Support Services	Units	-	-	-	-	-	-	-
Psychosocial Rehabilitation Services	Procedures	131.2	68.61	0.75	209.1	612.30	10.67	11.42
BH Case Management	Units	4.1	16.24	0.01	41.0	30.15	0.10	0.11
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	4.1	40.30	0.01	6.1	607.33	0.31	0.32
Other Professional MH/SA	Visits	14.3	40.34	0.05	24.6	610.58	1.25	1.30
Subtotal - Behavioral Health		1,453.2	\$ 130.66	\$ 15.82	1,119.1	\$ 399.42	\$ 37.25	\$ 53.07
Total All Services		17,725.8	\$ 194.11	\$ 286.73	15,028.4	\$ 538.18	\$ 674.00	\$ 960.73

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

APPENDIX C: DETAILED SUMMARIES – STATEWIDE BY POPULATION AND RATE CELL

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix C - Detailed Summaries - Statewide by Population and Rate Cell

Fiscal Year:		SFY 2017						
Population:		Excluded-Dual						
Rate Cell:		All Rate Cells						
Region:		Statewide						
Member Months:		146,922						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	PMPM	Utilization per 1,000	Paid per Unit	PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	129.9	\$ 2,335.47	\$ 25.27	31.4	\$ 2,173.07	\$ 5.68	\$ 30.95
Inpatient Maternity Delivery	Days	0.8	1,393.59	0.09	0.1	1,316.00	0.01	0.10
Inpatient Well Newborn	Days	-	-	-	-	-	-	-
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal – Inpatient Hospital		130.7	\$ 2,329.58	\$ 25.37	31.4	\$ 2,170.84	\$ 5.69	\$ 31.06
Outpatient Hospital								
Outpatient Emergency Room	Visits	803.2	\$ 208.29	\$ 13.94	34.6	\$ 308.68	\$ 0.89	\$ 14.83
Outpatient Surgery	Visits	87.7	603.98	4.42	5.9	532.27	0.26	4.68
Outpatient Radiology	Procedures	387.2	123.63	3.99	12.5	197.24	0.21	4.19
Outpatient Pathology/Lab	Procedures	147.8	24.00	0.30	29.7	370.38	0.92	1.21
Outpatient Pharmacy	Procedures	169.7	132.01	1.87	7.9	169.51	0.11	1.98
Other Outpatient	Procedures	3,395.8	50.87	14.40	1,774.4	120.60	17.83	32.23
Subtotal – Outpatient Hospital		4,991.5	\$ 93.53	\$ 38.91	1,865.1	\$ 130.09	\$ 20.22	\$ 59.12
Professional								
Inpatient and Outpatient Surgery	Procedures	1,305.8	\$ 74.69	\$ 8.13	203.5	\$ 93.82	\$ 1.59	\$ 9.72
Anesthesia	Procedures	261.8	76.66	1.67	59.7	86.06	0.43	2.10
Inpatient Visits	Visits	1,247.5	53.80	5.59	220.7	83.40	1.53	7.13
Emergency Room	Visits	984.8	52.64	4.32	293.1	41.42	1.01	5.33
Office/Home Visits/Consults	Visits	4,880.2	33.46	13.61	999.0	48.44	4.03	17.64
Maternity	Procedures	5.5	161.50	0.07	0.4	345.52	0.01	0.09
Pathology/Lab	Procedures	417.2	20.41	0.71	116.5	11.04	0.11	0.82
Radiology	Procedures	2,837.9	22.79	5.39	579.5	11.65	0.56	5.95
Office Administered Drugs	Procedures	1,035.0	70.49	6.08	26.8	29.82	0.07	6.15
FQHC/RHC/Tribal Clinic	Visits	843.8	78.01	5.49	1,298.9	76.78	8.31	13.80
Physical Exams	Visits	9.7	53.63	0.04	6.6	36.43	0.02	0.06
Therapy	Visits	1,002.7	27.52	2.30	9.7	8.27	0.01	2.31
Vision	Visits	925.8	70.26	5.42	29.1	39.41	0.10	5.52
Other Professional	Procedures	4,276.4	42.00	14.97	283.4	59.78	1.41	16.38
Telemedicine	Procedures	10.5	31.30	0.03	48.6	68.80	0.28	0.31
Subtotal – Professional		20,044.5	\$ 44.19	\$ 73.82	4,175.4	\$ 55.95	\$ 19.47	\$ 93.28
Pharmacy								
Psychotropic Drugs	Scripts	156.7	\$ 59.20	\$ 0.77	39.7	\$ 88.15	\$ 0.29	\$ 1.06
Opioid Drugs	Scripts	115.1	58.86	0.56	18.1	49.92	0.08	0.64
All Other Drugs	Scripts	1,163.0	102.40	9.92	348.6	88.52	2.57	12.50
Subtotal – Pharmacy		1,434.8	\$ 94.19	\$ 11.26	406.4	\$ 86.76	\$ 2.94	\$ 14.20
Ancillary								
Ground Transportation	Trips	4,596.0	\$ 50.28	\$ 19.26	2.0	\$ 145.34	\$ 0.02	\$ 19.28
Air Transportation	Trips	892.5	557.74	41.48	2.5	2,174.13	0.44	41.92
Accommodations	Claims	427.3	295.70	10.53	-	-	-	10.53
DME/Prosthetics	Procedures	5,523.8	51.30	23.61	0.1	13.60	0.00	23.61
Dental	Procedures	1,795.2	170.89	25.56	257.4	336.56	7.22	32.78
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		13,234.7	\$ 109.21	\$ 120.45	261.9	\$ 352.22	\$ 7.69	\$ 128.13
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.09	-	\$ 0.00	\$ 0.00	\$ 0.09
Nursing Home	Days	51.6	924.58	3.98	-	-	-	3.98
Skilled Nursing Facility	Days	5,710.4	635.30	302.32	808.8	1,033.04	69.62	371.94
HCBS	Procedures	42,652.7	172.56	613.35	3.3	409.48	0.11	613.47
Case Management	Procedures	1,254.7	243.56	25.47	47.9	277.09	1.11	26.57
Personal Care	Procedures	36,282.5	76.26	230.58	229.2	45.58	0.87	231.45
Subtotal – LTSS		85,952.0	\$ 164.15	\$ 1,175.78	1,089.1	\$ 790.12	\$ 71.71	\$ 1,247.49
Behavioral Health								
IP Psych Hospital - API	Days	11.4	\$ 896.48	\$ 0.85	-	\$ 0.00	\$ 0.00	\$ 0.85
IP Psych Hospital - All Other	Days	-	-	-	-	-	-	-
IP General Hospital - MH/SA	Days	11.5	2,023.85	1.94	0.2	1,694.57	0.02	1.97
OP General Hospital - MH/SA	Visits	11.5	58.64	0.06	-	-	-	0.06
Screening	Procedures	22.1	49.94	0.09	3.0	595.87	0.15	0.24
Assessment	Procedures	34.0	183.05	0.52	4.6	568.70	0.22	0.74
Crisis Services	Procedures	87.1	139.60	1.01	17.5	609.53	0.89	1.90
Medication Services	Procedures	587.1	31.01	1.52	22.0	604.98	1.11	2.62
Methadone Medication Services	Procedures	308.5	12.56	0.32	-	-	-	0.32
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	488.7	53.96	2.20	34.4	457.86	1.31	3.51
Family Therapy OP	Procedures	84.9	24.26	0.17	3.7	123.77	0.04	0.21
Group Therapy OP	Procedures	110.6	56.13	0.52	22.0	506.08	0.93	1.44
SBIRT	Procedures	0.3	47.59	0.00	4.2	609.00	0.22	0.22
Substance Abuse Residential	Days	17.4	253.73	0.37	41.9	301.41	1.05	1.42
Children's Residential	Days	-	-	-	-	-	-	-
RPTC - In State	Days	-	-	-	-	-	-	-
RPTC - Out of State	Days	-	-	-	-	-	-	-
Detoxification	Procedures	2.9	616.00	0.15	3.1	606.42	0.16	0.30
Medical Evaluation	Procedures	31.4	64.51	0.17	0.7	535.19	0.03	0.20
Psychological Testing	Procedures	22.3	91.45	0.17	0.5	60.74	0.00	0.17
Peer Support Services	Units	53.9	17.01	0.08	-	-	-	0.08
Psychosocial Rehabilitation Services	Procedures	3,685.0	207.55	63.74	362.8	607.73	18.37	82.11
BH Case Management	Units	2,937.4	16.05	3.93	69.9	234.37	1.37	5.29
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	24.3	87.98	0.18	6.6	502.07	0.28	0.46
Other Professional MH/SA	Visits	177.6	35.29	0.52	17.2	555.21	0.79	1.32
Subtotal – Behavioral Health		8,710.1	\$ 108.15	\$ 78.50	614.1	\$ 526.18	\$ 26.93	\$ 105.43
Total All Services		134,498.2	\$ 135.98	\$ 1,524.08	8,443.5	\$ 219.78	\$ 154.64	\$ 1,678.72

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix C - Detailed Summaries - Statewide by Population and Rate Cell

Fiscal Year:		SFY 2017						
Population:		Excluded-Other						
Rate Cell:		All Rate Cells						
Region:		Statewide						
Member Months:		272						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	10,309.1	\$ 2,628.60	\$ 2,258.22	-	\$ 0.00	\$ 0.00	\$ 2,258.22
Inpatient Maternity Delivery	Days	6,344.1	2,836.20	1,499.43	-	-	-	1,499.43
Inpatient Well Newborn	Days	88.1	3,011.62	22.11	-	-	-	22.11
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal – Inpatient Hospital		16,741.3	\$ 2,709.29	\$ 3,779.76	-	\$ 0.00	\$ 0.00	\$ 3,779.76
Outpatient Hospital								
Outpatient Emergency Room	Visits	484.6	\$ 1,116.66	\$ 45.10	616.8	\$ 521.29	\$ 26.79	\$ 71.89
Outpatient Surgery	Visits	88.1	1,388.03	10.19	88.1	944.75	6.94	17.13
Outpatient Radiology	Procedures	176.2	146.54	2.15	132.2	611.67	6.74	8.89
Outpatient Pathology/Lab	Procedures	3,216.1	12.67	3.40	616.8	561.14	28.84	32.24
Outpatient Pharmacy	Procedures	-	-	(0.00)	-	-	-	(0.00)
Other Outpatient	Procedures	1,145.5	69.95	6.68	1,409.8	215.19	25.28	31.96
Subtotal – Outpatient Hospital		5,110.5	\$ 158.53	\$ 67.51	2,863.7	\$ 396.38	\$ 94.59	\$ 162.10
Professional								
Inpatient and Outpatient Surgery	Procedures	2,643.4	\$ 727.12	\$ 160.17	660.8	\$ 130.42	\$ 7.18	\$ 167.35
Anesthesia	Procedures	1,542.0	877.80	112.80	220.3	380.06	6.98	119.77
Inpatient Visits	Visits	7,621.7	402.30	255.52	2,070.6	434.80	75.03	330.55
Emergency Room	Visits	1,057.3	143.20	12.62	837.1	117.13	8.17	20.79
Office/Home Visits/Consults	Visits	2,467.1	121.40	24.96	969.2	87.51	7.07	32.03
Maternity	Procedures	2,290.9	1,176.57	224.62	-	-	-	224.62
Pathology/Lab	Procedures	1,233.6	42.44	4.36	440.6	95.51	3.51	7.87
Radiology	Procedures	7,665.8	70.11	44.79	2,951.8	31.45	7.74	52.52
Office Administered Drugs	Procedures	352.4	53.22	1.56	-	-	-	1.56
FQHC/RHC/Tribal Clinic	Visits	220.3	147.35	2.70	1,982.5	463.56	76.59	79.29
Physical Exams	Visits	572.7	218.25	10.42	264.3	93.77	2.07	12.48
Therapy	Visits	837.1	220.57	15.39	-	-	-	15.39
Vision	Visits	925.2	124.85	9.63	-	-	-	9.63
Other Professional	Procedures	2,863.7	71.19	16.99	352.4	33.36	0.98	17.97
Telemedicine	Procedures	220.3	113.85	2.09	264.3	277.47	6.11	8.20
Subtotal – Professional		32,513.5	\$ 331.65	\$ 898.60	11,014.0	\$ 219.44	\$ 201.41	\$ 1,100.01
Pharmacy								
Psychotropic Drugs	Scripts	176.2	\$ 46.43	\$ 0.68	44.1	\$ 10.50	\$ 0.04	\$ 0.72
Opioid Drugs	Scripts	132.2	5.16	0.06	176.2	2.10	0.03	0.09
All Other Drugs	Scripts	1,453.9	444.58	53.86	925.2	22.50	1.74	55.60
Subtotal – Pharmacy		1,762.2	\$ 371.81	\$ 54.60	1,145.5	\$ 18.90	\$ 1.80	\$ 56.41
Ancillary								
Ground Transportation	Trips	704.9	\$ 30.07	\$ 1.77	-	\$ 0.00	\$ 0.00	\$ 1.77
Air Transportation	Trips	44.1	1,212.00	4.45	-	-	-	4.45
Accommodations	Claims	132.2	254.73	2.81	-	-	-	2.81
DME/Prosthetics	Procedures	572.7	72.95	3.48	-	-	-	3.48
Dental	Procedures	3,348.3	98.76	27.56	660.8	505.15	27.82	55.37
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		4,802.1	\$ 100.10	\$ 40.06	660.8	\$ 505.15	\$ 27.82	\$ 67.88
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Nursing Home	Days	572.7	730.06	34.84	-	-	-	34.84
Skilled Nursing Facility	Days	5,330.8	427.73	190.01	-	-	-	190.01
HCBS	Procedures	396.5	148.64	4.91	-	-	-	4.91
Case Management	Procedures	528.7	267.73	11.80	-	-	-	11.80
Personal Care	Procedures	1,057.3	30.55	2.69	-	-	-	2.69
Subtotal – LTSS		7,886.1	\$ 371.67	\$ 244.25	-	\$ 0.00	\$ 0.00	\$ 244.25
Behavioral Health								
IP Psych Hospital - API	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
IP Psych Hospital - All Other	Days	-	-	-	-	-	-	-
IP General Hospital - MH/SA	Days	176.2	2,810.63	41.28	-	-	-	41.28
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	88.1	35.00	0.26	-	-	-	0.26
Assessment	Procedures	88.1	100.00	0.73	44.1	603.00	2.21	2.95
Crisis Services	Procedures	264.3	62.24	1.37	-	-	-	1.37
Medication Services	Procedures	-	-	-	-	-	-	-
Methadone Medication Services	Procedures	-	-	-	-	-	-	-
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	484.6	93.18	3.76	1,101.4	591.98	54.33	58.10
Family Therapy OP	Procedures	220.3	138.83	2.55	44.1	603.00	2.21	4.76
Group Therapy OP	Procedures	88.1	57.68	0.42	88.1	603.00	4.43	4.85
SBIRT	Procedures	-	-	-	44.1	603.00	2.21	2.21
Substance Abuse Residential	Days	969.2	205.23	16.58	88.1	616.00	4.52	21.10
Children's Residential	Days	-	-	-	2,467.1	150.75	30.99	30.99
RPTC - In State	Days	-	-	-	-	-	-	-
RPTC - Out of State	Days	-	-	-	-	-	-	-
Detoxification	Procedures	837.1	616.00	42.97	-	-	-	42.97
Medical Evaluation	Procedures	-	-	-	-	-	-	-
Psychological Testing	Procedures	176.2	56.99	0.84	-	-	-	0.84
Peer Support Services	Units	-	-	-	-	-	-	-
Psychosocial Rehabilitation Services	Procedures	2,026.6	97.42	16.45	1,630.1	610.03	82.87	99.32
BH Case Management	Units	1,057.3	16.00	1.41	132.2	406.33	4.48	5.89
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	-	-	-	-	-	-	-
Other Professional MH/SA	Visits	396.5	37.07	1.22	132.2	611.67	6.74	7.96
Subtotal – Behavioral Health		6,872.8	\$ 226.71	\$ 129.84	5,771.4	\$ 405.45	\$ 195.00	\$ 324.84
Total All Services		75,688.5	\$ 826.75	\$ 5,214.63	21,455.4	\$ 291.18	\$ 520.62	\$ 5,735.25

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix C - Detailed Summaries - Statewide by Population and Rate Cell

Fiscal Year:		SFY 2017						
Population:		Low-Income Family						
Rate Cell:		All Rate Cells						
Region:		Statewide						
Member Months:		1,517,072						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	PMPM	Utilization per 1,000	Paid per Unit	PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	189.0	\$ 3,213.35	\$ 50.61	74.6	\$ 3,314.51	\$ 20.60	\$ 71.21
Inpatient Maternity Delivery	Days	4.7	2,952.05	1.15	5.7	3,287.49	1.56	2.71
Inpatient Well Newborn	Days	28.9	2,975.26	7.17	13.1	3,248.74	3.54	10.71
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal – Inpatient Hospital		222.6	\$ 3,176.93	\$ 58.93	93.4	\$ 3,303.64	\$ 25.70	\$ 84.64
Outpatient Hospital								
Outpatient Emergency Room	Visits	326.3	\$ 665.17	\$ 18.09	209.4	\$ 622.84	\$ 10.87	\$ 28.96
Outpatient Surgery	Visits	52.9	2,607.85	11.51	25.8	1,094.99	2.36	13.86
Outpatient Radiology	Procedures	78.7	338.42	2.22	44.5	540.66	2.00	4.22
Outpatient Pathology/Lab	Procedures	558.4	24.01	1.12	324.9	395.50	10.71	11.82
Outpatient Pharmacy	Procedures	67.5	302.50	1.70	26.2	402.02	0.88	2.58
Other Outpatient	Procedures	188.7	158.18	2.49	221.6	535.53	9.89	12.38
Subtotal – Outpatient Hospital		1,272.7	\$ 350.00	\$ 37.12	852.4	\$ 516.71	\$ 36.70	\$ 73.82
Professional								
Inpatient and Outpatient Surgery	Procedures	211.1	\$ 384.45	\$ 6.76	57.1	\$ 441.37	\$ 2.10	\$ 8.86
Anesthesia	Procedures	71.7	435.16	2.60	28.7	426.57	1.02	3.62
Inpatient Visits	Visits	227.5	370.46	7.02	51.0	328.21	1.39	8.42
Emergency Room	Visits	335.8	174.17	4.87	112.9	133.34	1.25	6.13
Office/Home Visits/Consults	Visits	1,336.6	133.30	14.85	454.2	110.92	4.20	19.04
Maternity	Procedures	8.2	550.78	0.38	3.7	987.68	0.30	0.68
Pathology/Lab	Procedures	969.5	22.63	1.83	137.1	17.37	0.20	2.03
Radiology	Procedures	489.9	80.49	3.29	102.6	45.19	0.39	3.67
Office Administered Drugs	Procedures	117.5	184.81	1.81	24.3	35.59	0.07	1.88
FQHC/RHC/Tribal Clinic	Visits	216.7	307.61	5.55	737.3	605.16	37.18	42.74
Physical Exams	Visits	383.1	166.92	5.33	64.0	126.54	0.67	6.00
Therapy	Visits	832.3	140.53	9.75	3.2	83.15	0.02	9.77
Vision	Visits	501.0	98.00	4.09	11.1	86.54	0.08	4.17
Other Professional	Procedures	379.8	115.78	3.66	48.9	67.70	0.28	3.94
Telemedicine	Procedures	7.4	166.86	0.10	61.2	346.75	1.77	1.87
Subtotal – Professional		6,088.1	\$ 141.71	\$ 71.90	1,897.4	\$ 322.13	\$ 50.94	\$ 122.83
Pharmacy								
Psychotropic Drugs	Scripts	336.6	\$ 30.17	\$ 0.85	68.4	\$ 14.43	\$ 0.08	\$ 0.93
Opioid Drugs	Scripts	278.4	70.59	1.64	59.1	26.41	0.13	1.77
All Other Drugs	Scripts	2,234.8	110.15	20.51	942.6	61.75	4.85	25.36
Subtotal – Pharmacy		2,849.8	\$ 96.84	\$ 23.00	1,070.1	\$ 56.77	\$ 5.06	\$ 28.06
Ancillary								
Ground Transportation	Trips	1,119.9	\$ 41.46	\$ 3.87	0.5	\$ 395.30	\$ 0.02	\$ 3.89
Air Transportation	Trips	431.5	679.10	24.42	1.0	7,876.03	0.64	25.07
Accommodations	Claims	170.6	285.75	4.06	-	-	-	4.06
DME/Prosthetics	Procedures	210.6	159.43	2.80	0.0	27.74	0.00	2.80
Dental	Procedures	3,060.2	110.99	28.30	391.1	530.65	17.30	45.60
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		4,992.8	\$ 152.51	\$ 63.46	392.7	\$ 548.75	\$ 17.96	\$ 81.41
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.01	-	\$ 0.00	\$ 0.00	\$ 0.01
Nursing Home	Days	1.9	607.52	0.10	0.6	2,767.67	0.13	0.23
Skilled Nursing Facility	Days	4.8	744.73	0.30	-	-	-	0.30
HCBS	Procedures	68.1	316.19	1.79	-	-	-	1.79
Case Management	Procedures	41.8	289.36	1.01	6.5	303.80	0.17	1.17
Personal Care	Procedures	67.6	60.84	0.34	-	-	-	0.34
Subtotal – LTSS		184.3	\$ 231.02	\$ 3.55	7.1	\$ 496.51	\$ 0.29	\$ 3.84
Behavioral Health								
IP Psych Hospital - API	Days	22.1	\$ 1,463.77	\$ 2.70	-	\$ 0.00	\$ 0.00	\$ 2.70
IP Psych Hospital - All Other	Days	141.5	756.42	8.92	-	-	-	8.92
IP General Hospital - MH/SA	Days	23.0	2,693.28	5.17	1.0	4,191.95	0.36	5.53
OP General Hospital - MH/SA	Visits	0.1	1,372.27	0.01	-	-	-	0.01
Screening	Procedures	19.5	39.85	0.06	5.7	609.69	0.29	0.36
Assessment	Procedures	27.9	214.62	0.50	9.1	602.69	0.46	0.95
Crisis Services	Procedures	9.5	99.70	0.08	10.9	607.06	0.55	0.63
Medication Services	Procedures	120.3	25.31	0.25	0.8	604.21	0.04	0.29
Methadone Medication Services	Procedures	153.5	12.56	0.16	-	-	-	0.16
Other Opioid Medication Services	Procedures	0.0	35.00	0.00	-	-	-	0.00
Individual Therapy OP	Procedures	323.5	94.64	2.55	50.7	599.15	2.53	5.08
Family Therapy OP	Procedures	104.0	105.12	0.91	9.6	588.42	0.47	1.38
Group Therapy OP	Procedures	227.8	77.08	1.46	7.9	590.68	0.39	1.85
SBIRT	Procedures	0.2	46.79	0.00	3.5	607.19	0.18	0.18
Substance Abuse Residential	Days	71.2	268.18	1.59	74.7	491.10	3.06	4.65
Children's Residential	Days	749.7	195.53	12.22	128.6	491.76	5.27	17.48
RPTC - In State	Days	302.4	321.39	8.10	-	-	-	8.10
RPTC - Out of State	Days	250.3	361.93	7.55	-	-	-	7.55
Detoxification	Procedures	1.5	616.00	0.08	0.6	611.42	0.03	0.11
Medical Evaluation	Procedures	9.7	244.21	0.20	0.2	480.06	0.01	0.20
Psychological Testing	Procedures	80.2	272.76	1.82	0.8	480.82	0.03	1.85
Peer Support Services	Units	49.5	17.03	0.07	0.0	301.50	0.00	0.07
Psychosocial Rehabilitation Services	Procedures	1,181.1	204.85	20.16	92.0	609.57	4.68	24.84
BH Case Management	Units	583.7	16.06	0.78	19.5	293.17	0.48	1.26
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	14.8	96.52	0.12	2.9	598.62	0.15	0.26
Other Professional MH/SA	Visits	56.2	45.01	0.21	11.7	611.97	0.60	0.81
Subtotal – Behavioral Health		4,523.3	\$ 200.77	\$ 75.68	430.2	\$ 545.51	\$ 19.56	\$ 95.23
Total All Services		20,133.6	\$ 198.85	\$ 333.63	4,743.2	\$ 395.20	\$ 156.21	\$ 489.84

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix C - Detailed Summaries - Statewide by Population and Rate Cell

Fiscal Year:		SFY 2017						
Population:		Medicaid Expansion						
Rate Cell:		All Rate Cells						
Region:		Statewide						
Member Months:		383,206						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	633.8	\$ 3,128.22	\$ 165.22	252.8	\$ 3,310.22	\$ 69.75	\$ 234.96
Inpatient Maternity Delivery	Days	2.2	3,125.86	0.58	2.8	3,240.31	0.75	1.33
Inpatient Well Newborn	Days	-	-	-	-	-	-	-
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal – Inpatient Hospital		636.0	\$ 3,128.22	\$ 165.80	255.6	\$ 3,309.46	\$ 70.50	\$ 236.29
Outpatient Hospital								
Outpatient Emergency Room	Visits	821.1	\$ 949.16	\$ 64.95	403.8	\$ 592.48	\$ 19.94	\$ 84.89
Outpatient Surgery	Visits	126.4	2,823.36	29.74	53.2	1,040.61	4.61	34.36
Outpatient Radiology	Procedures	281.7	456.11	10.71	87.4	538.71	3.92	14.63
Outpatient Pathology/Lab	Procedures	1,304.8	25.45	2.77	409.5	449.90	15.35	18.12
Outpatient Pharmacy	Procedures	159.2	198.33	2.63	40.1	423.00	1.41	4.04
Other Outpatient	Procedures	658.9	148.58	8.16	407.0	512.72	17.39	25.55
Subtotal – Outpatient Hospital		3,352.1	\$ 425.84	\$ 118.95	1,401.0	\$ 536.45	\$ 62.63	\$ 181.59
Professional								
Inpatient and Outpatient Surgery	Procedures	680.1	\$ 480.64	\$ 27.24	165.0	\$ 538.64	\$ 7.40	\$ 34.65
Anesthesia	Procedures	172.1	437.87	6.28	60.7	436.81	2.21	8.49
Inpatient Visits	Visits	565.0	287.05	13.52	136.0	400.32	4.54	18.05
Emergency Room	Visits	884.5	200.91	14.81	334.2	166.04	4.62	19.43
Office/Home Visits/Consults	Visits	2,175.7	145.20	26.33	426.7	129.76	4.61	30.94
Maternity	Procedures	6.7	480.47	0.27	1.4	1,012.57	0.12	0.39
Pathology/Lab	Procedures	2,932.8	25.75	6.29	85.2	53.83	0.38	6.68
Radiology	Procedures	1,702.7	133.32	18.92	430.3	48.28	1.73	20.65
Office Administered Drugs	Procedures	434.0	237.54	8.59	12.7	42.03	0.04	8.64
FQHC/RHC/Tribal Clinic	Visits	647.6	302.27	16.31	1,095.3	613.39	55.99	72.30
Physical Exams	Visits	57.7	62.55	0.30	7.1	39.67	0.02	0.32
Therapy	Visits	569.5	153.99	7.31	0.6	49.35	0.00	7.31
Vision	Visits	510.5	105.45	4.49	15.0	150.46	0.19	4.67
Other Professional	Procedures	724.7	123.96	7.49	133.5	94.14	1.05	8.53
Telemedicine	Procedures	4.7	143.63	0.06	52.5	321.34	1.40	1.46
Subtotal – Professional		12,068.3	\$ 157.29	\$ 158.19	2,956.0	\$ 342.29	\$ 84.32	\$ 242.51
Pharmacy								
Psychotropic Drugs	Scripts	887.2	\$ 39.44	\$ 2.92	289.7	\$ 23.00	\$ 0.56	\$ 3.47
Opioid Drugs	Scripts	1,055.4	84.56	7.44	236.6	50.13	0.99	8.43
All Other Drugs	Scripts	5,787.3	137.99	66.55	2,629.1	75.19	16.47	83.02
Subtotal – Pharmacy		7,729.9	\$ 119.39	\$ 76.90	3,155.3	\$ 68.52	\$ 18.02	\$ 94.92
Ancillary								
Ground Transportation	Trips	1,587.1	\$ 84.58	\$ 11.19	0.8	\$ 378.52	\$ 0.02	\$ 11.21
Air Transportation	Trips	340.4	1,013.83	28.76	1.4	8,625.37	1.01	29.77
Accommodations	Claims	216.7	297.04	5.36	-	-	-	5.36
DME/Prosthetics	Procedures	438.6	144.93	5.30	0.0	124.58	0.00	5.30
Dental	Procedures	2,154.8	201.05	36.10	322.4	338.15	9.08	45.19
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		4,737.6	\$ 219.62	\$ 86.70	324.6	\$ 374.20	\$ 10.12	\$ 96.83
LTSS								
Hospice	Days	1.4	\$ 2,816.35	\$ 0.34	-	\$ 0.00	\$ 0.00	\$ 0.34
Nursing Home	Days	35.3	966.87	2.85	11.7	2,479.06	2.43	5.27
Skilled Nursing Facility	Days	139.4	743.21	8.63	-	-	-	8.63
HCBS	Procedures	107.1	112.64	1.01	0.0	370.00	0.00	1.01
Case Management	Procedures	0.9	248.90	0.02	0.1	270.26	0.00	0.02
Personal Care	Procedures	200.2	61.35	1.02	4.7	23.44	0.01	1.03
Subtotal – LTSS		484.4	\$ 343.52	\$ 13.87	16.6	\$ 1,763.42	\$ 2.44	\$ 16.31
Behavioral Health								
IP Psych Hospital - API	Days	0.1	\$ 1,306.67	\$ 0.01	-	\$ 0.00	\$ 0.00	\$ 0.01
IP Psych Hospital - All Other	Days	-	-	-	-	-	-	-
IP General Hospital - MH/SA	Days	83.1	2,738.38	18.97	2.2	4,278.39	0.78	19.75
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	52.4	35.86	0.16	14.9	609.62	0.76	0.91
Assessment	Procedures	55.5	189.09	0.87	19.5	608.26	0.99	1.86
Crisis Services	Procedures	26.6	107.51	0.24	25.6	609.63	1.30	1.54
Medication Services	Procedures	157.2	31.60	0.41	23.8	610.23	1.21	1.62
Methadone Medication Services	Procedures	494.7	12.57	0.52	-	-	-	0.52
Other Opioid Medication Services	Procedures	0.1	10.01	0.00	-	-	-	0.00
Individual Therapy OP	Procedures	241.3	95.68	1.92	78.4	603.19	3.94	5.86
Family Therapy OP	Procedures	37.3	109.53	0.34	1.5	516.74	0.07	0.41
Group Therapy OP	Procedures	153.5	72.02	0.92	15.8	601.43	0.79	1.72
SBIRT	Procedures	1.5	43.13	0.01	17.5	611.26	0.89	0.90
Substance Abuse Residential	Days	399.4	216.65	7.21	358.4	450.92	13.47	20.68
Children's Residential	Days	-	-	-	-	-	-	-
RPTC - In State	Days	-	-	-	-	-	-	-
RPTC - Out of State	Days	-	-	-	-	-	-	-
Detoxification	Procedures	24.3	616.00	1.25	28.1	608.23	1.42	2.67
Medical Evaluation	Procedures	27.2	255.16	0.58	6.4	606.57	0.32	0.90
Psychological Testing	Procedures	17.6	815.49	1.20	1.0	546.71	0.05	1.24
Peer Support Services	Units	179.0	17.25	0.26	-	-	-	0.26
Psychosocial Rehabilitation Services	Procedures	839.4	89.15	6.24	329.2	610.11	16.74	22.98
BH Case Management	Units	666.5	16.04	0.89	63.1	258.11	1.36	2.25
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	19.0	156.43	0.25	7.6	606.26	0.38	0.63
Other Professional MH/SA	Visits	109.1	40.33	0.37	27.2	613.29	1.39	1.76
Subtotal – Behavioral Health		3,584.9	\$ 142.62	\$ 42.61	1,020.3	\$ 539.38	\$ 45.86	\$ 88.47
Total All Services		32,593.1	\$ 244.11	\$ 663.02	9,129.4	\$ 386.29	\$ 293.88	\$ 956.90

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix C - Detailed Summaries - Statewide by Population and Rate Cell

Fiscal Year:		SFY 2017						
Population:		Pregnant Women						
Rate Cell:		All Rate Cells						
Region:		Statewide						
Member Months:		46,677						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	202.6	\$ 2,987.05	\$ 50.43	95.9	\$ 3,225.45	\$ 25.78	\$ 76.20
Inpatient Maternity Delivery	Days	1,644.3	2,899.95	397.37	665.6	3,228.20	179.06	576.43
Inpatient Well Newborn	Days	-	-	-	-	-	-	-
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal – Inpatient Hospital		1,846.9	\$ 2,909.51	\$ 447.80	761.5	\$ 3,227.85	\$ 204.83	\$ 652.64
Outpatient Hospital								
Outpatient Emergency Room	Visits	950.5	\$ 753.83	\$ 59.71	459.4	\$ 671.79	\$ 25.72	\$ 85.43
Outpatient Surgery	Visits	44.5	2,855.43	10.58	22.1	906.15	1.67	12.25
Outpatient Radiology	Procedures	534.2	278.62	12.40	497.0	543.19	22.50	34.90
Outpatient Pathology/Lab	Procedures	4,729.7	26.39	10.40	2,103.0	420.13	73.63	84.03
Outpatient Pharmacy	Procedures	336.8	69.18	1.94	81.5	367.80	2.50	4.44
Other Outpatient	Procedures	853.0	273.28	19.43	714.4	534.08	31.80	51.22
Subtotal – Outpatient Hospital		7,448.6	\$ 184.41	\$ 114.46	3,877.4	\$ 488.39	\$ 157.81	\$ 272.27
Professional								
Inpatient and Outpatient Surgery	Procedures	227.3	\$ 335.81	\$ 6.36	66.8	\$ 343.55	\$ 1.91	\$ 8.27
Anesthesia	Procedures	607.8	709.31	35.92	155.8	654.76	8.50	44.42
Inpatient Visits	Visits	625.8	188.19	9.81	491.6	153.03	6.27	16.08
Emergency Room	Visits	714.7	204.44	12.18	232.9	166.72	3.24	15.41
Office/Home Visits/Consults	Visits	7,007.5	124.14	72.49	863.0	107.84	7.76	80.25
Maternity	Procedures	1,745.4	661.90	96.27	439.1	1,019.56	37.31	133.58
Pathology/Lab	Procedures	7,527.8	21.89	13.73	316.7	31.29	0.83	14.56
Radiology	Procedures	3,070.9	135.55	34.69	675.9	85.93	4.84	39.53
Office Administered Drugs	Procedures	350.7	48.96	1.43	54.0	43.50	0.20	1.63
FQHC/RHC/Tribal Clinic	Visits	446.6	294.50	10.96	3,091.5	598.49	154.19	165.14
Physical Exams	Visits	373.5	56.16	1.75	13.1	49.51	0.05	1.80
Therapy	Visits	411.3	132.64	4.55	16.5	46.53	0.06	4.61
Vision	Visits	464.8	103.29	4.00	6.7	110.58	0.06	4.06
Other Professional	Procedures	645.8	227.07	12.22	94.6	53.60	0.42	12.64
Telemedicine	Procedures	3.3	108.81	0.03	21.9	356.47	0.65	0.68
Subtotal – Professional		24,223.1	\$ 156.74	\$ 316.39	6,540.1	\$ 415.19	\$ 226.28	\$ 542.67
Pharmacy								
Psychotropic Drugs	Scripts	318.5	\$ 37.23	\$ 0.99	95.9	\$ 7.33	\$ 0.06	\$ 1.05
Opioid Drugs	Scripts	667.1	30.76	1.71	129.1	18.69	0.20	1.91
All Other Drugs	Scripts	3,602.1	82.76	24.84	2,102.0	45.95	8.05	32.89
Subtotal – Pharmacy		4,587.7	\$ 72.04	\$ 27.54	2,326.9	\$ 42.84	\$ 8.31	\$ 35.85
Ancillary								
Ground Transportation	Trips	4,057.9	\$ 31.09	\$ 10.51	3.3	\$ 401.67	\$ 0.11	\$ 10.62
Air Transportation	Trips	1,129.1	778.65	73.27	5.7	9,794.94	4.62	77.88
Accommodations	Claims	873.1	611.90	44.52	-	-	-	44.52
DME/Prosthetics	Procedures	98.2	172.56	1.41	0.3	13.60	0.00	1.41
Dental	Procedures	1,786.0	154.59	23.01	394.1	329.34	10.82	33.83
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		7,944.3	\$ 230.68	\$ 152.72	403.4	\$ 462.47	\$ 15.55	\$ 168.26
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Nursing Home	Days	-	-	-	-	-	-	-
Skilled Nursing Facility	Days	-	-	-	-	-	-	-
HCBS	Procedures	4.6	141.17	0.05	-	-	-	0.05
Case Management	Procedures	-	-	-	-	-	-	-
Personal Care	Procedures	92.0	103.05	0.79	-	-	-	0.79
Subtotal – LTSS		96.7	\$ 104.88	\$ 0.84	-	\$ 0.00	\$ 0.00	\$ 0.84
Behavioral Health								
IP Psych Hospital - API	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
IP Psych Hospital - All Other	Days	4.1	728.41	0.25	-	-	-	0.25
IP General Hospital - MH/SA	Days	10.3	2,726.06	2.34	0.5	7,577.80	0.32	2.66
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	27.8	34.63	0.08	11.8	610.91	0.60	0.68
Assessment	Procedures	34.7	163.40	0.47	19.0	599.74	0.95	1.42
Crisis Services	Procedures	7.7	102.47	0.07	26.7	608.93	1.36	1.42
Medication Services	Procedures	208.8	29.35	0.51	1.5	611.67	0.08	0.59
Methadone Medication Services	Procedures	765.9	12.53	0.80	-	-	-	0.80
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	114.1	99.85	0.95	76.9	584.30	3.74	4.69
Family Therapy OP	Procedures	26.0	113.14	0.24	3.1	550.05	0.14	0.39
Group Therapy OP	Procedures	64.0	55.38	0.30	24.4	558.14	1.14	1.43
SBIRT	Procedures	0.8	43.80	0.00	10.0	609.00	0.51	0.51
Substance Abuse Residential	Days	135.5	253.03	2.86	544.0	499.48	22.64	25.50
Children's Residential	Days	15.2	202.88	0.26	-	-	-	0.26
RPTC - In State	Days	-	-	-	-	-	-	-
RPTC - Out of State	Days	-	-	-	-	-	-	-
Detoxification	Procedures	2.8	616.00	0.15	0.8	611.67	0.04	0.18
Medical Evaluation	Procedures	17.0	269.62	0.38	0.5	418.58	0.02	0.40
Psychological Testing	Procedures	5.7	752.05	0.35	0.5	597.11	0.03	0.38
Peer Support Services	Units	36.5	17.03	0.05	-	-	-	0.05
Psychosocial Rehabilitation Services	Procedures	411.1	76.03	2.60	196.7	609.42	9.99	12.59
BH Case Management	Units	185.4	16.04	0.25	32.7	225.51	0.61	0.86
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	3.3	157.39	0.04	5.9	610.35	0.30	0.34
Other Professional MH/SA	Visits	59.9	41.06	0.20	21.1	609.19	1.07	1.28
Subtotal – Behavioral Health		2,136.4	\$ 73.89	\$ 13.15	976.2	\$ 535.25	\$ 43.54	\$ 56.70
Total All Services		48,283.7	\$ 266.65	\$ 1,072.92	14,885.4	\$ 529.09	\$ 656.31	\$ 1,729.23

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix C - Detailed Summaries - Statewide by Population and Rate Cell

Fiscal Year:		SFY 2017						
Population:		SSI/Disabled						
Rate Cell:		All Rate Cells						
Region:		Statewide						
Member Months:		142,046						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	735.2	\$ 3,278.90	\$ 200.89	236.0	\$ 3,226.93	\$ 63.45	\$ 264.34
Inpatient Maternity Delivery	Days	3.3	2,920.76	0.80	2.4	3,202.18	0.63	1.43
Inpatient Well Newborn	Days	-	-	-	-	-	-	-
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal – Inpatient Hospital		738.5	\$ 3,277.30	\$ 201.70	238.3	\$ 3,226.69	\$ 64.08	\$ 265.78
Outpatient Hospital								
Outpatient Emergency Room	Visits	881.9	\$ 787.75	\$ 57.89	246.4	\$ 588.47	\$ 12.08	\$ 69.98
Outpatient Surgery	Visits	153.7	2,270.67	29.08	35.6	988.52	2.93	32.01
Outpatient Radiology	Procedures	425.9	339.04	12.03	60.7	526.77	2.66	14.70
Outpatient Pathology/Lab	Procedures	2,287.2	22.15	4.22	321.6	414.07	11.10	15.32
Outpatient Pharmacy	Procedures	489.3	259.32	10.57	48.8	384.60	1.56	12.14
Other Outpatient	Procedures	2,339.2	136.47	26.60	841.8	271.51	19.05	45.65
Subtotal – Outpatient Hospital		6,577.2	\$ 256.16	\$ 140.40	1,554.9	\$ 381.14	\$ 49.39	\$ 189.79
Professional								
Inpatient and Outpatient Surgery	Procedures	1,100.4	\$ 308.08	\$ 28.25	169.5	\$ 379.99	\$ 5.37	\$ 33.62
Anesthesia	Procedures	255.5	306.22	6.52	58.2	336.68	1.63	8.15
Inpatient Visits	Visits	1,117.2	222.15	20.68	182.6	338.07	5.14	25.82
Emergency Room	Visits	1,030.1	165.93	14.24	278.1	150.21	3.48	17.73
Office/Home Visits/Consults	Visits	4,541.0	105.79	40.03	566.4	93.12	4.40	44.43
Maternity	Procedures	4.8	571.53	0.23	2.1	621.38	0.11	0.34
Pathology/Lab	Procedures	3,158.3	22.45	5.91	80.7	47.27	0.32	6.23
Radiology	Procedures	2,624.4	111.76	24.44	469.3	38.65	1.51	25.95
Office Administered Drugs	Procedures	892.8	177.99	13.24	15.6	39.66	0.05	13.29
FQHC/RHC/Tribal Clinic	Visits	877.9	228.65	16.73	1,263.6	443.94	46.75	63.47
Physical Exams	Visits	146.7	93.66	1.15	6.4	53.44	0.03	1.17
Therapy	Visits	3,656.2	135.80	41.38	5.4	26.22	0.01	41.39
Vision	Visits	839.2	89.15	6.23	20.6	98.08	0.17	6.40
Other Professional	Procedures	2,125.7	87.50	15.50	191.8	66.58	1.06	16.56
Telemedicine	Procedures	20.4	175.63	0.30	50.5	293.37	1.24	1.53
Subtotal – Professional		22,390.6	\$ 125.86	\$ 234.84	3,360.8	\$ 254.45	\$ 71.26	\$ 306.10
Pharmacy								
Psychotropic Drugs	Scripts	3,050.1	\$ 53.64	\$ 13.63	746.7	\$ 34.34	\$ 2.14	\$ 15.77
Opioid Drugs	Scripts	1,539.9	63.34	8.13	213.2	36.77	0.65	8.78
All Other Drugs	Scripts	14,235.4	149.67	177.55	3,425.1	87.12	24.87	202.41
Subtotal – Pharmacy		18,825.3	\$ 127.05	\$ 199.31	4,385.0	\$ 75.68	\$ 27.66	\$ 226.96
Ancillary								
Ground Transportation	Trips	3,228.8	\$ 65.67	\$ 17.67	0.8	\$ 320.17	\$ 0.02	\$ 17.69
Air Transportation	Trips	711.8	820.88	48.69	1.9	7,804.74	1.26	49.96
Accommodations	Claims	385.0	297.15	9.53	-	-	-	9.53
DME/Prosthetics	Procedures	3,097.1	97.51	25.17	0.2	42.57	0.00	25.17
Dental	Procedures	2,470.2	158.92	32.71	282.5	395.79	9.32	42.03
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		9,892.9	\$ 162.27	\$ 133.78	285.4	\$ 445.83	\$ 10.60	\$ 144.38
LTSS								
Hospice	Days	6.2	\$ 2,717.15	\$ 1.40	-	\$ 0.00	\$ 0.00	\$ 1.40
Nursing Home	Days	527.6	107.41	4.72	16.3	2,924.66	3.97	8.70
Skilled Nursing Facility	Days	1,706.4	684.77	97.37	168.5	985.84	13.84	111.21
HCBS	Procedures	488.3	214.72	8.74	-	-	-	8.74
Case Management	Procedures	50.4	282.47	1.19	1.1	294.42	0.03	1.21
Personal Care	Procedures	19,746.7	66.72	109.80	9.1	26.86	0.02	109.82
Subtotal – LTSS		22,525.5	\$ 118.91	\$ 223.21	195.0	\$ 1,099.20	\$ 17.86	\$ 241.07
Behavioral Health								
IP Psych Hospital - API	Days	53.7	\$ 1,467.96	\$ 6.57	-	\$ 0.00	\$ 0.00	\$ 6.57
IP Psych Hospital - All Other	Days	201.0	748.01	12.53	-	-	-	12.53
IP General Hospital - MH/SA	Days	70.0	2,666.16	15.56	3.5	5,614.87	1.66	17.22
OP General Hospital - MH/SA	Visits	6.0	188.95	0.09	-	-	-	0.09
Screening	Procedures	47.1	55.00	0.22	5.0	600.95	0.25	0.47
Assessment	Procedures	61.9	212.83	1.10	8.3	609.52	0.42	1.52
Crisis Services	Procedures	34.3	113.51	0.32	29.8	608.04	1.51	1.84
Medication Services	Procedures	578.1	30.08	1.45	21.2	606.68	1.07	2.52
Methadone Medication Services	Procedures	295.7	12.56	0.31	-	-	-	0.31
Other Opioid Medication Services	Procedures	0.1	179.98	0.00	-	-	-	0.00
Individual Therapy OP	Procedures	877.2	88.88	6.50	104.6	573.34	5.00	11.49
Family Therapy OP	Procedures	199.4	96.97	1.61	6.8	511.06	0.29	1.90
Group Therapy OP	Procedures	332.8	79.47	2.20	56.8	569.88	2.70	4.90
SBIRT	Procedures	0.3	43.80	0.00	5.9	610.24	0.30	0.30
Substance Abuse Residential	Days	60.7	131.78	0.67	31.8	606.62	1.61	2.27
Children's Residential	Days	1,630.4	189.45	25.74	0.8	170.00	0.01	25.75
RPTC - In State	Days	322.5	328.27	8.82	-	-	-	8.82
RPTC - Out of State	Days	870.8	379.45	27.54	-	-	-	27.54
Detoxification	Procedures	8.8	616.00	0.45	6.2	608.70	0.31	0.76
Medical Evaluation	Procedures	46.4	198.32	0.77	1.4	562.59	0.06	0.83
Psychological Testing	Procedures	74.7	588.98	3.67	0.6	348.54	0.02	3.68
Peer Support Services	Units	234.1	17.01	0.33	-	-	-	0.33
Psychosocial Rehabilitation Services	Procedures	4,274.0	197.52	70.35	703.4	607.57	35.61	105.96
BH Case Management	Units	3,574.4	16.05	4.78	184.5	256.74	3.95	8.73
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	41.6	85.16	0.29	11.1	586.11	0.54	0.84
Other Professional MH/SA	Visits	216.2	41.71	0.75	30.2	612.15	1.54	2.29
Subtotal – Behavioral Health		14,112.1	\$ 163.80	\$ 192.62	1,211.8	\$ 562.99	\$ 56.85	\$ 249.48
Total All Services		95,062.2	\$ 167.37	\$ 1,325.86	11,231.1	\$ 318.08	\$ 297.70	\$ 1,623.56

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix C - Detailed Summaries - Statewide by Population and Rate Cell

Fiscal Year:		SFY 2017						
Population:		Waiver/Institutional						
Rate Cell:		All Rate Cells						
Region:		Statewide						
Member Months:		36,521						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	907.2	\$ 3,163.00	\$ 239.12	177.8	\$ 3,154.30	\$ 46.73	\$ 285.85
Inpatient Maternity Delivery	Days	0.7	3,963.21	0.22	1.6	3,335.00	0.46	0.67
Inpatient Well Newborn	Days	-	-	-	-	-	-	-
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal – Inpatient Hospital		907.9	\$ 3,163.57	\$ 239.34	179.4	\$ 3,155.95	\$ 47.18	\$ 286.52
Outpatient Hospital								
Outpatient Emergency Room	Visits	598.7	\$ 663.31	\$ 33.09	122.2	\$ 569.50	\$ 5.80	\$ 38.89
Outpatient Surgery	Visits	127.8	2,537.63	27.03	14.5	926.17	1.12	28.15
Outpatient Radiology	Procedures	339.1	210.80	5.96	42.1	502.50	1.76	7.72
Outpatient Pathology/Lab	Procedures	1,767.8	18.86	2.78	208.3	477.99	8.30	11.08
Outpatient Pharmacy	Procedures	689.4	201.38	11.57	6.9	284.41	0.16	11.73
Other Outpatient	Procedures	4,631.7	128.80	49.71	712.4	265.65	15.77	65.48
Subtotal – Outpatient Hospital		8,154.4	\$ 191.51	\$ 130.14	1,106.3	\$ 356.96	\$ 32.91	\$ 163.05
Professional								
Inpatient and Outpatient Surgery	Procedures	962.1	\$ 220.97	\$ 17.72	83.8	\$ 289.59	\$ 2.02	\$ 19.74
Anesthesia	Procedures	224.1	297.06	5.55	34.5	340.24	0.98	6.53
Inpatient Visits	Visits	1,894.6	159.92	25.25	203.4	303.65	5.15	30.40
Emergency Room	Visits	788.6	139.56	9.17	185.6	152.00	2.35	11.52
Office/Home Visits/Consults	Visits	4,208.8	92.68	32.50	310.8	92.92	2.41	34.91
Maternity	Procedures	0.3	1,744.51	0.05	3.0	301.44	0.07	0.12
Pathology/Lab	Procedures	1,770.4	19.31	2.85	26.0	28.24	0.06	2.91
Radiology	Procedures	2,209.0	75.41	13.88	369.0	31.48	0.97	14.85
Office Administered Drugs	Procedures	612.5	202.67	10.34	6.6	41.08	0.02	10.37
FQHC/RHC/Tribal Clinic	Visits	513.2	195.03	8.34	893.7	420.75	31.34	39.68
Physical Exams	Visits	136.0	106.12	1.20	3.0	75.23	0.02	1.22
Therapy	Visits	7,522.5	144.46	90.56	3.6	40.91	0.01	90.57
Vision	Visits	679.8	80.78	4.58	8.5	121.72	0.09	4.66
Other Professional	Procedures	10,188.9	47.89	40.66	120.6	58.51	0.59	41.25
Telemedicine	Procedures	50.3	154.64	0.65	28.3	265.00	0.62	1.27
Subtotal – Professional		31,761.2	\$ 99.48	\$ 263.30	2,280.3	\$ 245.74	\$ 46.70	\$ 310.00
Pharmacy								
Psychotropic Drugs	Scripts	4,586.0	\$ 34.35	\$ 13.13	890.8	\$ 20.95	\$ 1.56	\$ 14.68
Opioid Drugs	Scripts	730.8	69.56	4.24	59.1	9.04	0.04	4.28
All Other Drugs	Scripts	17,352.0	87.11	125.96	3,194.1	69.69	18.55	144.51
Subtotal – Pharmacy		22,668.7	\$ 75.87	\$ 143.32	4,144.0	\$ 58.35	\$ 20.15	\$ 163.47
Ancillary								
Ground Transportation	Trips	6,507.5	\$ 99.21	\$ 53.80	0.7	\$ 120.44	\$ 0.01	\$ 53.81
Air Transportation	Trips	570.4	865.03	41.12	1.0	2,972.08	0.24	41.36
Accommodations	Claims	195.8	319.97	5.22	-	-	-	5.22
DME/Prosthetics	Procedures	19,809.4	102.85	169.79	-	-	-	169.79
Dental	Procedures	2,371.4	124.15	24.53	243.8	330.03	6.71	31.24
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		29,454.5	\$ 119.97	\$ 294.47	245.4	\$ 340.08	\$ 6.96	\$ 301.42
LTSS								
Hospice	Days	73.9	\$ 443.64	\$ 2.73	-	\$ 0.00	\$ 0.00	\$ 2.73
Nursing Home	Days	2,003.7	90.67	15.14	18.1	3,331.36	5.02	20.16
Skilled Nursing Facility	Days	26,542.3	626.92	1,386.67	1,729.0	1,110.40	159.99	1,546.66
HCBS	Procedures	298,759.0	180.60	4,496.37	23.7	452.33	0.89	4,497.26
Case Management	Procedures	11,998.7	211.46	211.43	392.7	293.23	9.59	221.03
Personal Care	Procedures	58,075.1	105.29	509.58	-	-	-	509.58
Subtotal – LTSS		397,452.8	\$ 199.93	\$ 6,621.92	2,163.4	\$ 973.44	\$ 175.49	\$ 6,797.41
Behavioral Health								
IP Psych Hospital - API	Days	59.1	\$ 1,281.48	\$ 6.32	-	\$ 0.00	\$ 0.00	\$ 6.32
IP Psych Hospital - All Other	Days	53.2	750.89	3.33	-	-	-	3.33
IP General Hospital - MH/SA	Days	7.6	2,126.26	1.34	-	-	-	1.34
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	51.6	80.73	0.35	3.6	515.85	0.16	0.50
Assessment	Procedures	37.1	204.69	0.63	4.3	600.98	0.21	0.85
Crisis Services	Procedures	1,313.3	221.40	24.23	15.1	608.69	0.77	25.00
Medication Services	Procedures	38.1	72.50	0.23	2.3	608.57	0.12	0.35
Methadone Medication Services	Procedures	-	-	-	-	-	-	-
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	793.5	76.52	5.06	51.3	590.65	2.52	7.58
Family Therapy OP	Procedures	132.1	90.06	0.99	4.6	466.48	0.18	1.17
Group Therapy OP	Procedures	236.2	60.92	1.20	1.3	612.75	0.07	1.27
SBIRT	Procedures	-	-	-	1.3	607.00	0.07	0.07
Substance Abuse Residential	Days	-	-	-	-	-	-	-
Children's Residential	Days	1,061.3	167.42	14.81	-	-	-	14.81
RPTC - In State	Days	155.7	315.64	4.10	-	-	-	4.10
RPTC - Out of State	Days	236.6	423.59	8.35	-	-	-	8.35
Detoxification	Procedures	-	-	-	-	-	-	-
Medical Evaluation	Procedures	31.2	201.23	0.52	-	-	-	0.52
Psychological Testing	Procedures	78.2	527.21	3.44	0.7	410.80	0.02	3.46
Peer Support Services	Units	2.3	10.20	0.00	-	-	-	0.00
Psychosocial Rehabilitation Services	Procedures	3,169.1	175.04	46.23	81.2	603.58	4.08	50.31
BH Case Management	Units	1,962.3	15.99	2.62	13.8	332.07	0.38	3.00
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	44.0	71.93	0.26	2.6	609.50	0.13	0.40
Other Professional MH/SA	Visits	152.5	35.23	0.45	11.2	608.11	0.57	1.01
Subtotal – Behavioral Health		9,615.2	\$ 155.31	\$ 124.45	193.2	\$ 576.02	\$ 9.27	\$ 133.72
Total All Services		500,014.6	\$ 187.60	\$ 7,816.93	10,312.1	\$ 394.09	\$ 338.66	\$ 8,155.60

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix C - Detailed Summaries - Statewide by Population and Rate Cell

Fiscal Year:		SFY 2017						
Population:		Excluded-Dual						
Rate Cell:		None						
Region:		Statewide						
Member Months:		146,922						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	PMPM	Utilization per 1,000	Paid per Unit	PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	129.9	\$ 2,335.47	\$ 25.27	31.4	\$ 2,173.07	\$ 5.68	\$ 30.95
Inpatient Maternity Delivery	Days	0.8	1,393.59	0.09	0.1	1,316.00	0.01	0.10
Inpatient Well Newborn	Days	-	-	-	-	-	-	-
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal – Inpatient Hospital		130.7	\$ 2,329.58	\$ 25.37	31.4	\$ 2,170.84	\$ 5.69	\$ 31.06
Outpatient Hospital								
Outpatient Emergency Room	Visits	803.2	\$ 208.29	\$ 13.94	34.6	\$ 308.68	\$ 0.89	\$ 14.83
Outpatient Surgery	Visits	87.7	603.98	4.42	5.9	532.27	0.26	4.68
Outpatient Radiology	Procedures	387.2	123.63	3.99	12.5	197.24	0.21	4.19
Outpatient Pathology/Lab	Procedures	147.8	24.00	0.30	29.7	370.38	0.92	1.21
Outpatient Pharmacy	Procedures	169.7	132.01	1.87	7.9	169.51	0.11	1.98
Other Outpatient	Procedures	3,395.8	50.87	14.40	1,774.4	120.60	17.83	32.23
Subtotal – Outpatient Hospital		4,991.5	\$ 93.53	\$ 38.91	1,865.1	\$ 130.09	\$ 20.22	\$ 59.12
Professional								
Inpatient and Outpatient Surgery	Procedures	1,305.8	\$ 74.69	\$ 8.13	203.5	\$ 93.82	\$ 1.59	\$ 9.72
Anesthesia	Procedures	261.8	76.66	1.67	59.7	86.06	0.43	2.10
Inpatient Visits	Visits	1,247.5	53.80	5.59	220.7	83.40	1.53	7.13
Emergency Room	Visits	984.8	52.64	4.32	293.1	41.42	1.01	5.33
Office/Home Visits/Consults	Visits	4,880.2	33.46	13.61	999.0	48.44	4.03	17.64
Maternity	Procedures	5.5	161.50	0.07	0.4	345.52	0.01	0.09
Pathology/Lab	Procedures	417.2	20.41	0.71	116.5	11.04	0.11	0.82
Radiology	Procedures	2,837.9	22.79	5.39	579.5	11.65	0.56	5.95
Office Administered Drugs	Procedures	1,035.0	70.49	6.08	26.8	29.82	0.07	6.15
FQHC/RHC/Tribal Clinic	Visits	843.8	78.01	5.49	1,298.9	76.78	8.31	13.80
Physical Exams	Visits	9.7	53.63	0.04	6.6	36.43	0.02	0.06
Therapy	Visits	1,002.7	27.52	2.30	9.7	8.27	0.01	2.31
Vision	Visits	925.8	70.26	5.42	29.1	39.41	0.10	5.52
Other Professional	Procedures	4,276.4	42.00	14.97	283.4	59.78	1.41	16.38
Telemedicine	Procedures	10.5	31.30	0.03	48.6	68.80	0.28	0.31
Subtotal – Professional		20,044.5	\$ 44.19	\$ 73.82	4,175.4	\$ 55.95	\$ 19.47	\$ 93.28
Pharmacy								
Psychotropic Drugs	Scripts	156.7	\$ 59.20	\$ 0.77	39.7	\$ 88.15	\$ 0.29	\$ 1.06
Opioid Drugs	Scripts	115.1	58.86	0.56	18.1	49.92	0.08	0.64
All Other Drugs	Scripts	1,163.0	102.40	9.92	348.6	88.52	2.57	12.50
Subtotal – Pharmacy		1,434.8	\$ 94.19	\$ 11.26	406.4	\$ 86.76	\$ 2.94	\$ 14.20
Ancillary								
Ground Transportation	Trips	4,596.0	\$ 50.28	\$ 19.26	2.0	\$ 145.34	\$ 0.02	\$ 19.28
Air Transportation	Trips	892.5	557.74	41.48	2.5	2,174.13	0.44	41.92
Accommodations	Claims	427.3	295.70	10.53	-	-	-	10.53
DME/Prosthetics	Procedures	5,523.8	51.30	23.61	0.1	13.60	0.00	23.61
Dental	Procedures	1,795.2	170.89	25.56	257.4	336.56	7.22	32.78
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		13,234.7	\$ 109.21	\$ 120.45	261.9	\$ 352.22	\$ 7.69	\$ 128.13
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.09	-	\$ 0.00	\$ 0.00	\$ 0.09
Nursing Home	Days	51.6	924.58	3.98	-	-	-	3.98
Skilled Nursing Facility	Days	5,710.4	635.30	302.32	808.8	1,033.04	69.62	371.94
HCBS	Procedures	42,652.7	172.56	613.35	3.3	409.48	0.11	613.47
Case Management	Procedures	1,254.7	243.56	25.47	47.9	277.09	1.11	26.57
Personal Care	Procedures	36,282.5	76.26	230.58	229.2	45.58	0.87	231.45
Subtotal – LTSS		85,952.0	\$ 164.15	\$ 1,175.78	1,089.1	\$ 790.12	\$ 71.71	\$ 1,247.49
Behavioral Health								
IP Psych Hospital - API	Days	11.4	\$ 896.48	\$ 0.85	-	\$ 0.00	\$ 0.00	\$ 0.85
IP Psych Hospital - All Other	Days	-	-	-	-	-	-	-
IP General Hospital - MH/SA	Days	11.5	2,023.85	1.94	0.2	1,694.57	0.02	1.97
OP General Hospital - MH/SA	Visits	11.5	58.64	0.06	-	-	-	0.06
Screening	Procedures	22.1	49.94	0.09	3.0	595.87	0.15	0.24
Assessment	Procedures	34.0	183.05	0.52	4.6	568.70	0.22	0.74
Crisis Services	Procedures	87.1	139.60	1.01	17.5	609.53	0.89	1.90
Medication Services	Procedures	587.1	31.01	1.52	22.0	604.98	1.11	2.62
Methadone Medication Services	Procedures	308.5	12.56	0.32	-	-	-	0.32
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	488.7	53.96	2.20	34.4	457.86	1.31	3.51
Family Therapy OP	Procedures	84.9	24.26	0.17	3.7	123.77	0.04	0.21
Group Therapy OP	Procedures	110.6	56.13	0.52	22.0	506.08	0.93	1.44
SBIRT	Procedures	0.3	47.59	0.00	4.2	609.00	0.22	0.22
Substance Abuse Residential	Days	17.4	253.73	0.37	41.9	301.41	1.05	1.42
Children's Residential	Days	-	-	-	-	-	-	-
RPTC - In State	Days	-	-	-	-	-	-	-
RPTC - Out of State	Days	-	-	-	-	-	-	-
Detoxification	Procedures	2.9	616.00	0.15	3.1	606.42	0.16	0.30
Medical Evaluation	Procedures	31.4	64.51	0.17	0.7	535.19	0.03	0.20
Psychological Testing	Procedures	22.3	91.45	0.17	0.5	60.74	0.00	0.17
Peer Support Services	Units	53.9	17.01	0.08	-	-	-	0.08
Psychosocial Rehabilitation Services	Procedures	3,685.0	207.55	63.74	362.8	607.73	18.37	82.11
BH Case Management	Units	2,937.4	16.05	3.93	69.9	234.37	1.37	5.29
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	24.3	87.98	0.18	6.6	502.07	0.28	0.46
Other Professional MH/SA	Visits	177.6	35.29	0.52	17.2	555.21	0.79	1.32
Subtotal – Behavioral Health		8,710.1	\$ 108.15	\$ 78.50	614.1	\$ 526.18	\$ 26.93	\$ 105.43
Total All Services		134,498.2	\$ 135.98	\$ 1,524.08	8,443.5	\$ 219.78	\$ 154.64	\$ 1,678.72

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix C - Detailed Summaries - Statewide by Population and Rate Cell

Fiscal Year:	SFY 2017							
Population:	Excluded-Other							
Rate Cell:	None							
Region:	Statewide							
Member Months:	272							
		Non-Tribal Providers			Tribal Providers			Total Paid
		Utilization per	Paid	Paid	Utilization per	Paid	PMPM	PMPM
Category of Service	Unit Description	1,000	per Unit	PMPM	1,000	per Unit	PMPM	PMPM
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	10,309.1	\$ 2,628.60	\$ 2,258.22	-	\$ 0.00	\$ 0.00	\$ 2,258.22
Inpatient Maternity Delivery	Days	6,344.1	2,836.20	1,499.43	-	-	-	1,499.43
Inpatient Well Newborn	Days	88.1	3,011.62	22.11	-	-	-	22.11
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal – Inpatient Hospital		16,741.3	\$ 2,709.29	\$ 3,779.76	-	\$ 0.00	\$ 0.00	\$ 3,779.76
Outpatient Hospital								
Outpatient Emergency Room	Visits	484.6	\$ 1,116.66	\$ 45.10	616.8	\$ 521.29	\$ 26.79	\$ 71.89
Outpatient Surgery	Visits	88.1	1,388.03	10.19	88.1	944.75	6.94	17.13
Outpatient Radiology	Procedures	176.2	146.54	2.15	132.2	611.67	6.74	8.89
Outpatient Pathology/Lab	Procedures	3,216.1	12.67	3.40	616.8	561.14	28.84	32.24
Outpatient Pharmacy	Procedures	-	-	(0.00)	-	-	-	(0.00)
Other Outpatient	Procedures	1,145.5	69.95	6.68	1,409.8	215.19	25.28	31.96
Subtotal – Outpatient Hospital		5,110.5	\$ 158.53	\$ 67.51	2,863.7	\$ 396.38	\$ 94.59	\$ 162.10
Professional								
Inpatient and Outpatient Surgery	Procedures	2,643.4	\$ 727.12	\$ 160.17	660.8	\$ 130.42	\$ 7.18	\$ 167.35
Anesthesia	Procedures	1,542.0	877.80	112.80	220.3	380.06	6.98	119.77
Inpatient Visits	Visits	7,621.7	402.30	255.52	2,070.6	434.80	75.03	330.55
Emergency Room	Visits	1,057.3	143.20	12.62	837.1	117.13	8.17	20.79
Office/Home Visits/Consults	Visits	2,467.1	121.40	24.96	969.2	87.51	7.07	32.03
Maternity	Procedures	2,290.9	1,176.57	224.62	-	-	-	224.62
Pathology/Lab	Procedures	1,233.6	42.44	4.36	440.6	95.51	3.51	7.87
Radiology	Procedures	7,665.8	70.11	44.79	2,951.8	31.45	7.74	52.52
Office Administered Drugs	Procedures	352.4	53.22	1.56	-	-	-	1.56
FQHC/RHC/Tribal Clinic	Visits	220.3	147.35	2.70	1,982.5	463.56	76.59	79.29
Physical Exams	Visits	572.7	218.25	10.42	264.3	93.77	2.07	12.48
Therapy	Visits	837.1	220.57	15.39	-	-	-	15.39
Vision	Visits	925.2	124.85	9.63	-	-	-	9.63
Other Professional	Procedures	2,863.7	71.19	16.99	352.4	33.36	0.98	17.97
Telemedicine	Procedures	220.3	113.85	2.09	264.3	277.47	6.11	8.20
Subtotal – Professional		32,513.5	\$ 331.65	\$ 898.60	11,014.0	\$ 219.44	\$ 201.41	\$ 1,100.01
Pharmacy								
Psychotropic Drugs	Scripts	176.2	\$ 46.43	\$ 0.68	44.1	\$ 10.50	\$ 0.04	\$ 0.72
Opioid Drugs	Scripts	132.2	5.16	0.06	176.2	2.10	0.03	0.09
All Other Drugs	Scripts	1,453.9	444.58	53.86	925.2	22.50	1.74	55.60
Subtotal – Pharmacy		1,762.2	\$ 371.81	\$ 54.60	1,145.5	\$ 18.90	\$ 1.80	\$ 56.41
Ancillary								
Ground Transportation	Trips	704.9	\$ 30.07	\$ 1.77	-	\$ 0.00	\$ 0.00	\$ 1.77
Air Transportation	Trips	44.1	1,212.00	4.45	-	-	-	4.45
Accommodations	Claims	132.2	254.73	2.81	-	-	-	2.81
DME/Prosthetics	Procedures	572.7	72.95	3.48	-	-	-	3.48
Dental	Procedures	3,348.3	98.76	27.56	660.8	505.15	27.82	55.37
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		4,802.1	\$ 100.10	\$ 40.06	660.8	\$ 505.15	\$ 27.82	\$ 67.88
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Nursing Home	Days	572.7	730.06	34.84	-	-	-	34.84
Skilled Nursing Facility	Days	5,330.8	427.73	190.01	-	-	-	190.01
HCBS	Procedures	396.5	148.64	4.91	-	-	-	4.91
Case Management	Procedures	528.7	267.73	11.80	-	-	-	11.80
Personal Care	Procedures	1,057.3	30.55	2.69	-	-	-	2.69
Subtotal – LTSS		7,886.1	\$ 371.67	\$ 244.25	-	\$ 0.00	\$ 0.00	\$ 244.25
Behavioral Health								
IP Psych Hospital - API	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
IP Psych Hospital - All Other	Days	-	-	-	-	-	-	-
IP General Hospital - MH/SA	Days	176.2	2,810.63	41.28	-	-	-	41.28
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	88.1	35.00	0.26	-	-	-	0.26
Assessment	Procedures	88.1	100.00	0.73	44.1	603.00	2.21	2.95
Crisis Services	Procedures	264.3	62.24	1.37	-	-	-	1.37
Medication Services	Procedures	-	-	-	-	-	-	-
Methadone Medication Services	Procedures	-	-	-	-	-	-	-
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	484.6	93.18	3.76	1,101.4	591.98	54.33	58.10
Family Therapy OP	Procedures	220.3	138.83	2.55	44.1	603.00	2.21	4.76
Group Therapy OP	Procedures	88.1	57.68	0.42	88.1	603.00	4.43	4.85
SBIRT	Procedures	-	-	-	44.1	603.00	2.21	2.21
Substance Abuse Residential	Days	969.2	205.23	16.58	88.1	616.00	4.52	21.10
Children's Residential	Days	-	-	-	2,467.1	150.75	30.99	30.99
RPTC - In State	Days	-	-	-	-	-	-	-
RPTC - Out of State	Days	-	-	-	-	-	-	-
Detoxification	Procedures	837.1	616.00	42.97	-	-	-	42.97
Medical Evaluation	Procedures	-	-	-	-	-	-	-
Psychological Testing	Procedures	176.2	56.99	0.84	-	-	-	0.84
Peer Support Services	Units	-	-	-	-	-	-	-
Psychosocial Rehabilitation Services	Procedures	2,026.6	97.42	16.45	1,630.1	610.03	82.87	99.32
BH Case Management	Units	1,057.3	16.00	1.41	132.2	406.33	4.48	5.89
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	-	-	-	-	-	-	-
Other Professional MH/SA	Visits	396.5	37.07	1.22	132.2	611.67	6.74	7.96
Subtotal – Behavioral Health		6,872.8	\$ 226.71	\$ 129.84	5,771.4	\$ 405.45	\$ 195.00	\$ 324.84
Total All Services		75,688.5	\$ 826.75	\$ 5,214.63	21,455.4	\$ 291.18	\$ 520.62	\$ 5,735.25

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix C - Detailed Summaries - Statewide by Population and Rate Cell

Fiscal Year:		SFY 2017						
Population:		Low-Income Family						
Rate Cell:		0-2 Months						
Region:		Statewide						
Member Months:		13,879						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	10,558.8	\$ 3,054.81	\$ 2,687.93	3,130.0	\$ 3,274.56	\$ 854.10	\$ 3,542.04
Inpatient Maternity Delivery	Days	-	-	-	-	-	-	-
Inpatient Well Newborn	Days	3,161.1	2,975.26	783.75	1,425.8	3,248.54	385.97	1,169.73
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal – Inpatient Hospital		13,719.9	\$ 3,036.48	\$ 3,471.69	4,555.7	\$ 3,266.42	\$ 1,240.07	\$ 4,711.76
Outpatient Hospital								
Outpatient Emergency Room	Visits	398.6	\$ 485.78	\$ 16.14	484.2	\$ 653.14	\$ 26.35	\$ 42.49
Outpatient Surgery	Visits	32.0	218.20	0.58	3.5	538.81	0.16	0.74
Outpatient Radiology	Procedures	64.8	219.20	1.18	34.6	556.34	1.60	2.79
Outpatient Pathology/Lab	Procedures	1,239.0	13.78	1.42	1,186.3	458.80	45.36	46.78
Outpatient Pharmacy	Procedures	12.1	53.25	0.05	28.5	471.64	1.12	1.18
Other Outpatient	Procedures	163.4	131.25	1.79	573.2	582.57	27.83	29.62
Subtotal – Outpatient Hospital		1,910.0	\$ 132.98	\$ 21.17	2,310.3	\$ 531.98	\$ 102.42	\$ 123.58
Professional								
Inpatient and Outpatient Surgery	Procedures	1,323.7	\$ 400.89	\$ 44.22	268.9	\$ 275.46	\$ 6.17	\$ 50.40
Anesthesia	Procedures	110.7	399.68	3.69	29.4	302.71	0.74	4.43
Inpatient Visits	Visits	9,007.7	416.57	312.69	2,081.2	334.47	58.01	370.70
Emergency Room	Visits	448.7	179.33	6.71	219.6	148.66	2.72	9.43
Office/Home Visits/Consults	Visits	3,419.6	109.99	31.34	612.2	153.78	7.84	39.19
Maternity	Procedures	-	-	-	-	-	-	-
Pathology/Lab	Procedures	662.3	43.55	2.40	25.1	6.32	0.01	2.42
Radiology	Procedures	2,233.3	28.85	5.37	418.5	38.02	1.33	6.70
Office Administered Drugs	Procedures	116.7	12.79	0.12	5.2	36.80	0.02	0.14
FQHC/RHC/Tribal Clinic	Visits	632.0	338.80	17.84	3,285.6	608.32	166.56	184.40
Physical Exams	Visits	7,729.8	172.34	111.01	1,942.8	165.47	26.79	137.80
Therapy	Visits	76.1	135.48	0.86	19.0	52.23	0.08	0.94
Vision	Visits	19.0	155.82	0.25	2.6	203.47	0.04	0.29
Other Professional	Procedures	1,199.2	79.10	7.90	114.1	35.62	0.34	8.24
Telemedicine	Procedures	-	-	-	16.4	412.42	0.56	0.56
Subtotal – Professional		26,979.0	\$ 242.15	\$ 544.42	9,040.5	\$ 360.00	\$ 271.22	\$ 815.64
Pharmacy								
Psychotropic Drugs	Scripts	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Opioid Drugs	Scripts	1.7	0.08	0.00	-	-	-	0.00
All Other Drugs	Scripts	704.7	64.60	3.79	294.8	33.04	0.81	4.61
Subtotal – Pharmacy		706.4	\$ 64.44	\$ 3.79	294.8	\$ 33.04	\$ 0.81	\$ 4.61
Ancillary								
Ground Transportation	Trips	1,696.4	\$ 59.96	\$ 8.48	0.9	\$ 573.90	\$ 0.04	\$ 8.52
Air Transportation	Trips	530.9	2,352.26	104.06	2.6	3,408.23	0.74	104.80
Accommodations	Claims	402.9	595.65	20.00	-	-	-	20.00
DME/Prosthetics	Procedures	485.1	133.38	5.39	-	-	-	5.39
Dental	Procedures	155.6	309.34	4.01	4.3	610.80	0.22	4.23
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		3,270.9	\$ 520.75	\$ 141.94	7.8	\$ 1,539.18	\$ 1.00	\$ 142.94
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Nursing Home	Days	-	-	-	-	-	-	-
Skilled Nursing Facility	Days	-	-	-	-	-	-	-
HCBS	Procedures	-	-	-	-	-	-	-
Case Management	Procedures	26.8	303.08	0.68	5.2	303.04	0.13	0.81
Personal Care	Procedures	-	-	-	-	-	-	-
Subtotal – LTSS		26.8	\$ 303.08	\$ 0.68	5.2	\$ 303.04	\$ 0.13	\$ 0.81
Behavioral Health								
IP Psych Hospital - API	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
IP Psych Hospital - All Other	Days	-	-	-	-	-	-	-
IP General Hospital - MH/SA	Days	-	-	-	-	-	-	-
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	-	-	-	-	-	-	-
Assessment	Procedures	-	-	-	-	-	-	-
Crisis Services	Procedures	-	-	-	-	-	-	-
Medication Services	Procedures	-	-	-	-	-	-	-
Methadone Medication Services	Procedures	-	-	-	-	-	-	-
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	-	-	-	-	-	-	-
Family Therapy OP	Procedures	-	-	-	-	-	-	-
Group Therapy OP	Procedures	-	-	-	-	-	-	-
SBIRT	Procedures	-	-	-	-	-	-	-
Substance Abuse Residential	Days	-	-	-	-	-	-	-
Children's Residential	Days	-	-	-	-	-	-	-
RPTC - In State	Days	-	-	-	-	-	-	-
RPTC - Out of State	Days	-	-	-	-	-	-	-
Detoxification	Procedures	-	-	-	-	-	-	-
Medical Evaluation	Procedures	-	-	-	-	-	-	-
Psychological Testing	Procedures	211.8	15.96	0.28	0.9	192.76	0.01	0.30
Peer Support Services	Units	-	-	-	-	-	-	-
Psychosocial Rehabilitation Services	Procedures	-	-	-	-	-	-	-
BH Case Management	Units	-	-	-	-	-	-	-
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	-	-	-	-	-	-	-
Other Professional MH/SA	Visits	-	-	-	-	-	-	-
Subtotal – Behavioral Health		211.8	\$ 15.96	\$ 0.28	0.9	\$ 192.76	\$ 0.01	\$ 0.30
Total All Services		46,824.8	\$ 1,072.24	\$ 4,183.97	16,215.2	\$ 1,195.67	\$ 1,615.67	\$ 5,799.63

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix C - Detailed Summaries - Statewide by Population and Rate Cell

Fiscal Year:		SFY 2017						
Population:		Low-Income Family						
Rate Cell:		1-4 Male and Female						
Region:		Statewide						
Member Months:		247,952						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid
		Utilization per 1,000	Paid per Unit	PMPM	Utilization per 1,000	Paid per Unit	PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	59.5	\$ 3,268.36	\$ 16.21	51.4	\$ 3,346.31	\$ 14.35	\$ 30.56
Inpatient Maternity Delivery	Days	-	-	-	-	-	-	-
Inpatient Well Newborn	Days	-	-	-	-	-	-	-
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal – Inpatient Hospital		59.5	\$ 3,268.36	\$ 16.21	51.4	\$ 3,346.31	\$ 14.35	\$ 30.56
Outpatient Hospital								
Outpatient Emergency Room	Visits	332.0	\$ 401.91	\$ 11.12	232.8	\$ 595.25	\$ 11.55	\$ 22.67
Outpatient Surgery	Visits	82.9	2,277.57	15.73	28.5	1,138.66	2.70	18.43
Outpatient Radiology	Procedures	33.6	238.92	0.67	19.6	545.41	0.89	1.56
Outpatient Pathology/Lab	Procedures	338.2	22.63	0.64	165.1	374.29	5.15	5.79
Outpatient Pharmacy	Procedures	70.4	124.93	0.73	17.5	306.00	0.45	1.18
Other Outpatient	Procedures	156.7	173.25	2.26	214.1	551.50	9.84	12.10
Subtotal – Outpatient Hospital		1,013.8	\$ 368.69	\$ 31.15	677.5	\$ 541.50	\$ 30.57	\$ 61.72
Professional								
Inpatient and Outpatient Surgery	Procedures	114.3	\$ 323.39	\$ 3.08	44.6	\$ 282.74	\$ 1.05	\$ 4.13
Anesthesia	Procedures	103.8	457.41	3.96	31.8	408.78	1.08	5.04
Inpatient Visits	Visits	51.9	335.17	1.45	34.0	312.77	0.89	2.33
Emergency Room	Visits	336.0	146.67	4.11	118.3	115.65	1.14	5.25
Office/Home Visits/Consults	Visits	1,206.8	125.74	12.65	542.4	106.41	4.81	17.46
Maternity	Procedures	-	-	-	-	-	-	-
Pathology/Lab	Procedures	211.7	15.58	0.27	119.9	9.27	0.09	0.37
Radiology	Procedures	179.5	34.05	0.51	45.3	33.41	0.13	0.64
Office Administered Drugs	Procedures	36.8	29.43	0.09	14.9	32.41	0.04	0.13
FQHC/RHC/Tribal Clinic	Visits	116.0	315.41	3.05	648.2	608.05	32.85	35.90
Physical Exams	Visits	594.5	173.42	8.59	99.5	120.57	1.00	9.59
Therapy	Visits	1,451.7	149.71	18.11	4.5	152.06	0.06	18.17
Vision	Visits	237.0	78.69	1.55	6.4	131.00	0.07	1.62
Other Professional	Procedures	303.5	120.45	3.05	48.0	41.54	0.17	3.21
Telemedicine	Procedures	1.1	153.20	0.01	72.1	328.08	1.97	1.98
Subtotal – Professional		4,944.7	\$ 146.77	\$ 60.48	1,829.7	\$ 297.34	\$ 45.34	\$ 105.81
Pharmacy								
Psychotropic Drugs	Scripts	1.6	\$ 15.71	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Opioid Drugs	Scripts	18.7	9.39	0.01	3.0	9.34	0.00	0.02
All Other Drugs	Scripts	1,019.3	101.30	8.60	535.3	41.78	1.86	10.47
Subtotal – Pharmacy		1,039.6	\$ 99.51	\$ 8.62	538.4	\$ 41.60	\$ 1.87	\$ 10.49
Ancillary								
Ground Transportation	Trips	1,078.7	\$ 27.29	\$ 2.45	0.5	\$ 367.25	\$ 0.01	\$ 2.47
Air Transportation	Trips	442.6	669.19	24.68	1.0	8,532.48	0.72	25.40
Accommodations	Claims	157.7	271.44	3.57	-	-	-	3.57
DME/Prosthetics	Procedures	222.0	188.67	3.49	0.0	13.60	0.00	3.49
Dental	Procedures	3,049.4	93.55	23.77	309.9	595.18	15.37	39.14
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		4,950.4	\$ 140.51	\$ 57.96	311.5	\$ 620.64	\$ 16.11	\$ 74.07
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Nursing Home	Days	-	-	-	-	-	-	-
Skilled Nursing Facility	Days	-	-	-	-	-	-	-
HCBS	Procedures	103.9	559.51	4.84	-	-	-	4.84
Case Management	Procedures	189.2	296.49	4.67	28.9	303.15	0.73	5.40
Personal Care	Procedures	-	-	-	-	-	-	-
Subtotal – LTSS		293.1	\$ 389.74	\$ 9.52	28.9	\$ 303.15	\$ 0.73	\$ 10.25
Behavioral Health								
IP Psych Hospital - API	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
IP Psych Hospital - All Other	Days	1.9	765.76	0.12	-	-	-	0.12
IP General Hospital - MH/SA	Days	0.0	2,798.02	0.01	-	-	-	0.01
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	6.4	37.20	0.02	0.4	608.78	0.02	0.04
Assessment	Procedures	7.8	200.91	0.13	1.0	603.68	0.05	0.18
Crisis Services	Procedures	0.2	101.20	0.00	0.7	610.43	0.03	0.04
Medication Services	Procedures	0.0	75.00	0.00	-	-	-	0.00
Methadone Medication Services	Procedures	-	-	-	-	-	-	-
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	57.5	96.27	0.46	4.9	605.61	0.25	0.71
Family Therapy OP	Procedures	33.5	102.67	0.29	2.4	606.90	0.12	0.41
Group Therapy OP	Procedures	73.8	101.61	0.62	-	-	-	0.62
SBIRT	Procedures	0.1	60.44	0.00	0.0	603.00	0.00	0.00
Substance Abuse Residential	Days	-	-	-	-	-	-	-
Children's Residential	Days	84.2	186.10	1.31	5.8	567.83	0.27	1.58
RPTC - In State	Days	-	-	-	-	-	-	-
RPTC - Out of State	Days	-	-	-	-	-	-	-
Detoxification	Procedures	-	-	-	-	-	-	-
Medical Evaluation	Procedures	0.8	253.31	0.02	-	-	-	0.02
Psychological Testing	Procedures	151.4	72.26	0.91	0.7	356.27	0.02	0.93
Peer Support Services	Units	11.9	17.00	0.02	-	-	-	0.02
Psychosocial Rehabilitation Services	Procedures	234.4	140.42	2.74	1.8	604.03	0.09	2.84
BH Case Management	Units	149.6	16.04	0.20	0.6	302.58	0.01	0.21
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	1.4	63.55	0.01	0.0	603.00	0.00	0.01
Other Professional MH/SA	Visits	14.5	38.21	0.05	0.9	607.33	0.04	0.09
Subtotal – Behavioral Health		829.6	\$ 99.91	\$ 6.91	19.4	\$ 576.05	\$ 0.93	\$ 7.84
Total All Services		13,130.7	\$ 174.42	\$ 190.85	3,456.8	\$ 381.48	\$ 109.89	\$ 300.74

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix C - Detailed Summaries - Statewide by Population and Rate Cell

Fiscal Year:		SFY 2017						
Population:		Low-Income Family						
Rate Cell:		14-18 Female						
Region:		Statewide						
Member Months:		106,828						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	47.1	\$ 3,268.49	\$ 12.82	22.6	\$ 3,575.05	\$ 6.73	\$ 19.55
Inpatient Maternity Delivery	Days	6.2	2,969.96	1.53	10.6	3,243.14	2.85	4.38
Inpatient Well Newborn	Days	-	-	-	-	-	-	-
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal – Inpatient Hospital		53.2	\$ 3,233.85	\$ 14.35	33.1	\$ 3,469.29	\$ 9.58	\$ 23.93
Outpatient Hospital								
Outpatient Emergency Room	Visits	320.9	\$ 692.10	\$ 18.51	171.0	\$ 599.35	\$ 8.54	\$ 27.05
Outpatient Surgery	Visits	25.4	3,203.03	6.78	17.3	1,015.25	1.46	8.24
Outpatient Radiology	Procedures	64.7	315.36	1.70	39.5	559.73	1.84	3.54
Outpatient Pathology/Lab	Procedures	757.3	23.73	1.50	376.3	370.41	11.62	13.11
Outpatient Pharmacy	Procedures	31.7	534.86	1.41	26.7	1,134.61	2.53	3.94
Other Outpatient	Procedures	160.7	130.55	1.75	183.2	548.07	8.37	10.12
Subtotal – Outpatient Hospital		1,360.8	\$ 279.05	\$ 31.64	814.1	\$ 506.47	\$ 34.36	\$ 66.00
Professional								
Inpatient and Outpatient Surgery	Procedures	146.8	\$ 349.70	\$ 4.28	33.1	\$ 476.78	\$ 1.32	\$ 5.59
Anesthesia	Procedures	37.7	441.38	1.39	21.7	463.69	0.84	2.23
Inpatient Visits	Visits	298.6	405.93	10.10	25.0	227.97	0.48	10.58
Emergency Room	Visits	329.9	182.69	5.02	102.6	140.10	1.20	6.22
Office/Home Visits/Consults	Visits	1,279.2	134.56	14.34	364.8	112.30	3.41	17.76
Maternity	Procedures	12.2	478.50	0.49	6.2	919.47	0.47	0.96
Pathology/Lab	Procedures	1,071.8	19.54	1.75	162.8	12.86	0.17	1.92
Radiology	Procedures	413.6	74.48	2.57	77.8	46.36	0.30	2.87
Office Administered Drugs	Procedures	112.1	116.86	1.09	29.5	36.84	0.09	1.18
FQHC/RHC/Tribal Clinic	Visits	278.4	307.26	7.13	811.0	602.48	40.72	47.85
Physical Exams	Visits	234.3	144.25	2.82	28.4	91.65	0.22	3.03
Therapy	Visits	427.1	132.30	4.71	13.3	54.68	0.06	4.77
Vision	Visits	791.8	95.23	6.28	14.6	71.04	0.09	6.37
Other Professional	Procedures	356.3	144.73	4.30	35.3	50.54	0.15	4.45
Telemedicine	Procedures	8.5	185.58	0.13	40.8	354.24	1.20	1.34
Subtotal – Professional		5,798.5	\$ 137.40	\$ 66.39	1,766.9	\$ 344.43	\$ 50.72	\$ 117.11
Pharmacy								
Psychotropic Drugs	Scripts	764.7	\$ 24.68	\$ 1.57	106.2	\$ 9.17	\$ 0.08	\$ 1.65
Opioid Drugs	Scripts	139.3	5.91	0.07	29.9	4.81	0.01	0.08
All Other Drugs	Scripts	2,345.1	108.10	21.12	707.0	51.34	3.02	24.15
Subtotal – Pharmacy		3,249.1	\$ 84.08	\$ 22.77	843.0	\$ 44.38	\$ 3.12	\$ 25.88
Ancillary								
Ground Transportation	Trips	1,290.4	\$ 60.29	\$ 6.48	0.4	\$ 308.41	\$ 0.01	\$ 6.50
Air Transportation	Trips	547.7	606.50	27.68	0.8	9,265.16	0.61	28.29
Accommodations	Claims	158.7	297.45	3.93	-	-	-	3.93
DME/Prosthetics	Procedures	85.8	153.17	1.10	-	-	-	1.10
Dental	Procedures	4,067.2	135.17	45.81	516.3	613.26	26.38	72.20
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		6,149.9	\$ 165.88	\$ 85.01	517.5	\$ 626.14	\$ 27.00	\$ 112.01
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Nursing Home	Days	-	-	-	2.0	3,335.00	0.56	0.56
Skilled Nursing Facility	Days	-	-	-	-	-	-	-
HCBS	Procedures	42.9	235.00	0.84	-	-	-	0.84
Case Management	Procedures	6.1	149.52	0.08	-	-	-	0.08
Personal Care	Procedures	21.7	97.08	0.18	-	-	-	0.18
Subtotal – LTSS		70.7	\$ 185.34	\$ 1.09	2.0	\$ 3,335.00	\$ 0.56	\$ 1.65
Behavioral Health								
IP Psych Hospital - API	Days	193.2	\$ 1,451.42	\$ 23.37	-	\$ 0.00	\$ 0.00	\$ 23.37
IP Psych Hospital - All Other	Days	537.5	766.44	34.33	-	-	-	34.33
IP General Hospital - MH/SA	Days	128.4	2,712.65	29.02	4.9	4,206.66	1.73	30.76
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	41.9	41.22	0.14	6.3	609.04	0.32	0.46
Assessment	Procedures	62.3	230.76	1.20	13.8	604.18	0.70	1.89
Crisis Services	Procedures	26.8	91.29	0.20	26.5	607.89	1.34	1.55
Medication Services	Procedures	445.9	22.07	0.82	0.1	603.00	0.01	0.83
Methadone Medication Services	Procedures	-	-	-	-	-	-	-
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	847.0	94.37	6.66	100.9	601.19	5.05	11.71
Family Therapy OP	Procedures	296.9	109.29	2.70	11.3	558.22	0.53	3.23
Group Therapy OP	Procedures	972.2	80.16	6.49	12.8	576.61	0.62	7.11
SBIRT	Procedures	0.1	60.44	0.00	6.4	605.73	0.32	0.32
Substance Abuse Residential	Days	237.6	281.39	5.57	122.7	608.36	6.22	11.79
Children's Residential	Days	2,532.6	199.38	42.08	360.1	551.14	16.54	58.62
RPTC - In State	Days	1,940.3	323.15	52.25	-	-	-	52.25
RPTC - Out of State	Days	777.8	364.04	23.60	-	-	-	23.60
Detoxification	Procedures	1.3	616.00	0.07	-	-	-	0.07
Medical Evaluation	Procedures	22.9	240.46	0.46	0.4	221.17	0.01	0.47
Psychological Testing	Procedures	69.4	541.60	3.13	0.4	512.55	0.02	3.15
Peer Support Services	Units	363.9	17.00	0.52	-	-	-	0.52
Psychosocial Rehabilitation Services	Procedures	3,376.9	220.92	62.17	125.7	609.23	6.38	68.55
BH Case Management	Units	1,197.0	16.11	1.61	32.7	281.24	0.77	2.37
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	26.1	90.70	0.20	4.4	593.59	0.22	0.41
Other Professional MH/SA	Visits	108.1	41.53	0.37	18.3	609.95	0.93	1.30
Subtotal – Behavioral Health		14,206.1	\$ 250.85	\$ 296.97	847.9	\$ 590.15	\$ 41.70	\$ 338.66
Total All Services		30,888.3	\$ 201.33	\$ 518.22	4,824.6	\$ 415.46	\$ 167.03	\$ 685.25

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix C - Detailed Summaries - Statewide by Population and Rate Cell

Fiscal Year:		SFY 2017						
Population:		Low-Income Family						
Rate Cell:		14-18 Male						
Region:		Statewide						
Member Months:		110,293						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	60.8	\$ 4,484.75	\$ 22.73	12.1	\$ 3,580.83	\$ 3.60	\$ 26.33
Inpatient Maternity Delivery	Days	-	-	-	-	-	-	-
Inpatient Well Newborn	Days	-	-	-	-	-	-	-
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal – Inpatient Hospital		60.8	\$ 4,484.75	\$ 22.73	12.1	\$ 3,580.83	\$ 3.60	\$ 26.33
Outpatient Hospital								
Outpatient Emergency Room	Visits	214.6	\$ 722.11	\$ 12.91	120.8	\$ 611.73	\$ 6.16	\$ 19.07
Outpatient Surgery	Visits	23.6	3,377.65	6.65	12.7	1,149.00	1.22	7.86
Outpatient Radiology	Procedures	60.1	334.36	1.67	35.3	511.99	1.50	3.18
Outpatient Pathology/Lab	Procedures	383.2	22.68	0.72	132.1	429.71	4.73	5.45
Outpatient Pharmacy	Procedures	50.4	339.57	1.43	7.6	356.38	0.23	1.65
Other Outpatient	Procedures	134.9	150.61	1.69	153.3	548.40	7.01	8.70
Subtotal – Outpatient Hospital		866.7	\$ 347.15	\$ 25.07	461.8	\$ 541.62	\$ 20.84	\$ 45.91
Professional								
Inpatient and Outpatient Surgery	Procedures	150.4	\$ 357.17	\$ 4.48	37.1	\$ 465.00	\$ 1.44	\$ 5.91
Anesthesia	Procedures	41.1	400.76	1.37	18.0	426.29	0.64	2.01
Inpatient Visits	Visits	212.8	402.69	7.14	12.0	256.25	0.26	7.40
Emergency Room	Visits	223.7	168.44	3.14	62.8	130.73	0.68	3.82
Office/Home Visits/Consults	Visits	819.9	135.83	9.28	235.9	121.55	2.39	11.67
Maternity	Procedures	-	-	-	-	-	-	-
Pathology/Lab	Procedures	413.0	22.99	0.79	74.0	12.20	0.08	0.87
Radiology	Procedures	359.3	55.29	1.66	68.0	32.87	0.19	1.84
Office Administered Drugs	Procedures	31.1	77.74	0.20	12.1	36.17	0.04	0.24
FQHC/RHC/Tribal Clinic	Visits	206.5	326.56	5.62	538.5	603.68	27.09	32.71
Physical Exams	Visits	215.8	149.86	2.69	31.0	84.82	0.22	2.91
Therapy	Visits	442.5	134.13	4.95	3.6	62.66	0.02	4.96
Vision	Visits	589.7	95.23	4.68	11.6	62.21	0.06	4.74
Other Professional	Procedures	247.0	88.08	1.81	23.4	70.27	0.14	1.95
Telemedicine	Procedures	9.5	180.02	0.14	58.1	375.09	1.82	1.96
Subtotal – Professional		3,962.2	\$ 145.23	\$ 47.95	1,185.9	\$ 354.57	\$ 35.04	\$ 83.00
Pharmacy								
Psychotropic Drugs	Scripts	477.9	\$ 26.09	\$ 1.04	64.0	\$ 12.16	\$ 0.06	\$ 1.10
Opioid Drugs	Scripts	107.1	10.73	0.10	26.3	4.57	0.01	0.11
All Other Drugs	Scripts	1,591.5	104.75	13.89	468.4	77.48	3.02	16.92
Subtotal – Pharmacy		2,176.5	\$ 82.86	\$ 15.03	558.7	\$ 66.56	\$ 3.10	\$ 18.13
Ancillary								
Ground Transportation	Trips	975.4	\$ 74.20	\$ 6.03	0.1	\$ 286.85	\$ 0.00	\$ 6.03
Air Transportation	Trips	402.7	623.20	20.91	0.5	5,558.09	0.25	21.16
Accommodations	Claims	134.3	253.59	2.84	-	-	-	2.84
DME/Prosthetics	Procedures	137.9	167.05	1.92	0.1	40.51	0.00	1.92
Dental	Procedures	3,612.3	131.21	39.50	405.5	610.65	20.63	60.13
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		5,262.5	\$ 162.35	\$ 71.20	406.3	\$ 617.03	\$ 20.89	\$ 92.09
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Nursing Home	Days	-	-	-	-	-	-	-
Skilled Nursing Facility	Days	-	-	-	-	-	-	-
HCBS	Procedures	145.1	184.60	2.23	-	-	-	2.23
Case Management	Procedures	5.2	234.56	0.10	0.3	358.75	0.01	0.11
Personal Care	Procedures	87.5	45.64	0.33	-	-	-	0.33
Subtotal – LTSS		237.8	\$ 134.59	\$ 2.67	0.3	\$ 358.75	\$ 0.01	\$ 2.68
Behavioral Health								
IP Psych Hospital - API	Days	64.0	\$ 1,510.11	\$ 8.05	-	\$ 0.00	\$ 0.00	\$ 8.05
IP Psych Hospital - All Other	Days	476.6	754.35	29.96	-	-	-	29.96
IP General Hospital - MH/SA	Days	42.1	2,651.85	9.30	4.6	3,605.79	1.37	10.68
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	39.2	54.41	0.18	5.8	608.89	0.29	0.47
Assessment	Procedures	52.7	229.95	1.01	13.4	598.38	0.67	1.68
Crisis Services	Procedures	12.2	111.66	0.11	18.0	600.45	0.90	1.01
Medication Services	Procedures	360.4	22.10	0.66	0.3	603.00	0.02	0.68
Methadone Medication Services	Procedures	-	-	-	-	-	-	-
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	649.3	92.31	4.99	73.3	602.06	3.68	8.67
Family Therapy OP	Procedures	185.2	106.32	1.64	22.2	588.71	1.09	2.73
Group Therapy OP	Procedures	964.1	80.95	6.50	36.3	584.32	1.77	8.27
SBIRT	Procedures	-	-	-	2.9	608.78	0.15	0.15
Substance Abuse Residential	Days	243.8	276.13	5.61	213.3	609.40	10.83	16.44
Children's Residential	Days	3,093.8	198.25	51.11	1,010.3	458.54	38.61	89.72
RPTC - In State	Days	1,585.3	314.83	41.59	-	-	-	41.59
RPTC - Out of State	Days	1,163.6	376.26	36.49	-	-	-	36.49
Detoxification	Procedures	-	-	-	-	-	-	-
Medical Evaluation	Procedures	15.1	244.70	0.31	0.1	221.17	0.00	0.31
Psychological Testing	Procedures	57.0	678.61	3.22	0.1	616.00	0.01	3.23
Peer Support Services	Units	88.8	17.10	0.13	-	-	-	0.13
Psychosocial Rehabilitation Services	Procedures	3,326.3	232.93	64.57	164.0	608.95	8.32	72.89
BH Case Management	Units	1,354.3	16.15	1.82	29.6	383.73	0.95	2.77
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	24.8	87.78	0.18	2.6	608.42	0.13	0.31
Other Professional MH/SA	Visits	106.4	42.46	0.38	19.7	607.07	1.00	1.37
Subtotal – Behavioral Health		13,904.8	\$ 231.13	\$ 267.82	1,616.5	\$ 517.97	\$ 69.77	\$ 337.60
Total All Services		26,471.4	\$ 205.12	\$ 452.47	4,241.5	\$ 433.60	\$ 153.26	\$ 605.73

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix C - Detailed Summaries - Statewide by Population and Rate Cell

Fiscal Year:		SFY 2017						
Population:		Low-Income Family						
Rate Cell:		19-25 Female						
Region:		Statewide						
Member Months:		73,789						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	91.6	\$ 3,157.00	\$ 24.09	41.5	\$ 3,270.55	\$ 11.30	\$ 35.39
Inpatient Maternity Delivery	Days	29.8	2,952.38	7.32	46.2	3,251.03	12.51	19.83
Inpatient Well Newborn	Days	-	-	-	0.7	3,335.00	0.18	0.18
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal – Inpatient Hospital		121.3	\$ 3,106.81	\$ 31.41	88.3	\$ 3,260.82	\$ 24.00	\$ 55.41
Outpatient Hospital								
Outpatient Emergency Room	Visits	571.3	\$ 720.98	\$ 34.32	330.0	\$ 658.49	\$ 18.11	\$ 52.43
Outpatient Surgery	Visits	33.5	3,103.32	8.66	26.2	1,018.32	2.22	10.89
Outpatient Radiology	Procedures	101.5	325.09	2.75	76.1	562.03	3.56	6.31
Outpatient Pathology/Lab	Procedures	811.5	25.80	1.74	810.5	378.85	25.59	27.33
Outpatient Pharmacy	Procedures	51.1	153.81	0.65	51.6	329.32	1.41	2.07
Other Outpatient	Procedures	113.3	131.94	1.25	202.1	535.38	9.02	10.26
Subtotal – Outpatient Hospital		1,682.2	\$ 352.28	\$ 49.38	1,496.5	\$ 480.45	\$ 59.92	\$ 109.30
Professional								
Inpatient and Outpatient Surgery	Procedures	194.8	\$ 381.88	\$ 6.20	51.9	\$ 455.67	\$ 1.97	\$ 8.17
Anesthesia	Procedures	60.5	487.58	2.46	35.1	476.73	1.40	3.85
Inpatient Visits	Visits	124.6	293.54	3.05	58.1	239.22	1.16	4.20
Emergency Room	Visits	570.5	186.25	8.85	192.2	146.72	2.35	11.20
Office/Home Visits/Consults	Visits	1,411.9	132.52	15.59	508.2	107.90	4.57	20.16
Maternity	Procedures	49.4	605.31	2.49	27.8	1,022.40	2.37	4.86
Pathology/Lab	Procedures	2,028.6	21.61	3.65	233.9	16.32	0.32	3.97
Radiology	Procedures	704.8	87.58	5.14	173.0	58.61	0.85	5.99
Office Administered Drugs	Procedures	169.5	110.56	1.56	47.5	37.74	0.15	1.71
FQHC/RHC/Tribal Clinic	Visits	248.7	324.16	6.72	1,013.6	603.19	50.95	57.67
Physical Exams	Visits	67.2	102.43	0.57	15.1	48.25	0.06	0.63
Therapy	Visits	237.6	137.60	2.72	5.0	47.90	0.02	2.74
Vision	Visits	502.8	104.97	4.40	9.3	79.59	0.06	4.46
Other Professional	Procedures	313.7	173.84	4.54	38.1	52.27	0.17	4.71
Telemedicine	Procedures	1.8	101.62	0.02	41.5	345.16	1.19	1.21
Subtotal – Professional		6,686.3	\$ 122.00	\$ 67.98	2,450.3	\$ 330.95	\$ 67.58	\$ 135.56
Pharmacy								
Psychotropic Drugs	Scripts	345.1	\$ 23.12	\$ 0.66	97.6	\$ 13.98	\$ 0.11	\$ 0.78
Opioid Drugs	Scripts	317.0	43.35	1.14	90.7	36.77	0.28	1.42
All Other Drugs	Scripts	2,190.4	67.62	12.34	1,080.8	51.85	4.67	17.01
Subtotal – Pharmacy		2,852.4	\$ 59.54	\$ 14.15	1,269.1	\$ 47.86	\$ 5.06	\$ 19.21
Ancillary								
Ground Transportation	Trips	1,133.2	\$ 43.13	\$ 4.07	0.3	\$ 473.50	\$ 0.01	\$ 4.09
Air Transportation	Trips	361.4	694.40	20.91	1.3	7,177.17	0.78	21.69
Accommodations	Claims	163.9	358.20	4.89	-	-	-	4.89
DME/Prosthetics	Procedures	75.1	145.35	0.91	0.2	40.51	0.00	0.91
Dental	Procedures	2,118.7	169.25	29.88	408.4	426.67	14.52	44.40
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		3,852.3	\$ 188.98	\$ 60.67	410.1	\$ 447.96	\$ 15.31	\$ 75.98
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Nursing Home	Days	35.0	523.66	1.53	-	-	-	1.53
Skilled Nursing Facility	Days	-	-	-	-	-	-	-
HCBS	Procedures	48.6	124.40	0.50	-	-	-	0.50
Case Management	Procedures	0.5	242.38	0.01	0.2	358.75	0.00	0.01
Personal Care	Procedures	12.0	117.54	0.12	-	-	-	0.12
Subtotal – LTSS		96.1	\$ 269.38	\$ 2.16	0.2	\$ 358.75	\$ 0.00	\$ 2.16
Behavioral Health								
IP Psych Hospital - API	Days	37.2	\$ 1,506.50	\$ 4.68	-	\$ 0.00	\$ 0.00	\$ 4.68
IP Psych Hospital - All Other	Days	2.8	683.82	0.16	-	-	-	0.16
IP General Hospital - MH/SA	Days	38.9	2,695.72	8.73	2.3	4,378.99	0.83	9.56
OP General Hospital - MH/SA	Visits	0.2	3,633.04	0.05	-	-	-	0.05
Screening	Procedures	22.4	35.13	0.07	10.4	610.31	0.53	0.60
Assessment	Procedures	27.2	203.77	0.46	12.5	579.45	0.60	1.07
Crisis Services	Procedures	30.6	92.72	0.24	22.8	606.68	1.15	1.39
Medication Services	Procedures	64.7	35.85	0.19	0.5	607.33	0.02	0.22
Methadone Medication Services	Procedures	137.4	12.55	0.14	-	-	-	0.14
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	173.7	99.91	1.45	52.9	593.39	2.61	4.06
Family Therapy OP	Procedures	14.1	98.56	0.12	2.6	610.31	0.13	0.25
Group Therapy OP	Procedures	82.8	64.33	0.44	4.1	604.15	0.20	0.65
SBIRT	Procedures	0.7	43.80	0.00	11.1	607.97	0.56	0.56
Substance Abuse Residential	Days	131.2	253.95	2.78	92.2	480.74	3.69	6.47
Children's Residential	Days	90.1	202.05	1.52	-	-	-	1.52
RPTC - In State	Days	-	-	-	-	-	-	-
RPTC - Out of State	Days	25.2	549.68	1.15	-	-	-	1.15
Detoxification	Procedures	1.5	616.00	0.08	0.3	609.50	0.02	0.09
Medical Evaluation	Procedures	14.8	240.10	0.30	0.2	603.00	0.01	0.30
Psychological Testing	Procedures	8.5	814.85	0.57	0.5	616.00	0.03	0.60
Peer Support Services	Units	6.5	17.00	0.01	-	-	-	0.01
Psychosocial Rehabilitation Services	Procedures	304.8	100.07	2.54	71.4	609.61	3.63	6.17
BH Case Management	Units	229.0	16.04	0.31	9.1	250.45	0.19	0.50
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	10.2	139.69	0.12	2.9	605.17	0.15	0.27
Other Professional MH/SA	Visits	42.8	60.54	0.22	13.5	610.83	0.69	0.90
Subtotal – Behavioral Health		1,497.1	\$ 210.87	\$ 26.31	309.2	\$ 584.05	\$ 15.05	\$ 41.35
Total All Services		16,787.8	\$ 180.17	\$ 252.06	6,023.6	\$ 372.36	\$ 186.91	\$ 438.97

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix C - Detailed Summaries - Statewide by Population and Rate Cell

Fiscal Year:		SFY 2017						
Population:		Low-Income Family						
Rate Cell:		19-25 Male						
Region:		Statewide						
Member Months:		45,291						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	72.1	\$ 3,394.26	\$ 20.38	28.6	\$ 3,457.74	\$ 8.25	\$ 28.63
Inpatient Maternity Delivery	Days	-	-	-	-	-	-	-
Inpatient Well Newborn	Days	-	-	-	-	-	-	-
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal – Inpatient Hospital		72.1	\$ 3,394.26	\$ 20.38	28.6	\$ 3,457.74	\$ 8.25	\$ 28.63
Outpatient Hospital								
Outpatient Emergency Room	Visits	321.7	\$ 722.13	\$ 19.36	178.6	\$ 651.18	\$ 9.69	\$ 29.05
Outpatient Surgery	Visits	19.6	2,890.10	4.72	11.1	1,084.17	1.01	5.73
Outpatient Radiology	Procedures	29.4	285.65	0.70	27.6	535.72	1.23	1.93
Outpatient Pathology/Lab	Procedures	259.9	21.60	0.47	120.3	443.55	4.45	4.91
Outpatient Pharmacy	Procedures	16.2	1,170.72	1.58	18.5	250.83	0.39	1.96
Other Outpatient	Procedures	109.4	209.70	1.91	102.3	533.79	4.55	6.46
Subtotal – Outpatient Hospital		756.2	\$ 456.01	\$ 28.74	458.4	\$ 557.87	\$ 21.31	\$ 50.04
Professional								
Inpatient and Outpatient Surgery	Procedures	126.9	\$ 459.64	\$ 4.86	27.8	\$ 497.29	\$ 1.15	\$ 6.01
Anesthesia	Procedures	34.7	440.39	1.27	12.7	446.47	0.47	1.75
Inpatient Visits	Visits	91.9	271.58	2.08	23.8	277.85	0.55	2.63
Emergency Room	Visits	338.1	175.01	4.93	104.9	139.41	1.22	6.15
Office/Home Visits/Consults	Visits	509.2	137.90	5.85	219.1	111.56	2.04	7.89
Maternity	Procedures	-	-	-	-	-	-	-
Pathology/Lab	Procedures	448.6	22.27	0.83	59.3	23.17	0.11	0.95
Radiology	Procedures	340.5	58.14	1.65	92.5	38.70	0.30	1.95
Office Administered Drugs	Procedures	36.8	36.73	0.11	13.5	34.92	0.04	0.15
FQHC/RHC/Tribal Clinic	Visits	139.6	410.64	4.78	329.3	604.49	16.59	21.37
Physical Exams	Visits	21.7	105.19	0.19	17.5	47.69	0.07	0.26
Therapy	Visits	170.1	138.58	1.96	2.6	47.90	0.01	1.98
Vision	Visits	303.4	106.03	2.68	3.7	124.98	0.04	2.72
Other Professional	Procedures	138.8	98.74	1.14	22.8	99.21	0.19	1.33
Telemedicine	Procedures	5.6	124.12	0.06	50.9	374.08	1.59	1.64
Subtotal – Professional		2,706.0	\$ 143.71	\$ 32.41	980.6	\$ 298.22	\$ 24.37	\$ 56.78
Pharmacy								
Psychotropic Drugs	Scripts	137.0	\$ 59.16	\$ 0.68	46.9	\$ 7.35	\$ 0.03	\$ 0.70
Opioid Drugs	Scripts	191.6	46.07	0.74	44.8	56.18	0.21	0.95
All Other Drugs	Scripts	945.6	166.91	13.15	381.5	78.57	2.50	15.65
Subtotal – Pharmacy		1,274.2	\$ 137.16	\$ 14.56	473.2	\$ 69.39	\$ 2.74	\$ 17.30
Ancillary								
Ground Transportation	Trips	389.0	\$ 60.24	\$ 1.95	1.3	\$ 413.10	\$ 0.05	\$ 2.00
Air Transportation	Trips	143.6	723.28	8.66	1.9	8,642.19	1.34	9.99
Accommodations	Claims	59.3	213.63	1.06	-	-	-	1.06
DME/Prosthetics	Procedures	73.1	169.52	1.03	-	-	-	1.03
Dental	Procedures	1,715.8	179.10	25.61	218.3	470.43	8.56	34.17
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		2,380.9	\$ 193.08	\$ 38.31	221.5	\$ 538.51	\$ 9.94	\$ 48.25
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Nursing Home	Days	-	-	-	2.9	671.96	0.16	0.16
Skilled Nursing Facility	Days	-	-	-	-	-	-	-
HCBS	Procedures	18.0	107.45	0.16	-	-	-	0.16
Case Management	Procedures	0.3	299.86	0.01	-	-	-	0.01
Personal Care	Procedures	120.0	54.70	0.55	-	-	-	0.55
Subtotal – LTSS		138.3	\$ 62.04	\$ 0.72	2.9	\$ 671.96	\$ 0.16	\$ 0.88
Behavioral Health								
IP Psych Hospital - API	Days	42.4	\$ 1,479.30	\$ 5.23	-	\$ 0.00	\$ 0.00	\$ 5.23
IP Psych Hospital - All Other	Days	-	-	-	-	-	-	-
IP General Hospital - MH/SA	Days	39.5	2,776.40	9.13	1.1	3,260.00	0.29	9.42
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	18.3	35.08	0.05	5.8	608.91	0.30	0.35
Assessment	Procedures	19.6	197.58	0.32	8.2	594.45	0.41	0.73
Crisis Services	Procedures	63.3	76.15	0.40	10.3	605.38	0.52	0.92
Medication Services	Procedures	63.1	29.89	0.16	-	-	-	0.16
Methadone Medication Services	Procedures	-	-	-	-	-	-	-
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	110.5	92.76	0.85	15.4	604.60	0.77	1.63
Family Therapy OP	Procedures	12.2	109.74	0.11	0.3	100.54	0.00	0.11
Group Therapy OP	Procedures	43.2	88.67	0.32	1.3	603.00	0.07	0.39
SBIRT	Procedures	0.3	43.80	0.00	4.5	609.88	0.23	0.23
Substance Abuse Residential	Days	80.0	193.54	1.29	44.8	145.64	0.54	1.83
Children's Residential	Days	222.8	189.08	3.51	-	-	-	3.51
RPTC - In State	Days	-	-	-	-	-	-	-
RPTC - Out of State	Days	-	-	-	-	-	-	-
Detoxification	Procedures	2.1	616.00	0.11	-	-	-	0.11
Medical Evaluation	Procedures	11.7	237.65	0.23	-	-	-	0.23
Psychological Testing	Procedures	17.2	660.85	0.95	-	-	-	0.95
Peer Support Services	Units	55.9	17.22	0.08	-	-	-	0.08
Psychosocial Rehabilitation Services	Procedures	339.4	107.60	3.04	78.4	604.94	3.95	7.00
BH Case Management	Units	147.8	15.98	0.20	5.3	184.15	0.08	0.28
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	10.3	134.67	0.12	3.4	611.00	0.18	0.29
Other Professional MH/SA	Visits	36.8	40.77	0.13	6.4	608.56	0.32	0.45
Subtotal – Behavioral Health		1,336.4	\$ 235.54	\$ 26.23	185.2	\$ 496.33	\$ 7.66	\$ 33.89
Total All Services		8,663.9	\$ 223.47	\$ 161.34	2,350.4	\$ 379.97	\$ 74.42	\$ 235.77

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix C - Detailed Summaries - Statewide by Population and Rate Cell

Fiscal Year:		SFY 2017						
Population:		Low-Income Family						
Rate Cell:		26-39 Female						
Region:		Statewide						
Member Months:		153,202						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	PMPM	Utilization per 1,000	Paid per Unit	PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	145.0	\$ 3,152.16	\$ 38.08	75.2	\$ 3,382.97	\$ 21.20	\$ 59.28
Inpatient Maternity Delivery	Days	25.7	2,959.96	6.34	26.0	3,325.86	7.21	13.54
Inpatient Well Newborn	Days	-	-	-	-	-	-	-
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal – Inpatient Hospital		170.7	\$ 3,123.23	\$ 44.42	101.2	\$ 3,368.29	\$ 28.41	\$ 72.83
Outpatient Hospital								
Outpatient Emergency Room	Visits	618.0	\$ 829.38	\$ 42.71	345.5	\$ 632.67	\$ 18.22	\$ 60.93
Outpatient Surgery	Visits	80.2	2,996.85	20.03	36.0	966.52	2.90	22.93
Outpatient Radiology	Procedures	188.7	381.71	6.00	91.1	549.19	4.17	10.17
Outpatient Pathology/Lab	Procedures	1,158.1	26.88	2.59	761.5	399.34	25.34	27.94
Outpatient Pharmacy	Procedures	112.1	198.95	1.86	60.9	374.80	1.90	3.76
Other Outpatient	Procedures	253.2	146.31	3.09	290.7	531.83	12.88	15.97
Subtotal – Outpatient Hospital		2,410.2	\$ 379.81	\$ 76.29	1,585.7	\$ 495.03	\$ 65.41	\$ 141.70
Professional								
Inpatient and Outpatient Surgery	Procedures	415.1	\$ 425.19	\$ 14.71	82.6	\$ 474.39	\$ 3.27	\$ 17.97
Anesthesia	Procedures	109.3	458.94	4.18	41.4	460.37	1.59	5.77
Inpatient Visits	Visits	148.9	273.77	3.40	60.0	291.09	1.46	4.85
Emergency Room	Visits	630.1	196.07	10.29	197.0	149.94	2.46	12.76
Office/Home Visits/Consults	Visits	2,475.6	138.23	28.52	544.3	111.70	5.07	33.58
Maternity	Procedures	44.5	552.07	2.05	18.3	979.01	1.50	3.54
Pathology/Lab	Procedures	3,295.7	23.98	6.59	229.8	24.78	0.47	7.06
Radiology	Procedures	1,092.1	96.79	8.81	223.5	56.72	1.06	9.87
Office Administered Drugs	Procedures	330.6	188.93	5.21	43.8	37.52	0.14	5.34
FQHC/RHC/Tribal Clinic	Visits	348.4	290.14	8.42	1,144.5	610.39	58.22	66.64
Physical Exams	Visits	46.6	49.60	0.19	10.0	35.15	0.03	0.22
Therapy	Visits	497.0	147.05	6.09	0.3	78.41	0.00	6.09
Vision	Visits	550.0	109.98	5.04	12.5	119.09	0.12	5.16
Other Professional	Procedures	525.5	136.24	5.97	54.9	79.52	0.36	6.33
Telemedicine	Procedures	3.9	122.70	0.04	50.8	350.89	1.49	1.53
Subtotal – Professional		10,513.3	\$ 124.98	\$ 109.50	2,713.8	\$ 341.47	\$ 77.22	\$ 186.72
Pharmacy								
Psychotropic Drugs	Scripts	856.1	\$ 37.09	\$ 2.65	225.3	\$ 16.01	\$ 0.30	\$ 2.95
Opioid Drugs	Scripts	1,035.4	88.47	7.63	175.5	37.83	0.55	8.19
All Other Drugs	Scripts	4,774.9	84.92	33.79	1,913.9	65.62	10.47	44.26
Subtotal – Pharmacy		6,666.4	\$ 79.33	\$ 44.07	2,314.6	\$ 58.69	\$ 11.32	\$ 55.39
Ancillary								
Ground Transportation	Trips	1,388.1	\$ 43.54	\$ 5.04	1.0	\$ 410.84	\$ 0.03	\$ 5.07
Air Transportation	Trips	425.5	700.70	24.84	1.4	9,337.45	1.10	25.94
Accommodations	Claims	227.3	288.88	5.47	-	-	-	5.47
DME/Prosthetics	Procedures	179.2	122.31	1.83	0.1	13.60	0.00	1.83
Dental	Procedures	2,089.2	157.20	27.37	417.6	338.08	11.76	39.13
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		4,309.2	\$ 179.75	\$ 64.55	420.1	\$ 368.41	\$ 12.90	\$ 77.44
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.01	-	\$ 0.00	\$ 0.00	\$ 0.01
Nursing Home	Days	-	-	-	-	-	-	-
Skilled Nursing Facility	Days	14.2	681.66	0.81	-	-	-	0.81
HCBS	Procedures	32.4	112.54	0.30	-	-	-	0.30
Case Management	Procedures	0.3	285.69	0.01	-	-	-	0.01
Personal Care	Procedures	92.4	91.12	0.70	-	-	-	0.70
Subtotal – LTSS		139.3	\$ 157.81	\$ 1.83	-	\$ 0.00	\$ 0.00	\$ 1.83
Behavioral Health								
IP Psych Hospital - API	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
IP Psych Hospital - All Other	Days	-	-	-	-	-	-	-
IP General Hospital - MH/SA	Days	36.9	2,565.74	7.89	0.7	6,402.16	0.38	8.26
OP General Hospital - MH/SA	Visits	0.3	2,043.59	0.05	-	-	-	0.05
Screening	Procedures	26.1	35.13	0.08	13.8	610.46	0.70	0.78
Assessment	Procedures	40.2	182.76	0.61	18.6	607.11	0.94	1.56
Crisis Services	Procedures	10.7	117.43	0.10	28.4	608.11	1.44	1.54
Medication Services	Procedures	341.4	29.11	0.83	4.2	611.58	0.21	1.04
Methadone Medication Services	Procedures	1,080.8	12.56	1.13	-	-	-	1.13
Other Opioid Medication Services	Procedures	0.2	35.00	0.00	-	-	-	0.00
Individual Therapy OP	Procedures	254.3	98.65	2.09	90.0	596.74	4.48	6.57
Family Therapy OP	Procedures	61.4	112.72	0.58	3.5	530.20	0.16	0.73
Group Therapy OP	Procedures	107.7	60.15	0.54	13.1	594.69	0.65	1.19
SBIRT	Procedures	0.8	43.68	0.00	11.7	609.11	0.59	0.60
Substance Abuse Residential	Days	202.1	269.53	4.54	316.2	439.97	11.59	16.13
Children's Residential	Days	-	-	-	-	-	-	-
RPTC - In State	Days	-	-	-	-	-	-	-
RPTC - Out of State	Days	-	-	-	-	-	-	-
Detoxification	Procedures	6.4	616.00	0.33	3.7	613.51	0.19	0.52
Medical Evaluation	Procedures	19.0	252.40	0.40	0.4	613.40	0.02	0.42
Psychological Testing	Procedures	11.0	785.31	0.72	0.2	611.67	0.01	0.73
Peer Support Services	Units	12.1	17.17	0.02	0.2	301.50	0.00	0.02
Psychosocial Rehabilitation Services	Procedures	443.7	78.68	2.91	147.2	610.30	7.49	10.39
BH Case Management	Units	217.8	16.04	0.29	27.9	195.47	0.45	0.75
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	21.5	132.98	0.24	8.5	602.58	0.42	0.66
Other Professional MH/SA	Visits	69.1	46.33	0.27	22.5	616.37	1.15	1.42
Subtotal – Behavioral Health		2,963.5	\$ 95.62	\$ 23.61	710.6	\$ 521.44	\$ 30.88	\$ 54.49
Total All Services		27,172.7	\$ 160.87	\$ 364.27	7,845.9	\$ 345.87	\$ 226.13	\$ 590.41

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix C - Detailed Summaries - Statewide by Population and Rate Cell

Fiscal Year:		SFY 2017						
Population:		Low-Income Family						
Rate Cell:		26-39 Male						
Region:		Statewide						
Member Months:		83,892						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	165.2	\$ 2,821.27	\$ 38.84	38.9	\$ 3,316.37	\$ 10.75	\$ 49.60
Inpatient Maternity Delivery	Days	-	-	-	-	-	-	-
Inpatient Well Newborn	Days	-	-	-	-	-	-	-
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal – Inpatient Hospital		165.2	\$ 2,821.27	\$ 38.84	38.9	\$ 3,316.37	\$ 10.75	\$ 49.60
Outpatient Hospital								
Outpatient Emergency Room	Visits	372.6	\$ 807.98	\$ 25.09	161.8	\$ 634.37	\$ 8.55	\$ 33.64
Outpatient Surgery	Visits	47.8	2,736.47	10.89	17.7	1,107.24	1.64	12.53
Outpatient Radiology	Procedures	79.7	453.99	3.01	37.3	545.25	1.70	4.71
Outpatient Pathology/Lab	Procedures	445.3	26.04	0.97	167.1	408.39	5.69	6.65
Outpatient Pharmacy	Procedures	43.8	588.73	2.15	19.6	342.38	0.56	2.71
Other Outpatient	Procedures	168.5	159.57	2.24	154.1	539.24	6.92	9.16
Subtotal – Outpatient Hospital		1,157.6	\$ 459.76	\$ 44.35	557.6	\$ 539.19	\$ 25.05	\$ 69.41
Professional								
Inpatient and Outpatient Surgery	Procedures	268.5	\$ 433.62	\$ 9.70	52.9	\$ 467.87	\$ 2.06	\$ 11.77
Anesthesia	Procedures	64.4	423.66	2.27	19.9	462.35	0.77	3.04
Inpatient Visits	Visits	131.3	277.09	3.03	21.6	437.87	0.79	3.82
Emergency Room	Visits	386.6	184.88	5.96	80.0	136.97	0.91	6.87
Office/Home Visits/Consults	Visits	1,162.9	140.57	13.62	266.3	114.02	2.53	16.15
Maternity	Procedures	-	-	-	-	-	-	-
Pathology/Lab	Procedures	1,214.1	23.21	2.35	56.4	25.34	0.12	2.47
Radiology	Procedures	571.7	79.18	3.77	84.1	45.10	0.32	4.09
Office Administered Drugs	Procedures	211.0	191.24	3.36	19.7	38.41	0.06	3.43
FQHC/RHC/Tribal Clinic	Visits	194.0	299.36	4.84	396.4	610.97	20.18	25.02
Physical Exams	Visits	22.2	54.72	0.10	9.6	39.83	0.03	0.13
Therapy	Visits	260.0	142.91	3.10	0.3	146.41	0.00	3.10
Vision	Visits	320.1	110.99	2.96	8.4	104.10	0.07	3.03
Other Professional	Procedures	255.8	122.51	2.61	30.8	118.99	0.30	2.92
Telemedicine	Procedures	0.7	170.38	0.01	37.0	335.09	1.03	1.04
Subtotal – Professional		5,063.4	\$ 136.72	\$ 57.69	1,083.4	\$ 323.29	\$ 29.19	\$ 86.88
Pharmacy								
Psychotropic Drugs	Scripts	293.8	\$ 43.48	\$ 1.06	53.4	\$ 14.30	\$ 0.06	\$ 1.13
Opioid Drugs	Scripts	645.8	98.45	5.30	86.0	41.15	0.29	5.59
All Other Drugs	Scripts	2,118.3	186.32	32.89	756.0	55.82	3.52	36.41
Subtotal – Pharmacy		3,057.9	\$ 154.04	\$ 39.25	895.3	\$ 51.94	\$ 3.87	\$ 43.13
Ancillary								
Ground Transportation	Trips	647.8	\$ 52.26	\$ 2.82	0.3	\$ 329.97	\$ 0.01	\$ 2.83
Air Transportation	Trips	211.7	870.17	15.35	1.0	5,878.25	0.49	15.84
Accommodations	Claims	111.6	239.75	2.23	-	-	-	2.23
DME/Prosthetics	Procedures	217.6	154.84	2.81	-	-	-	2.81
Dental	Procedures	1,628.8	171.11	23.23	257.3	324.07	6.95	30.18
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		2,817.5	\$ 197.77	\$ 46.43	258.6	\$ 345.58	\$ 7.45	\$ 53.88
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Nursing Home	Days	-	-	-	4.9	3,028.54	1.23	1.23
Skilled Nursing Facility	Days	7.4	971.41	0.60	-	-	-	0.60
HCBS	Procedures	29.8	81.73	0.20	-	-	-	0.20
Case Management	Procedures	1.1	240.77	0.02	-	-	-	0.02
Personal Care	Procedures	8.7	61.90	0.05	-	-	-	0.05
Subtotal – LTSS		47.1	\$ 222.54	\$ 0.87	4.9	\$ 3,028.54	\$ 1.23	\$ 2.10
Behavioral Health								
IP Psych Hospital - API	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
IP Psych Hospital - All Other	Days	-	-	-	-	-	-	-
IP General Hospital - MH/SA	Days	10.4	2,781.49	2.42	0.7	4,103.56	0.24	2.66
OP General Hospital - MH/SA	Visits	0.1	57.73	0.00	-	-	-	0.00
Screening	Procedures	19.6	35.11	0.06	12.7	609.72	0.65	0.70
Assessment	Procedures	21.5	166.76	0.30	12.0	606.54	0.61	0.91
Crisis Services	Procedures	8.2	140.85	0.10	11.4	610.82	0.58	0.68
Medication Services	Procedures	73.4	27.75	0.17	1.0	525.93	0.04	0.21
Methadone Medication Services	Procedures	278.4	12.57	0.29	-	-	-	0.29
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	79.1	96.77	0.64	16.9	605.81	0.85	1.49
Family Therapy OP	Procedures	27.9	101.69	0.24	0.4	607.33	0.02	0.26
Group Therapy OP	Procedures	13.6	82.57	0.09	4.9	595.97	0.24	0.34
SBIRT	Procedures	0.6	41.60	0.00	3.7	610.00	0.19	0.19
Substance Abuse Residential	Days	34.5	194.95	0.56	32.2	613.96	1.65	2.21
Children's Residential	Days	-	-	-	-	-	-	-
RPTC - In State	Days	-	-	-	-	-	-	-
RPTC - Out of State	Days	-	-	-	-	-	-	-
Detoxification	Procedures	4.3	616.00	0.22	0.3	603.00	0.01	0.23
Medical Evaluation	Procedures	10.9	248.00	0.22	0.3	412.08	0.01	0.23
Psychological Testing	Procedures	6.6	890.25	0.49	-	-	-	0.49
Peer Support Services	Units	-	-	-	-	-	-	-
Psychosocial Rehabilitation Services	Procedures	248.6	79.40	1.64	126.3	610.09	6.42	8.07
BH Case Management	Units	75.8	16.02	0.10	11.6	218.78	0.21	0.31
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	4.0	212.07	0.07	4.0	612.29	0.20	0.28
Other Professional MH/SA	Visits	36.3	40.43	0.12	11.9	610.83	0.60	0.73
Subtotal – Behavioral Health		953.7	\$ 97.34	\$ 7.74	250.3	\$ 601.23	\$ 12.54	\$ 20.28
Total All Services		13,262.4	\$ 212.79	\$ 235.18	3,089.0	\$ 349.96	\$ 90.09	\$ 325.27

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix C - Detailed Summaries - Statewide by Population and Rate Cell

Fiscal Year:		SFY 2017						
Population:		Low-Income Family						
Rate Cell:		3-12 Months						
Region:		Statewide						
Member Months:		60,454						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	408.7	\$ 3,715.49	\$ 126.55	244.2	\$ 3,339.03	\$ 67.94	\$ 194.48
Inpatient Maternity Delivery	Days	-	-	-	-	-	-	-
Inpatient Well Newborn	Days	-	-	-	0.2	3,235.00	0.05	0.05
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal – Inpatient Hospital		408.7	\$ 3,715.49	\$ 126.55	244.4	\$ 3,338.94	\$ 67.99	\$ 194.54
Outpatient Hospital								
Outpatient Emergency Room	Visits	560.2	\$ 416.55	\$ 19.44	522.3	\$ 629.69	\$ 27.40	\$ 46.85
Outpatient Surgery	Visits	23.2	1,603.57	3.10	12.3	1,293.42	1.33	4.43
Outpatient Radiology	Procedures	57.4	262.62	1.26	31.4	548.73	1.43	2.69
Outpatient Pathology/Lab	Procedures	476.6	22.88	0.91	214.0	347.63	6.20	7.11
Outpatient Pharmacy	Procedures	40.7	65.91	0.22	41.3	432.66	1.49	1.71
Other Outpatient	Procedures	145.5	133.82	1.62	418.4	552.81	19.28	20.90
Subtotal – Outpatient Hospital		1,303.5	\$ 244.49	\$ 26.56	1,239.6	\$ 553.03	\$ 57.13	\$ 83.69
Professional								
Inpatient and Outpatient Surgery	Procedures	143.9	\$ 427.19	\$ 5.12	36.5	\$ 311.20	\$ 0.95	\$ 6.07
Anesthesia	Procedures	70.3	308.30	1.81	27.6	271.36	0.62	2.43
Inpatient Visits	Visits	493.1	360.96	14.83	141.7	427.03	5.04	19.88
Emergency Room	Visits	585.6	160.24	7.82	235.0	131.09	2.57	10.39
Office/Home Visits/Consults	Visits	1,958.4	121.40	19.81	931.6	106.43	8.26	28.07
Maternity	Procedures	-	-	-	-	-	-	-
Pathology/Lab	Procedures	252.3	13.28	0.28	51.4	12.37	0.05	0.33
Radiology	Procedures	436.9	35.44	1.29	131.2	32.98	0.36	1.65
Office Administered Drugs	Procedures	77.8	25.53	0.17	14.9	31.37	0.04	0.20
FQHC/RHC/Tribal Clinic	Visits	234.0	307.93	6.01	1,442.9	609.99	73.35	79.35
Physical Exams	Visits	2,107.9	196.12	34.45	242.6	152.71	3.09	37.54
Therapy	Visits	592.5	166.86	8.24	5.6	132.65	0.06	8.30
Vision	Visits	97.9	87.74	0.72	3.2	180.49	0.05	0.76
Other Professional	Procedures	402.0	93.68	3.14	131.0	36.62	0.40	3.54
Telemedicine	Procedures	-	-	-	73.6	341.26	2.09	2.09
Subtotal – Professional		7,452.5	\$ 166.94	\$ 103.68	3,468.8	\$ 335.33	\$ 96.93	\$ 200.61
Pharmacy								
Psychotropic Drugs	Scripts	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Opioid Drugs	Scripts	4.8	5.43	0.00	0.4	2.54	0.00	0.00
All Other Drugs	Scripts	1,508.4	158.76	19.96	894.0	32.06	2.39	22.34
Subtotal – Pharmacy		1,513.2	\$ 158.28	\$ 19.96	894.4	\$ 32.04	\$ 2.39	\$ 22.35
Ancillary								
Ground Transportation	Trips	1,269.2	\$ 32.59	\$ 3.45	2.4	\$ 418.42	\$ 0.08	\$ 3.53
Air Transportation	Trips	417.8	1,024.28	35.67	3.2	7,434.20	1.97	37.63
Accommodations	Claims	241.0	254.62	5.11	-	-	-	5.11
DME/Prosthetics	Procedures	747.9	259.99	16.21	-	-	-	16.21
Dental	Procedures	140.5	86.78	1.02	42.1	566.52	1.99	3.00
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		2,816.5	\$ 261.80	\$ 61.45	47.6	\$ 1,016.96	\$ 4.04	\$ 65.48
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Nursing Home	Days	-	-	-	-	-	-	-
Skilled Nursing Facility	Days	-	-	-	-	-	-	-
HCBS	Procedures	121.7	639.95	6.49	-	-	-	6.49
Case Management	Procedures	198.3	303.08	5.01	41.5	302.91	1.05	6.06
Personal Care	Procedures	-	-	-	-	-	-	-
Subtotal – LTSS		320.0	\$ 431.18	\$ 11.50	41.5	\$ 302.91	\$ 1.05	\$ 12.54
Behavioral Health								
IP Psych Hospital - API	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
IP Psych Hospital - All Other	Days	-	-	-	-	-	-	-
IP General Hospital - MH/SA	Days	-	-	-	-	-	-	-
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	0.6	71.89	0.00	-	-	-	0.00
Assessment	Procedures	-	-	-	-	-	-	-
Crisis Services	Procedures	-	-	-	0.2	616.00	0.01	0.01
Medication Services	Procedures	-	-	-	-	-	-	-
Methadone Medication Services	Procedures	-	-	-	-	-	-	-
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	-	-	-	-	-	-	-
Family Therapy OP	Procedures	-	-	-	-	-	-	-
Group Therapy OP	Procedures	1.4	80.00	0.01	-	-	-	0.01
SBIRT	Procedures	-	-	-	-	-	-	-
Substance Abuse Residential	Days	-	-	-	-	-	-	-
Children's Residential	Days	-	-	-	-	-	-	-
RPTC - In State	Days	-	-	-	-	-	-	-
RPTC - Out of State	Days	-	-	-	-	-	-	-
Detoxification	Procedures	-	-	-	-	-	-	-
Medical Evaluation	Procedures	-	-	-	-	-	-	-
Psychological Testing	Procedures	464.1	15.54	0.60	1.6	147.66	0.02	0.62
Peer Support Services	Units	-	-	-	-	-	-	-
Psychosocial Rehabilitation Services	Procedures	-	-	-	-	-	-	-
BH Case Management	Units	-	-	-	-	-	-	-
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	0.2	300.00	0.00	-	-	-	0.00
Other Professional MH/SA	Visits	0.2	40.00	0.00	-	-	-	0.00
Subtotal – Behavioral Health		466.5	\$ 15.93	\$ 0.62	1.8	\$ 199.70	\$ 0.03	\$ 0.65
Total All Services		14,280.8	\$ 294.35	\$ 350.30	5,938.1	\$ 463.89	\$ 229.55	\$ 579.86

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix C - Detailed Summaries - Statewide by Population and Rate Cell

Fiscal Year:		SFY 2017						
Population:		Low-Income Family						
Rate Cell:		40+						
Region:		Statewide						
Member Months:		137,756						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	225.5	\$ 3,281.42	\$ 61.67	103.8	\$ 3,250.83	\$ 28.13	\$ 89.80
Inpatient Maternity Delivery	Days	2.2	2,806.55	0.51	1.0	3,436.30	0.30	0.81
Inpatient Well Newborn	Days	-	-	-	-	-	-	-
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal – Inpatient Hospital		227.7	\$ 3,276.87	\$ 62.18	104.9	\$ 3,252.68	\$ 28.43	\$ 90.61
Outpatient Hospital								
Outpatient Emergency Room	Visits	394.1	\$ 999.39	\$ 32.82	259.2	\$ 674.40	\$ 14.57	\$ 47.39
Outpatient Surgery	Visits	114.6	2,708.48	25.85	69.6	1,067.20	6.19	32.04
Outpatient Radiology	Procedures	220.4	387.20	7.11	126.0	532.39	5.59	12.70
Outpatient Pathology/Lab	Procedures	1,191.8	23.96	2.38	659.9	377.84	20.78	23.16
Outpatient Pharmacy	Procedures	175.9	336.48	4.93	57.8	325.62	1.57	6.50
Other Outpatient	Procedures	687.5	159.70	9.15	484.3	492.30	19.87	29.02
Subtotal – Outpatient Hospital		2,784.2	\$ 354.48	\$ 82.25	1,656.9	\$ 496.59	\$ 68.57	\$ 150.81
Professional								
Inpatient and Outpatient Surgery	Procedures	568.4	\$ 412.03	\$ 19.52	164.6	\$ 506.04	\$ 6.94	\$ 26.46
Anesthesia	Procedures	133.3	412.51	4.58	52.4	424.50	1.86	6.44
Inpatient Visits	Visits	222.0	236.18	4.37	57.3	355.66	1.70	6.07
Emergency Room	Visits	421.4	200.95	7.06	153.0	148.82	1.90	8.95
Office/Home Visits/Consults	Visits	2,248.0	138.99	26.04	724.4	118.18	7.13	33.17
Maternity	Procedures	4.9	382.30	0.16	0.6	965.22	0.05	0.20
Pathology/Lab	Procedures	2,550.9	23.87	5.07	193.9	31.58	0.51	5.59
Radiology	Procedures	1,311.5	118.68	12.97	268.2	47.21	1.06	14.03
Office Administered Drugs	Procedures	401.9	287.25	9.62	30.3	39.06	0.10	9.72
FQHC/RHC/Tribal Clinic	Visits	445.2	291.82	10.83	1,008.8	592.67	49.83	60.65
Physical Exams	Visits	58.3	52.61	0.26	14.8	35.49	0.04	0.30
Therapy	Visits	674.7	144.44	8.12	1.1	59.39	0.01	8.13
Vision	Visits	672.2	109.30	6.12	17.3	104.36	0.15	6.27
Other Professional	Procedures	674.7	128.15	7.20	117.7	114.20	1.12	8.32
Telemedicine	Procedures	3.1	116.03	0.03	84.3	335.06	2.35	2.38
Subtotal – Professional		10,390.5	\$ 140.83	\$ 121.94	2,888.9	\$ 310.46	\$ 74.74	\$ 196.68
Pharmacy								
Psychotropic Drugs	Scripts	752.3	\$ 27.53	\$ 1.73	229.4	\$ 14.83	\$ 0.28	\$ 2.01
Opioid Drugs	Scripts	971.7	64.36	5.21	252.0	16.95	0.36	5.57
All Other Drugs	Scripts	6,234.5	104.04	54.06	3,215.6	70.47	18.88	72.94
Subtotal – Pharmacy		7,958.5	\$ 91.97	\$ 60.99	3,697.1	\$ 63.37	\$ 19.52	\$ 80.52
Ancillary								
Ground Transportation	Trips	1,965.6	\$ 40.07	\$ 6.56	0.6	\$ 405.77	\$ 0.02	\$ 6.58
Air Transportation	Trips	613.3	721.48	36.87	1.0	8,032.20	0.70	37.57
Accommodations	Claims	349.7	275.69	8.03	-	-	-	8.03
DME/Prosthetics	Procedures	478.7	121.55	4.85	0.1	13.60	0.00	4.85
Dental	Procedures	1,774.1	162.08	23.96	362.5	351.38	10.61	34.58
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		5,181.3	\$ 185.93	\$ 80.28	364.2	\$ 373.43	\$ 11.33	\$ 91.61
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.04	-	\$ 0.00	\$ 0.00	\$ 0.04
Nursing Home	Days	2.5	1,229.24	0.26	-	-	-	0.26
Skilled Nursing Facility	Days	32.8	743.74	2.04	-	-	-	2.04
HCBS	Procedures	63.3	80.95	0.43	-	-	-	0.43
Case Management	Procedures	0.4	242.22	0.01	0.2	299.76	0.00	0.01
Personal Care	Procedures	501.8	55.32	2.31	-	-	-	2.31
Subtotal – LTSS		601.0	\$ 101.60	\$ 5.09	0.2	\$ 299.76	\$ 0.00	\$ 5.09
Behavioral Health								
IP Psych Hospital - API	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
IP Psych Hospital - All Other	Days	-	-	-	-	-	-	-
IP General Hospital - MH/SA	Days	16.6	2,746.06	3.79	0.1	3,335.00	0.02	3.81
OP General Hospital - MH/SA	Visits	0.5	767.03	0.03	-	-	-	0.03
Screening	Procedures	14.0	35.10	0.04	9.4	609.74	0.48	0.52
Assessment	Procedures	19.8	194.67	0.32	11.2	608.53	0.57	0.89
Crisis Services	Procedures	4.7	110.79	0.04	11.2	609.80	0.57	0.61
Medication Services	Procedures	55.4	35.67	0.16	2.1	608.42	0.11	0.27
Methadone Medication Services	Procedures	244.2	12.57	0.26	-	-	-	0.26
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	174.1	102.43	1.49	50.7	597.97	2.53	4.01
Family Therapy OP	Procedures	40.9	107.28	0.37	2.6	490.70	0.11	0.47
Group Therapy OP	Procedures	41.5	64.73	0.22	4.2	599.92	0.21	0.43
SBIRT	Procedures	0.4	43.80	0.00	8.3	602.58	0.42	0.42
Substance Abuse Residential	Days	53.9	266.98	1.20	91.6	341.16	2.60	3.80
Children's Residential	Days	-	-	-	-	-	-	-
RPTC - In State	Days	-	-	-	-	-	-	-
RPTC - Out of State	Days	-	-	-	-	-	-	-
Detoxification	Procedures	4.4	616.00	0.23	1.7	607.55	0.09	0.32
Medical Evaluation	Procedures	8.9	246.14	0.18	0.7	560.15	0.03	0.21
Psychological Testing	Procedures	11.3	770.25	0.73	0.4	524.66	0.02	0.75
Peer Support Services	Units	4.8	17.26	0.01	-	-	-	0.01
Psychosocial Rehabilitation Services	Procedures	206.5	86.18	1.48	117.3	608.94	5.95	7.44
BH Case Management	Units	197.7	16.01	0.26	13.5	216.74	0.24	0.51
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	11.8	119.88	0.12	1.6	610.22	0.08	0.20
Other Professional MH/SA	Visits	37.3	51.39	0.16	13.9	624.98	0.73	0.89
Subtotal – Behavioral Health		1,148.6	\$ 115.87	\$ 11.09	340.4	\$ 519.74	\$ 14.74	\$ 25.84
Total All Services		28,291.8	\$ 179.76	\$ 423.82	9,052.6	\$ 288.11	\$ 217.34	\$ 641.17

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix C - Detailed Summaries - Statewide by Population and Rate Cell

Fiscal Year:		SFY 2017						
Population:		Low-Income Family						
Rate Cell:		5-13 Male and Female						
Region:		Statewide						
Member Months:		483,736						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	24.5	\$ 3,692.77	\$ 7.53	10.3	\$ 3,324.53	\$ 2.85	\$ 10.39
Inpatient Maternity Delivery	Days	-	-	-	-	-	-	-
Inpatient Well Newborn	Days	-	-	-	-	-	-	-
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal – Inpatient Hospital		24.5	\$ 3,692.77	\$ 7.53	10.3	\$ 3,324.53	\$ 2.85	\$ 10.39
Outpatient Hospital								
Outpatient Emergency Room	Visits	162.1	\$ 505.42	\$ 6.83	114.6	\$ 589.16	\$ 5.63	\$ 12.45
Outpatient Surgery	Visits	35.5	2,449.37	7.25	18.7	1,178.47	1.83	9.08
Outpatient Radiology	Procedures	38.1	232.58	0.74	22.3	529.67	0.99	1.72
Outpatient Pathology/Lab	Procedures	296.7	22.24	0.55	167.2	428.45	5.97	6.52
Outpatient Pharmacy	Procedures	49.3	409.90	1.68	10.8	329.92	0.30	1.98
Other Outpatient	Procedures	89.8	170.53	1.28	144.0	548.28	6.58	7.85
Subtotal – Outpatient Hospital		671.4	\$ 327.40	\$ 18.32	477.6	\$ 534.92	\$ 21.29	\$ 39.61
Professional								
Inpatient and Outpatient Surgery	Procedures	99.5	\$ 297.20	\$ 2.46	35.3	\$ 459.51	\$ 1.35	\$ 3.82
Anesthesia	Procedures	45.8	434.67	1.66	22.6	423.26	0.80	2.45
Inpatient Visits	Visits	91.6	405.34	3.09	6.7	274.85	0.15	3.25
Emergency Room	Visits	165.9	149.96	2.07	61.9	112.56	0.58	2.65
Office/Home Visits/Consults	Visits	871.8	133.31	9.69	355.2	107.52	3.18	12.87
Maternity	Procedures	-	-	-	-	-	-	-
Pathology/Lab	Procedures	218.4	19.24	0.35	129.7	12.68	0.14	0.49
Radiology	Procedures	194.7	43.71	0.71	40.7	32.03	0.11	0.82
Office Administered Drugs	Procedures	19.6	59.42	0.10	22.9	33.03	0.06	0.16
FQHC/RHC/Tribal Clinic	Visits	142.3	309.90	3.68	499.7	605.48	25.21	28.89
Physical Exams	Visits	263.0	151.66	3.32	37.3	99.25	0.31	3.63
Therapy	Visits	1,147.9	132.60	12.69	1.2	52.55	0.01	12.69
Vision	Visits	601.5	93.95	4.71	13.2	62.04	0.07	4.78
Other Professional	Procedures	352.0	93.89	2.75	31.9	47.72	0.13	2.88
Telemedicine	Procedures	15.5	172.27	0.22	65.5	353.39	1.93	2.15
Subtotal – Professional		4,229.5	\$ 134.76	\$ 47.50	1,323.7	\$ 308.46	\$ 34.03	\$ 81.52
Pharmacy								
Psychotropic Drugs	Scripts	175.2	\$ 26.71	\$ 0.39	11.3	\$ 19.47	\$ 0.02	\$ 0.41
Opioid Drugs	Scripts	24.7	13.02	0.03	10.8	13.21	0.01	0.04
All Other Drugs	Scripts	1,319.0	132.58	14.57	445.0	62.80	2.33	16.90
Subtotal – Pharmacy		1,518.9	\$ 118.42	\$ 14.99	467.1	\$ 60.60	\$ 2.36	\$ 17.35
Ancillary								
Ground Transportation	Trips	923.6	\$ 34.30	\$ 2.64	0.2	\$ 383.10	\$ 0.01	\$ 2.65
Air Transportation	Trips	431.6	572.27	20.58	0.5	7,605.32	0.31	20.90
Accommodations	Claims	125.3	280.50	2.93	-	-	-	2.93
DME/Prosthetics	Procedures	139.8	124.05	1.45	0.0	44.63	0.00	1.45
Dental	Procedures	4,357.2	84.66	30.74	493.1	598.84	24.61	55.35
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		5,977.5	\$ 117.11	\$ 58.34	493.9	\$ 605.76	\$ 24.93	\$ 83.27
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Nursing Home	Days	-	-	-	0.2	3,335.00	0.05	0.05
Skilled Nursing Facility	Days	-	-	-	-	-	-	-
HCBS	Procedures	60.0	258.86	1.29	-	-	-	1.29
Case Management	Procedures	5.5	148.88	0.07	0.2	356.34	0.01	0.07
Personal Care	Procedures	0.6	54.17	0.00	-	-	-	0.00
Subtotal – LTSS		66.1	\$ 247.82	\$ 1.37	0.3	\$ 1,845.67	\$ 0.05	\$ 1.42
Behavioral Health								
IP Psych Hospital - API	Days	2.4	\$ 1,277.41	\$ 0.26	-	\$ 0.00	\$ 0.00	\$ 0.26
IP Psych Hospital - All Other	Days	215.0	752.02	13.48	-	-	-	13.48
IP General Hospital - MH/SA	Days	6.4	2,787.54	1.49	0.3	4,732.60	0.12	1.61
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	19.0	37.84	0.06	3.7	609.15	0.19	0.25
Assessment	Procedures	29.6	228.82	0.57	8.0	603.47	0.40	0.97
Crisis Services	Procedures	4.4	112.44	0.04	5.2	606.69	0.26	0.31
Medication Services	Procedures	44.1	21.81	0.08	0.3	608.91	0.01	0.09
Methadone Medication Services	Procedures	0.4	12.50	0.00	-	-	-	0.00
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	469.1	93.55	3.66	62.0	599.07	3.10	6.75
Family Therapy OP	Procedures	161.8	102.47	1.38	18.9	598.52	0.94	2.32
Group Therapy OP	Procedures	176.9	67.93	1.00	6.8	598.12	0.34	1.34
SBIRT	Procedures	0.1	60.44	0.00	0.1	611.67	0.01	0.01
Substance Abuse Residential	Days	2.3	301.94	0.06	8.7	607.73	0.44	0.50
Children's Residential	Days	1,008.6	191.94	16.13	90.3	521.69	3.93	20.06
RPTC - In State	Days	158.5	331.62	4.38	-	-	-	4.38
RPTC - Out of State	Days	344.0	347.73	9.97	-	-	-	9.97
Detoxification	Procedures	-	-	-	-	-	-	-
Medical Evaluation	Procedures	7.8	240.17	0.16	-	-	-	0.16
Psychological Testing	Procedures	70.6	516.72	3.04	1.5	537.95	0.07	3.11
Peer Support Services	Units	37.2	17.00	0.05	-	-	-	0.05
Psychosocial Rehabilitation Services	Procedures	1,759.0	211.97	31.07	102.4	610.02	5.21	36.28
BH Case Management	Units	993.5	16.04	1.33	30.2	322.74	0.81	2.14
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	20.9	76.91	0.13	3.0	587.34	0.14	0.28
Other Professional MH/SA	Visits	72.0	45.57	0.27	11.9	608.28	0.60	0.88
Subtotal – Behavioral Health		5,603.9	\$ 189.75	\$ 88.61	353.3	\$ 562.79	\$ 16.57	\$ 105.18
Total All Services		18,091.8	\$ 156.97	\$ 236.66	3,126.3	\$ 391.83	\$ 102.08	\$ 338.74

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix C - Detailed Summaries - Statewide by Population and Rate Cell

Fiscal Year:		SFY 2017						
Population:		Medicaid Expansion						
Rate Cell:		19-25 Female						
Region:		Statewide						
Member Months:		26,801						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	174.2	\$ 2,934.54	\$ 42.59	90.0	\$ 3,348.25	\$ 25.11	\$ 67.70
Inpatient Maternity Delivery	Days	12.5	3,169.60	3.31	32.2	3,175.69	8.53	11.84
Inpatient Well Newborn	Days	-	-	-	-	-	-	-
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal – Inpatient Hospital		186.7	\$ 2,950.33	\$ 45.90	122.2	\$ 3,302.74	\$ 33.64	\$ 79.55
Outpatient Hospital								
Outpatient Emergency Room	Visits	779.5	\$ 798.53	\$ 51.87	373.9	\$ 625.74	\$ 19.49	\$ 71.37
Outpatient Surgery	Visits	37.6	3,207.42	10.05	23.3	902.07	1.75	11.80
Outpatient Radiology	Procedures	120.9	378.31	3.81	50.1	527.12	2.20	6.01
Outpatient Pathology/Lab	Procedures	951.9	27.12	2.15	537.7	425.58	19.07	21.22
Outpatient Pharmacy	Procedures	42.1	57.98	0.20	40.7	347.84	1.18	1.38
Other Outpatient	Procedures	199.7	134.17	2.23	177.8	526.54	7.80	10.03
Subtotal – Outpatient Hospital		2,131.7	\$ 395.87	\$ 70.32	1,203.5	\$ 513.48	\$ 51.50	\$ 121.82
Professional								
Inpatient and Outpatient Surgery	Procedures	268.6	\$ 391.30	\$ 8.76	61.3	\$ 446.81	\$ 2.28	\$ 11.04
Anesthesia	Procedures	67.2	467.46	2.62	31.8	477.70	1.27	3.88
Inpatient Visits	Visits	239.1	292.68	5.83	74.8	285.44	1.78	7.61
Emergency Room	Visits	797.9	194.12	12.91	300.0	160.78	4.02	16.93
Office/Home Visits/Consults	Visits	1,612.3	139.38	18.73	301.8	119.08	2.99	21.72
Maternity	Procedures	43.0	480.73	1.72	14.3	1,131.97	1.35	3.07
Pathology/Lab	Procedures	2,582.1	23.40	5.04	129.8	19.83	0.21	5.25
Radiology	Procedures	835.9	92.08	6.41	221.2	58.27	1.07	7.49
Office Administered Drugs	Procedures	242.2	76.23	1.54	11.2	36.97	0.03	1.57
FQHC/RHC/Tribal Clinic	Visits	314.3	313.18	8.20	942.9	609.48	47.89	56.09
Physical Exams	Visits	54.2	84.40	0.38	10.3	51.32	0.04	0.43
Therapy	Visits	254.8	142.21	3.02	-	-	-	3.02
Vision	Visits	451.3	109.05	4.10	3.6	130.42	0.04	4.14
Other Professional	Procedures	348.3	156.18	4.53	51.5	64.78	0.28	4.81
Telemedicine	Procedures	13.4	138.24	0.15	13.9	385.55	0.45	0.60
Subtotal – Professional		8,124.6	\$ 123.99	\$ 83.95	2,168.4	\$ 352.60	\$ 63.71	\$ 147.66
Pharmacy								
Psychotropic Drugs	Scripts	571.3	\$ 43.10	\$ 2.05	171.9	\$ 31.82	\$ 0.46	\$ 2.51
Opioid Drugs	Scripts	482.7	123.02	4.95	74.8	20.17	0.13	5.07
All Other Drugs	Scripts	2,813.6	72.06	16.90	1,109.9	62.10	5.74	22.64
Subtotal – Pharmacy		3,867.6	\$ 74.14	\$ 23.90	1,356.6	\$ 55.95	\$ 6.33	\$ 30.22
Ancillary								
Ground Transportation	Trips	964.0	\$ 67.32	\$ 5.41	0.9	\$ 286.85	\$ 0.02	\$ 5.43
Air Transportation	Trips	248.5	755.99	15.65	2.2	8,754.17	1.63	17.29
Accommodations	Claims	137.5	357.97	4.10	-	-	-	4.10
DME/Prosthetics	Procedures	91.3	227.17	1.73	-	-	-	1.73
Dental	Procedures	1,913.6	161.56	25.76	355.5	302.66	8.97	34.73
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		3,354.9	\$ 188.34	\$ 52.66	358.6	\$ 355.38	\$ 10.62	\$ 63.28
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.05	-	\$ 0.00	\$ 0.00	\$ 0.05
Nursing Home	Days	-	-	-	-	-	-	-
Skilled Nursing Facility	Days	3.1	971.41	0.25	-	-	-	0.25
HCBS	Procedures	155.8	77.37	1.00	-	-	-	1.00
Case Management	Procedures	1.8	285.89	0.04	-	-	-	0.04
Personal Care	Procedures	3.1	38.34	0.01	-	-	-	0.01
Subtotal – LTSS		163.9	\$ 99.51	\$ 1.36	-	\$ 0.00	\$ 0.00	\$ 1.36
Behavioral Health								
IP Psych Hospital - API	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
IP Psych Hospital - All Other	Days	-	-	-	-	-	-	-
IP General Hospital - MH/SA	Days	117.3	2,782.59	27.20	2.7	3,235.00	0.72	27.93
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	46.1	35.14	0.14	20.1	609.64	1.02	1.16
Assessment	Procedures	54.2	204.15	0.92	24.6	595.76	1.22	2.14
Crisis Services	Procedures	32.7	99.70	0.27	42.1	610.61	2.14	2.41
Medication Services	Procedures	45.2	37.49	0.14	6.3	612.29	0.32	0.46
Methadone Medication Services	Procedures	70.7	12.65	0.07	-	-	-	0.07
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	195.7	94.37	1.54	103.0	606.09	5.20	6.74
Family Therapy OP	Procedures	27.3	107.35	0.24	1.3	611.67	0.07	0.31
Group Therapy OP	Procedures	120.0	67.23	0.67	23.7	587.74	1.16	1.83
SBIRT	Procedures	0.9	43.80	0.00	14.3	610.72	0.73	0.73
Substance Abuse Residential	Days	298.6	262.53	6.53	327.3	487.79	13.30	19.84
Children's Residential	Days	-	-	-	-	-	-	-
RPTC - In State	Days	-	-	-	-	-	-	-
RPTC - Out of State	Days	-	-	-	-	-	-	-
Detoxification	Procedures	23.7	616.00	1.22	2.2	608.20	0.11	1.33
Medical Evaluation	Procedures	28.7	249.34	0.60	0.4	616.00	0.02	0.62
Psychological Testing	Procedures	16.1	826.82	1.11	1.3	513.33	0.06	1.17
Peer Support Services	Units	309.4	17.41	0.45	-	-	-	0.45
Psychosocial Rehabilitation Services	Procedures	443.7	87.26	3.23	161.6	611.44	8.24	11.46
BH Case Management	Units	347.4	16.05	0.46	74.3	155.07	0.96	1.43
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	23.7	149.07	0.29	8.1	611.67	0.41	0.71
Other Professional MH/SA	Visits	74.8	39.91	0.25	27.3	610.89	1.39	1.64
Subtotal – Behavioral Health		2,276.3	\$ 239.05	\$ 45.35	840.9	\$ 529.30	\$ 37.09	\$ 82.43
Total All Services		20,105.6	\$ 193.04	\$ 323.43	6,050.3	\$ 402.41	\$ 202.89	\$ 526.32

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix C - Detailed Summaries - Statewide by Population and Rate Cell

Fiscal Year:	SFY 2017							
Population:	Medicaid Expansion							
Rate Cell:	19-25 Male							
Region:	Statewide							
Member Months:	34,455							
		Non-Tribal Providers			Tribal Providers			Total Paid
		Utilization per	Paid	PMPM	Utilization per	Paid	PMPM	PMPM
Category of Service	Unit Description	1,000	Paid per Unit	PMPM	1,000	Paid per Unit	PMPM	PMPM
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	296.0	\$ 2,960.29	\$ 73.03	104.5	\$ 3,299.57	\$ 28.73	\$ 101.76
Inpatient Maternity Delivery	Days	-	-	-	-	-	-	-
Inpatient Well Newborn	Days	-	-	-	-	-	-	-
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal – Inpatient Hospital		296.0	\$ 2,960.29	\$ 73.03	104.5	\$ 3,299.57	\$ 28.73	\$ 101.76
Outpatient Hospital								
Outpatient Emergency Room	Visits	526.9	\$ 839.55	\$ 36.87	278.6	\$ 608.83	\$ 14.14	\$ 51.00
Outpatient Surgery	Visits	39.0	3,148.44	10.23	15.7	1,178.84	1.54	11.77
Outpatient Radiology	Procedures	76.6	523.06	3.34	33.4	539.17	1.50	4.84
Outpatient Pathology/Lab	Procedures	342.0	27.20	0.78	181.5	409.62	6.19	6.97
Outpatient Pharmacy	Procedures	20.9	83.99	0.15	30.0	288.31	0.72	0.87
Other Outpatient	Procedures	153.9	126.30	1.62	145.6	489.24	5.94	7.56
Subtotal – Outpatient Hospital		1,159.4	\$ 548.37	\$ 52.98	684.7	\$ 526.24	\$ 30.03	\$ 83.01
Professional								
Inpatient and Outpatient Surgery	Procedures	271.3	\$ 420.50	\$ 9.51	65.8	\$ 568.49	\$ 3.12	\$ 12.63
Anesthesia	Procedures	75.6	422.14	2.66	33.1	470.14	1.30	3.95
Inpatient Visits	Visits	267.1	266.40	5.93	55.0	416.23	1.91	7.84
Emergency Room	Visits	540.5	183.53	8.27	211.8	146.98	2.59	10.86
Office/Home Visits/Consults	Visits	840.1	140.71	9.85	217.3	112.60	2.04	11.89
Maternity	Procedures	-	-	-	-	-	-	-
Pathology/Lab	Procedures	1,190.4	27.43	2.72	40.7	20.02	0.07	2.79
Radiology	Procedures	656.9	99.67	5.46	184.6	49.86	0.77	6.22
Office Administered Drugs	Procedures	77.3	98.87	0.64	12.9	38.05	0.04	0.68
FQHC/RHC/Tribal Clinic	Visits	250.1	301.04	6.27	423.5	611.32	21.57	27.85
Physical Exams	Visits	24.4	92.43	0.19	9.4	39.38	0.03	0.22
Therapy	Visits	221.9	152.40	2.82	2.1	47.90	0.01	2.83
Vision	Visits	299.9	106.61	2.66	4.9	132.20	0.05	2.72
Other Professional	Procedures	213.1	89.24	1.59	39.0	61.86	0.20	1.79
Telemedicine	Procedures	1.7	137.90	0.02	48.8	331.25	1.35	1.37
Subtotal – Professional		4,930.3	\$ 142.57	\$ 58.58	1,348.9	\$ 311.78	\$ 35.05	\$ 93.62
Pharmacy								
Psychotropic Drugs	Scripts	320.8	\$ 50.61	\$ 1.35	110.4	\$ 52.70	\$ 0.48	\$ 1.84
Opioid Drugs	Scripts	407.8	101.78	3.46	67.9	17.28	0.10	3.56
All Other Drugs	Scripts	1,422.4	183.82	21.79	533.9	132.00	5.87	27.66
Subtotal – Pharmacy		2,151.0	\$ 148.40	\$ 26.60	712.2	\$ 108.77	\$ 6.46	\$ 33.06
Ancillary								
Ground Transportation	Trips	620.6	\$ 92.17	\$ 4.77	1.0	\$ 440.03	\$ 0.04	\$ 4.81
Air Transportation	Trips	170.3	1,323.98	18.79	1.4	9,863.00	1.15	19.94
Accommodations	Claims	78.7	259.26	1.70	-	-	-	1.70
DME/Prosthetics	Procedures	113.5	143.90	1.36	-	-	-	1.36
Dental	Procedures	1,527.9	169.36	21.56	275.1	308.89	7.08	28.65
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		2,511.1	\$ 230.26	\$ 48.18	277.6	\$ 357.33	\$ 8.27	\$ 56.45
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Nursing Home	Days	-	-	-	-	-	-	-
Skilled Nursing Facility	Days	57.8	904.47	4.36	-	-	-	4.36
HCBS	Procedures	62.7	110.06	0.57	-	-	-	0.57
Case Management	Procedures	1.0	240.77	0.02	0.3	358.74	0.01	0.03
Personal Care	Procedures	22.6	124.44	0.23	-	-	-	0.23
Subtotal – LTSS		144.2	\$ 431.80	\$ 5.19	0.3	\$ 358.74	\$ 0.01	\$ 5.20
Behavioral Health								
IP Psych Hospital - API	Days	0.3	\$ 1,288.00	\$ 0.04	-	\$ 0.00	\$ 0.00	\$ 0.04
IP Psych Hospital - All Other	Days	-	-	-	-	-	-	-
IP General Hospital - MH/SA	Days	79.1	2,631.22	17.34	6.3	4,935.25	2.58	19.91
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	47.4	35.09	0.14	12.9	611.43	0.66	0.80
Assessment	Procedures	43.2	188.57	0.68	15.7	611.38	0.80	1.48
Crisis Services	Procedures	36.2	115.48	0.35	23.3	606.67	1.18	1.53
Medication Services	Procedures	86.4	28.44	0.20	0.3	603.00	0.02	0.22
Methadone Medication Services	Procedures	193.6	12.53	0.20	-	-	-	0.20
Other Opioid Medication Services	Procedures	0.3	0.01	0.00	-	-	-	0.00
Individual Therapy OP	Procedures	143.1	103.94	1.24	33.4	604.18	1.68	2.92
Family Therapy OP	Procedures	20.5	97.68	0.17	0.7	609.50	0.04	0.20
Group Therapy OP	Procedures	56.8	86.36	0.41	3.8	566.73	0.18	0.59
SBIRT	Procedures	1.4	41.60	0.00	11.1	611.94	0.57	0.57
Substance Abuse Residential	Days	256.0	203.63	4.34	233.7	341.98	6.66	11.00
Children's Residential	Days	-	-	-	-	-	-	-
RPTC - In State	Days	-	-	-	-	-	-	-
RPTC - Out of State	Days	-	-	-	-	-	-	-
Detoxification	Procedures	6.6	616.00	0.34	1.0	616.00	0.05	0.39
Medical Evaluation	Procedures	26.5	238.93	0.53	-	-	-	0.53
Psychological Testing	Procedures	16.4	617.30	0.84	1.7	516.63	0.07	0.92
Peer Support Services	Units	510.6	17.37	0.74	-	-	-	0.74
Psychosocial Rehabilitation Services	Procedures	890.6	123.43	9.16	181.1	609.81	9.20	18.36
BH Case Management	Units	391.5	16.04	0.52	22.3	209.72	0.39	0.91
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	16.0	217.67	0.29	5.2	612.53	0.27	0.56
Other Professional MH/SA	Visits	96.1	40.26	0.32	20.5	609.17	1.04	1.37
Subtotal – Behavioral Health		2,918.6	\$ 155.64	\$ 37.85	573.3	\$ 531.47	\$ 25.39	\$ 63.24
Total All Services		14,110.6	\$ 257.18	\$ 302.41	3,701.5	\$ 434.17	\$ 133.92	\$ 436.34

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix C - Detailed Summaries - Statewide by Population and Rate Cell

Fiscal Year:	SFY 2017							
Population:	Medicaid Expansion							
Rate Cell:	26-39 Female							
Region:	Statewide							
Member Months:	47,167							
		Non-Tribal Providers			Tribal Providers			Total Paid
		Utilization per	Paid	Paid	Utilization per	Paid	Paid	PMPM
Category of Service	Unit Description	1,000	per Unit	PMPM	1,000	per Unit	PMPM	PMPM
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	500.2	\$ 3,455.04	\$ 144.01	213.2	\$ 3,284.30	\$ 58.35	\$ 202.36
Inpatient Maternity Delivery	Days	10.9	3,097.37	2.82	4.3	3,513.99	1.27	4.09
Inpatient Well Newborn	Days	-	-	-	-	-	-	-
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal – Inpatient Hospital		511.1	\$ 3,447.38	\$ 146.83	217.5	\$ 3,288.86	\$ 59.62	\$ 206.45
Outpatient Hospital								
Outpatient Emergency Room	Visits	1,108.7	\$ 860.64	\$ 79.52	574.7	\$ 612.19	\$ 29.32	\$ 108.84
Outpatient Surgery	Visits	92.1	2,914.19	22.37	28.5	952.28	2.26	24.63
Outpatient Radiology	Procedures	187.8	373.15	5.84	65.1	534.57	2.90	8.74
Outpatient Pathology/Lab	Procedures	1,411.7	27.52	3.24	483.4	458.88	18.48	21.72
Outpatient Pharmacy	Procedures	116.5	276.02	2.68	34.1	445.50	1.27	3.95
Other Outpatient	Procedures	475.0	104.61	4.14	241.2	512.47	10.30	14.44
Subtotal – Outpatient Hospital		3,391.8	\$ 416.70	\$ 117.78	1,427.0	\$ 542.67	\$ 64.53	\$ 182.31
Professional								
Inpatient and Outpatient Surgery	Procedures	550.0	\$ 435.41	\$ 19.96	89.6	\$ 483.44	\$ 3.61	\$ 23.57
Anesthesia	Procedures	153.7	425.43	5.45	36.9	439.03	1.35	6.80
Inpatient Visits	Visits	553.4	261.90	12.08	128.2	347.85	3.72	15.79
Emergency Room	Visits	1,168.5	196.15	19.10	481.6	163.65	6.57	25.67
Office/Home Visits/Consults	Visits	2,502.4	143.98	30.02	294.6	126.98	3.12	33.14
Maternity	Procedures	27.5	485.92	1.11	3.3	718.65	0.20	1.31
Pathology/Lab	Procedures	4,197.3	25.53	8.93	90.8	38.29	0.29	9.22
Radiology	Procedures	1,439.0	76.48	9.17	387.0	51.09	1.65	10.82
Office Administered Drugs	Procedures	354.7	257.20	7.60	13.0	36.40	0.04	7.64
FQHC/RHC/Tribal Clinic	Visits	581.1	304.76	14.76	1,286.6	612.66	65.69	80.44
Physical Exams	Visits	52.7	54.51	0.24	4.6	38.98	0.01	0.25
Therapy	Visits	539.6	149.86	6.74	0.3	52.06	0.00	6.74
Vision	Visits	439.9	105.19	3.86	7.6	142.34	0.09	3.95
Other Professional	Procedures	605.8	135.92	6.86	104.3	50.38	0.44	7.30
Telemedicine	Procedures	2.3	159.09	0.03	39.2	332.62	1.09	1.12
Subtotal – Professional		13,167.7	\$ 132.97	\$ 145.91	2,967.5	\$ 355.25	\$ 87.85	\$ 233.76
Pharmacy								
Psychotropic Drugs	Scripts	1,228.1	\$ 50.20	\$ 5.14	414.2	\$ 32.54	\$ 1.12	\$ 6.26
Opioid Drugs	Scripts	1,169.3	117.99	11.50	229.5	102.25	1.96	13.45
All Other Drugs	Scripts	5,610.8	89.73	41.96	2,464.5	69.81	14.34	56.29
Subtotal – Pharmacy		8,008.2	\$ 87.80	\$ 58.59	3,108.2	\$ 67.24	\$ 17.42	\$ 76.01
Ancillary								
Ground Transportation	Trips	1,251.2	\$ 102.25	\$ 10.66	0.8	\$ 364.91	\$ 0.02	\$ 10.68
Air Transportation	Trips	257.7	981.14	21.07	1.5	8,033.35	1.02	22.09
Accommodations	Claims	138.9	307.24	3.56	-	-	-	3.56
DME/Prosthetics	Procedures	295.4	148.09	3.65	-	-	-	3.65
Dental	Procedures	2,351.0	180.93	35.45	316.5	327.12	8.63	44.07
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		4,294.3	\$ 207.85	\$ 74.38	318.8	\$ 364.11	\$ 9.67	\$ 84.05
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.10	-	\$ 0.00	\$ 0.00	\$ 0.10
Nursing Home	Days	12.7	1,433.72	1.52	-	-	-	1.52
Skilled Nursing Facility	Days	168.4	659.86	9.26	-	-	-	9.26
HCBS	Procedures	57.8	94.46	0.45	-	-	-	0.45
Case Management	Procedures	0.3	243.18	0.01	-	-	-	0.01
Personal Care	Procedures	113.2	63.20	0.60	-	-	-	0.60
Subtotal – LTSS		352.4	\$ 406.50	\$ 11.94	-	\$ 0.00	\$ 0.00	\$ 11.94
Behavioral Health								
IP Psych Hospital - API	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
IP Psych Hospital - All Other	Days	-	-	-	-	-	-	-
IP General Hospital - MH/SA	Days	116.3	2,630.50	25.49	3.1	3,260.00	0.83	26.32
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	93.1	35.13	0.27	18.8	610.38	0.96	1.23
Assessment	Procedures	96.4	191.08	1.54	33.3	608.99	1.69	3.23
Crisis Services	Procedures	22.6	115.43	0.22	40.7	609.83	2.07	2.29
Medication Services	Procedures	212.7	35.34	0.63	9.4	609.68	0.48	1.10
Methadone Medication Services	Procedures	702.4	12.58	0.74	-	-	-	0.74
Other Opioid Medication Services	Procedures	0.3	0.01	0.00	-	-	-	0.00
Individual Therapy OP	Procedures	487.7	95.24	3.87	148.8	602.44	7.47	11.34
Family Therapy OP	Procedures	61.8	113.71	0.59	2.5	462.31	0.10	0.68
Group Therapy OP	Procedures	400.2	68.48	2.28	52.9	602.01	2.65	4.94
SBIRT	Procedures	3.8	44.78	0.01	18.8	611.96	0.96	0.97
Substance Abuse Residential	Days	915.6	199.45	15.22	1,245.6	466.87	48.46	63.68
Children's Residential	Days	-	-	-	-	-	-	-
RPTC - In State	Days	-	-	-	-	-	-	-
RPTC - Out of State	Days	-	-	-	-	-	-	-
Detoxification	Procedures	48.6	616.00	2.49	8.9	604.86	0.45	2.94
Medical Evaluation	Procedures	44.3	259.79	0.96	2.3	607.33	0.12	1.07
Psychological Testing	Procedures	22.9	785.41	1.50	1.5	558.75	0.07	1.57
Peer Support Services	Units	418.0	17.17	0.60	-	-	-	0.60
Psychosocial Rehabilitation Services	Procedures	1,617.6	82.59	11.13	478.6	610.84	24.36	35.49
BH Case Management	Units	674.2	16.06	0.90	70.5	234.85	1.38	2.28
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	34.1	153.16	0.44	7.9	581.47	0.38	0.82
Other Professional MH/SA	Visits	180.9	40.38	0.61	47.8	620.78	2.47	3.08
Subtotal – Behavioral Health		6,153.5	\$ 135.49	\$ 69.48	2,191.5	\$ 519.65	\$ 94.90	\$ 164.38
Total All Services		35,879.0	\$ 209.01	\$ 624.91	10,230.5	\$ 391.76	\$ 333.99	\$ 958.90

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix C - Detailed Summaries - Statewide by Population and Rate Cell

Fiscal Year:		SFY 2017						
Population:		Medicaid Expansion						
Rate Cell:		26-39 Male						
Region:		Statewide						
Member Months:		76,811						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	494.0	\$ 3,020.69	\$ 124.35	160.0	\$ 3,279.66	\$ 43.72	\$ 168.07
Inpatient Maternity Delivery	Days	-	-	-	-	-	-	-
Inpatient Well Newborn	Days	-	-	-	-	-	-	-
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal – Inpatient Hospital		494.0	\$ 3,020.69	\$ 124.35	160.0	\$ 3,279.66	\$ 43.72	\$ 168.07
Outpatient Hospital								
Outpatient Emergency Room	Visits	875.5	\$ 858.79	\$ 62.66	366.2	\$ 602.17	\$ 18.38	\$ 81.03
Outpatient Surgery	Visits	59.5	2,958.54	14.68	25.9	1,103.11	2.38	17.06
Outpatient Radiology	Procedures	116.9	448.71	4.37	42.2	541.09	1.90	6.27
Outpatient Pathology/Lab	Procedures	690.7	25.03	1.44	206.2	462.15	7.94	9.38
Outpatient Pharmacy	Procedures	108.1	312.70	2.82	28.1	407.98	0.96	3.77
Other Outpatient	Procedures	332.6	146.16	4.05	233.6	526.11	10.24	14.29
Subtotal – Outpatient Hospital		2,183.3	\$ 494.72	\$ 90.01	902.2	\$ 555.97	\$ 41.80	\$ 131.81
Professional								
Inpatient and Outpatient Surgery	Procedures	402.1	\$ 438.34	\$ 14.69	93.6	\$ 530.40	\$ 4.14	\$ 18.83
Anesthesia	Procedures	107.3	426.39	3.81	39.1	458.97	1.49	5.31
Inpatient Visits	Visits	490.2	297.69	12.16	99.0	366.62	3.03	15.19
Emergency Room	Visits	926.7	192.73	14.88	292.8	159.02	3.88	18.76
Office/Home Visits/Consults	Visits	1,484.8	143.68	17.78	238.1	126.07	2.50	20.28
Maternity	Procedures	-	-	-	-	-	-	-
Pathology/Lab	Procedures	2,141.7	25.70	4.59	34.2	40.26	0.11	4.70
Radiology	Procedures	1,045.2	65.12	5.67	257.2	45.92	0.98	6.66
Office Administered Drugs	Procedures	172.8	99.53	1.43	13.3	45.07	0.05	1.48
FQHC/RHC/Tribal Clinic	Visits	476.5	308.58	12.25	620.2	613.23	31.70	43.95
Physical Exams	Visits	38.4	73.61	0.24	4.8	40.93	0.02	0.25
Therapy	Visits	267.6	153.60	3.43	-	-	-	3.43
Vision	Visits	296.5	105.10	2.60	8.6	142.84	0.10	2.70
Other Professional	Procedures	404.3	106.33	3.58	63.6	67.91	0.36	3.94
Telemedicine	Procedures	3.9	176.99	0.06	47.8	322.59	1.29	1.34
Subtotal – Professional		8,258.2	\$ 141.20	\$ 97.17	1,812.2	\$ 328.73	\$ 49.64	\$ 146.82
Pharmacy								
Psychotropic Drugs	Scripts	647.3	\$ 46.38	\$ 2.50	179.7	\$ 37.40	\$ 0.56	\$ 3.06
Opioid Drugs	Scripts	871.1	148.66	10.79	141.4	85.15	1.00	11.79
All Other Drugs	Scripts	2,783.5	171.82	39.86	1,058.8	70.00	6.18	46.03
Subtotal – Pharmacy		4,301.9	\$ 148.26	\$ 53.15	1,379.8	\$ 67.31	\$ 7.74	\$ 60.89
Ancillary								
Ground Transportation	Trips	926.9	\$ 113.68	\$ 8.78	0.9	\$ 396.94	\$ 0.03	\$ 8.81
Air Transportation	Trips	198.9	1,244.58	20.63	1.2	7,879.25	0.82	21.45
Accommodations	Claims	111.2	304.64	2.82	-	-	-	2.82
DME/Prosthetics	Procedures	206.2	167.51	2.88	-	-	-	2.88
Dental	Procedures	1,926.3	187.98	30.18	252.5	324.02	6.82	36.99
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		3,369.5	\$ 232.50	\$ 65.29	254.7	\$ 361.37	\$ 7.67	\$ 72.95
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.37	-	\$ 0.00	\$ 0.00	\$ 0.37
Nursing Home	Days	84.7	966.48	6.82	8.7	1,242.28	0.91	7.73
Skilled Nursing Facility	Days	38.6	526.01	1.69	-	-	-	1.69
HCBS	Procedures	47.6	111.45	0.44	-	-	-	0.44
Case Management	Procedures	-	-	-	-	-	-	-
Personal Care	Procedures	28.6	48.87	0.12	-	-	-	0.12
Subtotal – LTSS		199.5	\$ 568.12	\$ 9.45	8.7	\$ 1,242.28	\$ 0.91	\$ 10.35
Behavioral Health								
IP Psych Hospital - API	Days	0.2	\$ 1,316.00	\$ 0.02	-	\$ 0.00	\$ 0.00	\$ 0.02
IP Psych Hospital - All Other	Days	-	-	-	-	-	-	-
IP General Hospital - MH/SA	Days	113.9	2,790.98	26.49	4.2	4,547.68	1.60	28.09
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	75.5	36.30	0.23	19.2	611.46	0.98	1.21
Assessment	Procedures	78.0	176.12	1.14	23.3	608.18	1.18	2.32
Crisis Services	Procedures	39.7	110.14	0.36	29.2	610.65	1.49	1.85
Medication Services	Procedures	208.6	30.55	0.53	28.4	609.79	1.44	1.98
Methadone Medication Services	Procedures	789.6	12.56	0.83	-	-	-	0.83
Other Opioid Medication Services	Procedures	0.2	40.00	0.00	-	-	-	0.00
Individual Therapy OP	Procedures	243.4	94.71	1.92	60.5	606.20	3.05	4.98
Family Therapy OP	Procedures	47.6	107.52	0.43	3.4	560.87	0.16	0.59
Group Therapy OP	Procedures	194.8	71.70	1.16	14.2	606.25	0.72	1.88
SBIRT	Procedures	2.2	42.73	0.01	16.4	611.67	0.84	0.84
Substance Abuse Residential	Days	616.5	223.71	11.49	337.3	394.75	11.10	22.59
Children's Residential	Days	-	-	-	-	-	-	-
RPTC - In State	Days	-	-	-	-	-	-	-
RPTC - Out of State	Days	-	-	-	-	-	-	-
Detoxification	Procedures	31.9	616.00	1.64	41.2	608.56	2.09	3.73
Medical Evaluation	Procedures	36.7	253.81	0.78	8.9	602.92	0.45	1.22
Psychological Testing	Procedures	18.4	820.83	1.26	0.6	606.25	0.03	1.29
Peer Support Services	Units	173.9	17.19	0.25	-	-	-	0.25
Psychosocial Rehabilitation Services	Procedures	1,160.6	100.34	9.70	383.5	610.10	19.50	29.20
BH Case Management	Units	776.0	16.04	1.04	62.2	209.85	1.09	2.12
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	19.1	176.69	0.28	10.3	609.11	0.52	0.80
Other Professional MH/SA	Visits	149.8	39.95	0.50	30.3	609.63	1.54	2.04
Subtotal – Behavioral Health		4,776.4	\$ 150.88	\$ 60.06	1,073.3	\$ 534.15	\$ 47.77	\$ 107.83
Total All Services		23,582.7	\$ 254.15	\$ 499.47	5,590.9	\$ 427.67	\$ 199.26	\$ 698.72

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix C - Detailed Summaries - Statewide by Population and Rate Cell

Fiscal Year:		SFY 2017						
Population:		Medicaid Expansion						
Rate Cell:		40-54 Female						
Region:		Statewide						
Member Months:		50,017						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	596.9	\$ 3,072.61	\$ 152.84	358.2	\$ 3,297.44	\$ 98.43	\$ 251.27
Inpatient Maternity Delivery	Days	-	-	-	-	-	-	-
Inpatient Well Newborn	Days	-	-	-	-	-	-	-
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal – Inpatient Hospital		596.9	\$ 3,072.61	\$ 152.84	358.2	\$ 3,297.44	\$ 98.43	\$ 251.27
Outpatient Hospital								
Outpatient Emergency Room	Visits	988.9	\$ 1,018.68	\$ 83.95	497.1	\$ 591.19	\$ 24.49	\$ 108.44
Outpatient Surgery	Visits	202.7	2,516.47	42.51	89.5	953.42	7.11	49.62
Outpatient Radiology	Procedures	490.9	398.59	16.30	141.8	528.17	6.24	22.55
Outpatient Pathology/Lab	Procedures	1,914.3	27.39	4.37	587.8	461.34	22.60	26.97
Outpatient Pharmacy	Procedures	284.1	163.93	3.88	46.5	478.01	1.85	5.73
Other Outpatient	Procedures	893.2	136.79	10.18	590.0	520.16	25.57	35.75
Subtotal – Outpatient Hospital		4,774.2	\$ 405.19	\$ 161.20	1,952.7	\$ 539.97	\$ 87.87	\$ 249.07
Professional								
Inpatient and Outpatient Surgery	Procedures	1,026.4	\$ 443.38	\$ 37.92	245.0	\$ 529.86	\$ 10.82	\$ 48.74
Anesthesia	Procedures	237.0	418.29	8.26	89.2	415.46	3.09	11.35
Inpatient Visits	Visits	519.7	295.87	12.81	169.1	448.17	6.32	19.13
Emergency Room	Visits	1,049.2	206.93	18.09	424.9	172.29	6.10	24.19
Office/Home Visits/Consults	Visits	3,406.1	146.98	41.72	595.5	134.27	6.66	48.38
Maternity	Procedures	2.2	412.18	0.07	-	-	-	0.07
Pathology/Lab	Procedures	4,317.8	25.31	9.11	119.7	69.11	0.69	9.80
Radiology	Procedures	2,540.5	90.43	19.15	718.3	47.47	2.84	21.99
Office Administered Drugs	Procedures	723.4	268.75	16.20	11.0	46.14	0.04	16.24
FQHC/RHC/Tribal Clinic	Visits	1,000.2	295.01	24.59	1,859.9	615.11	95.33	119.92
Physical Exams	Visits	78.7	52.75	0.35	4.3	35.59	0.01	0.36
Therapy	Visits	1,028.3	154.77	13.26	1.0	71.80	0.01	13.27
Vision	Visits	764.1	103.64	6.60	23.0	143.19	0.27	6.87
Other Professional	Procedures	915.5	117.68	8.98	190.7	96.13	1.53	10.51
Telemedicine	Procedures	3.4	173.02	0.05	68.1	330.79	1.88	1.93
Subtotal – Professional		17,612.5	\$ 147.96	\$ 217.16	4,519.8	\$ 360.00	\$ 135.59	\$ 352.75
Pharmacy								
Psychotropic Drugs	Scripts	1,692.9	\$ 45.30	\$ 6.39	592.1	\$ 18.25	\$ 0.90	\$ 7.29
Opioid Drugs	Scripts	1,774.7	58.04	8.58	423.9	44.25	1.56	10.15
All Other Drugs	Scripts	10,195.6	117.46	99.80	4,810.1	72.18	28.93	128.73
Subtotal – Pharmacy		13,663.2	\$ 100.80	\$ 114.77	5,826.2	\$ 64.67	\$ 31.40	\$ 146.17
Ancillary								
Ground Transportation	Trips	2,393.0	\$ 75.38	\$ 15.03	0.5	\$ 286.85	\$ 0.01	\$ 15.04
Air Transportation	Trips	467.6	869.52	33.88	1.0	8,558.90	0.68	34.57
Accommodations	Claims	315.3	267.42	7.03	-	-	-	7.03
DME/Prosthetics	Procedures	670.3	132.11	7.38	-	-	-	7.38
Dental	Procedures	2,712.5	216.12	48.85	387.0	360.84	11.64	60.49
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		6,558.7	\$ 205.24	\$ 112.17	388.4	\$ 381.00	\$ 12.33	\$ 124.51
LTSS								
Hospice	Days	1.7	\$ 910.79	\$ 0.13	-	\$ 0.00	\$ 0.00	\$ 0.13
Nursing Home	Days	27.4	947.99	2.16	15.8	1,598.37	2.11	4.27
Skilled Nursing Facility	Days	37.9	971.47	3.07	-	-	-	3.07
HCBS	Procedures	113.5	125.57	1.19	0.2	370.00	0.01	1.19
Case Management	Procedures	0.5	240.77	0.01	0.7	240.77	0.01	0.02
Personal Care	Procedures	466.4	60.63	2.36	36.0	23.44	0.07	2.43
Subtotal – LTSS		647.3	\$ 165.19	\$ 8.91	52.8	\$ 500.46	\$ 2.20	\$ 11.11
Behavioral Health								
IP Psych Hospital - API	Days	0.2	\$ 1,316.00	\$ 0.03	-	\$ 0.00	\$ 0.00	\$ 0.03
IP Psych Hospital - All Other	Days	-	-	-	-	-	-	-
IP General Hospital - MH/SA	Days	75.8	2,831.35	17.89	0.5	6,630.23	0.27	18.15
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	39.1	36.16	0.12	14.9	608.03	0.75	0.87
Assessment	Procedures	47.7	205.40	0.82	20.4	610.95	1.04	1.86
Crisis Services	Procedures	20.6	106.00	0.18	34.1	608.86	1.73	1.91
Medication Services	Procedures	242.8	30.67	0.62	15.1	612.29	0.77	1.39
Methadone Medication Services	Procedures	666.5	12.57	0.70	-	-	-	0.70
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	362.0	94.37	2.85	157.6	602.46	7.91	10.76
Family Therapy OP	Procedures	57.1	113.23	0.54	0.7	439.85	0.03	0.57
Group Therapy OP	Procedures	177.5	90.48	1.34	10.3	614.19	0.53	1.87
SBIRT	Procedures	0.2	43.80	0.00	19.7	609.66	1.00	1.00
Substance Abuse Residential	Days	213.0	227.22	4.03	189.1	533.14	8.40	12.43
Children's Residential	Days	-	-	-	-	-	-	-
RPTC - In State	Days	-	-	-	-	-	-	-
RPTC - Out of State	Days	-	-	-	-	-	-	-
Detoxification	Procedures	27.8	616.00	1.43	13.0	600.56	0.65	2.08
Medical Evaluation	Procedures	29.0	254.93	0.62	2.9	582.85	0.14	0.76
Psychological Testing	Procedures	22.3	860.59	1.60	1.2	608.20	0.06	1.66
Peer Support Services	Units	8.9	16.97	0.01	-	-	-	0.01
Psychosocial Rehabilitation Services	Procedures	703.9	88.11	5.17	413.9	609.17	21.01	26.18
BH Case Management	Units	987.3	16.04	1.32	113.5	242.69	2.30	3.62
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	16.3	151.10	0.21	12.7	607.17	0.64	0.85
Other Professional MH/SA	Visits	106.0	40.43	0.36	32.4	611.09	1.65	2.01
Subtotal – Behavioral Health		3,804.4	\$ 125.60	\$ 39.82	1,051.8	\$ 557.56	\$ 48.87	\$ 88.69
Total All Services		47,657.1	\$ 203.17	\$ 806.88	14,150.0	\$ 353.38	\$ 416.69	\$ 1,223.57

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix C - Detailed Summaries - Statewide by Population and Rate Cell

Fiscal Year:		SFY 2017						
Population:		Medicaid Expansion						
Rate Cell:		40-54 Male						
Region:		Statewide						
Member Months:		63,024						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	1,014.7	\$ 3,089.50	\$ 261.23	382.3	\$ 3,322.66	\$ 105.86	\$ 367.09
Inpatient Maternity Delivery	Days	-	-	-	-	-	-	-
Inpatient Well Newborn	Days	-	-	-	-	-	-	-
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal – Inpatient Hospital		1,014.7	\$ 3,089.50	\$ 261.23	382.3	\$ 3,322.66	\$ 105.86	\$ 367.09
Outpatient Hospital								
Outpatient Emergency Room	Visits	976.0	\$ 943.29	\$ 76.72	465.3	\$ 566.64	\$ 21.97	\$ 98.70
Outpatient Surgery	Visits	140.1	2,972.50	34.71	62.8	1,095.75	5.74	40.45
Outpatient Radiology	Procedures	236.9	482.03	9.51	89.5	542.28	4.04	13.56
Outpatient Pathology/Lab	Procedures	1,255.1	24.49	2.56	389.0	461.77	14.97	17.53
Outpatient Pharmacy	Procedures	141.3	242.03	2.85	41.1	420.40	1.44	4.29
Other Outpatient	Procedures	919.8	139.25	10.67	510.5	506.89	21.56	32.24
Subtotal – Outpatient Hospital		3,669.3	\$ 448.16	\$ 137.03	1,558.3	\$ 536.96	\$ 69.73	\$ 206.76
Professional								
Inpatient and Outpatient Surgery	Procedures	835.3	\$ 513.98	\$ 35.78	232.9	\$ 520.65	\$ 10.10	\$ 45.88
Anesthesia	Procedures	217.4	456.67	8.27	79.0	426.93	2.81	11.09
Inpatient Visits	Visits	852.8	292.92	20.82	201.8	411.98	6.93	27.75
Emergency Room	Visits	1,087.6	202.06	18.31	401.4	170.38	5.70	24.01
Office/Home Visits/Consults	Visits	2,091.6	146.64	25.56	484.2	130.31	5.26	30.82
Maternity	Procedures	-	-	-	-	-	-	-
Pathology/Lab	Procedures	2,637.8	25.43	5.59	76.5	69.71	0.44	6.03
Radiology	Procedures	1,847.3	87.68	13.50	526.7	48.80	2.14	15.64
Office Administered Drugs	Procedures	346.2	297.83	8.59	12.4	39.94	0.04	8.63
FQHC/RHC/Tribal Clinic	Visits	709.8	307.00	18.16	984.4	614.68	50.42	68.58
Physical Exams	Visits	53.7	62.85	0.28	7.6	40.45	0.03	0.31
Therapy	Visits	579.0	160.42	7.74	0.2	181.00	0.00	7.74
Vision	Visits	556.9	105.06	4.88	20.2	139.82	0.24	5.11
Other Professional	Procedures	897.9	123.50	9.24	163.2	107.48	1.46	10.70
Telemedicine	Procedures	9.3	133.01	0.10	60.2	319.37	1.60	1.70
Subtotal – Professional		12,722.7	\$ 166.78	\$ 176.82	3,250.6	\$ 321.83	\$ 87.18	\$ 264.00
Pharmacy								
Psychotropic Drugs	Scripts	721.2	\$ 25.05	\$ 1.51	242.4	\$ 15.56	\$ 0.31	\$ 1.82
Opioid Drugs	Scripts	1,203.2	73.06	7.33	268.5	53.51	1.20	8.52
All Other Drugs	Scripts	5,794.7	166.06	80.19	2,828.6	86.23	20.33	100.51
Subtotal – Pharmacy		7,719.1	\$ 138.39	\$ 89.02	3,339.5	\$ 78.47	\$ 21.84	\$ 110.86
Ancillary								
Ground Transportation	Trips	1,887.1	\$ 97.26	\$ 15.30	0.6	\$ 382.53	\$ 0.02	\$ 15.31
Air Transportation	Trips	351.7	1,063.87	31.18	1.1	8,307.05	0.79	31.97
Accommodations	Claims	234.2	315.77	6.16	-	-	-	6.16
DME/Prosthetics	Procedures	604.1	162.29	8.17	0.2	124.58	0.00	8.17
Dental	Procedures	2,431.6	216.04	43.78	329.4	336.57	9.24	53.02
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		5,508.7	\$ 227.82	\$ 104.58	331.3	\$ 364.01	\$ 10.05	\$ 114.63
LTSS								
Hospice	Days	4.6	\$ 1,506.89	\$ 0.57	-	\$ 0.00	\$ 0.00	\$ 0.57
Nursing Home	Days	39.4	985.12	3.24	25.5	2,905.83	6.18	9.41
Skilled Nursing Facility	Days	184.9	848.61	13.07	-	-	-	13.07
HCBS	Procedures	81.5	116.58	0.79	-	-	-	0.79
Case Management	Procedures	0.8	240.77	0.02	-	-	-	0.02
Personal Care	Procedures	218.8	50.88	0.93	-	-	-	0.93
Subtotal – LTSS		529.9	\$ 421.63	\$ 18.62	25.5	\$ 2,905.83	\$ 6.18	\$ 24.80
Behavioral Health								
IP Psych Hospital - API	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
IP Psych Hospital - All Other	Days	-	-	-	-	-	-	-
IP General Hospital - MH/SA	Days	89.5	2,777.89	20.72	0.6	3,235.00	0.15	20.87
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	53.1	36.08	0.16	15.2	611.29	0.78	0.94
Assessment	Procedures	53.9	186.34	0.84	19.4	609.88	0.99	1.82
Crisis Services	Procedures	29.5	104.38	0.26	18.5	610.64	0.94	1.20
Medication Services	Procedures	127.6	32.73	0.35	62.1	610.34	3.16	3.50
Methadone Medication Services	Procedures	348.8	12.57	0.37	-	-	-	0.37
Other Opioid Medication Services	Procedures	0.2	0.01	0.00	-	-	-	0.00
Individual Therapy OP	Procedures	173.1	92.55	1.33	54.3	604.81	2.73	4.07
Family Therapy OP	Procedures	20.2	101.06	0.17	1.3	540.51	0.06	0.23
Group Therapy OP	Procedures	111.4	61.09	0.57	16.2	599.30	0.81	1.38
SBIRT	Procedures	2.3	41.83	0.01	21.1	612.14	1.08	1.09
Substance Abuse Residential	Days	423.6	218.72	7.72	324.4	454.64	12.29	20.01
Children's Residential	Days	-	-	-	-	-	-	-
RPTC - In State	Days	-	-	-	-	-	-	-
RPTC - Out of State	Days	-	-	-	-	-	-	-
Detoxification	Procedures	26.1	616.00	1.34	67.8	608.95	3.44	4.78
Medical Evaluation	Procedures	24.2	260.39	0.52	16.6	609.57	0.84	1.37
Psychological Testing	Procedures	19.8	863.02	1.42	1.0	496.36	0.04	1.46
Peer Support Services	Units	104.0	17.25	0.15	-	-	-	0.15
Psychosocial Rehabilitation Services	Procedures	791.1	73.18	4.82	446.3	610.10	22.69	27.52
BH Case Management	Units	876.0	16.02	1.17	50.1	336.85	1.41	2.58
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	21.5	144.37	0.26	7.8	614.10	0.40	0.66
Other Professional MH/SA	Visits	107.6	40.92	0.37	26.5	615.01	1.36	1.72
Subtotal – Behavioral Health		3,403.5	\$ 149.99	\$ 42.54	1,149.1	\$ 555.16	\$ 53.16	\$ 95.70
Total All Services		34,567.9	\$ 288.08	\$ 829.85	10,036.5	\$ 423.25	\$ 353.99	\$ 1,183.84

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix C - Detailed Summaries - Statewide by Population and Rate Cell

Fiscal Year:		SFY 2017						
Population:		Medicaid Expansion						
Rate Cell:		55-64 Female						
Region:		Statewide						
Member Months:		39,755						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	586.2	\$ 3,263.16	\$ 159.40	273.2	\$ 3,457.88	\$ 78.72	\$ 238.12
Inpatient Maternity Delivery	Days	-	-	-	-	-	-	-
Inpatient Well Newborn	Days	-	-	-	-	-	-	-
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal – Inpatient Hospital		586.2	\$ 3,263.16	\$ 159.40	273.2	\$ 3,457.88	\$ 78.72	\$ 238.12
Outpatient Hospital								
Outpatient Emergency Room	Visits	487.5	\$ 1,291.91	\$ 52.48	295.8	\$ 571.55	\$ 14.09	\$ 66.57
Outpatient Surgery	Visits	236.7	2,562.36	50.53	98.7	1,034.83	8.51	59.04
Outpatient Radiology	Procedures	604.3	411.73	20.73	181.1	539.31	8.14	28.87
Outpatient Pathology/Lab	Procedures	2,219.5	23.07	4.27	598.9	430.34	21.48	25.74
Outpatient Pharmacy	Procedures	339.6	111.90	3.17	45.3	443.32	1.67	4.84
Other Outpatient	Procedures	1,142.8	146.76	13.98	689.4	500.15	28.73	42.71
Subtotal – Outpatient Hospital		5,030.4	\$ 346.28	\$ 145.16	1,909.2	\$ 519.32	\$ 82.62	\$ 227.78
Professional								
Inpatient and Outpatient Surgery	Procedures	1,013.6	\$ 504.27	\$ 42.59	250.5	\$ 588.49	\$ 12.29	\$ 54.88
Anesthesia	Procedures	227.9	434.62	8.25	83.6	456.44	3.18	11.43
Inpatient Visits	Visits	490.8	266.44	10.90	134.9	408.60	4.59	15.49
Emergency Room	Visits	553.9	223.09	10.30	246.0	168.61	3.46	13.75
Office/Home Visits/Consults	Visits	3,044.8	146.29	37.12	695.8	132.83	7.70	44.82
Maternity	Procedures	-	-	-	-	-	-	-
Pathology/Lab	Procedures	3,456.8	27.32	7.87	132.5	61.17	0.68	8.54
Radiology	Procedures	2,664.7	167.24	37.14	585.3	44.52	2.17	39.31
Office Administered Drugs	Procedures	715.4	301.55	17.98	13.6	37.10	0.04	18.02
FQHC/RHC/Tribal Clinic	Visits	946.6	296.01	23.35	1,698.8	610.41	86.41	109.76
Physical Exams	Visits	102.0	57.97	0.49	7.8	33.13	0.02	0.51
Therapy	Visits	1,071.3	152.32	13.60	2.1	18.58	0.00	13.60
Vision	Visits	738.0	105.88	6.51	26.6	163.82	0.36	6.87
Other Professional	Procedures	1,146.1	130.31	12.45	202.5	94.00	1.59	14.03
Telemedicine	Procedures	3.6	100.73	0.03	53.4	295.86	1.32	1.35
Subtotal – Professional		16,175.6	\$ 169.57	\$ 228.58	4,133.6	\$ 359.44	\$ 123.81	\$ 352.39
Pharmacy								
Psychotropic Drugs	Scripts	1,326.3	\$ 29.35	\$ 3.24	428.6	\$ 11.63	\$ 0.42	\$ 3.66
Opioid Drugs	Scripts	1,159.1	44.38	4.29	336.0	26.29	0.74	5.02
All Other Drugs	Scripts	10,380.1	113.88	98.51	4,675.4	65.71	25.60	124.11
Subtotal – Pharmacy		12,865.5	\$ 98.91	\$ 106.04	5,440.0	\$ 59.01	\$ 26.75	\$ 132.80
Ancillary								
Ground Transportation	Trips	2,327.3	\$ 60.08	\$ 11.65	0.9	\$ 344.15	\$ 0.03	\$ 11.68
Air Transportation	Trips	564.5	822.15	38.67	2.1	8,448.99	1.49	40.16
Accommodations	Claims	372.5	273.58	8.49	-	-	-	8.49
DME/Prosthetics	Procedures	810.2	131.10	8.85	-	-	-	8.85
Dental	Procedures	2,084.6	209.55	36.40	371.3	342.60	10.60	47.00
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		6,159.0	\$ 202.77	\$ 104.07	374.3	\$ 388.37	\$ 12.11	\$ 116.19
LTSS								
Hospice	Days	4.5	\$ 2,421.80	\$ 0.91	-	\$ 0.00	\$ 0.00	\$ 0.91
Nursing Home	Days	16.6	1,363.26	1.89	11.2	3,324.19	3.09	4.98
Skilled Nursing Facility	Days	415.6	659.26	22.83	-	-	-	22.83
HCBS	Procedures	164.2	98.62	1.35	-	-	-	1.35
Case Management	Procedures	2.7	246.39	0.06	-	-	-	0.06
Personal Care	Procedures	547.9	58.61	2.68	-	-	-	2.68
Subtotal – LTSS		1,151.6	\$ 309.66	\$ 29.72	11.2	\$ 3,324.19	\$ 3.09	\$ 32.81
Behavioral Health								
IP Psych Hospital - API	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
IP Psych Hospital - All Other	Days	-	-	-	-	-	-	-
IP General Hospital - MH/SA	Days	18.1	2,664.08	4.02	-	-	-	4.02
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	20.2	37.68	0.06	5.7	610.53	0.29	0.36
Assessment	Procedures	26.3	203.94	0.45	5.4	609.50	0.28	0.72
Crisis Services	Procedures	12.7	104.02	0.11	12.4	608.07	0.63	0.74
Medication Services	Procedures	106.9	32.80	0.29	1.8	611.67	0.09	0.38
Methadone Medication Services	Procedures	399.3	12.57	0.42	-	-	-	0.42
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	169.9	92.17	1.31	48.3	597.51	2.40	3.71
Family Therapy OP	Procedures	46.5	112.22	0.43	0.3	100.54	0.00	0.44
Group Therapy OP	Procedures	41.4	74.58	0.26	2.4	616.00	0.12	0.38
SBIRT	Procedures	0.3	43.80	0.00	14.2	607.43	0.72	0.72
Substance Abuse Residential	Days	108.4	249.03	2.25	19.9	608.91	1.01	3.26
Children's Residential	Days	-	-	-	-	-	-	-
RPTC - In State	Days	-	-	-	-	-	-	-
RPTC - Out of State	Days	-	-	-	-	-	-	-
Detoxification	Procedures	7.8	616.00	0.40	4.5	612.53	0.23	0.63
Medical Evaluation	Procedures	11.8	252.53	0.25	1.2	612.75	0.06	0.31
Psychological Testing	Procedures	13.3	883.93	0.98	0.9	616.00	0.05	1.02
Peer Support Services	Units	5.1	17.00	0.01	-	-	-	0.01
Psychosocial Rehabilitation Services	Procedures	261.7	66.47	1.45	116.8	611.87	5.96	7.41
BH Case Management	Units	400.6	16.04	0.54	29.9	526.92	1.31	1.85
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	6.0	123.88	0.06	2.1	612.29	0.11	0.17
Other Professional MH/SA	Visits	51.9	40.21	0.17	11.8	611.33	0.60	0.77
Subtotal – Behavioral Health		1,708.2	\$ 94.52	\$ 13.46	277.7	\$ 599.04	\$ 13.86	\$ 27.32
Total All Services		43,676.4	\$ 216.07	\$ 786.42	12,419.1	\$ 329.47	\$ 340.98	\$ 1,127.40

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix C - Detailed Summaries - Statewide by Population and Rate Cell

Fiscal Year:		SFY 2017						
Population:		Medicaid Expansion						
Rate Cell:		55-64 Male						
Region:		Statewide						
Member Months:		45,175						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	1,092.5	\$ 3,127.81	\$ 284.77	346.6	\$ 3,240.51	\$ 93.61	\$ 378.38
Inpatient Maternity Delivery	Days	-	-	-	-	-	-	-
Inpatient Well Newborn	Days	-	-	-	-	-	-	-
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal – Inpatient Hospital		1,092.5	\$ 3,127.81	\$ 284.77	346.6	\$ 3,240.51	\$ 93.61	\$ 378.38
Outpatient Hospital								
Outpatient Emergency Room	Visits	569.0	\$ 1,187.39	\$ 56.30	308.7	\$ 573.73	\$ 14.76	\$ 71.06
Outpatient Surgery	Visits	194.7	3,097.73	50.26	78.1	1,097.46	7.14	57.40
Outpatient Radiology	Procedures	459.0	599.22	22.92	104.9	553.51	4.84	27.76
Outpatient Pathology/Lab	Procedures	1,770.2	24.48	3.61	440.7	452.04	16.60	20.21
Outpatient Pharmacy	Procedures	193.6	213.24	3.44	60.6	444.71	2.24	5.69
Other Outpatient	Procedures	1,013.9	200.78	16.96	615.2	517.30	26.52	43.48
Subtotal – Outpatient Hospital		4,200.4	\$ 438.53	\$ 153.50	1,608.1	\$ 538.05	\$ 72.10	\$ 225.61
Professional								
Inpatient and Outpatient Surgery	Procedures	951.2	\$ 547.93	\$ 43.43	243.6	\$ 561.46	\$ 11.40	\$ 54.83
Anesthesia	Procedures	252.9	453.30	9.55	82.9	419.72	2.90	12.45
Inpatient Visits	Visits	839.1	294.09	20.56	177.2	422.32	6.24	26.80
Emergency Room	Visits	655.6	215.48	11.77	248.1	177.33	3.67	15.44
Office/Home Visits/Consults	Visits	2,352.4	145.88	28.60	614.9	132.84	6.81	35.41
Maternity	Procedures	-	-	-	-	-	-	-
Pathology/Lab	Procedures	2,911.3	26.33	6.39	106.0	66.63	0.59	6.98
Radiology	Procedures	2,431.9	298.90	60.57	491.4	49.46	2.03	62.60
Office Administered Drugs	Procedures	901.6	204.51	15.36	13.3	51.47	0.06	15.42
FQHC/RHC/Tribal Clinic	Visits	768.2	302.50	19.37	1,083.5	616.25	55.64	75.01
Physical Exams	Visits	66.9	58.10	0.32	11.4	37.94	0.04	0.36
Therapy	Visits	603.2	154.11	7.75	-	-	-	7.75
Vision	Visits	597.9	106.47	5.31	21.8	171.53	0.31	5.62
Other Professional	Procedures	1,183.1	127.40	12.56	238.0	119.45	2.37	14.93
Telemedicine	Procedures	1.6	117.23	0.02	70.9	309.92	1.83	1.85
Subtotal – Professional		14,517.0	\$ 199.68	\$ 241.56	3,403.0	\$ 331.00	\$ 93.87	\$ 335.43
Pharmacy								
Psychotropic Drugs	Scripts	511.6	\$ 19.69	\$ 0.84	162.0	\$ 10.59	\$ 0.14	\$ 0.98
Opioid Drugs	Scripts	990.0	44.40	3.66	291.1	18.08	0.44	4.10
All Other Drugs	Scripts	7,239.2	194.36	117.25	3,476.0	80.97	23.46	140.71
Subtotal – Pharmacy		8,740.9	\$ 167.15	\$ 121.75	3,929.2	\$ 73.41	\$ 24.04	\$ 145.79
Ancillary								
Ground Transportation	Trips	2,205.0	\$ 74.81	\$ 13.75	0.8	\$ 446.38	\$ 0.03	\$ 13.78
Air Transportation	Trips	497.5	1,162.31	48.19	1.3	10,092.77	1.12	49.31
Accommodations	Claims	358.6	314.57	9.40	-	-	-	9.40
DME/Prosthetics	Procedures	622.9	131.26	6.81	-	-	-	6.81
Dental	Procedures	2,018.0	231.90	39.00	339.2	376.12	10.63	49.63
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		5,702.0	\$ 246.54	\$ 117.15	341.3	\$ 414.10	\$ 11.78	\$ 128.93
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.35	-	\$ 0.00	\$ 0.00	\$ 0.35
Nursing Home	Days	42.5	675.85	2.39	21.8	2,953.79	5.36	7.76
Skilled Nursing Facility	Days	229.5	809.95	15.49	-	-	-	15.49
HCBS	Procedures	243.1	131.27	2.66	-	-	-	2.66
Case Management	Procedures	1.6	241.17	0.03	-	-	-	0.03
Personal Care	Procedures	208.5	81.64	1.42	-	-	-	1.42
Subtotal – LTSS		725.2	\$ 369.78	\$ 22.35	21.8	\$ 2,953.79	\$ 5.36	\$ 27.71
Behavioral Health								
IP Psych Hospital - API	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
IP Psych Hospital - All Other	Days	-	-	-	-	-	-	-
IP General Hospital - MH/SA	Days	35.6	2,590.63	7.68	0.5	3,185.00	0.14	7.83
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	19.9	35.88	0.06	9.3	598.07	0.46	0.52
Assessment	Procedures	21.0	191.76	0.34	10.1	609.50	0.51	0.85
Crisis Services	Procedures	12.8	89.34	0.09	7.4	608.11	0.38	0.47
Medication Services	Procedures	123.5	27.72	0.29	34.5	609.50	1.75	2.04
Methadone Medication Services	Procedures	354.9	12.58	0.37	-	-	-	0.37
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	107.0	111.42	0.99	27.4	597.81	1.36	2.36
Family Therapy OP	Procedures	6.4	110.68	0.06	0.3	100.54	0.00	0.06
Group Therapy OP	Procedures	50.5	57.90	0.24	1.9	610.43	0.09	0.34
SBIRT	Procedures	-	-	-	20.5	612.79	1.04	1.04
Substance Abuse Residential	Days	88.7	178.71	1.32	114.5	468.96	4.47	5.80
Children's Residential	Days	-	-	-	-	-	-	-
RPTC - In State	Days	-	-	-	-	-	-	-
RPTC - Out of State	Days	-	-	-	-	-	-	-
Detoxification	Procedures	8.0	616.00	0.41	43.8	608.83	2.22	2.63
Medical Evaluation	Procedures	8.8	272.93	0.20	9.0	612.18	0.46	0.66
Psychological Testing	Procedures	8.0	776.77	0.52	0.5	385.00	0.02	0.53
Peer Support Services	Units	53.9	17.00	0.08	-	-	-	0.08
Psychosocial Rehabilitation Services	Procedures	402.2	63.96	2.14	223.4	609.29	11.34	13.49
BH Case Management	Units	457.7	16.05	0.61	73.0	279.26	1.70	2.31
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	13.3	114.75	0.13	2.9	604.18	0.15	0.27
Other Professional MH/SA	Visits	51.0	40.59	0.17	14.6	610.09	0.74	0.92
Subtotal – Behavioral Health		1,823.0	\$ 103.38	\$ 15.71	593.7	\$ 542.92	\$ 26.86	\$ 42.57
Total All Services		36,801.1	\$ 311.99	\$ 956.79	10,243.8	\$ 383.79	\$ 327.62	\$ 1,284.41

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix C - Detailed Summaries - Statewide by Population and Rate Cell

Fiscal Year:		SFY 2017						
Population:		Pregnant Women						
Rate Cell:		Pregnant Women						
Region:		Statewide						
Member Months:		46,677						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	202.6	\$ 2,987.05	\$ 50.43	95.9	\$ 3,225.45	\$ 25.78	\$ 76.20
Inpatient Maternity Delivery	Days	1,644.3	2,899.95	397.37	665.6	3,228.20	179.06	576.43
Inpatient Well Newborn	Days	-	-	-	-	-	-	-
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal – Inpatient Hospital		1,846.9	\$ 2,909.51	\$ 447.80	761.5	\$ 3,227.85	\$ 204.83	\$ 652.64
Outpatient Hospital								
Outpatient Emergency Room	Visits	950.5	\$ 753.83	\$ 59.71	459.4	\$ 671.79	\$ 25.72	\$ 85.43
Outpatient Surgery	Visits	44.5	2,855.43	10.58	22.1	906.15	1.67	12.25
Outpatient Radiology	Procedures	534.2	278.62	12.40	497.0	543.19	22.50	34.90
Outpatient Pathology/Lab	Procedures	4,729.7	26.39	10.40	2,103.0	420.13	73.63	84.03
Outpatient Pharmacy	Procedures	336.8	69.18	1.94	81.5	367.80	2.50	4.44
Other Outpatient	Procedures	853.0	273.28	19.43	714.4	534.08	31.80	51.22
Subtotal – Outpatient Hospital		7,448.6	\$ 184.41	\$ 114.46	3,877.4	\$ 488.39	\$ 157.81	\$ 272.27
Professional								
Inpatient and Outpatient Surgery	Procedures	227.3	\$ 335.81	\$ 6.36	66.8	\$ 343.55	\$ 1.91	\$ 8.27
Anesthesia	Procedures	607.8	709.31	35.92	155.8	654.76	8.50	44.42
Inpatient Visits	Visits	625.8	188.19	9.81	491.6	153.03	6.27	16.08
Emergency Room	Visits	714.7	204.44	12.18	232.9	166.72	3.24	15.41
Office/Home Visits/Consults	Visits	7,007.5	124.14	72.49	863.0	107.84	7.76	80.25
Maternity	Procedures	1,745.4	661.90	96.27	439.1	1,019.56	37.31	133.58
Pathology/Lab	Procedures	7,527.8	21.89	13.73	316.7	31.29	0.83	14.56
Radiology	Procedures	3,070.9	135.55	34.69	675.9	85.93	4.84	39.53
Office Administered Drugs	Procedures	350.7	48.96	1.43	54.0	43.50	0.20	1.63
FQHC/RHC/Tribal Clinic	Visits	446.6	294.50	10.96	3,091.5	598.49	154.19	165.14
Physical Exams	Visits	373.5	56.16	1.75	13.1	49.51	0.05	1.80
Therapy	Visits	411.3	132.64	4.55	16.5	46.53	0.06	4.61
Vision	Visits	464.8	103.29	4.00	6.7	110.58	0.06	4.06
Other Professional	Procedures	645.8	227.07	12.22	94.6	53.60	0.42	12.64
Telemedicine	Procedures	3.3	108.81	0.03	21.9	356.47	0.65	0.68
Subtotal – Professional		24,223.1	\$ 156.74	\$ 316.39	6,540.1	\$ 415.19	\$ 226.28	\$ 542.67
Pharmacy								
Psychotropic Drugs	Scripts	318.5	\$ 37.23	\$ 0.99	95.9	\$ 7.33	\$ 0.06	\$ 1.05
Opioid Drugs	Scripts	667.1	30.76	1.71	129.1	18.69	0.20	1.91
All Other Drugs	Scripts	3,602.1	82.76	24.84	2,102.0	45.95	8.05	32.89
Subtotal – Pharmacy		4,587.7	\$ 72.04	\$ 27.54	2,326.9	\$ 42.84	\$ 8.31	\$ 35.85
Ancillary								
Ground Transportation	Trips	4,057.9	\$ 31.09	\$ 10.51	3.3	\$ 401.67	\$ 0.11	\$ 10.62
Air Transportation	Trips	1,129.1	778.65	73.27	5.7	9,794.94	4.62	77.88
Accommodations	Claims	873.1	611.90	44.52	-	-	-	44.52
DME/Prosthetics	Procedures	98.2	172.56	1.41	0.3	13.60	0.00	1.41
Dental	Procedures	1,786.0	154.59	23.01	394.1	329.34	10.82	33.83
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		7,944.3	\$ 230.68	\$ 152.72	403.4	\$ 462.47	\$ 15.55	\$ 168.26
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Nursing Home	Days	-	-	-	-	-	-	-
Skilled Nursing Facility	Days	-	-	-	-	-	-	-
HCBS	Procedures	4.6	141.17	0.05	-	-	-	0.05
Case Management	Procedures	-	-	-	-	-	-	-
Personal Care	Procedures	92.0	103.05	0.79	-	-	-	0.79
Subtotal – LTSS		96.7	\$ 104.88	\$ 0.84	-	\$ 0.00	\$ 0.00	\$ 0.84
Behavioral Health								
IP Psych Hospital - API	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
IP Psych Hospital - All Other	Days	4.1	728.41	0.25	-	-	-	0.25
IP General Hospital - MH/SA	Days	10.3	2,726.06	2.34	0.5	7,577.80	0.32	2.66
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	27.8	34.63	0.08	11.8	610.91	0.60	0.68
Assessment	Procedures	34.7	163.40	0.47	19.0	599.74	0.95	1.42
Crisis Services	Procedures	7.7	102.47	0.07	26.7	608.93	1.36	1.42
Medication Services	Procedures	208.8	29.35	0.51	1.5	611.67	0.08	0.59
Methadone Medication Services	Procedures	765.9	12.53	0.80	-	-	-	0.80
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	114.1	99.85	0.95	76.9	584.30	3.74	4.69
Family Therapy OP	Procedures	26.0	113.14	0.24	3.1	550.05	0.14	0.39
Group Therapy OP	Procedures	64.0	55.38	0.30	24.4	558.14	1.14	1.43
SBIRT	Procedures	0.8	43.80	0.00	10.0	609.00	0.51	0.51
Substance Abuse Residential	Days	135.5	253.03	2.86	544.0	499.48	22.64	25.50
Children's Residential	Days	15.2	202.88	0.26	-	-	-	0.26
RPTC - In State	Days	-	-	-	-	-	-	-
RPTC - Out of State	Days	-	-	-	-	-	-	-
Detoxification	Procedures	2.8	616.00	0.15	0.8	611.67	0.04	0.18
Medical Evaluation	Procedures	17.0	269.62	0.38	0.5	418.58	0.02	0.40
Psychological Testing	Procedures	5.7	752.05	0.35	0.5	597.11	0.03	0.38
Peer Support Services	Units	36.5	17.03	0.05	-	-	-	0.05
Psychosocial Rehabilitation Services	Procedures	411.1	76.03	2.60	196.7	609.42	9.99	12.59
BH Case Management	Units	185.4	16.04	0.25	32.7	225.51	0.61	0.86
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	3.3	157.39	0.04	5.9	610.35	0.30	0.34
Other Professional MH/SA	Visits	59.9	41.06	0.20	21.1	609.19	1.07	1.28
Subtotal – Behavioral Health		2,136.4	\$ 73.89	\$ 13.15	976.2	\$ 535.25	\$ 43.54	\$ 56.70
Total All Services		48,283.7	\$ 266.65	\$ 1,072.92	14,885.4	\$ 529.09	\$ 656.31	\$ 1,729.23

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix C - Detailed Summaries - Statewide by Population and Rate Cell

Fiscal Year:		SFY 2017						
Population:		SSI/Disabled						
Rate Cell:		Adult						
Region:		Statewide						
Member Months:		111,362						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	847.2	\$ 2,973.41	\$ 209.92	291.2	\$ 3,229.53	\$ 78.36	\$ 288.28
Inpatient Maternity Delivery	Days	3.8	2,940.50	0.92	1.7	3,348.50	0.48	1.41
Inpatient Well Newborn	Days	-	-	-	-	-	-	-
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal – Inpatient Hospital		851.0	\$ 2,973.27	\$ 210.84	292.9	\$ 3,230.23	\$ 78.84	\$ 289.68
Outpatient Hospital								
Outpatient Emergency Room	Visits	1,029.5	\$ 790.52	\$ 67.82	276.5	\$ 587.99	\$ 13.55	\$ 81.37
Outpatient Surgery	Visits	175.5	2,180.98	31.90	40.9	983.04	3.35	35.26
Outpatient Radiology	Procedures	499.8	338.98	14.12	71.4	526.03	3.13	17.25
Outpatient Pathology/Lab	Procedures	2,299.4	23.27	4.46	361.5	415.22	12.51	16.97
Outpatient Pharmacy	Procedures	449.5	247.44	9.27	56.5	390.55	1.84	11.11
Other Outpatient	Procedures	2,615.8	138.13	30.11	1,014.5	257.44	21.77	51.88
Subtotal – Outpatient Hospital		7,069.5	\$ 267.65	\$ 157.68	1,821.4	\$ 369.91	\$ 56.15	\$ 213.82
Professional								
Inpatient and Outpatient Surgery	Procedures	1,317.6	\$ 306.21	\$ 33.62	205.4	\$ 383.57	\$ 6.56	\$ 40.19
Anesthesia	Procedures	282.5	295.30	6.95	69.1	324.95	1.87	8.82
Inpatient Visits	Visits	1,258.6	204.97	21.50	223.8	342.17	6.38	27.88
Emergency Room	Visits	1,213.8	164.85	16.67	326.4	151.38	4.12	20.79
Office/Home Visits/Consults	Visits	5,131.7	101.32	43.33	675.2	91.04	5.12	48.45
Maternity	Procedures	5.2	592.73	0.26	1.9	559.32	0.09	0.35
Pathology/Lab	Procedures	3,832.3	22.43	7.16	91.1	52.20	0.40	7.56
Radiology	Procedures	3,167.4	115.12	30.39	579.3	38.46	1.86	32.24
Office Administered Drugs	Procedures	1,104.0	179.21	16.49	18.4	39.50	0.06	16.55
FQHC/RHC/Tribal Clinic	Visits	1,064.2	223.79	19.85	1,461.7	428.27	52.17	72.01
Physical Exams	Visits	102.3	49.50	0.42	5.8	38.73	0.02	0.44
Therapy	Visits	1,154.1	106.34	10.23	6.6	25.15	0.01	10.24
Vision	Visits	864.2	90.27	6.50	23.7	96.60	0.19	6.69
Other Professional	Procedures	2,135.1	83.35	14.83	230.4	66.33	1.27	16.10
Telemedicine	Procedures	10.2	166.49	0.14	53.4	273.89	1.22	1.36
Subtotal – Professional		22,643.1	\$ 121.01	\$ 228.34	3,972.2	\$ 245.74	\$ 81.34	\$ 309.68
Pharmacy								
Psychotropic Drugs	Scripts	3,331.5	\$ 55.85	\$ 15.51	926.7	\$ 34.27	\$ 2.65	\$ 18.15
Opioid Drugs	Scripts	1,930.1	64.33	10.35	267.2	37.08	0.83	11.17
All Other Drugs	Scripts	16,226.9	131.81	178.25	4,148.7	85.03	29.40	207.64
Subtotal – Pharmacy		21,488.6	\$ 113.98	\$ 204.10	5,342.7	\$ 73.82	\$ 32.87	\$ 236.97
Ancillary								
Ground Transportation	Trips	3,631.3	\$ 63.90	\$ 19.34	1.0	\$ 320.17	\$ 0.03	\$ 19.36
Air Transportation	Trips	691.4	822.04	47.36	2.2	7,896.37	1.42	48.78
Accommodations	Claims	393.8	289.36	9.50	-	-	-	9.50
DME/Prosthetics	Procedures	3,120.4	87.79	22.83	0.1	44.63	0.00	22.83
Dental	Procedures	2,097.6	185.16	32.37	287.0	342.71	8.20	40.56
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		9,934.5	\$ 158.71	\$ 131.39	290.2	\$ 398.62	\$ 9.64	\$ 141.03
LTSS								
Hospice	Days	7.9	\$ 2,717.15	\$ 1.78	-	\$ 0.00	\$ 0.00	\$ 1.78
Nursing Home	Days	70.7	657.51	3.87	20.6	2,921.41	5.01	8.88
Skilled Nursing Facility	Days	2,089.7	687.48	119.72	214.9	985.84	17.65	137.37
HCBS	Procedures	289.6	118.56	2.86	-	-	-	2.86
Case Management	Procedures	3.7	250.16	0.08	0.3	265.65	0.01	0.08
Personal Care	Procedures	24,516.6	67.03	136.94	11.6	26.86	0.03	136.96
Subtotal – LTSS		26,978.2	\$ 117.98	\$ 265.25	247.4	\$ 1,100.81	\$ 22.70	\$ 287.95
Behavioral Health								
IP Psych Hospital - API	Days	22.4	\$ 1,437.30	\$ 2.68	-	\$ 0.00	\$ 0.00	\$ 2.68
IP Psych Hospital - All Other	Days	-	-	-	-	-	-	-
IP General Hospital - MH/SA	Days	76.3	2,709.16	17.22	4.0	5,349.61	1.78	19.00
OP General Hospital - MH/SA	Visits	7.7	188.95	0.12	-	-	-	0.12
Screening	Procedures	33.6	42.61	0.12	5.0	598.96	0.25	0.37
Assessment	Procedures	56.9	211.83	1.00	7.9	610.48	0.40	1.40
Crisis Services	Procedures	35.5	115.35	0.34	32.2	608.00	1.63	1.97
Medication Services	Procedures	664.1	30.68	1.70	26.5	606.65	1.34	3.04
Methadone Medication Services	Procedures	377.1	12.56	0.39	-	-	-	0.39
Other Opioid Medication Services	Procedures	0.1	179.98	0.00	-	-	-	0.00
Individual Therapy OP	Procedures	708.0	86.05	5.08	99.7	564.56	4.69	9.77
Family Therapy OP	Procedures	118.7	82.48	0.82	2.5	304.05	0.06	0.88
Group Therapy OP	Procedures	137.3	76.61	0.88	68.2	569.09	3.23	4.11
SBIRT	Procedures	0.3	43.80	0.00	6.9	610.11	0.35	0.35
Substance Abuse Residential	Days	77.4	131.78	0.85	38.0	606.85	1.92	2.77
Children's Residential	Days	-	-	-	-	-	-	-
RPTC - In State	Days	-	-	-	-	-	-	-
RPTC - Out of State	Days	-	-	-	-	-	-	-
Detoxification	Procedures	11.2	616.00	0.58	7.9	608.70	0.40	0.97
Medical Evaluation	Procedures	48.4	190.69	0.77	1.6	585.35	0.08	0.85
Psychological Testing	Procedures	29.5	641.38	1.58	0.4	157.70	0.01	1.58
Peer Support Services	Units	117.5	17.01	0.17	-	-	-	0.17
Psychosocial Rehabilitation Services	Procedures	3,824.5	183.80	58.58	782.7	607.45	39.62	98.20
BH Case Management	Units	3,552.7	16.06	4.75	210.1	251.29	4.40	9.15
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	33.6	93.23	0.26	11.0	579.26	0.53	0.79
Other Professional MH/SA	Visits	213.1	42.62	0.76	31.9	612.72	1.63	2.39
Subtotal – Behavioral Health		10,145.9	\$ 116.68	\$ 98.65	1,336.5	\$ 559.59	\$ 62.32	\$ 160.97
Total All Services		99,110.8	\$ 156.95	\$ 1,296.25	13,303.3	\$ 310.17	\$ 343.86	\$ 1,640.10

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix C - Detailed Summaries - Statewide by Population and Rate Cell

Fiscal Year:		SFY 2017						
Population:		SSI/Disabled						
Rate Cell:		Child						
Region:		Statewide						
Member Months:		30,684						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	328.9	\$ 6,134.67	\$ 168.14	35.6	\$ 3,149.67	\$ 9.34	\$ 177.48
Inpatient Maternity Delivery	Days	1.6	2,748.02	0.36	4.7	3,007.08	1.18	1.53
Inpatient Well Newborn	Days	-	-	-	-	-	-	-
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal – Inpatient Hospital		330.5	\$ 6,118.64	\$ 168.50	40.3	\$ 3,133.06	\$ 10.52	\$ 179.02
Outpatient Hospital								
Outpatient Emergency Room	Visits	346.1	\$ 757.93	\$ 21.86	137.3	\$ 592.01	\$ 6.77	\$ 28.63
Outpatient Surgery	Visits	74.3	3,039.68	18.82	16.0	1,039.27	1.39	20.21
Outpatient Radiology	Procedures	158.0	339.73	4.47	21.5	535.70	0.96	5.43
Outpatient Pathology/Lab	Procedures	2,242.9	17.97	3.36	176.8	405.51	5.97	9.33
Outpatient Pharmacy	Procedures	633.9	289.89	15.31	21.1	326.84	0.58	15.89
Other Outpatient	Procedures	1,335.2	124.65	13.87	215.1	512.35	9.18	23.05
Subtotal – Outpatient Hospital		4,790.4	\$ 194.63	\$ 77.70	587.8	\$ 507.39	\$ 24.85	\$ 102.55
Professional								
Inpatient and Outpatient Surgery	Procedures	312.1	\$ 336.60	\$ 8.75	39.1	\$ 311.61	\$ 1.02	\$ 9.77
Anesthesia	Procedures	157.2	377.50	4.95	18.8	493.27	0.77	5.72
Inpatient Visits	Visits	603.8	352.10	17.72	32.9	236.62	0.65	18.37
Emergency Room	Visits	363.7	179.03	5.43	102.9	136.83	1.17	6.60
Office/Home Visits/Consults	Visits	2,397.3	140.57	28.08	171.7	122.88	1.76	29.84
Maternity	Procedures	3.5	458.44	0.13	2.7	780.96	0.18	0.31
Pathology/Lab	Procedures	712.2	22.83	1.35	43.0	9.38	0.03	1.39
Radiology	Procedures	653.9	52.64	2.87	70.0	44.27	0.26	3.13
Office Administered Drugs	Procedures	126.3	139.13	1.46	5.5	41.62	0.02	1.48
FQHC/RHC/Tribal Clinic	Visits	201.8	321.59	5.41	544.4	596.63	27.07	32.47
Physical Exams	Visits	308.2	146.84	3.77	8.6	89.53	0.06	3.84
Therapy	Visits	12,737.2	145.49	154.43	1.2	47.90	0.00	154.44
Vision	Visits	748.5	84.47	5.27	9.4	111.57	0.09	5.36
Other Professional	Procedures	2,091.5	102.88	17.93	51.6	70.54	0.30	18.23
Telemedicine	Procedures	57.1	181.58	0.86	39.9	388.12	1.29	2.15
Subtotal – Professional		21,474.4	\$ 144.41	\$ 258.42	1,141.6	\$ 364.46	\$ 34.67	\$ 293.09
Pharmacy								
Psychotropic Drugs	Scripts	2,028.6	\$ 40.44	\$ 6.84	93.5	\$ 37.02	\$ 0.29	\$ 7.12
Opioid Drugs	Scripts	123.6	7.05	0.07	17.2	19.40	0.03	0.10
All Other Drugs	Scripts	7,007.4	299.72	175.02	798.6	126.54	8.42	183.44
Subtotal – Pharmacy		9,159.6	\$ 238.35	\$ 181.93	909.3	\$ 115.31	\$ 8.74	\$ 190.67
Ancillary								
Ground Transportation	Trips	1,768.1	\$ 78.86	\$ 11.62	-	\$ 0.00	\$ 0.00	\$ 11.62
Air Transportation	Trips	786.1	817.19	53.53	1.2	7,193.85	0.70	54.23
Accommodations	Claims	352.8	328.70	9.66	-	-	-	9.66
DME/Prosthetics	Procedures	3,012.5	134.03	33.65	0.4	40.51	0.00	33.65
Dental	Procedures	3,822.5	106.67	33.98	266.3	603.37	13.39	47.37
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		9,741.9	\$ 175.45	\$ 142.44	267.9	\$ 631.41	\$ 14.10	\$ 156.53
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Nursing Home	Days	2,185.8	42.84	7.80	0.8	3,235.00	0.21	8.01
Skilled Nursing Facility	Days	315.2	619.60	16.28	-	-	-	16.28
HCBS	Procedures	1,209.2	298.32	30.06	-	-	-	30.06
Case Management	Procedures	220.2	284.42	5.22	3.9	303.05	0.10	5.32
Personal Care	Procedures	2,434.9	55.62	11.29	-	-	-	11.29
Subtotal – LTSS		6,365.3	\$ 133.18	\$ 70.64	4.7	\$ 791.71	\$ 0.31	\$ 70.95
Behavioral Health								
IP Psych Hospital - API	Days	167.4	\$ 1,482.86	\$ 20.68	-	\$ 0.00	\$ 0.00	\$ 20.68
IP Psych Hospital - All Other	Days	930.4	748.01	57.99	-	-	-	57.99
IP General Hospital - MH/SA	Days	47.3	2,414.57	9.52	2.0	7,577.80	1.23	10.76
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	96.2	70.71	0.57	5.1	608.00	0.26	0.82
Assessment	Procedures	80.2	215.42	1.44	9.8	606.74	0.49	1.93
Crisis Services	Procedures	30.1	105.65	0.27	21.1	608.24	1.07	1.34
Medication Services	Procedures	265.9	24.73	0.55	2.0	608.20	0.10	0.65
Methadone Medication Services	Procedures	-	-	-	-	-	-	-
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	1,491.2	93.76	11.65	122.4	599.29	6.11	17.76
Family Therapy OP	Procedures	492.0	109.66	4.50	22.7	593.15	1.12	5.62
Group Therapy OP	Procedures	1,042.6	80.84	7.02	15.3	582.61	0.74	7.76
SBIRT	Procedures	-	-	-	2.3	611.67	0.12	0.12
Substance Abuse Residential	Days	-	-	-	9.0	603.00	0.45	0.45
Children's Residential	Days	7,547.5	189.45	119.15	3.5	170.00	0.05	119.20
RPTC - In State	Days	1,493.2	328.27	40.85	-	-	-	40.85
RPTC - Out of State	Days	4,031.3	379.45	127.47	-	-	-	127.47
Detoxification	Procedures	-	-	-	-	-	-	-
Medical Evaluation	Procedures	39.1	232.58	0.76	0.4	221.17	0.01	0.77
Psychological Testing	Procedures	238.6	565.44	11.24	1.2	603.00	0.06	11.30
Peer Support Services	Units	657.4	17.00	0.93	-	-	-	0.93
Psychosocial Rehabilitation Services	Procedures	5,905.4	229.75	113.06	415.3	608.43	21.06	134.12
BH Case Management	Units	3,653.1	16.04	4.88	91.5	302.09	2.30	7.19
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	70.4	71.16	0.42	11.3	610.17	0.58	0.99
Other Professional MH/SA	Visits	227.2	38.62	0.73	24.2	609.40	1.23	1.96
Subtotal – Behavioral Health		28,506.5	\$ 224.66	\$ 533.69	759.1	\$ 584.74	\$ 36.99	\$ 570.68
Total All Services		80,368.5	\$ 214.01	\$ 1,433.33	3,710.6	\$ 420.98	\$ 130.17	\$ 1,563.50

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix C - Detailed Summaries - Statewide by Population and Rate Cell

Fiscal Year:		SFY 2017						
Population:		Waiver/Institutional						
Rate Cell:		Adult						
Region:		Statewide						
Member Months:		26,563						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	953.7	\$ 3,061.10	\$ 243.27	208.7	\$ 3,125.75	\$ 54.36	\$ 297.63
Inpatient Maternity Delivery	Days	-	-	-	2.3	3,335.00	0.63	0.63
Inpatient Well Newborn	Days	-	-	-	-	-	-	-
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal – Inpatient Hospital		953.7	\$ 3,061.10	\$ 243.27	211.0	\$ 3,127.99	\$ 54.99	\$ 298.26
Outpatient Hospital								
Outpatient Emergency Room	Visits	676.3	\$ 624.42	\$ 35.19	129.7	\$ 568.91	\$ 6.15	\$ 41.34
Outpatient Surgery	Visits	126.9	2,166.83	22.92	13.6	935.98	1.06	23.98
Outpatient Radiology	Procedures	387.2	207.14	6.68	41.1	496.68	1.70	8.38
Outpatient Pathology/Lab	Procedures	1,617.3	18.78	2.53	202.4	488.42	8.24	10.77
Outpatient Pharmacy	Procedures	868.7	214.37	15.52	7.2	339.10	0.20	15.72
Other Outpatient	Procedures	5,446.4	123.83	56.20	889.1	246.97	18.30	74.50
Subtotal – Outpatient Hospital		9,122.8	\$ 182.90	\$ 139.04	1,283.0	\$ 333.39	\$ 35.64	\$ 174.69
Professional								
Inpatient and Outpatient Surgery	Procedures	1,152.4	\$ 189.20	\$ 18.17	100.7	\$ 272.00	\$ 2.28	\$ 20.45
Anesthesia	Procedures	232.2	223.56	4.33	37.9	309.20	0.98	5.30
Inpatient Visits	Visits	2,337.4	135.03	26.30	236.7	277.73	5.48	31.78
Emergency Room	Visits	917.1	129.37	9.89	220.0	149.84	2.75	12.63
Office/Home Visits/Consults	Visits	4,619.2	81.23	31.27	343.3	86.04	2.46	33.73
Maternity	Procedures	-	-	-	4.1	301.44	0.10	0.10
Pathology/Lab	Procedures	2,223.5	18.84	3.49	28.5	32.96	0.08	3.57
Radiology	Procedures	2,662.7	80.35	17.83	453.6	31.01	1.17	19.00
Office Administered Drugs	Procedures	808.6	206.21	13.90	7.2	39.11	0.02	13.92
FQHC/RHC/Tribal Clinic	Visits	660.0	191.60	10.54	899.9	359.46	26.96	37.49
Physical Exams	Visits	66.9	51.47	0.29	1.4	31.62	0.00	0.29
Therapy	Visits	1,413.5	103.00	12.13	1.4	7.61	0.00	12.13
Vision	Visits	686.2	83.14	4.75	8.1	117.16	0.08	4.83
Other Professional	Procedures	11,645.8	39.52	38.35	130.1	59.24	0.64	38.99
Telemedicine	Procedures	12.2	116.35	0.12	19.9	169.56	0.28	0.40
Subtotal – Professional		29,437.8	\$ 78.00	\$ 191.35	2,492.8	\$ 208.39	\$ 43.29	\$ 234.64
Pharmacy								
Psychotropic Drugs	Scripts	4,693.7	\$ 27.38	\$ 10.71	1,097.8	\$ 19.70	\$ 1.80	\$ 12.51
Opioid Drugs	Scripts	939.2	73.47	5.75	78.2	9.21	0.06	5.81
All Other Drugs	Scripts	18,313.3	66.66	101.73	3,508.8	55.73	16.30	118.03
Subtotal – Pharmacy		23,946.2	\$ 59.23	\$ 118.19	4,684.7	\$ 46.51	\$ 18.16	\$ 136.35
Ancillary								
Ground Transportation	Trips	8,007.4	\$ 103.61	\$ 69.14	0.9	\$ 120.44	\$ 0.01	\$ 69.15
Air Transportation	Trips	354.2	720.19	21.26	0.9	2,326.29	0.18	21.43
Accommodations	Claims	105.3	301.08	2.64	-	-	-	2.64
DME/Prosthetics	Procedures	19,257.9	85.00	136.41	-	-	-	136.41
Dental	Procedures	2,091.6	137.17	23.91	256.6	248.01	5.30	29.21
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		29,816.4	\$ 101.96	\$ 253.35	258.4	\$ 254.83	\$ 5.49	\$ 258.84
LTSS								
Hospice	Days	101.6	\$ 443.64	\$ 3.76	-	\$ 0.00	\$ 0.00	\$ 3.76
Nursing Home	Days	235.8	615.55	12.10	24.8	3,331.36	6.90	18.99
Skilled Nursing Facility	Days	36,480.2	627.01	1,906.13	2,377.1	1,110.40	219.97	2,126.09
HCBS	Procedures	317,842.6	176.42	4,672.93	26.2	423.45	0.92	4,673.86
Case Management	Procedures	9,214.0	242.60	186.27	418.3	275.88	9.62	195.89
Personal Care	Procedures	73,023.2	103.64	630.69	-	-	-	630.69
Subtotal – LTSS		436,897.5	\$ 203.58	\$ 7,411.88	2,846.5	\$ 1,000.82	\$ 237.40	\$ 7,649.28
Behavioral Health								
IP Psych Hospital - API	Days	1.8	\$ 1,302.00	\$ 0.20	-	\$ 0.00	\$ 0.00	\$ 0.20
IP Psych Hospital - All Other	Days	-	-	-	-	-	-	-
IP General Hospital - MH/SA	Days	10.4	2,126.26	1.84	-	-	-	1.84
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	48.8	84.02	0.34	4.5	507.13	0.19	0.53
Assessment	Procedures	33.4	202.55	0.56	3.2	612.29	0.16	0.73
Crisis Services	Procedures	607.2	169.54	8.58	19.0	611.60	0.97	9.54
Medication Services	Procedures	35.7	71.18	0.21	3.2	608.57	0.16	0.37
Methadone Medication Services	Procedures	-	-	-	-	-	-	-
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	671.3	69.15	3.87	47.9	597.82	2.39	6.25
Family Therapy OP	Procedures	64.6	80.54	0.43	3.6	360.85	0.11	0.54
Group Therapy OP	Procedures	192.0	47.30	0.76	-	-	-	0.76
SBIRT	Procedures	-	-	-	0.9	616.00	0.05	0.05
Substance Abuse Residential	Days	-	-	-	-	-	-	-
Children's Residential	Days	-	-	-	-	-	-	-
RPTC - In State	Days	-	-	-	-	-	-	-
RPTC - Out of State	Days	-	-	-	-	-	-	-
Detoxification	Procedures	-	-	-	-	-	-	-
Medical Evaluation	Procedures	31.2	187.74	0.49	-	-	-	0.49
Psychological Testing	Procedures	28.9	446.10	1.07	-	-	-	1.07
Peer Support Services	Units	3.2	10.20	0.00	-	-	-	0.00
Psychosocial Rehabilitation Services	Procedures	2,824.4	163.77	38.55	69.6	608.91	3.53	42.08
BH Case Management	Units	1,367.0	16.08	1.83	18.5	325.46	0.50	2.33
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	14.0	84.92	0.10	1.4	611.67	0.07	0.17
Other Professional MH/SA	Visits	137.8	33.09	0.38	12.2	609.26	0.62	1.00
Subtotal – Behavioral Health		6,071.6	\$ 117.03	\$ 59.21	183.9	\$ 570.50	\$ 8.74	\$ 67.95
Total All Services		536,245.9	\$ 188.34	\$ 8,416.30	11,960.2	\$ 405.06	\$ 403.72	\$ 8,820.01

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix C - Detailed Summaries - Statewide by Population and Rate Cell

Fiscal Year:		SFY 2017						
Population:		Waiver/Institutional						
Rate Cell:		Child						
Region:		Statewide						
Member Months:		9,958						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	783.3	\$ 3,493.92	\$ 228.07	95.2	\$ 3,321.28	\$ 26.35	\$ 254.42
Inpatient Maternity Delivery	Days	2.4	3,963.21	0.80	-	-	-	0.80
Inpatient Well Newborn	Days	-	-	-	-	-	-	-
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal – Inpatient Hospital		785.7	\$ 3,495.36	\$ 228.86	95.2	\$ 3,321.28	\$ 26.35	\$ 255.21
Outpatient Hospital								
Outpatient Emergency Room	Visits	391.7	\$ 842.47	\$ 27.50	102.4	\$ 571.51	\$ 4.88	\$ 32.37
Outpatient Surgery	Visits	130.1	3,502.42	37.99	16.9	905.15	1.27	39.26
Outpatient Radiology	Procedures	210.9	228.71	4.02	44.6	516.80	1.92	5.94
Outpatient Pathology/Lab	Procedures	2,169.1	19.02	3.44	224.1	452.88	8.46	11.90
Outpatient Pharmacy	Procedures	210.9	58.67	1.03	6.0	109.40	0.05	1.09
Other Outpatient	Procedures	2,458.4	158.20	32.41	241.0	449.49	9.03	41.44
Subtotal – Outpatient Hospital		5,571.1	\$ 229.14	\$ 106.38	635.1	\$ 483.97	\$ 25.61	\$ 131.99
Professional								
Inpatient and Outpatient Surgery	Procedures	454.3	\$ 435.90	\$ 16.50	38.6	\$ 412.17	\$ 1.32	\$ 17.83
Anesthesia	Procedures	202.5	521.95	8.81	25.3	464.39	0.98	9.79
Inpatient Visits	Visits	713.4	377.47	22.44	114.5	446.64	4.26	26.70
Emergency Room	Visits	445.9	195.51	7.26	94.0	165.49	1.30	8.56
Office/Home Visits/Consults	Visits	3,113.9	137.97	35.80	224.1	121.03	2.26	38.06
Maternity	Procedures	1.2	1,744.51	0.18	-	-	-	0.18
Pathology/Lab	Procedures	561.6	24.26	1.14	19.3	9.65	0.02	1.15
Radiology	Procedures	999.0	40.26	3.35	143.4	35.43	0.42	3.78
Office Administered Drugs	Procedures	89.2	117.23	0.87	4.8	48.98	0.02	0.89
FQHC/RHC/Tribal Clinic	Visits	121.7	244.67	2.48	877.3	588.46	43.02	45.50
Physical Exams	Visits	320.6	136.53	3.65	7.2	97.04	0.06	3.71
Therapy	Visits	23,818.4	151.03	299.77	9.6	53.40	0.04	299.81
Vision	Visits	662.8	74.24	4.10	9.6	131.98	0.11	4.21
Other Professional	Procedures	6,302.6	89.16	46.83	95.2	55.85	0.44	47.27
Telemedicine	Procedures	151.8	162.85	2.06	50.6	364.99	1.54	3.60
Subtotal – Professional		37,958.8	\$ 143.91	\$ 455.23	1,713.6	\$ 390.69	\$ 55.79	\$ 511.03
Pharmacy								
Psychotropic Drugs	Scripts	4,298.5	\$ 54.65	\$ 19.57	338.6	\$ 31.77	\$ 0.90	\$ 20.47
Opioid Drugs	Scripts	174.7	13.42	0.20	8.4	4.78	0.00	0.20
All Other Drugs	Scripts	14,787.5	154.65	190.57	2,354.7	125.18	24.56	215.14
Subtotal – Pharmacy		19,260.8	\$ 131.05	\$ 210.34	2,701.8	\$ 113.09	\$ 25.46	\$ 235.81
Ancillary								
Ground Transportation	Trips	2,506.6	\$ 61.75	\$ 12.90	-	\$ 0.00	\$ 0.00	\$ 12.90
Air Transportation	Trips	1,147.2	984.31	94.10	1.2	4,263.65	0.43	94.53
Accommodations	Claims	437.4	332.10	12.11	-	-	-	12.11
DME/Prosthetics	Procedures	21,280.5	145.96	258.84	-	-	-	258.84
Dental	Procedures	3,117.5	100.86	26.20	209.7	597.76	10.45	36.65
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		28,489.3	\$ 170.23	\$ 404.15	210.9	\$ 618.71	\$ 10.87	\$ 415.02
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Nursing Home	Days	6,719.5	41.53	23.26	-	-	-	23.26
Skilled Nursing Facility	Days	32.5	368.45	1.00	-	-	-	1.00
HCBS	Procedures	247,852.6	194.89	4,025.37	16.9	571.99	0.80	4,026.18
Case Management	Procedures	19,427.1	172.06	278.55	324.2	352.97	9.54	288.08
Personal Care	Procedures	18,200.3	122.96	186.49	-	-	-	186.49
Subtotal – LTSS		292,232.1	\$ 185.39	\$ 4,514.67	341.0	\$ 363.81	\$ 10.34	\$ 4,525.01
Behavioral Health								
IP Psych Hospital - API	Days	212.1	\$ 1,281.01	\$ 22.64	-	\$ 0.00	\$ 0.00	\$ 22.64
IP Psych Hospital - All Other	Days	195.2	750.89	12.22	-	-	-	12.22
IP General Hospital - MH/SA	Days	-	-	-	-	-	-	-
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	59.0	73.49	0.36	1.2	603.00	0.06	0.42
Assessment	Procedures	47.0	208.76	0.82	7.2	587.79	0.35	1.17
Crisis Services	Procedures	3,197.1	247.67	65.99	4.8	578.17	0.23	66.22
Medication Services	Procedures	44.6	75.30	0.28	-	-	-	0.28
Methadone Medication Services	Procedures	-	-	-	-	-	-	-
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	1,119.5	88.31	8.24	60.3	575.45	2.89	11.13
Family Therapy OP	Procedures	312.1	95.31	2.48	7.2	607.33	0.37	2.84
Group Therapy OP	Procedures	354.3	80.60	2.38	4.8	612.75	0.25	2.63
SBIRT	Procedures	-	-	-	2.4	588.00	0.12	0.12
Substance Abuse Residential	Days	-	-	-	-	-	-	-
Children's Residential	Days	3,892.4	167.42	54.31	-	-	-	54.31
RPTC - In State	Days	571.2	315.64	15.02	-	-	-	15.02
RPTC - Out of State	Days	867.7	423.59	30.63	-	-	-	30.63
Detoxification	Procedures	-	-	-	-	-	-	-
Medical Evaluation	Procedures	31.3	237.05	0.62	-	-	-	0.62
Psychological Testing	Procedures	209.7	557.05	9.73	2.4	410.80	0.08	9.82
Peer Support Services	Units	-	-	-	-	-	-	-
Psychosocial Rehabilitation Services	Procedures	4,088.8	195.81	66.72	112.1	594.74	5.55	72.27
BH Case Management	Units	3,550.2	15.90	4.70	1.2	603.00	0.06	4.77
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	124.1	68.01	0.70	6.0	608.20	0.31	1.01
Other Professional MH/SA	Visits	191.6	39.34	0.63	8.4	603.66	0.42	1.05
Subtotal – Behavioral Health		19,068.0	\$ 187.83	\$ 298.47	218.1	\$ 588.44	\$ 10.70	\$ 309.16
Total All Services		403,365.8	\$ 184.99	\$ 6,218.10	5,915.7	\$ 334.95	\$ 165.13	\$ 6,383.23

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska, Department of Health and Social Services
 Statewide Databook- Appendix C
 SFY 2016 and SFY 2017 Data Book - Detailed Summary

Fiscal Year:		SFY 2016						
Population:		Excluded-Dual						
Rate Cell:		All Rate Cells						
Region:		Statewide						
Member Months:		141,145						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid
		Utilization per 1,000	Paid per Unit	PMPM	Utilization per 1,000	Paid per Unit	PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	136.5	\$ 2,328.36	\$ 26.49	40.1	\$ 1,289.10	\$ 4.31	\$ 30.80
Inpatient Maternity Delivery	Days	1.7	1,897.21	0.27	0.1	1,288.00	0.01	0.28
Inpatient Well Newborn	Days	-	-	-	-	-	-	-
Other Inpatient	Days	4.5	25.45	0.01	-	-	-	0.01
Subtotal - Inpatient Hospital		142.7	\$ 2,250.53	\$ 26.77	40.2	\$ 1,289.10	\$ 4.32	\$ 31.09
Outpatient Hospital								
Outpatient Emergency Room	Visits	819.9	\$ 203.74	\$ 13.92	40.6	\$ 300.88	\$ 1.02	\$ 14.94
Outpatient Surgery	Visits	135.4	477.47	5.39	7.8	517.67	0.34	5.73
Outpatient Radiology	Procedures	441.0	121.61	4.47	4.7	394.60	0.15	4.62
Outpatient Pathology/Lab	Procedures	138.8	22.77	0.26	24.6	338.44	0.69	0.96
Outpatient Pharmacy	Procedures	171.1	136.65	1.95	2.6	262.84	0.06	2.01
Other Outpatient	Procedures	3,418.4	49.04	13.97	1,599.2	123.09	16.40	30.37
Subtotal - Outpatient Hospital		5,124.7	\$ 93.57	\$ 39.96	1,679.6	\$ 133.36	\$ 18.67	\$ 58.62
Professional								
Inpatient and Outpatient Surgery	Procedures	1,318.8	\$ 77.75	\$ 8.55	196.8	\$ 91.69	\$ 1.50	\$ 10.05
Anesthesia	Procedures	221.0	91.05	1.68	48.0	91.19	0.36	2.04
Inpatient Visits	Visits	1,175.6	54.25	5.31	177.3	73.89	1.09	6.41
Emergency Room	Visits	967.3	49.98	4.03	265.6	43.31	0.96	4.99
Office/Home Visits/Consults	Visits	4,883.3	33.62	13.68	905.5	55.07	4.16	17.84
Maternity	Procedures	1.9	143.68	0.02	0.8	54.01	0.00	0.03
Pathology/Lab	Procedures	506.2	21.20	0.89	95.8	11.81	0.09	0.99
Radiology	Procedures	2,873.6	25.88	6.20	471.1	11.74	0.46	6.66
Office Administered Drugs	Procedures	991.4	75.61	6.25	24.6	28.42	0.06	6.30
FQHC/RHC/Tribal Clinic	Visits	825.1	83.70	5.76	1,315.7	73.73	8.08	13.84
Physical Exams	Visits	9.1	46.66	0.04	7.5	39.77	0.02	0.06
Therapy	Visits	1,003.1	30.60	2.56	8.0	12.14	0.01	2.57
Vision	Visits	944.9	68.74	5.41	28.9	39.00	0.09	5.51
Other Professional	Procedures	3,951.8	43.28	14.25	230.8	76.02	1.46	15.72
Telemedicine	Procedures	13.3	43.75	0.05	54.3	235.07	1.06	1.11
Subtotal - Professional		19,686.4	\$ 45.52	\$ 74.67	3,830.6	\$ 60.86	\$ 19.43	\$ 94.10
Pharmacy								
Psychotropic Drugs	Scripts	177.6	\$ 86.85	\$ 1.29	39.0	\$ 81.62	\$ 0.27	\$ 1.55
Opioid Drugs	Scripts	111.1	51.86	0.48	18.6	36.68	0.06	0.54
All Other Drugs	Scripts	1,161.9	105.08	10.17	262.4	79.49	1.74	11.91
Subtotal - Pharmacy		1,450.6	\$ 98.77	\$ 11.94	320.0	\$ 77.26	\$ 2.06	\$ 14.00
Ancillary								
Ground Transportation	Trips	4,513.9	\$ 50.73	\$ 19.08	1.4	\$ 136.88	\$ 0.02	\$ 19.10
Air Transportation	Trips	967.1	523.31	42.17	1.6	2,353.86	0.32	42.49
Accommodations	Claims	412.8	278.65	9.58	-	-	-	9.58
DME/Prosthetics	Procedures	5,778.2	53.23	25.63	-	-	-	25.63
Dental	Procedures	2,182.5	168.33	30.62	269.9	365.07	8.21	38.82
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		13,854.6	\$ 110.07	\$ 127.09	272.9	\$ 375.63	\$ 8.54	\$ 135.63
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.14	-	\$ 0.00	\$ 0.00	\$ 0.14
Nursing Home	Days	24.0	678.64	1.36	1.3	1,541.27	0.16	1.52
Skilled Nursing Facility	Days	6,783.5	533.50	301.58	946.9	907.11	71.58	373.17
HCBS	Procedures	44,242.3	172.55	636.17	1.4	394.94	0.04	636.22
Case Management	Procedures	1,303.6	236.98	25.74	59.2	285.50	1.41	27.15
Personal Care	Procedures	39,335.1	77.66	254.55	219.3	46.34	0.85	255.40
Subtotal - LTSS		91,688.5	\$ 159.61	\$ 1,219.54	1,228.1	\$ 723.51	\$ 74.05	\$ 1,293.59
Behavioral Health								
IP Psych Hospital - API	Days	11.4	\$ 1,183.85	\$ 1.12	-	\$ 0.00	\$ 0.00	\$ 1.12
IP Psych Hospital - All Other	Days	-	-	-	-	-	-	-
IP General Hospital - MH/SA	Days	11.6	2,564.25	2.49	0.5	2,319.22	0.10	2.59
OP General Hospital - MH/SA	Visits	30.3	36.50	0.09	10.8	15.06	0.01	0.11
Screening	Procedures	24.6	55.03	0.11	3.1	363.40	0.09	0.21
Assessment	Procedures	33.6	182.41	0.51	5.0	538.02	0.22	0.74
Crisis Services	Procedures	72.4	140.31	0.85	15.7	592.61	0.78	1.62
Medication Services	Procedures	687.3	30.68	1.76	38.2	600.70	1.91	3.67
Methadone Medication Services	Procedures	273.5	12.50	0.28	-	-	-	0.28
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	559.3	62.16	2.90	48.8	528.32	2.15	5.05
Family Therapy OP	Procedures	58.2	24.83	0.12	2.2	371.87	0.07	0.19
Group Therapy OP	Procedures	89.7	45.78	0.34	26.7	184.29	0.41	0.75
SBIRT	Procedures	0.1	43.80	0.00	5.6	601.85	0.28	0.28
Substance Abuse Residential	Days	35.0	215.05	0.63	5.3	601.00	0.26	0.89
Children's Residential	Days	5.1	176.70	0.08	-	-	-	0.08
RPTC - In State	Days	-	-	-	-	-	-	-
RPTC - Out of State	Days	-	-	-	-	-	-	-
Detoxification	Procedures	-	-	-	2.7	602.38	0.14	0.14
Medical Evaluation	Procedures	27.6	67.36	0.16	-	-	-	0.16
Psychological Testing	Procedures	16.7	149.77	0.21	-	-	-	0.21
Peer Support Services	Units	46.8	17.00	0.07	-	-	-	0.07
Psychosocial Rehabilitation Services	Procedures	3,791.8	195.55	61.79	404.6	601.51	20.28	82.07
BH Case Management	Units	3,152.0	15.98	4.20	71.7	172.86	1.03	5.23
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	14.9	84.61	0.10	6.9	515.77	0.30	0.40
Other Professional MH/SA	Visits	177.0	35.70	0.53	15.1	601.97	0.76	1.29
Subtotal - Behavioral Health		9,118.6	\$ 103.08	\$ 78.33	662.9	\$ 521.26	\$ 28.80	\$ 107.12
Total All Services		141,066.1	\$ 134.26	\$ 1,578.30	8,034.3	\$ 232.79	\$ 155.86	\$ 1,734.15

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska, Department of Health and Social Services
Statewide Databook- Appendix C
SFY 2016 and SFY 2017 Data Book - Detailed Summary

Fiscal Year:		SFY 2016						
Population:		Excluded-Other						
Rate Cell:		All Rate Cells						
Region:		Statewide						
Member Months:		182						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	10,227.0	\$ 2,784.69	\$ 2,373.25	-	\$ 0.00	\$ 0.00	\$ 2,373.25
Inpatient Maternity Delivery	Days	8,049.6	2,968.99	1,991.61	-	-	-	1,991.61
Inpatient Well Newborn	Days	-	-	-	-	-	-	-
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal – Inpatient Hospital		18,276.6	\$ 2,865.86	\$ 4,364.85	-	\$ 0.00	\$ 0.00	\$ 4,364.85
Outpatient Hospital								
Outpatient Emergency Room	Visits	66.0	\$ 13,658.22	\$ 75.10	725.8	\$ 730.90	\$ 44.21	\$ 119.30
Outpatient Surgery	Visits	132.0	3,235.98	35.59	-	-	0.00	35.59
Outpatient Radiology	Procedures	197.9	237.61	3.92	197.9	602.33	9.94	13.85
Outpatient Pathology/Lab	Procedures	1,517.6	21.27	2.69	2,441.3	589.59	119.95	122.64
Outpatient Pharmacy	Procedures	-	-	(0.00)	132.0	602.00	6.62	6.62
Other Outpatient	Procedures	132.0	40.82	0.45	3,497.0	354.41	103.28	103.73
Subtotal – Outpatient Hospital		2,045.4	\$ 690.77	\$ 117.74	6,993.9	\$ 487.26	\$ 283.99	\$ 401.73
Professional								
Inpatient and Outpatient Surgery	Procedures	2,441.3	\$ 808.74	\$ 164.53	1,715.5	\$ 550.41	\$ 78.69	\$ 243.22
Anesthesia	Procedures	3,694.9	752.26	231.63	132.0	327.87	3.61	235.23
Inpatient Visits	Visits	10,490.9	293.38	256.49	4,816.6	749.88	300.99	557.47
Emergency Room	Visits	791.8	217.90	14.38	593.8	163.67	8.10	22.48
Office/Home Visits/Consults	Visits	2,705.2	187.42	42.25	1,319.6	127.05	13.97	56.22
Maternity	Procedures	3,431.0	1,371.96	392.27	-	-	-	392.27
Pathology/Lab	Procedures	1,913.4	41.15	6.56	593.8	136.72	6.77	13.33
Radiology	Procedures	8,049.6	83.08	55.73	5,212.5	56.80	24.67	80.40
Office Administered Drugs	Procedures	3,431.0	43.83	12.53	66.0	33.10	0.18	12.71
FQHC/RHC/Tribal Clinic	Visits	527.8	352.44	15.50	5,212.5	234.89	102.03	117.53
Physical Exams	Visits	66.0	147.66	0.81	66.0	183.67	1.01	1.82
Therapy	Visits	1,715.5	551.98	78.91	66.0	48.23	0.27	79.17
Vision	Visits	461.9	82.99	3.19	66.0	38.13	0.21	3.40
Other Professional	Procedures	4,222.7	61.63	21.69	263.9	90.79	2.00	23.68
Telemedicine	Procedures	-	-	-	-	-	-	-
Subtotal – Professional		43,943.0	\$ 354.04	\$ 1,296.46	20,124.0	\$ 323.48	\$ 542.48	\$ 1,838.94
Pharmacy								
Psychotropic Drugs	Scripts	132.0	\$ 2.84	\$ 0.03	-	\$ 0.00	\$ 0.00	\$ 0.03
Opioid Drugs	Scripts	923.7	13.72	1.06	395.9	15.18	0.50	1.56
All Other Drugs	Scripts	4,024.8	32.67	10.96	2,639.2	34.77	7.65	18.60
Subtotal – Pharmacy		5,080.5	\$ 28.45	\$ 12.04	3,035.1	\$ 32.21	\$ 8.15	\$ 20.19
Ancillary								
Ground Transportation	Trips	66.0	\$ 19.82	\$ 0.11	-	\$ 0.00	\$ 0.00	\$ 0.11
Air Transportation	Trips	-	-	(0.00)	-	-	-	(0.00)
Accommodations	Claims	-	-	-	-	-	-	-
DME/Prosthetics	Procedures	725.8	15.74	0.95	-	-	-	0.95
Dental	Procedures	5,212.5	182.19	79.14	329.9	500.24	13.75	92.89
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		6,004.2	\$ 160.28	\$ 80.20	329.9	\$ 500.24	\$ 13.75	\$ 93.95
LTSS								
Hospice	Days	-	\$ 0.00	\$ 26.88	-	\$ 0.00	\$ 0.00	\$ 26.88
Nursing Home	Days	-	-	-	-	-	-	-
Skilled Nursing Facility	Days	3,892.8	371.60	120.55	3,958.8	1,057.38	348.83	469.38
HCBS	Procedures	1,649.5	145.97	20.07	-	-	-	20.07
Case Management	Procedures	527.8	256.35	11.28	-	-	-	11.28
Personal Care	Procedures	1,649.5	69.00	9.48	-	-	-	9.48
Subtotal – LTSS		7,719.7	\$ 292.63	\$ 188.25	3,958.8	\$ 1,057.38	\$ 348.83	\$ 537.08
Behavioral Health								
IP Psych Hospital - API	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
IP Psych Hospital - All Other	Days	-	-	-	-	-	-	-
IP General Hospital - MH/SA	Days	-	-	-	66.0	3,335.00	18.34	18.34
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	66.0	35.00	0.19	66.0	601.00	3.30	3.50
Assessment	Procedures	-	-	-	66.0	601.00	3.30	3.30
Crisis Services	Procedures	197.9	605.67	9.99	66.0	601.00	3.30	13.30
Medication Services	Procedures	66.0	75.00	0.41	66.0	601.00	3.30	3.72
Methadone Medication Services	Procedures	2,837.2	12.50	2.96	-	-	-	2.96
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	1,319.6	105.00	11.55	1,649.5	601.64	82.70	94.25
Family Therapy OP	Procedures	132.0	110.00	1.21	263.9	602.00	13.24	14.45
Group Therapy OP	Procedures	-	-	-	461.9	601.86	23.16	23.16
SBIRT	Procedures	-	-	-	-	-	-	-
Substance Abuse Residential	Days	11,414.6	166.18	158.08	20,322.0	177.79	301.09	459.16
Children's Residential	Days	3,892.8	168.39	54.63	-	-	-	54.63
RPTC - In State	Days	-	-	-	-	-	-	-
RPTC - Out of State	Days	-	-	-	-	-	-	-
Detoxification	Procedures	-	-	-	-	-	-	-
Medical Evaluation	Procedures	-	-	-	-	-	-	-
Psychological Testing	Procedures	263.9	155.33	3.42	-	-	-	3.42
Peer Support Services	Units	-	-	-	-	-	-	-
Psychosocial Rehabilitation Services	Procedures	2,639.2	99.70	21.93	4,090.8	602.65	205.44	227.37
BH Case Management	Units	12,404.3	16.00	16.54	66.0	603.00	3.32	19.85
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	66.0	48.00	0.26	-	-	-	0.26
Other Professional MH/SA	Visits	659.8	40.00	2.20	263.9	602.00	13.24	15.44
Subtotal – Behavioral Health		35,959.3	\$ 94.56	\$ 283.36	27,447.9	\$ 294.56	\$ 673.74	\$ 957.10
Total All Services		119,028.7	\$ 639.47	\$ 6,342.90	61,889.7	\$ 362.76	\$ 1,870.94	\$ 8,213.85

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska, Department of Health and Social Services
Statewide Databook- Appendix C
SFY 2016 and SFY 2017 Data Book - Detailed Summary

Fiscal Year: SFY 2016
Population: Low-Income Family
Rate Cell: All Rate Cells
Region: Statewide

Member Months: 1,320,733

Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	PMPM	Utilization per 1,000	Paid per Unit	PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	207.4	\$ 3,248.49	\$ 56.14	76.3	\$ 3,109.45	\$ 19.78	\$ 75.92
Inpatient Maternity Delivery	Days	5.2	2,945.81	1.29	4.5	3,159.06	1.17	2.46
Inpatient Well Newborn	Days	49.1	2,906.76	11.90	17.5	3,080.77	4.50	16.40
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		261.8	\$ 3,178.30	\$ 69.33	98.3	\$ 3,106.59	\$ 25.45	\$ 94.78
Outpatient Hospital								
Outpatient Emergency Room	Visits	345.7	\$ 666.01	\$ 19.19	228.9	\$ 574.67	\$ 10.96	\$ 30.15
Outpatient Surgery	Visits	57.6	2,569.36	12.33	26.1	1,031.26	2.24	14.57
Outpatient Radiology	Procedures	88.4	385.11	2.84	38.6	500.97	1.61	4.45
Outpatient Pathology/Lab	Procedures	575.7	21.20	1.02	304.4	393.57	9.98	11.00
Outpatient Pharmacy	Procedures	77.8	305.31	1.98	24.1	411.96	0.83	2.81
Other Outpatient	Procedures	186.3	174.30	2.71	246.1	525.65	10.78	13.48
Subtotal - Outpatient Hospital		1,331.5	\$ 360.99	\$ 40.05	868.1	\$ 503.22	\$ 36.40	\$ 76.46
Professional								
Inpatient and Outpatient Surgery	Procedures	224.3	\$ 396.37	\$ 7.41	51.2	\$ 454.02	\$ 1.94	\$ 9.35
Anesthesia	Procedures	70.1	456.28	2.67	26.0	445.11	0.96	3.63
Inpatient Visits	Visits	238.3	408.63	8.11	52.3	327.67	1.43	9.54
Emergency Room	Visits	353.9	170.06	5.02	126.7	130.83	1.38	6.40
Office/Home Visits/Consults	Visits	1,420.0	133.63	15.81	462.2	120.01	4.62	20.44
Maternity	Procedures	8.7	571.15	0.42	3.9	840.31	0.27	0.69
Pathology/Lab	Procedures	1,188.8	23.63	2.34	90.2	23.88	0.18	2.52
Radiology	Procedures	516.2	90.51	3.89	103.0	51.62	0.44	4.34
Office Administered Drugs	Procedures	108.8	149.40	1.36	20.0	36.90	0.06	1.42
FQHC/RHC/Tribal Clinic	Visits	215.0	292.27	5.24	729.1	597.97	36.33	41.57
Physical Exams	Visits	418.8	169.14	5.90	61.8	129.21	0.67	6.57
Therapy	Visits	735.0	146.26	8.96	6.5	59.24	0.03	8.99
Vision	Visits	516.6	99.15	4.27	9.8	97.42	0.08	4.35
Other Professional	Procedures	376.0	115.19	3.61	48.5	68.17	0.28	3.88
Telemedicine	Procedures	4.2	165.87	0.06	62.4	385.39	2.00	2.06
Subtotal - Professional		6,394.7	\$ 140.85	\$ 75.06	1,853.7	\$ 328.09	\$ 50.68	\$ 125.74
Pharmacy								
Psychotropic Drugs	Scripts	352.1	\$ 49.24	\$ 1.44	70.6	\$ 24.64	\$ 0.14	\$ 1.59
Opioid Drugs	Scripts	314.4	59.07	1.55	74.4	19.33	0.12	1.67
All Other Drugs	Scripts	2,288.4	102.29	19.51	914.0	57.64	4.39	23.90
Subtotal - Pharmacy		2,954.8	\$ 91.37	\$ 22.50	1,059.0	\$ 52.75	\$ 4.65	\$ 27.15
Ancillary								
Ground Transportation	Trips	1,324.0	\$ 40.93	\$ 4.52	0.6	\$ 307.24	\$ 0.02	\$ 4.53
Air Transportation	Trips	520.8	628.48	27.28	1.1	8,039.31	0.71	27.99
Accommodations	Claims	177.6	264.39	3.91	-	-	-	3.91
DME/Prosthetics	Procedures	214.0	166.65	2.97	0.1	51.32	0.00	2.97
Dental	Procedures	3,240.2	112.97	30.50	402.4	550.78	18.47	48.97
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		5,476.6	\$ 151.58	\$ 69.18	404.2	\$ 569.98	\$ 19.20	\$ 88.38
LTSS								
Hospice	Days	0.1	\$ 6,276.93	\$ 0.04	-	\$ 0.00	\$ 0.00	\$ 0.04
Nursing Home	Days	3.7	522.78	0.16	0.1	3,335.00	0.02	0.18
Skilled Nursing Facility	Days	2.1	695.73	0.12	-	-	-	0.12
HCBS	Procedures	50.1	284.76	1.19	0.1	201.66	0.00	1.19
Case Management	Procedures	45.1	295.04	1.11	7.0	303.78	0.18	1.29
Personal Care	Procedures	91.3	62.05	0.47	-	-	-	0.47
Subtotal - LTSS		192.4	\$ 192.72	\$ 3.09	7.2	\$ 333.44	\$ 0.20	\$ 3.29
Behavioral Health								
IP Psych Hospital - API	Days	19.3	\$ 1,319.49	\$ 2.12	-	\$ 0.00	\$ 0.00	\$ 2.12
IP Psych Hospital - All Other	Days	164.2	714.45	9.78	-	-	-	9.78
IP General Hospital - MH/SA	Days	24.1	2,751.23	5.53	1.5	3,711.33	0.47	6.00
OP General Hospital - MH/SA	Visits	0.1	120.90	0.00	0.0	10.46	0.00	0.00
Screening	Procedures	20.0	34.99	0.06	4.8	600.38	0.24	0.30
Assessment	Procedures	31.7	214.71	0.57	9.5	595.31	0.47	1.04
Crisis Services	Procedures	6.2	129.58	0.07	9.9	596.47	0.49	0.56
Medication Services	Procedures	115.5	28.82	0.28	1.6	584.29	0.08	0.35
Methadone Medication Services	Procedures	167.1	12.50	0.17	-	-	-	0.17
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	355.7	92.84	2.75	53.7	597.36	2.67	5.42
Family Therapy OP	Procedures	108.6	102.27	0.93	11.2	588.82	0.55	1.47
Group Therapy OP	Procedures	279.3	77.94	1.81	10.9	595.66	0.54	2.36
SBIRT	Procedures	0.1	44.06	0.00	4.0	599.16	0.20	0.20
Substance Abuse Residential	Days	95.9	248.35	1.99	98.6	424.37	3.49	5.47
Children's Residential	Days	927.5	176.07	13.61	114.1	320.16	3.04	16.65
RPTC - In State	Days	358.9	321.31	9.61	-	-	-	9.61
RPTC - Out of State	Days	230.2	360.46	6.92	-	-	-	6.92
Detoxification	Procedures	-	-	-	1.1	602.05	0.06	0.06
Medical Evaluation	Procedures	11.2	246.20	0.23	0.0	400.36	0.00	0.23
Psychological Testing	Procedures	80.1	290.62	1.94	0.9	432.15	0.03	1.97
Peer Support Services	Units	10.4	17.00	0.01	0.1	150.50	0.00	0.02
Psychosocial Rehabilitation Services	Procedures	1,528.6	186.88	23.81	107.0	600.78	5.36	29.16
BH Case Management	Units	623.0	15.97	0.83	18.6	267.10	0.41	1.24
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	10.1	106.07	0.09	2.3	591.74	0.11	0.20
Other Professional MH/SA	Visits	59.4	41.37	0.20	11.2	600.96	0.56	0.77
Subtotal - Behavioral Health		5,227.4	\$ 191.21	\$ 83.30	461.0	\$ 488.74	\$ 18.78	\$ 102.07
Total All Services		21,839.1	\$ 199.19	\$ 362.50	4,751.5	\$ 392.38	\$ 155.37	\$ 517.87

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska, Department of Health and Social Services
Statewide Databook- Appendix C
SFY 2016 and SFY 2017 Data Book - Detailed Summary

Fiscal Year:		SFY 2016						
Population:		Medicaid Expansion						
Rate Cell:		All Rate Cells						
Region:		Statewide						
Member Months:		157,857						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	1,081.0	\$ 2,876.79	\$ 259.15	363.2	\$ 3,142.02	\$ 95.10	\$ 354.25
Inpatient Maternity Delivery	Days	3.0	3,505.38	0.87	1.7	3,297.82	0.46	1.33
Inpatient Well Newborn	Days	-	-	-	-	-	-	-
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal – Inpatient Hospital		1,083.9	\$ 2,878.50	\$ 260.01	364.9	\$ 3,142.73	\$ 95.56	\$ 355.57
Outpatient Hospital								
Outpatient Emergency Room	Visits	984.4	\$ 959.60	\$ 78.72	463.4	\$ 557.31	\$ 21.52	\$ 100.24
Outpatient Surgery	Visits	159.4	2,701.76	35.89	65.5	941.17	5.13	41.02
Outpatient Radiology	Procedures	342.4	457.42	13.05	80.0	507.50	3.39	16.44
Outpatient Pathology/Lab	Procedures	1,635.2	21.84	2.98	467.7	421.64	16.43	19.41
Outpatient Pharmacy	Procedures	241.7	197.61	3.98	51.2	404.34	1.72	5.70
Other Outpatient	Procedures	791.2	157.82	10.41	501.9	479.21	20.04	30.45
Subtotal – Outpatient Hospital		4,154.2	\$ 418.91	\$ 145.02	1,629.8	\$ 502.49	\$ 68.24	\$ 213.27
Professional								
Inpatient and Outpatient Surgery	Procedures	760.0	\$ 529.52	\$ 33.53	190.1	\$ 554.28	\$ 8.78	\$ 42.32
Anesthesia	Procedures	185.3	502.93	7.77	71.8	459.26	2.75	10.52
Inpatient Visits	Visits	802.2	315.95	21.12	170.3	442.44	6.28	27.40
Emergency Room	Visits	1,038.3	202.68	17.54	385.8	166.78	5.36	22.90
Office/Home Visits/Consults	Visits	2,317.5	151.37	29.23	496.1	138.29	5.72	34.95
Maternity	Procedures	6.2	510.40	0.27	1.1	828.70	0.08	0.34
Pathology/Lab	Procedures	4,311.8	24.66	8.86	90.8	78.23	0.59	9.45
Radiology	Procedures	2,085.3	140.09	24.34	529.5	47.19	2.08	26.43
Office Administered Drugs	Procedures	390.3	257.40	8.37	11.8	44.80	0.04	8.42
FQHC/RHC/Tribal Clinic	Visits	855.7	288.24	20.55	1,279.8	605.22	64.55	85.10
Physical Exams	Visits	52.9	68.45	0.30	5.5	45.80	0.02	0.32
Therapy	Visits	478.5	150.59	6.01	10.3	73.23	0.06	6.07
Vision	Visits	587.2	107.51	5.26	20.0	159.62	0.27	5.53
Other Professional	Procedures	791.6	125.09	8.25	135.3	122.28	1.38	9.63
Telemedicine	Procedures	8.3	124.24	0.09	43.9	273.28	1.00	1.09
Subtotal – Professional		14,671.2	\$ 156.63	\$ 191.49	3,442.2	\$ 344.99	\$ 98.96	\$ 290.45
Pharmacy								
Psychotropic Drugs	Scripts	854.8	\$ 46.54	\$ 3.32	325.5	\$ 20.88	\$ 0.57	\$ 3.88
Opioid Drugs	Scripts	1,133.6	45.89	4.34	302.9	26.89	0.68	5.01
All Other Drugs	Scripts	5,492.5	117.89	53.96	2,598.5	80.59	17.45	71.41
Subtotal – Pharmacy		7,480.9	\$ 98.82	\$ 61.61	3,226.8	\$ 69.53	\$ 18.70	\$ 80.30
Ancillary								
Ground Transportation	Trips	1,626.5	\$ 106.21	\$ 14.40	1.1	\$ 319.69	\$ 0.03	\$ 14.42
Air Transportation	Trips	364.1	1,090.17	33.07	1.9	10,066.27	1.59	34.67
Accommodations	Claims	191.3	277.55	4.42	-	-	-	4.42
DME/Prosthetics	Procedures	436.6	159.82	5.82	0.2	29.12	0.00	5.82
Dental	Procedures	3,245.0	204.80	55.38	318.5	386.10	10.25	65.63
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		5,863.4	\$ 231.44	\$ 113.09	321.6	\$ 442.91	\$ 11.87	\$ 124.96
LTSS								
Hospice	Days	1.4	\$ 8,034.44	\$ 0.92	-	\$ 0.00	\$ 0.00	\$ 0.92
Nursing Home	Days	28.8	629.92	1.51	8.7	3,259.66	2.35	3.87
Skilled Nursing Facility	Days	145.8	699.68	8.50	-	-	-	8.50
HCBS	Procedures	146.3	164.73	2.01	-	-	-	2.01
Case Management	Procedures	1.7	241.61	0.04	0.6	358.74	0.02	0.05
Personal Care	Procedures	145.4	60.32	0.73	-	-	-	0.73
Subtotal – LTSS		469.5	\$ 350.29	\$ 13.70	9.3	\$ 3,069.43	\$ 2.37	\$ 16.08
Behavioral Health								
IP Psych Hospital - API	Days	2.0	\$ 1,313.14	\$ 0.22	-	\$ 0.00	\$ 0.00	\$ 0.22
IP Psych Hospital - All Other	Days	-	-	-	-	-	-	-
IP General Hospital - MH/SA	Days	129.0	2,921.00	31.40	3.8	3,874.51	1.23	32.63
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	60.5	35.57	0.18	13.6	599.62	0.68	0.86
Assessment	Procedures	76.0	203.23	1.29	21.3	597.15	1.06	2.35
Crisis Services	Procedures	19.8	140.42	0.23	25.0	602.11	1.25	1.49
Medication Services	Procedures	77.5	48.22	0.31	16.8	600.04	0.84	1.15
Methadone Medication Services	Procedures	722.8	12.50	0.75	-	-	-	0.75
Other Opioid Medication Services	Procedures	0.1	15.99	0.00	-	-	-	0.00
Individual Therapy OP	Procedures	281.0	94.36	2.21	102.3	601.14	5.13	7.34
Family Therapy OP	Procedures	35.6	113.89	0.34	1.4	440.73	0.05	0.39
Group Therapy OP	Procedures	171.8	70.15	1.00	16.3	594.66	0.81	1.81
SBIRT	Procedures	1.4	43.80	0.00	13.1	602.52	0.66	0.66
Substance Abuse Residential	Days	623.9	208.88	10.86	470.8	391.35	15.35	26.21
Children's Residential	Days	-	-	-	-	-	-	-
RPTC - In State	Days	-	-	-	-	-	-	-
RPTC - Out of State	Days	2.3	366.00	0.07	-	-	-	0.07
Detoxification	Procedures	-	-	-	42.4	602.46	2.13	2.13
Medical Evaluation	Procedures	31.8	255.34	0.68	1.5	602.80	0.08	0.75
Psychological Testing	Procedures	19.4	794.93	1.28	1.3	588.81	0.06	1.35
Peer Support Services	Units	14.7	16.77	0.02	-	-	-	0.02
Psychosocial Rehabilitation Services	Procedures	842.9	98.76	6.94	328.6	601.52	16.47	23.41
BH Case Management	Units	1,016.1	16.00	1.35	104.4	245.35	2.13	3.49
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	20.2	126.35	0.21	6.6	596.59	0.33	0.54
Other Professional MH/SA	Visits	113.4	40.69	0.38	27.7	602.48	1.39	1.77
Subtotal – Behavioral Health		4,262.2	\$ 168.19	\$ 59.74	1,196.8	\$ 497.78	\$ 49.64	\$ 109.38
Total All Services		37,985.4	\$ 266.84	\$ 844.66	10,191.3	\$ 406.64	\$ 345.35	\$ 1,190.01

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska, Department of Health and Social Services
Statewide Databook- Appendix C
SFY 2016 and SFY 2017 Data Book - Detailed Summary

Fiscal Year:		SFY 2016						
Population:		Pregnant Women						
Rate Cell:		All Rate Cells						
Region:		Statewide						
Member Months:		52,722						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid
		Utilization per 1,000	Paid per Unit	PMPM	Utilization per 1,000	Paid per Unit	PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	351.2	\$ 2,694.23	\$ 78.85	98.8	\$ 3,131.45	\$ 25.78	\$ 104.63
Inpatient Maternity Delivery	Days	1,380.7	2,818.91	324.33	533.7	3,104.40	138.08	462.41
Inpatient Well Newborn	Days	-	-	-	-	-	-	-
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal – Inpatient Hospital		1,731.9	\$ 2,793.62	\$ 403.18	632.5	\$ 3,108.63	\$ 163.86	\$ 567.04
Outpatient Hospital								
Outpatient Emergency Room	Visits	972.1	\$ 752.64	\$ 60.97	471.8	\$ 613.86	\$ 24.14	\$ 85.11
Outpatient Surgery	Visits	38.5	2,788.79	8.94	19.1	846.27	1.35	10.29
Outpatient Radiology	Procedures	532.4	283.94	12.60	404.2	518.19	17.46	30.05
Outpatient Pathology/Lab	Procedures	4,272.7	23.92	8.52	2,139.7	370.75	66.11	74.63
Outpatient Pharmacy	Procedures	358.7	66.71	1.99	72.6	283.89	1.72	3.71
Other Outpatient	Procedures	896.1	171.25	12.79	771.4	530.19	34.08	46.87
Subtotal – Outpatient Hospital		7,070.4	\$ 179.57	\$ 105.80	3,878.9	\$ 448.11	\$ 144.85	\$ 250.65
Professional								
Inpatient and Outpatient Surgery	Procedures	234.4	\$ 320.09	\$ 6.25	57.8	\$ 309.94	\$ 1.49	\$ 7.75
Anesthesia	Procedures	537.8	688.45	30.86	131.8	683.95	7.51	38.37
Inpatient Visits	Visits	483.9	210.60	8.49	417.4	150.24	5.23	13.72
Emergency Room	Visits	768.2	198.75	12.72	245.6	160.32	3.28	16.00
Office/Home Visits/Consults	Visits	6,660.7	125.13	69.45	1,004.2	110.98	9.29	78.74
Maternity	Procedures	1,548.4	705.49	91.03	549.4	775.36	35.50	126.53
Pathology/Lab	Procedures	7,919.4	23.28	15.37	249.5	38.61	0.80	16.17
Radiology	Procedures	2,755.9	134.55	30.90	745.9	87.26	5.42	36.32
Office Administered Drugs	Procedures	302.3	60.38	1.52	32.8	43.21	0.12	1.64
FQHC/RHC/Tribal Clinic	Visits	544.7	289.17	13.13	2,891.3	592.56	142.77	155.90
Physical Exams	Visits	306.4	54.82	1.40	12.7	50.03	0.05	1.45
Therapy	Visits	305.0	133.22	3.39	72.2	55.50	0.33	3.72
Vision	Visits	452.0	109.91	4.14	8.9	86.63	0.06	4.20
Other Professional	Procedures	607.3	223.82	11.33	78.8	57.68	0.38	11.70
Telemedicine	Procedures	1.6	202.03	0.03	28.7	423.14	1.01	1.04
Subtotal – Professional		23,427.9	\$ 153.66	\$ 300.00	6,526.9	\$ 392.08	\$ 213.26	\$ 513.26
Pharmacy								
Psychotropic Drugs	Scripts	324.1	\$ 28.97	\$ 0.78	93.3	\$ 14.17	\$ 0.11	\$ 0.89
Opioid Drugs	Scripts	737.2	29.29	1.80	164.3	14.93	0.20	2.00
All Other Drugs	Scripts	3,352.7	61.81	17.27	1,964.5	50.72	8.30	25.57
Subtotal – Pharmacy		4,414.0	\$ 53.97	\$ 19.85	2,222.1	\$ 46.54	\$ 8.62	\$ 28.47
Ancillary								
Ground Transportation	Trips	4,132.9	\$ 30.88	\$ 10.64	4.6	\$ 327.07	\$ 0.12	\$ 10.76
Air Transportation	Trips	1,139.2	672.67	63.86	8.9	8,455.51	6.25	70.11
Accommodations	Claims	875.8	527.70	38.52	-	-	-	38.52
DME/Prosthetics	Procedures	77.6	119.83	0.78	-	-	-	0.78
Dental	Procedures	2,312.3	157.31	30.31	404.7	375.53	12.66	42.98
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		8,537.8	\$ 202.53	\$ 144.10	418.1	\$ 546.54	\$ 19.04	\$ 163.14
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Nursing Home	Days	-	-	-	-	-	-	-
Skilled Nursing Facility	Days	1.4	972.17	0.11	-	-	-	0.11
HCBS	Procedures	32.3	79.10	0.21	-	-	-	0.21
Case Management	Procedures	-	-	-	-	-	-	-
Personal Care	Procedures	82.6	97.68	0.67	-	-	-	0.67
Subtotal – LTSS		116.3	\$ 102.79	\$ 1.00	-	\$ 0.00	\$ 0.00	\$ 1.00
Behavioral Health								
IP Psych Hospital - API	Days	4.6	\$ 1,319.13	\$ 0.50	-	\$ 0.00	\$ 0.00	\$ 0.50
IP Psych Hospital - All Other	Days	-	-	-	-	-	-	-
IP General Hospital - MH/SA	Days	15.7	2,981.31	3.90	0.2	3,335.00	0.06	3.97
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	24.6	35.51	0.07	6.8	602.53	0.34	0.42
Assessment	Procedures	32.5	182.79	0.50	18.2	594.16	0.90	1.40
Crisis Services	Procedures	7.3	130.54	0.08	22.5	600.57	1.13	1.21
Medication Services	Procedures	24.8	75.00	0.16	3.2	602.43	0.16	0.32
Methadone Medication Services	Procedures	866.3	12.50	0.90	-	-	-	0.90
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	128.1	94.12	1.01	74.0	583.88	3.60	4.60
Family Therapy OP	Procedures	17.3	110.00	0.16	7.7	571.74	0.37	0.53
Group Therapy OP	Procedures	34.1	59.27	0.17	29.6	594.80	1.47	1.64
SBIRT	Procedures	-	-	-	12.5	600.03	0.63	0.63
Substance Abuse Residential	Days	119.0	261.09	2.59	812.6	276.79	18.74	21.33
Children's Residential	Days	46.0	155.76	0.60	-	-	-	0.60
RPTC - In State	Days	23.7	445.04	0.88	-	-	-	0.88
RPTC - Out of State	Days	-	-	-	-	-	-	-
Detoxification	Procedures	-	-	-	1.4	603.00	0.07	0.07
Medical Evaluation	Procedures	15.9	272.67	0.36	0.2	265.27	0.01	0.37
Psychological Testing	Procedures	2.0	845.91	0.14	0.7	191.29	0.01	0.16
Peer Support Services	Units	10.0	17.00	0.01	-	-	-	0.01
Psychosocial Rehabilitation Services	Procedures	437.2	166.31	6.06	151.8	601.12	7.60	13.66
BH Case Management	Units	222.6	16.00	0.30	55.1	206.48	0.95	1.24
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	8.2	135.60	0.09	3.2	602.00	0.16	0.25
Other Professional MH/SA	Visits	46.2	40.47	0.16	18.9	607.96	0.96	1.11
Subtotal – Behavioral Health		2,086.3	\$ 107.16	\$ 18.63	1,218.6	\$ 365.85	\$ 37.15	\$ 55.78
Total All Services		47,384.5	\$ 251.36	\$ 992.56	14,897.2	\$ 472.66	\$ 586.78	\$ 1,579.34

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska, Department of Health and Social Services
 Statewide Databook- Appendix C
 SFY 2016 and SFY 2017 Data Book - Detailed Summary

Fiscal Year:		SFY 2016						
Population:		SSI/Disabled						
Rate Cell:		All Rate Cells						
Region:		Statewide						
Member Months:		140,473						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid
		Utilization per 1,000	Paid per Unit	PMPM	Utilization per 1,000	Paid per Unit	PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	722.8	\$ 2,929.53	\$ 176.45	182.0	\$ 3,013.42	\$ 45.69	\$ 222.14
Inpatient Maternity Delivery	Days	5.9	2,858.31	1.40	0.5	3,062.33	0.13	1.53
Inpatient Well Newborn	Days	-	-	-	0.2	2,926.00	0.04	0.04
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		728.7	\$ 2,928.95	\$ 177.86	182.6	\$ 3,013.47	\$ 45.86	\$ 223.72
Outpatient Hospital								
Outpatient Emergency Room	Visits	890.3	\$ 819.05	\$ 60.77	256.4	\$ 539.01	\$ 11.52	\$ 72.28
Outpatient Surgery	Visits	187.7	2,045.11	31.99	34.5	913.70	2.63	34.61
Outpatient Radiology	Procedures	438.9	369.12	13.50	50.7	488.94	2.07	15.57
Outpatient Pathology/Lab	Procedures	2,500.3	20.50	4.27	308.3	407.83	10.48	14.75
Outpatient Pharmacy	Procedures	527.3	311.32	13.68	44.9	390.58	1.46	15.14
Other Outpatient	Procedures	2,154.8	134.86	24.22	761.0	292.56	18.55	42.77
Subtotal - Outpatient Hospital		6,699.3	\$ 265.86	\$ 148.42	1,455.8	\$ 384.96	\$ 46.70	\$ 195.12
Professional								
Inpatient and Outpatient Surgery	Procedures	1,102.9	\$ 321.42	\$ 29.54	130.0	\$ 353.35	\$ 3.83	\$ 33.37
Anesthesia	Procedures	230.1	346.36	6.64	43.9	320.31	1.17	7.81
Inpatient Visits	Visits	1,026.0	234.15	20.02	163.8	330.37	4.51	24.53
Emergency Room	Visits	1,012.1	167.91	14.16	283.3	150.86	3.56	17.72
Office/Home Visits/Consults	Visits	4,529.3	110.44	41.68	521.1	106.17	4.61	46.30
Maternity	Procedures	6.8	493.64	0.28	1.5	637.03	0.08	0.36
Pathology/Lab	Procedures	3,923.8	25.45	8.32	61.3	48.48	0.25	8.57
Radiology	Procedures	2,557.9	111.57	23.78	451.2	36.58	1.38	25.16
Office Administered Drugs	Procedures	818.9	202.48	13.82	15.2	40.08	0.05	13.87
FQHC/RHC/Tribal Clinic	Visits	835.9	225.02	15.67	1,283.1	461.82	49.38	65.05
Physical Exams	Visits	138.2	95.92	1.10	5.8	47.62	0.02	1.13
Therapy	Visits	3,361.2	142.54	39.93	5.3	55.92	0.02	39.95
Vision	Visits	813.8	90.42	6.13	18.1	104.99	0.16	6.29
Other Professional	Procedures	1,984.6	90.52	14.97	158.4	115.82	1.53	16.50
Telemedicine	Procedures	21.2	162.05	0.29	37.2	322.51	1.00	1.28
Subtotal - Professional		22,362.6	\$ 126.82	\$ 236.34	3,179.2	\$ 270.07	\$ 71.55	\$ 307.89
Pharmacy								
Psychotropic Drugs	Scripts	3,235.0	\$ 64.80	\$ 17.47	876.8	\$ 35.52	\$ 2.60	\$ 20.06
Opioid Drugs	Scripts	1,655.1	63.69	8.78	243.2	26.79	0.54	9.33
All Other Drugs	Scripts	14,669.8	137.18	167.70	3,740.1	81.88	25.52	193.22
Subtotal - Pharmacy		19,559.9	\$ 118.99	\$ 193.95	4,860.1	\$ 70.76	\$ 28.66	\$ 222.61
Ancillary								
Ground Transportation	Trips	3,017.1	\$ 73.37	\$ 18.45	2.0	\$ 295.57	\$ 0.05	\$ 18.50
Air Transportation	Trips	795.9	710.39	47.12	2.5	6,505.19	1.34	48.46
Accommodations	Claims	360.6	321.25	9.65	-	-	-	9.65
DME/Prosthetics	Procedures	2,930.1	101.32	24.74	-	-	-	24.74
Dental	Procedures	2,786.0	160.82	37.34	296.4	419.55	10.36	47.70
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		9,889.7	\$ 166.59	\$ 137.30	300.9	\$ 468.84	\$ 11.76	\$ 149.05
LTSS								
Hospice	Days	5.5	\$ 4,194.62	\$ 1.91	-	\$ 0.00	\$ 0.00	\$ 1.91
Nursing Home	Days	224.5	88.08	1.65	19.2	2,979.93	4.77	6.42
Skilled Nursing Facility	Days	1,811.4	646.79	97.64	124.8	931.61	9.69	107.32
HCBS	Procedures	448.2	211.81	7.91	0.1	370.00	0.00	7.91
Case Management	Procedures	48.8	283.75	1.15	2.6	306.59	0.07	1.22
Personal Care	Procedures	20,544.0	68.84	117.86	-	-	-	117.86
Subtotal - LTSS		23,082.4	\$ 118.59	\$ 228.11	146.7	\$ 1,188.78	\$ 14.53	\$ 242.64
Behavioral Health								
IP Psych Hospital - API	Days	72.4	\$ 1,337.59	\$ 8.07	-	\$ 0.00	\$ 0.00	\$ 8.07
IP Psych Hospital - All Other	Days	200.0	707.72	11.79	-	-	-	11.79
IP General Hospital - MH/SA	Days	77.2	2,862.45	18.42	4.0	4,658.14	1.56	19.98
OP General Hospital - MH/SA	Visits	14.6	94.80	0.12	2.1	22.56	0.00	0.12
Screening	Procedures	44.5	50.33	0.19	5.7	533.56	0.25	0.44
Assessment	Procedures	59.7	209.38	1.04	10.6	587.83	0.52	1.56
Crisis Services	Procedures	21.8	141.29	0.26	25.0	595.34	1.24	1.50
Medication Services	Procedures	536.8	31.28	1.40	39.7	600.59	1.99	3.39
Methadone Medication Services	Procedures	259.7	12.50	0.27	-	-	-	0.27
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	873.2	88.70	6.45	111.0	582.69	5.39	11.84
Family Therapy OP	Procedures	171.6	97.55	1.40	5.3	449.54	0.20	1.59
Group Therapy OP	Procedures	259.3	67.90	1.47	45.6	485.18	1.84	3.31
SBIRT	Procedures	0.2	43.80	0.00	5.0	601.81	0.25	0.25
Substance Abuse Residential	Days	50.8	217.82	0.92	98.8	328.46	2.70	3.63
Children's Residential	Days	1,528.3	179.34	22.84	23.2	176.84	0.34	23.18
RPTC - In State	Days	286.3	339.54	8.10	-	-	-	8.10
RPTC - Out of State	Days	983.7	364.05	29.84	-	-	-	29.84
Detoxification	Procedures	-	-	-	11.5	602.10	0.58	0.58
Medical Evaluation	Procedures	42.3	214.68	0.76	0.8	502.47	0.03	0.79
Psychological Testing	Procedures	68.6	594.80	3.40	1.2	565.11	0.06	3.46
Peer Support Services	Units	245.5	16.98	0.35	-	-	-	0.35
Psychosocial Rehabilitation Services	Procedures	4,272.6	186.71	66.48	774.4	601.67	38.83	105.31
BH Case Management	Units	3,708.1	15.99	4.94	250.7	205.46	4.29	9.23
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	25.2	87.44	0.18	11.9	586.73	0.58	0.76
Other Professional MH/SA	Visits	195.9	39.47	0.64	26.9	603.96	1.35	2.00
Subtotal - Behavioral Health		13,998.4	\$ 162.30	\$ 189.33	1,453.5	\$ 512.00	\$ 62.02	\$ 251.34
Total All Services		96,321.0	\$ 163.37	\$ 1,311.31	11,578.8	\$ 291.30	\$ 281.08	\$ 1,592.39

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska, Department of Health and Social Services
Statewide Databook- Appendix C
SFY 2016 and SFY 2017 Data Book - Detailed Summary

Fiscal Year:		SFY 2016						
Population:		Waiver/Institutional						
Rate Cell:		All Rate Cells						
Region:		Statewide						
Member Months:		37,126						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	803.9	\$ 2,764.25	\$ 185.17	236.0	\$ 3,103.78	\$ 61.03	\$ 246.20
Inpatient Maternity Delivery	Days	0.6	3,636.15	0.20	-	-	-	0.20
Inpatient Well Newborn	Days	-	-	-	-	-	-	-
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		804.5	\$ 2,764.95	\$ 185.37	236.0	\$ 3,103.78	\$ 61.03	\$ 246.39
Outpatient Hospital								
Outpatient Emergency Room	Visits	641.6	\$ 639.62	\$ 34.20	115.7	\$ 514.73	\$ 4.96	\$ 39.16
Outpatient Surgery	Visits	150.0	2,049.82	25.62	18.1	867.19	1.31	26.93
Outpatient Radiology	Procedures	296.7	252.12	6.23	35.2	475.72	1.40	7.63
Outpatient Pathology/Lab	Procedures	1,882.8	16.93	2.66	174.5	468.09	6.81	9.46
Outpatient Pharmacy	Procedures	362.0	239.92	7.24	14.5	340.53	0.41	7.65
Other Outpatient	Procedures	5,005.7	120.13	50.11	640.3	252.78	13.49	63.60
Subtotal - Outpatient Hospital		8,338.8	\$ 181.40	\$ 126.05	998.4	\$ 341.06	\$ 28.38	\$ 154.43
Professional								
Inpatient and Outpatient Surgery	Procedures	973.5	\$ 244.61	\$ 19.84	97.0	\$ 273.49	\$ 2.21	\$ 22.05
Anesthesia	Procedures	209.8	322.94	5.65	31.0	391.30	1.01	6.66
Inpatient Visits	Visits	1,865.3	135.26	21.03	185.9	358.97	5.56	26.59
Emergency Room	Visits	798.7	128.84	8.58	176.5	142.35	2.09	10.67
Office/Home Visits/Consults	Visits	4,104.3	94.10	32.18	269.9	100.85	2.27	34.45
Maternity	Procedures	1.6	318.23	0.04	0.6	112.68	0.01	0.05
Pathology/Lab	Procedures	1,862.4	21.00	3.26	28.4	49.10	0.12	3.38
Radiology	Procedures	2,245.7	59.72	11.18	365.6	32.39	0.99	12.16
Office Administered Drugs	Procedures	570.8	117.23	5.58	1.3	19.57	0.00	5.58
FQHC/RHC/Tribal Clinic	Visits	573.4	174.85	8.35	855.2	426.84	30.42	38.78
Physical Exams	Visits	120.2	104.08	1.04	0.6	27.22	0.00	1.04
Therapy	Visits	7,250.8	153.20	92.57	3.9	13.81	0.00	92.57
Vision	Visits	704.9	77.46	4.55	10.0	125.67	0.10	4.66
Other Professional	Procedures	10,628.8	47.08	41.70	97.9	145.46	1.19	42.89
Telemedicine	Procedures	41.4	147.55	0.51	20.0	273.34	0.46	0.97
Subtotal - Professional		31,951.7	\$ 96.17	\$ 256.05	2,143.9	\$ 259.88	\$ 46.43	\$ 302.48
Pharmacy								
Psychotropic Drugs	Scripts	4,948.5	\$ 45.99	\$ 18.97	1,049.8	\$ 30.37	\$ 2.66	\$ 21.62
Opioid Drugs	Scripts	704.0	82.28	4.83	59.8	15.36	0.08	4.90
All Other Drugs	Scripts	18,433.3	81.86	125.75	3,772.6	59.02	18.55	144.30
Subtotal - Pharmacy		24,085.8	\$ 74.50	\$ 149.54	4,882.3	\$ 52.32	\$ 21.29	\$ 170.83
Ancillary								
Ground Transportation	Trips	6,576.3	\$ 101.03	\$ 55.36	0.3	\$ 120.93	\$ 0.00	\$ 55.37
Air Transportation	Trips	618.6	782.61	40.35	0.3	1,609.94	0.04	40.39
Accommodations	Claims	185.9	312.74	4.84	-	-	-	4.84
DME/Prosthetics	Procedures	19,324.4	101.75	163.85	-	-	-	163.85
Dental	Procedures	2,600.6	126.70	27.46	252.1	365.93	7.69	35.15
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		29,305.8	\$ 119.51	\$ 291.87	252.8	\$ 367.20	\$ 7.73	\$ 299.60
LTSS								
Hospice	Days	35.6	\$ 1,600.75	\$ 4.74	-	\$ 0.00	\$ 0.00	\$ 4.74
Nursing Home	Days	1,586.4	106.44	14.07	11.0	3,046.29	2.79	16.86
Skilled Nursing Facility	Days	29,175.9	523.92	1,273.82	1,623.9	1,008.60	136.49	1,410.31
HCBS	Procedures	289,646.3	177.56	4,285.80	20.4	368.12	0.62	4,286.43
Case Management	Procedures	12,110.8	201.46	203.32	388.5	293.95	9.52	212.83
Personal Care	Procedures	61,766.3	105.29	541.97	-	-	-	541.97
Subtotal - LTSS		394,321.2	\$ 192.44	\$ 6,323.72	2,043.7	\$ 877.32	\$ 149.42	\$ 6,473.14
Behavioral Health								
IP Psych Hospital - API	Days	79.8	\$ 1,141.85	\$ 7.60	-	\$ 0.00	\$ 0.00	\$ 7.60
IP Psych Hospital - All Other	Days	99.2	713.73	5.90	-	-	-	5.90
IP General Hospital - MH/SA	Days	37.2	2,567.65	7.95	1.6	2,916.00	0.39	8.35
OP General Hospital - MH/SA	Visits	18.7	36.19	0.06	0.6	63.35	0.00	0.06
Screening	Procedures	64.3	78.05	0.42	3.2	249.37	0.07	0.49
Assessment	Procedures	41.4	201.68	0.70	5.2	538.70	0.23	0.93
Crisis Services	Procedures	1,236.0	218.54	22.51	12.9	600.98	0.65	23.16
Medication Services	Procedures	65.3	59.01	0.32	2.3	602.14	0.11	0.43
Methadone Medication Services	Procedures	1.0	12.50	0.00	-	-	-	0.00
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	915.0	74.85	5.71	46.9	573.10	2.24	7.95
Family Therapy OP	Procedures	152.6	85.95	1.09	4.5	546.86	0.21	1.30
Group Therapy OP	Procedures	286.7	52.40	1.25	0.3	603.00	0.02	1.27
SBIRT	Procedures	-	-	-	1.0	603.00	0.05	0.05
Substance Abuse Residential	Days	-	-	-	2.9	601.00	0.15	0.15
Children's Residential	Days	804.8	162.59	10.90	-	-	-	10.90
RPTC - In State	Days	16.5	371.29	0.51	-	-	-	0.51
RPTC - Out of State	Days	369.1	378.84	11.65	-	-	-	11.65
Detoxification	Procedures	-	-	-	-	-	-	-
Medical Evaluation	Procedures	40.7	200.90	0.68	-	-	-	0.68
Psychological Testing	Procedures	80.2	536.67	3.58	-	-	-	3.58
Peer Support Services	Units	57.9	10.16	0.05	-	-	-	0.05
Psychosocial Rehabilitation Services	Procedures	3,763.6	178.86	56.10	72.4	596.00	3.60	59.69
BH Case Management	Units	2,548.3	15.93	3.38	30.7	183.97	0.47	3.85
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	22.3	70.16	0.13	6.5	544.23	0.29	0.42
Other Professional MH/SA	Visits	169.4	54.22	0.77	3.6	544.26	0.16	0.93
Subtotal - Behavioral Health		10,869.9	\$ 155.95	\$ 141.26	194.6	\$ 532.40	\$ 8.63	\$ 149.90
Total All Services		499,677.7	\$ 179.49	\$ 7,473.86	10,751.6	\$ 360.40	\$ 322.91	\$ 7,796.77

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska, Department of Health and Social Services
 Statewide Databook- Appendix C
 SFY 2016 and SFY 2017 Data Book - Detailed Summary

Fiscal Year:		SFY 2016						
Population:		Excluded-Dual						
Rate Cell:		None						
Region:		Statewide						
Member Months:		141,145						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	136.5	\$ 2,328.36	\$ 26.49	40.1	\$ 1,289.10	\$ 4.31	\$ 30.80
Inpatient Maternity Delivery	Days	1.7	1,897.21	0.27	0.1	1,288.00	0.01	0.28
Inpatient Well Newborn	Days	-	-	-	-	-	-	-
Other Inpatient	Days	4.5	25.45	0.01	-	-	-	0.01
Subtotal - Inpatient Hospital		142.7	\$ 2,250.53	\$ 26.77	40.2	\$ 1,289.10	\$ 4.32	\$ 31.09
Outpatient Hospital								
Outpatient Emergency Room	Visits	819.9	\$ 203.74	\$ 13.92	40.6	\$ 300.88	\$ 1.02	\$ 14.94
Outpatient Surgery	Visits	135.4	477.47	5.39	7.8	517.67	0.34	5.73
Outpatient Radiology	Procedures	441.0	121.61	4.47	4.7	394.60	0.15	4.62
Outpatient Pathology/Lab	Procedures	138.8	22.77	0.26	24.6	338.44	0.69	0.96
Outpatient Pharmacy	Procedures	171.1	136.65	1.95	2.6	262.84	0.06	2.01
Other Outpatient	Procedures	3,418.4	49.04	13.97	1,599.2	123.09	16.40	30.37
Subtotal - Outpatient Hospital		5,124.7	\$ 93.57	\$ 39.96	1,679.6	\$ 133.36	\$ 18.67	\$ 58.62
Professional								
Inpatient and Outpatient Surgery	Procedures	1,318.8	\$ 77.75	\$ 8.55	196.8	\$ 91.69	\$ 1.50	\$ 10.05
Anesthesia	Procedures	221.0	91.05	1.68	48.0	91.19	0.36	2.04
Inpatient Visits	Visits	1,175.6	54.25	5.31	177.3	73.89	1.09	6.41
Emergency Room	Visits	967.3	49.98	4.03	265.6	43.01	0.96	4.99
Office/Home Visits/Consults	Visits	4,883.3	33.62	13.68	905.5	55.07	4.16	17.84
Maternity	Procedures	1.9	143.68	0.02	0.8	54.01	0.00	0.03
Pathology/Lab	Procedures	506.2	21.20	0.89	95.8	11.81	0.09	0.99
Radiology	Procedures	2,873.6	25.88	6.20	471.1	11.74	0.46	6.66
Office Administered Drugs	Procedures	991.4	75.61	6.25	24.6	28.42	0.06	6.30
FQHC/RHC/Tribal Clinic	Visits	825.1	83.70	5.76	1,315.7	73.73	8.08	13.84
Physical Exams	Visits	9.1	46.66	0.04	7.5	39.77	0.02	0.06
Therapy	Visits	1,003.1	30.60	2.56	8.0	12.14	0.01	2.57
Vision	Visits	944.9	68.74	5.41	28.9	39.00	0.09	5.51
Other Professional	Procedures	3,951.8	43.28	14.25	230.8	76.02	1.46	15.72
Telemedicine	Procedures	13.3	43.75	0.05	54.3	235.07	1.06	1.11
Subtotal - Professional		19,686.4	\$ 45.52	\$ 74.67	3,830.6	\$ 60.86	\$ 19.43	\$ 94.10
Pharmacy								
Psychotropic Drugs	Scripts	177.6	\$ 86.85	\$ 1.29	39.0	\$ 81.62	\$ 0.27	\$ 1.55
Opioid Drugs	Scripts	111.1	51.86	0.48	18.6	36.68	0.06	0.54
All Other Drugs	Scripts	1,161.9	105.08	10.17	262.4	79.49	1.74	11.91
Subtotal - Pharmacy		1,450.6	\$ 98.77	\$ 11.94	320.0	\$ 77.26	\$ 2.06	\$ 14.00
Ancillary								
Ground Transportation	Trips	4,513.9	\$ 50.73	\$ 19.08	1.4	\$ 136.88	\$ 0.02	\$ 19.10
Air Transportation	Trips	967.1	523.31	42.17	1.6	2,353.86	0.32	42.49
Accommodations	Claims	412.8	278.65	9.58	-	-	-	9.58
DME/Prosthetics	Procedures	5,778.2	53.23	25.63	-	-	-	25.63
Dental	Procedures	2,182.5	168.33	30.62	269.9	365.07	8.21	38.82
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		13,854.6	\$ 110.07	\$ 127.09	272.9	\$ 375.63	\$ 8.54	\$ 135.63
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.14	-	\$ 0.00	\$ 0.00	\$ 0.14
Nursing Home	Days	24.0	678.64	1.36	1.3	1,541.27	0.16	1.52
Skilled Nursing Facility	Days	6,783.5	533.50	301.58	946.9	907.11	71.58	373.17
HCBS	Procedures	44,242.3	172.55	636.17	1.4	394.94	0.04	636.22
Case Management	Procedures	1,303.6	236.98	25.74	59.2	285.50	1.41	27.15
Personal Care	Procedures	39,335.1	77.66	254.55	219.3	46.34	0.85	255.40
Subtotal - LTSS		91,688.5	\$ 159.61	\$ 1,219.54	1,228.1	\$ 723.51	\$ 74.05	\$ 1,293.59
Behavioral Health								
IP Psych Hospital - API	Days	11.4	\$ 1,183.85	\$ 1.12	-	\$ 0.00	\$ 0.00	\$ 1.12
IP Psych Hospital - All Other	Days	-	-	-	-	-	-	-
IP General Hospital - MH/SA	Days	11.6	2,564.25	2.49	0.5	2,319.22	0.10	2.59
OP General Hospital - MH/SA	Visits	30.3	36.50	0.09	10.8	15.06	0.01	0.11
Screening	Procedures	24.6	55.03	0.11	3.1	363.40	0.09	0.21
Assessment	Procedures	33.6	182.41	0.51	5.0	538.02	0.22	0.74
Crisis Services	Procedures	72.4	140.31	0.85	15.7	592.61	0.78	1.62
Medication Services	Procedures	687.3	30.68	1.76	38.2	600.70	1.91	3.67
Methadone Medication Services	Procedures	273.5	12.50	0.28	-	-	-	0.28
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	559.3	62.16	2.90	48.8	528.32	2.15	5.05
Family Therapy OP	Procedures	58.2	24.83	0.12	2.2	371.87	0.07	0.19
Group Therapy OP	Procedures	89.7	45.78	0.34	26.7	184.29	0.41	0.75
SBIRT	Procedures	0.1	43.80	0.00	5.6	601.85	0.28	0.28
Substance Abuse Residential	Days	35.0	215.05	0.63	5.3	601.00	0.26	0.89
Children's Residential	Days	5.1	176.70	0.08	-	-	-	0.08
RPTC - In State	Days	-	-	-	-	-	-	-
RPTC - Out of State	Days	-	-	-	-	-	-	-
Detoxification	Procedures	-	-	-	2.7	602.38	0.14	0.14
Medical Evaluation	Procedures	27.6	67.36	0.16	-	-	-	0.16
Psychological Testing	Procedures	16.7	149.77	0.21	-	-	-	0.21
Peer Support Services	Units	46.8	17.00	0.07	-	-	-	0.07
Psychosocial Rehabilitation Services	Procedures	3,791.8	195.55	61.79	404.6	601.51	20.28	82.07
BH Case Management	Units	3,152.0	15.98	4.20	71.7	172.86	1.03	5.23
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	14.9	84.61	0.10	6.9	515.77	0.30	0.40
Other Professional MH/SA	Visits	177.0	35.70	0.53	15.1	601.97	0.76	1.29
Subtotal - Behavioral Health		9,118.6	\$ 103.08	\$ 78.33	662.9	\$ 521.26	\$ 28.80	\$ 107.12
Total All Services		141,066.1	\$ 134.26	\$ 1,578.30	8,034.3	\$ 232.79	\$ 155.86	\$ 1,734.15

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska, Department of Health and Social Services
Statewide Databook- Appendix C
SFY 2016 and SFY 2017 Data Book - Detailed Summary

Fiscal Year:		SFY 2016						
Population:		Excluded-Other						
Rate Cell:		None						
Region:		Statewide						
Member Months:		182						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	10,227.0	\$ 2,784.69	\$ 2,373.25	-	\$ 0.00	\$ 0.00	\$ 2,373.25
Inpatient Maternity Delivery	Days	8,049.6	2,968.99	1,991.61	-	-	-	1,991.61
Inpatient Well Newborn	Days	-	-	-	-	-	-	-
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal – Inpatient Hospital		18,276.6	\$ 2,865.86	\$ 4,364.85	-	\$ 0.00	\$ 0.00	\$ 4,364.85
Outpatient Hospital								
Outpatient Emergency Room	Visits	66.0	\$ 13,658.22	\$ 75.10	725.8	\$ 730.90	\$ 44.21	\$ 119.30
Outpatient Surgery	Visits	132.0	3,235.98	35.59	-	-	0.00	35.59
Outpatient Radiology	Procedures	197.9	237.61	3.92	197.9	602.33	9.94	13.85
Outpatient Pathology/Lab	Procedures	1,517.6	21.27	2.69	2,441.3	589.59	119.95	122.64
Outpatient Pharmacy	Procedures	-	-	(0.00)	132.0	602.00	6.62	6.62
Other Outpatient	Procedures	132.0	40.82	0.45	3,497.0	354.41	103.28	103.73
Subtotal – Outpatient Hospital		2,045.4	\$ 690.77	\$ 117.74	6,993.9	\$ 487.26	\$ 283.99	\$ 401.73
Professional								
Inpatient and Outpatient Surgery	Procedures	2,441.3	\$ 808.74	\$ 164.53	1,715.5	\$ 550.41	\$ 78.69	\$ 243.22
Anesthesia	Procedures	3,694.9	752.26	231.63	132.0	327.87	3.61	235.23
Inpatient Visits	Visits	10,490.9	293.38	256.49	4,816.6	749.88	300.99	557.47
Emergency Room	Visits	791.8	217.90	14.38	593.8	163.67	8.10	22.48
Office/Home Visits/Consults	Visits	2,705.2	187.42	42.25	1,319.6	127.05	13.97	56.22
Maternity	Procedures	3,431.0	1,371.96	392.27	-	-	-	392.27
Pathology/Lab	Procedures	1,913.4	41.15	6.56	593.8	136.72	6.77	13.33
Radiology	Procedures	8,049.6	83.08	55.73	5,212.5	56.80	24.67	80.40
Office Administered Drugs	Procedures	3,431.0	43.83	12.53	66.0	33.10	0.18	12.71
FQHC/RHC/Tribal Clinic	Visits	527.8	352.44	15.50	5,212.5	234.89	102.03	117.53
Physical Exams	Visits	66.0	147.66	0.81	66.0	183.67	1.01	1.82
Therapy	Visits	1,715.5	551.98	78.91	66.0	48.23	0.27	79.17
Vision	Visits	461.9	82.99	3.19	66.0	38.13	0.21	3.40
Other Professional	Procedures	4,222.7	61.63	21.69	263.9	90.79	2.00	23.68
Telemedicine	Procedures	-	-	-	-	-	-	-
Subtotal – Professional		43,943.0	\$ 354.04	\$ 1,296.46	20,124.0	\$ 323.48	\$ 542.48	\$ 1,838.94
Pharmacy								
Psychotropic Drugs	Scripts	132.0	\$ 2.84	\$ 0.03	-	\$ 0.00	\$ 0.00	\$ 0.03
Opioid Drugs	Scripts	923.7	13.72	1.06	395.9	15.18	0.50	1.56
All Other Drugs	Scripts	4,024.8	32.67	10.96	2,639.2	34.77	7.65	18.60
Subtotal – Pharmacy		5,080.5	\$ 28.45	\$ 12.04	3,035.1	\$ 32.21	\$ 8.15	\$ 20.19
Ancillary								
Ground Transportation	Trips	66.0	\$ 19.82	\$ 0.11	-	\$ 0.00	\$ 0.00	\$ 0.11
Air Transportation	Trips	-	-	(0.00)	-	-	-	(0.00)
Accommodations	Claims	-	-	-	-	-	-	-
DME/Prosthetics	Procedures	725.8	15.74	0.95	-	-	-	0.95
Dental	Procedures	5,212.5	182.19	79.14	329.9	500.24	13.75	92.89
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		6,004.2	\$ 160.28	\$ 80.20	329.9	\$ 500.24	\$ 13.75	\$ 93.95
LTSS								
Hospice	Days	-	\$ 0.00	\$ 26.88	-	\$ 0.00	\$ 0.00	\$ 26.88
Nursing Home	Days	-	-	-	-	-	-	-
Skilled Nursing Facility	Days	3,892.8	371.60	120.55	3,958.8	1,057.38	348.83	469.38
HCBS	Procedures	1,649.5	145.97	20.07	-	-	-	20.07
Case Management	Procedures	527.8	256.35	11.28	-	-	-	11.28
Personal Care	Procedures	1,649.5	69.00	9.48	-	-	-	9.48
Subtotal – LTSS		7,719.7	\$ 292.63	\$ 188.25	3,958.8	\$ 1,057.38	\$ 348.83	\$ 537.08
Behavioral Health								
IP Psych Hospital - API	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
IP Psych Hospital - All Other	Days	-	-	-	-	-	-	-
IP General Hospital - MH/SA	Days	-	-	-	66.0	3,335.00	18.34	18.34
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	66.0	35.00	0.19	66.0	601.00	3.30	3.50
Assessment	Procedures	-	-	-	66.0	601.00	3.30	3.30
Crisis Services	Procedures	197.9	605.67	9.99	66.0	601.00	3.30	13.30
Medication Services	Procedures	66.0	75.00	0.41	66.0	601.00	3.30	3.72
Methadone Medication Services	Procedures	2,837.2	12.50	2.96	-	-	-	2.96
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	1,319.6	105.00	11.55	1,649.5	601.64	82.70	94.25
Family Therapy OP	Procedures	132.0	110.00	1.21	263.9	602.00	13.24	14.45
Group Therapy OP	Procedures	-	-	-	461.9	601.86	23.16	23.16
SBIRT	Procedures	-	-	-	-	-	-	-
Substance Abuse Residential	Days	11,414.6	166.18	158.08	20,322.0	177.79	301.09	459.16
Children's Residential	Days	3,892.8	168.39	54.63	-	-	-	54.63
RPTC - In State	Days	-	-	-	-	-	-	-
RPTC - Out of State	Days	-	-	-	-	-	-	-
Detoxification	Procedures	-	-	-	-	-	-	-
Medical Evaluation	Procedures	-	-	-	-	-	-	-
Psychological Testing	Procedures	263.9	155.33	3.42	-	-	-	3.42
Peer Support Services	Units	-	-	-	-	-	-	-
Psychosocial Rehabilitation Services	Procedures	2,639.2	99.70	21.93	4,090.8	602.65	205.44	227.37
BH Case Management	Units	12,404.3	16.00	16.54	66.0	603.00	3.32	19.85
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	66.0	48.00	0.26	-	-	-	0.26
Other Professional MH/SA	Visits	659.8	40.00	2.20	263.9	602.00	13.24	15.44
Subtotal – Behavioral Health		35,959.3	\$ 94.56	\$ 283.36	27,447.9	\$ 294.56	\$ 673.74	\$ 957.10
Total All Services		119,028.7	\$ 639.47	\$ 6,342.90	61,889.7	\$ 362.76	\$ 1,870.94	\$ 8,213.85

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska, Department of Health and Social Services
 Statewide Databook- Appendix C
 SFY 2016 and SFY 2017 Data Book - Detailed Summary

Fiscal Year:		SFY 2016						
Population:		Low-Income Family						
Rate Cell:		0-2 Months						
Region:		Statewide						
Member Months:		13,758						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	9,716.2	\$ 3,063.73	\$ 2,480.66	2,432.5	\$ 3,127.29	\$ 633.94	\$ 3,114.60
Inpatient Maternity Delivery	Days	-	-	-	-	-	-	-
Inpatient Well Newborn	Days	4,715.1	2,906.76	1,142.13	1,682.5	3,080.77	431.94	1,574.07
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		14,431.3	\$ 3,012.44	\$ 3,622.79	4,115.0	\$ 3,108.27	\$ 1,065.88	\$ 4,688.67
Outpatient Hospital								
Outpatient Emergency Room	Visits	434.4	\$ 556.82	\$ 20.15	401.2	\$ 593.55	\$ 19.84	\$ 40.00
Outpatient Surgery	Visits	33.1	616.78	1.70	2.6	535.08	0.12	1.82
Outpatient Radiology	Procedures	58.4	223.78	1.09	25.3	553.19	1.17	2.26
Outpatient Pathology/Lab	Procedures	1,451.3	10.65	1.29	1,061.5	429.64	38.00	39.29
Outpatient Pharmacy	Procedures	60.2	27.88	0.14	25.3	544.03	1.15	1.29
Other Outpatient	Procedures	177.9	135.24	2.01	572.2	562.94	26.84	28.85
Subtotal - Outpatient Hospital		2,215.4	\$ 142.90	\$ 26.38	2,088.0	\$ 500.68	\$ 87.12	\$ 113.50
Professional								
Inpatient and Outpatient Surgery	Procedures	1,459.2	\$ 362.20	\$ 44.04	227.6	\$ 263.72	\$ 5.00	\$ 49.05
Anesthesia	Procedures	125.6	442.01	4.63	16.6	414.06	0.57	5.20
Inpatient Visits	Visits	8,194.3	481.18	328.57	2,003.4	332.92	55.58	384.16
Emergency Room	Visits	481.5	169.44	6.80	191.0	151.79	2.42	9.21
Office/Home Visits/Consults	Visits	3,294.3	109.37	30.02	630.6	158.15	8.31	38.33
Maternity	Procedures	-	-	-	-	-	-	-
Pathology/Lab	Procedures	562.6	51.69	2.42	10.5	28.91	0.03	2.45
Radiology	Procedures	2,602.6	24.71	5.36	419.5	36.65	1.28	6.64
Office Administered Drugs	Procedures	98.6	8.41	0.07	2.6	33.10	0.01	0.08
FQHC/RHC/Tribal Clinic	Visits	667.2	346.05	19.24	2,985.5	601.35	149.61	168.85
Physical Exams	Visits	7,752.9	175.61	113.46	1,911.0	161.35	25.69	139.15
Therapy	Visits	90.7	148.43	1.12	7.0	52.62	0.03	1.15
Vision	Visits	17.4	152.23	0.22	4.4	178.78	0.06	0.29
Other Professional	Procedures	1,287.4	70.26	7.54	144.8	33.06	0.40	7.94
Telemedicine	Procedures	-	-	-	32.3	517.64	1.39	1.39
Subtotal - Professional		26,634.2	\$ 253.88	\$ 563.50	8,586.7	\$ 349.92	\$ 250.39	\$ 813.89
Pharmacy								
Psychotropic Drugs	Scripts	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Opioid Drugs	Scripts	-	-	-	1.7	5.38	0.00	0.00
All Other Drugs	Scripts	568.7	57.81	2.74	275.6	31.32	0.72	3.46
Subtotal - Pharmacy		568.7	\$ 57.81	\$ 2.74	277.4	\$ 31.16	\$ 0.72	\$ 3.46
Ancillary								
Ground Transportation	Trips	1,505.4	\$ 65.43	\$ 8.21	4.4	\$ 395.89	\$ 0.14	\$ 8.35
Air Transportation	Trips	509.4	2,566.41	108.94	8.7	7,134.05	5.19	114.12
Accommodations	Claims	342.8	559.32	15.98	-	-	-	15.98
DME/Prosthetics	Procedures	621.9	139.07	7.21	-	-	-	7.21
Dental	Procedures	48.0	286.41	1.14	4.4	601.40	0.22	1.36
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		3,027.4	\$ 560.77	\$ 141.47	17.4	\$ 3,816.35	\$ 5.55	\$ 147.02
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Nursing Home	Days	-	-	-	-	-	-	-
Skilled Nursing Facility	Days	-	-	-	-	-	-	-
HCBS	Procedures	43.6	621.73	2.26	-	-	-	2.26
Case Management	Procedures	54.1	303.08	1.37	3.5	303.08	0.09	1.45
Personal Care	Procedures	-	-	-	-	-	-	-
Subtotal - LTSS		97.7	\$ 445.33	\$ 3.63	3.5	\$ 303.08	\$ 0.09	\$ 3.71
Behavioral Health								
IP Psych Hospital - API	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
IP Psych Hospital - All Other	Days	-	-	-	-	-	-	-
IP General Hospital - MH/SA	Days	-	-	-	-	-	-	-
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	-	-	-	-	-	-	-
Assessment	Procedures	-	-	-	-	-	-	-
Crisis Services	Procedures	-	-	-	-	-	-	-
Medication Services	Procedures	-	-	-	-	-	-	-
Methadone Medication Services	Procedures	-	-	-	-	-	-	-
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	-	-	-	-	-	-	-
Family Therapy OP	Procedures	-	-	-	-	-	-	-
Group Therapy OP	Procedures	-	-	-	-	-	-	-
SBIRT	Procedures	-	-	-	-	-	-	-
Substance Abuse Residential	Days	-	-	-	-	-	-	-
Children's Residential	Days	-	-	-	-	-	-	-
RPTC - In State	Days	-	-	-	-	-	-	-
RPTC - Out of State	Days	-	-	-	-	-	-	-
Detoxification	Procedures	-	-	-	-	-	-	-
Medical Evaluation	Procedures	-	-	-	-	-	-	-
Psychological Testing	Procedures	137.8	18.29	0.21	0.9	193.81	0.01	0.22
Peer Support Services	Units	-	-	-	-	-	-	-
Psychosocial Rehabilitation Services	Procedures	-	-	-	-	-	-	-
BH Case Management	Units	-	-	-	-	-	-	-
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	-	-	-	-	-	-	-
Other Professional MH/SA	Visits	-	-	-	-	-	-	-
Subtotal - Behavioral Health		137.8	\$ 18.29	\$ 0.21	0.9	\$ 193.81	\$ 0.01	\$ 0.22
Total All Services		47,112.4	\$ 1,110.72	\$ 4,360.72	15,089.0	\$ 1,121.16	\$ 1,409.76	\$ 5,770.48

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska, Department of Health and Social Services
Statewide Databook- Appendix C
SFY 2016 and SFY 2017 Data Book - Detailed Summary

Fiscal Year:		SFY 2016						
Population:		Low-Income Family						
Rate Cell:		1-4 Male and Female						
Region:		Statewide						
Member Months:		218,840						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid
		Utilization per 1,000	Paid per Unit	PMPM	Utilization per 1,000	Paid per Unit	PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	82.3	\$ 3,135.56	\$ 21.49	44.7	\$ 3,048.82	\$ 11.35	\$ 32.85
Inpatient Maternity Delivery	Days	-	-	-	-	-	-	-
Inpatient Well Newborn	Days	-	-	-	-	-	-	-
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal – Inpatient Hospital		82.3	\$ 3,135.56	\$ 21.49	44.7	\$ 3,048.82	\$ 11.35	\$ 32.85
Outpatient Hospital								
Outpatient Emergency Room	Visits	345.7	\$ 414.21	\$ 11.93	248.5	\$ 552.10	\$ 11.43	\$ 23.36
Outpatient Surgery	Visits	93.6	2,266.11	17.68	27.7	1,094.55	2.53	20.20
Outpatient Radiology	Procedures	34.7	236.08	0.68	15.9	515.72	0.68	1.37
Outpatient Pathology/Lab	Procedures	350.4	22.58	0.66	153.7	384.32	4.92	5.58
Outpatient Pharmacy	Procedures	71.6	127.85	0.76	12.1	295.80	0.30	1.06
Other Outpatient	Procedures	160.7	174.04	2.33	244.5	541.17	11.03	13.36
Subtotal – Outpatient Hospital		1,056.6	\$ 386.62	\$ 34.04	702.3	\$ 527.74	\$ 30.89	\$ 64.93
Professional								
Inpatient and Outpatient Surgery	Procedures	126.3	\$ 327.17	\$ 3.44	39.6	\$ 300.08	\$ 0.99	\$ 4.43
Anesthesia	Procedures	109.3	457.40	4.17	30.2	419.99	1.06	5.23
Inpatient Visits	Visits	58.0	395.75	1.91	27.4	298.00	0.68	2.59
Emergency Room	Visits	347.8	144.66	4.19	128.8	114.08	1.22	5.42
Office/Home Visits/Consults	Visits	1,299.5	125.36	13.58	546.0	115.29	5.25	18.82
Maternity	Procedures	-	-	-	-	-	-	-
Pathology/Lab	Procedures	234.4	16.29	0.32	70.5	9.58	0.06	0.37
Radiology	Procedures	187.2	32.25	0.50	46.5	40.45	0.16	0.66
Office Administered Drugs	Procedures	28.0	48.29	0.11	10.5	34.03	0.03	0.14
FQHC/RHC/Tribal Clinic	Visits	117.3	303.62	2.97	653.8	600.58	32.72	35.69
Physical Exams	Visits	633.9	173.35	9.16	82.5	125.87	0.87	10.42
Therapy	Visits	1,238.2	159.64	16.47	2.0	106.02	0.02	16.09
Vision	Visits	236.2	83.13	1.64	5.6	133.82	0.06	1.70
Other Professional	Procedures	302.7	114.35	2.88	51.3	33.19	0.14	3.03
Telemedicine	Procedures	0.2	159.40	0.00	81.9	371.95	2.54	2.54
Subtotal – Professional		4,918.8	\$ 149.66	\$ 61.35	1,776.5	\$ 309.28	\$ 45.79	\$ 107.13
Pharmacy								
Psychotropic Drugs	Scripts	2.5	\$ 94.96	\$ 0.02	0.1	\$ 1.66	\$ 0.00	\$ 0.02
Opioid Drugs	Scripts	18.5	11.81	0.02	4.2	8.53	0.00	0.02
All Other Drugs	Scripts	1,098.0	102.36	9.37	495.3	42.36	1.75	11.11
Subtotal – Pharmacy		1,119.0	\$ 100.84	\$ 9.40	499.6	\$ 42.07	\$ 1.75	\$ 11.15
Ancillary								
Ground Transportation	Trips	1,322.6	\$ 25.76	\$ 2.84	0.7	\$ 310.82	\$ 0.02	\$ 2.86
Air Transportation	Trips	555.7	631.70	29.25	1.0	8,456.97	0.73	29.99
Accommodations	Claims	172.1	265.81	3.81	-	-	-	3.81
DME/Prosthetics	Procedures	180.9	207.02	3.12	-	-	-	3.12
Dental	Procedures	3,048.7	94.79	24.08	333.4	597.64	16.61	40.69
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		5,279.9	\$ 143.43	\$ 63.11	335.1	\$ 621.51	\$ 17.36	\$ 80.47
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Nursing Home	Days	-	-	-	-	-	-	-
Skilled Nursing Facility	Days	-	-	-	-	-	-	-
HCBS	Procedures	25.9	438.00	0.95	-	-	-	0.95
Case Management	Procedures	200.4	301.87	5.04	31.5	303.07	0.79	5.84
Personal Care	Procedures	-	-	-	-	-	-	-
Subtotal – LTSS		226.3	\$ 317.47	\$ 5.99	31.5	\$ 303.07	\$ 0.79	\$ 6.78
Behavioral Health								
IP Psych Hospital - API	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
IP Psych Hospital - All Other	Days	3.2	712.15	0.19	-	-	-	0.19
IP General Hospital - MH/SA	Days	-	-	-	-	-	-	-
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	5.6	35.54	0.02	0.8	602.73	0.04	0.06
Assessment	Procedures	7.2	193.20	0.12	1.6	602.17	0.08	0.20
Crisis Services	Procedures	0.1	276.00	0.00	1.2	602.24	0.06	0.06
Medication Services	Procedures	5.7	28.46	0.01	-	-	-	0.01
Methadone Medication Services	Procedures	-	-	-	-	-	-	-
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	72.0	88.30	0.53	6.9	598.44	0.34	0.87
Family Therapy OP	Procedures	40.5	101.92	0.34	2.5	591.90	0.12	0.47
Group Therapy OP	Procedures	92.3	99.87	0.77	0.2	603.00	0.01	0.78
SBIRT	Procedures	0.1	61.27	0.00	-	-	-	0.00
Substance Abuse Residential	Days	-	-	-	-	-	-	-
Children's Residential	Days	177.7	177.14	2.62	11.5	464.88	0.45	3.07
RPTC - In State	Days	-	-	-	-	-	-	-
RPTC - Out of State	Days	-	-	-	-	-	-	-
Detoxification	Procedures	-	-	-	-	-	-	-
Medical Evaluation	Procedures	1.3	260.16	0.03	-	-	-	0.03
Psychological Testing	Procedures	153.6	85.44	1.09	1.2	85.07	0.01	1.10
Peer Support Services	Units	16.5	17.00	0.02	-	-	-	0.02
Psychosocial Rehabilitation Services	Procedures	377.9	160.89	5.07	9.0	602.23	0.45	5.52
BH Case Management	Units	184.5	16.00	0.25	1.7	349.94	0.05	0.30
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	1.5	99.23	0.01	-	-	-	0.01
Other Professional MH/SA	Visits	15.2	39.52	0.05	1.2	602.33	0.06	0.11
Subtotal – Behavioral Health		1,154.9	\$ 115.60	\$ 11.13	37.6	\$ 531.60	\$ 1.67	\$ 12.79
Total All Services		13,837.8	\$ 179.08	\$ 206.50	3,427.4	\$ 383.73	\$ 109.60	\$ 316.10

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska, Department of Health and Social Services
 Statewide Databook- Appendix C
 SFY 2016 and SFY 2017 Data Book - Detailed Summary

Fiscal Year: SFY 2016
 Population: Low-Income Family
 Rate Cell: 14-18 Female
 Region: Statewide

Member Months: 95,285

Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	52.5	\$ 3,845.77	\$ 16.83	17.5	\$ 3,442.06	\$ 5.02	\$ 21.85
Inpatient Maternity Delivery	Days	14.5	2,897.13	3.50	5.2	3,266.30	1.41	4.90
Inpatient Well Newborn	Days	-	-	-	-	-	-	-
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		67.0	\$ 3,640.71	\$ 20.33	22.7	\$ 3,402.03	\$ 6.43	\$ 26.75
Outpatient Hospital								
Outpatient Emergency Room	Visits	320.3	\$ 728.48	\$ 19.44	186.3	\$ 563.64	\$ 8.75	\$ 28.19
Outpatient Surgery	Visits	26.4	3,055.40	6.73	15.4	1,006.35	1.29	8.02
Outpatient Radiology	Procedures	77.8	357.22	2.32	33.4	507.54	1.41	3.73
Outpatient Pathology/Lab	Procedures	745.0	19.49	1.21	319.0	394.63	10.49	11.70
Outpatient Pharmacy	Procedures	69.1	346.35	2.00	24.1	1,178.28	2.36	4.36
Other Outpatient	Procedures	145.7	149.89	1.82	196.3	546.07	8.93	10.75
Subtotal - Outpatient Hospital		1,384.4	\$ 290.53	\$ 33.52	774.4	\$ 515.02	\$ 33.24	\$ 66.75
Professional								
Inpatient and Outpatient Surgery	Procedures	155.0	\$ 319.38	\$ 4.13	29.0	\$ 552.00	\$ 1.33	\$ 5.46
Anesthesia	Procedures	37.9	446.25	1.41	18.0	479.94	0.72	2.13
Inpatient Visits	Visits	378.2	352.52	11.11	20.1	211.69	0.36	11.47
Emergency Room	Visits	330.6	178.95	4.93	108.6	139.03	1.26	6.19
Office/Home Visits/Consults	Visits	1,327.3	134.57	14.88	350.0	120.35	3.51	18.39
Maternity	Procedures	19.4	522.87	0.85	5.5	702.86	0.32	1.17
Pathology/Lab	Procedures	1,098.3	19.47	1.78	105.3	13.46	0.12	1.90
Radiology	Procedures	443.8	71.72	2.65	72.7	54.81	0.33	2.98
Office Administered Drugs	Procedures	112.1	70.39	0.66	23.4	37.97	0.07	0.73
FQHC/RHC/Tribal Clinic	Visits	255.4	288.40	6.14	786.4	594.26	38.94	45.08
Physical Exams	Visits	248.9	144.46	3.00	26.7	93.45	0.21	3.20
Therapy	Visits	387.3	126.04	4.07	11.1	61.54	0.06	4.12
Vision	Visits	843.5	97.56	6.86	10.2	73.60	0.06	6.92
Other Professional	Procedures	374.8	127.15	3.97	28.3	57.10	0.13	4.11
Telemedicine	Procedures	6.5	193.65	0.11	41.1	400.61	1.37	1.48
Subtotal - Professional		6,018.9	\$ 132.65	\$ 66.53	1,636.3	\$ 357.87	\$ 48.80	\$ 115.33
Pharmacy								
Psychotropic Drugs	Scripts	890.9	\$ 34.22	\$ 2.54	92.3	\$ 19.77	\$ 0.15	\$ 2.69
Opioid Drugs	Scripts	164.7	6.42	0.09	35.4	4.70	0.01	0.10
All Other Drugs	Scripts	2,412.2	83.37	16.76	670.9	43.95	2.46	19.22
Subtotal - Pharmacy		3,467.8	\$ 67.09	\$ 19.39	798.6	\$ 39.41	\$ 2.62	\$ 22.01
Ancillary								
Ground Transportation	Trips	1,498.9	\$ 63.36	\$ 7.91	0.1	\$ 286.85	\$ 0.00	\$ 7.92
Air Transportation	Trips	644.4	544.79	29.26	0.3	8,376.05	0.18	29.43
Accommodations	Claims	172.5	255.43	3.67	-	-	-	3.67
DME/Prosthetics	Procedures	99.6	119.01	0.99	0.1	13.60	0.00	0.99
Dental	Procedures	4,249.9	133.64	47.33	518.0	610.84	26.37	73.70
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		6,665.4	\$ 160.52	\$ 89.16	518.5	\$ 614.39	\$ 26.55	\$ 115.71
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Nursing Home	Days	40.8	507.04	1.72	-	-	-	1.72
Skilled Nursing Facility	Days	-	-	-	-	-	-	-
HCBS	Procedures	22.2	252.49	0.47	0.9	150.48	0.01	0.48
Case Management	Procedures	4.7	79.11	0.03	0.5	358.74	0.02	0.05
Personal Care	Procedures	6.7	150.89	0.08	-	-	-	0.08
Subtotal - LTSS		74.3	\$ 372.28	\$ 2.31	1.4	\$ 226.21	\$ 0.03	\$ 2.33
Behavioral Health								
IP Psych Hospital - API	Days	150.5	\$ 1,298.12	\$ 16.28	-	\$ 0.00	\$ 0.00	\$ 16.28
IP Psych Hospital - All Other	Days	580.8	711.56	34.44	-	-	-	34.44
IP General Hospital - MH/SA	Days	136.1	2,600.49	29.50	5.4	3,578.48	1.61	31.12
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	42.6	34.69	0.12	5.4	602.26	0.27	0.39
Assessment	Procedures	77.1	224.42	1.44	14.6	584.04	0.71	2.15
Crisis Services	Procedures	18.8	140.12	0.22	25.9	597.20	1.29	1.51
Medication Services	Procedures	583.3	24.66	1.20	2.5	544.21	0.11	1.31
Methadone Medication Services	Procedures	-	-	-	-	-	-	-
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	903.3	93.07	7.01	108.3	589.83	5.32	12.33
Family Therapy OP	Procedures	258.7	102.73	2.21	14.2	572.08	0.68	2.89
Group Therapy OP	Procedures	1,280.9	79.67	8.50	33.5	587.90	1.64	10.14
SBIRT	Procedures	-	-	-	4.2	583.30	0.20	0.20
Substance Abuse Residential	Days	352.8	245.50	7.22	139.3	601.35	6.98	14.20
Children's Residential	Days	3,168.5	180.80	47.74	331.2	253.35	6.99	54.73
RPTC - In State	Days	2,057.3	320.08	54.88	-	-	-	54.88
RPTC - Out of State	Days	1,027.4	359.60	30.79	-	-	-	30.79
Detoxification	Procedures	-	-	-	0.1	603.00	0.01	0.01
Medical Evaluation	Procedures	24.1	242.14	0.49	-	-	-	0.49
Psychological Testing	Procedures	70.8	527.02	3.11	0.9	601.86	0.04	3.15
Peer Support Services	Units	13.3	17.00	0.02	-	-	-	0.02
Psychosocial Rehabilitation Services	Procedures	4,282.3	183.14	65.35	235.5	600.77	11.79	77.14
BH Case Management	Units	1,026.4	15.97	1.37	28.6	271.14	0.65	2.01
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	14.7	106.75	0.13	3.3	594.00	0.16	0.29
Other Professional MH/SA	Visits	110.1	39.54	0.36	19.1	597.98	0.95	1.32
Subtotal - Behavioral Health		16,179.7	\$ 231.68	\$ 312.37	972.1	\$ 486.65	\$ 39.42	\$ 351.80
Total All Services		33,857.5	\$ 192.67	\$ 543.61	4,723.9	\$ 399.02	\$ 157.08	\$ 700.69

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska, Department of Health and Social Services
 Statewide Databook- Appendix C
 SFY 2016 and SFY 2017 Data Book - Detailed Summary

Fiscal Year: SFY 2016
 Population: Low-Income Family
 Rate Cell: 14-18 Male
 Region: Statewide

Member Months: 98,642

Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	51.2	\$ 4,269.99	\$ 18.22	18.5	\$ 2,973.73	\$ 4.58	\$ 22.81
Inpatient Maternity Delivery	Days	-	-	-	-	-	-	-
Inpatient Well Newborn	Days	-	-	-	-	-	-	-
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		51.2	\$ 4,269.99	\$ 18.22	18.5	\$ 2,973.73	\$ 4.58	\$ 22.81
Outpatient Hospital								
Outpatient Emergency Room	Visits	209.1	\$ 695.90	\$ 12.13	134.8	\$ 592.97	\$ 6.66	\$ 18.79
Outpatient Surgery	Visits	25.3	3,131.39	6.60	12.4	979.35	1.01	7.62
Outpatient Radiology	Procedures	56.1	340.14	1.59	32.2	498.16	1.34	2.93
Outpatient Pathology/Lab	Procedures	445.4	20.26	0.75	121.9	445.43	4.52	5.28
Outpatient Pharmacy	Procedures	53.8	546.87	2.45	10.2	1,786.85	1.52	3.97
Other Outpatient	Procedures	86.1	137.53	0.99	156.0	531.27	6.90	7.89
Subtotal - Outpatient Hospital		875.8	\$ 335.83	\$ 24.51	467.5	\$ 563.73	\$ 21.96	\$ 46.47
Professional								
Inpatient and Outpatient Surgery	Procedures	159.6	\$ 366.12	\$ 4.87	34.2	\$ 455.09	\$ 1.30	\$ 6.17
Anesthesia	Procedures	36.5	438.25	1.33	15.4	410.00	0.53	1.86
Inpatient Visits	Visits	208.5	426.32	7.41	13.9	267.64	0.31	7.72
Emergency Room	Visits	218.6	166.33	3.03	72.9	134.83	0.82	3.85
Office/Home Visits/Consults	Visits	876.7	136.24	9.95	250.7	134.67	2.81	12.77
Maternity	Procedures	-	-	-	-	-	-	-
Pathology/Lab	Procedures	376.6	22.04	0.69	43.8	17.68	0.06	0.76
Radiology	Procedures	353.0	56.85	1.67	66.7	36.10	0.20	1.87
Office Administered Drugs	Procedures	28.8	47.15	0.11	12.5	36.03	0.04	0.15
FQHC/RHC/Tribal Clinic	Visits	215.6	292.36	5.25	483.9	597.02	24.08	29.33
Physical Exams	Visits	224.0	148.59	2.77	24.9	87.34	0.18	2.95
Therapy	Visits	372.7	134.80	4.19	7.1	48.37	0.03	4.22
Vision	Visits	607.7	98.54	4.99	6.7	71.58	0.04	5.03
Other Professional	Procedures	235.9	100.22	1.97	20.3	64.33	0.11	2.08
Telemedicine	Procedures	6.6	154.47	0.08	55.1	412.35	1.89	1.98
Subtotal - Professional		3,920.9	\$ 147.91	\$ 48.33	1,108.1	\$ 350.84	\$ 32.40	\$ 80.73
Pharmacy								
Psychotropic Drugs	Scripts	589.4	\$ 53.24	\$ 2.62	64.8	\$ 41.49	\$ 0.22	\$ 2.84
Opioid Drugs	Scripts	125.8	10.94	0.11	28.0	4.57	0.01	0.13
All Other Drugs	Scripts	1,708.2	104.63	14.89	438.3	57.42	2.10	16.99
Subtotal - Pharmacy		2,423.4	\$ 87.27	\$ 17.62	531.1	\$ 52.69	\$ 2.33	\$ 19.96
Ancillary								
Ground Transportation	Trips	1,113.4	\$ 69.52	\$ 6.45	0.4	\$ 286.85	\$ 0.01	\$ 6.46
Air Transportation	Trips	475.9	562.98	22.33	0.7	7,913.75	0.48	22.81
Accommodations	Claims	127.7	236.45	2.52	-	-	-	2.52
DME/Prosthetics	Procedures	117.6	148.85	1.46	0.1	44.63	0.00	1.46
Dental	Procedures	3,631.1	126.14	38.17	424.1	609.68	21.55	59.71
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		5,465.7	\$ 155.71	\$ 70.92	425.3	\$ 621.78	\$ 22.04	\$ 92.96
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Nursing Home	Days	-	-	-	-	-	-	-
Skilled Nursing Facility	Days	-	-	-	-	-	-	-
HCBS	Procedures	113.7	142.96	1.36	-	-	-	1.36
Case Management	Procedures	6.7	174.32	0.10	0.1	356.34	0.00	0.10
Personal Care	Procedures	115.0	53.66	0.51	-	-	-	0.51
Subtotal - LTSS		235.4	\$ 100.24	\$ 1.97	0.1	\$ 356.34	\$ 0.00	\$ 1.97
Behavioral Health								
IP Psych Hospital - API	Days	68.1	\$ 1,351.17	\$ 7.67	-	\$ 0.00	\$ 0.00	\$ 7.67
IP Psych Hospital - All Other	Days	515.1	712.96	30.60	-	-	-	30.60
IP General Hospital - MH/SA	Days	30.8	2,983.27	7.65	6.4	3,315.10	1.78	9.43
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	45.5	34.83	0.13	4.3	602.14	0.21	0.35
Assessment	Procedures	68.1	222.53	1.26	15.8	597.10	0.79	2.05
Crisis Services	Procedures	11.3	156.82	0.15	15.2	601.08	0.76	0.91
Medication Services	Procedures	525.2	23.82	1.04	3.4	602.07	0.17	1.21
Methadone Medication Services	Procedures	-	-	-	-	-	-	-
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	695.0	89.79	5.20	76.0	598.14	3.79	8.99
Family Therapy OP	Procedures	197.2	105.53	1.73	28.0	596.25	1.39	3.12
Group Therapy OP	Procedures	1,063.5	78.34	6.94	67.6	596.98	3.36	10.31
SBIRT	Procedures	0.1	43.80	0.00	3.6	602.33	0.18	0.18
Substance Abuse Residential	Days	278.0	244.97	5.67	222.1	601.94	11.14	16.82
Children's Residential	Days	3,623.8	175.94	53.13	893.0	294.43	21.91	75.04
RPTC - In State	Days	2,062.6	317.12	54.51	-	-	-	54.51
RPTC - Out of State	Days	960.3	350.54	28.05	-	-	-	28.05
Detoxification	Procedures	-	-	-	-	-	-	-
Medical Evaluation	Procedures	14.5	238.32	0.29	0.1	265.27	0.00	0.29
Psychological Testing	Procedures	70.7	631.08	3.72	0.6	602.20	0.03	3.75
Peer Support Services	Units	41.8	17.00	0.06	-	-	-	0.06
Psychosocial Rehabilitation Services	Procedures	4,220.8	196.42	69.09	307.3	598.63	15.33	84.42
BH Case Management	Units	1,476.4	15.97	1.97	13.7	223.81	0.26	2.22
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	13.7	100.43	0.12	0.9	602.43	0.04	0.16
Other Professional MH/SA	Visits	121.9	39.46	0.40	18.0	601.23	0.90	1.30
Subtotal - Behavioral Health		16,104.5	\$ 208.18	\$ 279.39	1,676.2	\$ 444.29	\$ 62.06	\$ 341.45
Total All Services		29,076.8	\$ 190.24	\$ 460.96	4,226.9	\$ 412.71	\$ 145.38	\$ 606.34

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska, Department of Health and Social Services
 Statewide Databook- Appendix C
 SFY 2016 and SFY 2017 Data Book - Detailed Summary

Fiscal Year: SFY 2016
 Population: Low-Income Family
 Rate Cell: 19-25 Female
 Region: Statewide

Member Months: 58,492

Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	PMPM	Utilization per 1,000	Paid per Unit	PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	64.8	\$ 3,101.03	\$ 16.75	52.5	\$ 3,086.79	\$ 13.51	\$ 30.26
Inpatient Maternity Delivery	Days	31.8	2,955.10	7.83	40.2	3,126.62	10.48	18.31
Inpatient Well Newborn	Days	-	-	-	-	-	-	-
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		96.6	\$ 3,053.01	\$ 24.58	92.7	\$ 3,104.06	\$ 23.99	\$ 48.57
Outpatient Hospital								
Outpatient Emergency Room	Visits	631.3	\$ 735.21	\$ 38.68	362.3	\$ 582.83	\$ 17.60	\$ 56.27
Outpatient Surgery	Visits	40.2	2,752.34	9.22	26.1	937.97	2.04	11.26
Outpatient Radiology	Procedures	125.8	340.85	3.57	73.0	509.44	3.10	6.67
Outpatient Pathology/Lab	Procedures	904.3	22.79	1.72	838.9	367.77	25.71	27.43
Outpatient Pharmacy	Procedures	43.7	166.89	0.61	47.8	250.62	1.00	1.61
Other Outpatient	Procedures	132.7	169.69	1.88	243.1	539.68	10.93	12.81
Subtotal - Outpatient Hospital		1,878.0	\$ 355.74	\$ 55.67	1,591.2	\$ 455.32	\$ 60.38	\$ 116.05
Professional								
Inpatient and Outpatient Surgery	Procedures	217.7	\$ 395.08	\$ 7.17	51.5	\$ 495.76	\$ 2.13	\$ 9.29
Anesthesia	Procedures	54.8	495.23	2.26	34.5	488.66	1.40	3.66
Inpatient Visits	Visits	88.2	258.59	1.90	60.7	238.71	1.21	3.11
Emergency Room	Visits	629.0	183.68	9.63	208.4	142.79	2.48	12.11
Office/Home Visits/Consults	Visits	1,631.0	132.57	18.02	562.7	112.97	5.30	23.32
Maternity	Procedures	62.8	534.14	2.79	33.2	853.71	2.36	5.16
Pathology/Lab	Procedures	2,477.7	21.41	4.42	160.4	19.31	0.26	4.68
Radiology	Procedures	768.5	93.99	6.02	179.3	65.88	0.98	7.00
Office Administered Drugs	Procedures	217.7	141.28	2.56	32.4	41.48	0.11	2.67
FQHC/RHC/Tribal Clinic	Visits	233.9	279.25	5.44	1,022.1	593.87	50.58	56.03
Physical Exams	Visits	66.5	95.41	0.53	14.2	46.90	0.06	0.58
Therapy	Visits	243.3	138.08	2.80	21.5	54.19	0.10	2.90
Vision	Visits	534.4	109.25	4.87	7.8	92.92	0.06	4.93
Other Professional	Procedures	332.4	171.67	4.75	26.3	63.26	0.14	4.89
Telemedicine	Procedures	0.8	228.74	0.02	48.4	413.05	1.67	1.68
Subtotal - Professional		7,558.6	\$ 116.18	\$ 73.18	2,463.5	\$ 335.31	\$ 68.84	\$ 142.01
Pharmacy								
Psychotropic Drugs	Scripts	325.0	\$ 37.27	\$ 1.01	84.9	\$ 33.82	\$ 0.24	\$ 1.25
Opioid Drugs	Scripts	474.9	43.18	1.71	110.2	17.94	0.16	1.87
All Other Drugs	Scripts	2,338.6	54.34	10.59	1,065.6	40.47	3.59	14.18
Subtotal - Pharmacy		3,138.5	\$ 50.89	\$ 13.31	1,260.7	\$ 38.05	\$ 4.00	\$ 17.31
Ancillary								
Ground Transportation	Trips	1,361.0	\$ 42.22	\$ 4.79	1.0	\$ 286.85	\$ 0.02	\$ 4.81
Air Transportation	Trips	417.9	628.99	21.90	2.1	8,533.37	1.46	23.36
Accommodations	Claims	171.9	342.41	4.91	-	-	-	4.91
DME/Prosthetics	Procedures	39.0	101.13	0.33	-	-	-	0.33
Dental	Procedures	2,735.8	166.43	37.94	440.3	440.38	16.16	54.10
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		4,725.6	\$ 177.43	\$ 69.87	443.3	\$ 477.47	\$ 17.64	\$ 87.51
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Nursing Home	Days	6.2	507.04	0.26	-	-	-	0.26
Skilled Nursing Facility	Days	-	-	-	-	-	-	-
HCBS	Procedures	39.2	212.93	0.70	-	-	-	0.70
Case Management	Procedures	0.8	241.97	0.02	-	-	-	0.02
Personal Care	Procedures	58.9	89.07	0.44	-	-	-	0.44
Subtotal - LTSS		105.0	\$ 160.96	\$ 1.41	-	\$ 0.00	\$ 0.00	\$ 1.41
Behavioral Health								
IP Psych Hospital - API	Days	22.0	\$ 1,356.11	\$ 2.48	-	\$ 0.00	\$ 0.00	\$ 2.48
IP Psych Hospital - All Other	Days	-	-	-	-	-	-	-
IP General Hospital - MH/SA	Days	23.0	2,849.02	5.46	2.7	3,653.19	0.81	6.27
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	23.0	34.78	0.07	8.6	602.43	0.43	0.50
Assessment	Procedures	31.2	200.86	0.52	12.9	588.21	0.63	1.16
Crisis Services	Procedures	7.0	135.97	0.08	25.2	592.04	1.24	1.32
Medication Services	Procedures	10.3	73.49	0.06	2.9	602.29	0.14	0.21
Methadone Medication Services	Procedures	57.4	12.50	0.06	-	-	-	0.06
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	191.4	99.45	1.59	54.0	590.11	2.65	4.24
Family Therapy OP	Procedures	18.1	105.65	0.16	2.5	518.77	0.11	0.27
Group Therapy OP	Procedures	71.8	63.24	0.38	4.9	571.21	0.23	0.61
SBIRT	Procedures	0.2	43.80	0.00	9.8	602.33	0.49	0.50
Substance Abuse Residential	Days	98.5	256.56	2.11	161.5	318.04	4.28	6.38
Children's Residential	Days	96.0	182.66	1.46	-	-	-	1.46
RPTC - In State	Days	1.4	371.29	0.04	-	-	-	0.04
RPTC - Out of State	Days	31.0	366.00	0.94	-	-	-	0.94
Detoxification	Procedures	-	-	-	2.1	601.20	0.10	0.10
Medical Evaluation	Procedures	16.2	238.62	0.32	-	-	-	0.32
Psychological Testing	Procedures	10.9	764.70	0.69	0.2	603.00	0.01	0.70
Peer Support Services	Units	-	-	-	-	-	-	-
Psychosocial Rehabilitation Services	Procedures	339.1	95.26	2.69	81.0	601.61	4.06	6.75
BH Case Management	Units	198.6	16.00	0.26	26.9	234.27	0.52	0.79
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	9.8	128.63	0.11	5.1	602.68	0.26	0.36
Other Professional MH/SA	Visits	42.5	39.54	0.14	15.8	602.04	0.79	0.93
Subtotal - Behavioral Health		1,299.3	\$ 181.25	\$ 19.62	416.1	\$ 484.13	\$ 16.79	\$ 36.41
Total All Services		18,801.7	\$ 164.44	\$ 257.65	6,267.6	\$ 366.88	\$ 191.62	\$ 449.27

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska, Department of Health and Social Services
 Statewide Databook- Appendix C
 SFY 2016 and SFY 2017 Data Book - Detailed Summary

Fiscal Year: SFY 2016
 Population: Low-Income Family
 Rate Cell: 19-25 Male
 Region: Statewide

Member Months: 33,027

Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	77.8	\$ 3,410.94	\$ 22.10	22.5	\$ 3,236.42	\$ 6.08	\$ 28.18
Inpatient Maternity Delivery	Days	-	-	-	-	-	-	-
Inpatient Well Newborn	Days	-	-	-	-	-	-	-
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		77.8	\$ 3,410.94	\$ 22.10	22.5	\$ 3,236.42	\$ 6.08	\$ 28.18
Outpatient Hospital								
Outpatient Emergency Room	Visits	360.1	\$ 746.11	\$ 22.39	210.0	\$ 581.30	\$ 10.17	\$ 32.56
Outpatient Surgery	Visits	18.2	2,752.82	4.17	16.7	908.60	1.27	5.43
Outpatient Radiology	Procedures	39.2	333.41	1.09	24.7	544.72	1.12	2.21
Outpatient Pathology/Lab	Procedures	277.6	17.64	0.41	117.0	475.49	4.64	5.04
Outpatient Pharmacy	Procedures	15.3	513.43	0.65	13.1	255.82	0.28	0.93
Other Outpatient	Procedures	134.4	181.05	2.03	110.8	510.20	4.71	6.74
Subtotal - Outpatient Hospital		844.8	\$ 436.59	\$ 30.73	492.3	\$ 540.78	\$ 22.19	\$ 52.92
Professional								
Inpatient and Outpatient Surgery	Procedures	139.5	\$ 382.55	\$ 4.45	30.9	\$ 478.35	\$ 1.23	\$ 5.68
Anesthesia	Procedures	34.9	399.05	1.16	17.4	458.54	0.67	1.83
Inpatient Visits	Visits	92.7	274.76	2.12	24.0	298.57	0.60	2.72
Emergency Room	Visits	368.4	168.37	5.17	110.1	143.00	1.31	6.48
Office/Home Visits/Consults	Visits	581.0	136.32	6.60	237.3	124.91	2.47	9.07
Maternity	Procedures	-	-	-	-	-	-	-
Pathology/Lab	Procedures	707.4	24.14	1.42	35.2	23.71	0.07	1.49
Radiology	Procedures	361.5	56.62	1.71	71.9	49.59	0.30	2.00
Office Administered Drugs	Procedures	33.4	60.58	0.17	18.5	34.66	0.05	0.22
FQHC/RHC/Tribal Clinic	Visits	98.1	301.12	2.46	296.8	598.80	14.81	17.27
Physical Exams	Visits	27.6	125.53	0.29	13.8	48.98	0.06	0.35
Therapy	Visits	117.0	122.33	1.19	6.2	50.89	0.03	1.22
Vision	Visits	327.4	105.86	2.89	4.0	112.78	0.04	2.93
Other Professional	Procedures	153.7	105.57	1.35	21.4	44.69	0.08	1.43
Telemedicine	Procedures	3.6	173.48	0.05	49.8	396.97	1.65	1.70
Subtotal - Professional		3,046.2	\$ 122.24	\$ 31.03	937.4	\$ 298.98	\$ 23.36	\$ 54.39
Pharmacy								
Psychotropic Drugs	Scripts	154.1	\$ 35.90	\$ 0.46	57.4	\$ 22.88	\$ 0.11	\$ 0.57
Opioid Drugs	Scripts	246.3	43.56	0.89	58.5	5.02	0.02	0.92
All Other Drugs	Scripts	1,038.4	108.24	9.37	352.1	71.37	2.09	11.46
Subtotal - Pharmacy		1,438.8	\$ 89.42	\$ 10.72	468.0	\$ 57.12	\$ 2.23	\$ 12.95
Ancillary								
Ground Transportation	Trips	535.2	\$ 65.16	\$ 2.91	0.7	\$ 301.30	\$ 0.02	\$ 2.92
Air Transportation	Trips	188.6	794.21	12.48	1.1	7,833.25	0.71	13.19
Accommodations	Claims	62.9	192.71	1.01	-	-	-	1.01
DME/Prosthetics	Procedures	85.4	159.48	1.13	-	-	-	1.13
Dental	Procedures	2,126.2	167.51	29.68	228.2	506.03	9.62	39.30
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		2,998.3	\$ 188.95	\$ 47.21	230.0	\$ 540.11	\$ 10.35	\$ 57.56
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Nursing Home	Days	-	-	-	-	-	-	-
Skilled Nursing Facility	Days	-	-	-	-	-	-	-
HCBS	Procedures	0.7	227.23	0.01	-	-	-	0.01
Case Management	Procedures	0.7	144.19	0.01	-	-	-	0.01
Personal Care	Procedures	-	-	-	-	-	-	-
Subtotal - LTSS		1.5	\$ 185.71	\$ 0.02	-	\$ 0.00	\$ 0.00	\$ 0.02
Behavioral Health								
IP Psych Hospital - API	Days	21.8	\$ 1,209.20	\$ 2.20	-	\$ 0.00	\$ 0.00	\$ 2.20
IP Psych Hospital - All Other	Days	-	-	-	-	-	-	-
IP General Hospital - MH/SA	Days	56.3	3,064.02	14.38	5.1	4,173.77	1.77	16.15
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	22.5	35.00	0.07	9.1	602.60	0.46	0.52
Assessment	Procedures	24.3	203.37	0.41	13.8	581.79	0.67	1.08
Crisis Services	Procedures	23.3	84.16	0.16	15.3	588.05	0.75	0.91
Medication Services	Procedures	54.1	31.28	0.14	0.7	602.00	0.04	0.18
Methadone Medication Services	Procedures	66.9	12.50	0.07	-	-	-	0.07
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	126.1	101.03	1.06	18.9	594.70	0.94	2.00
Family Therapy OP	Procedures	15.3	88.26	0.11	-	-	-	0.11
Group Therapy OP	Procedures	63.2	68.71	0.36	1.1	602.33	0.05	0.42
SBIRT	Procedures	-	-	-	5.8	564.68	0.27	0.27
Substance Abuse Residential	Days	43.2	253.57	0.91	62.1	602.16	3.12	4.03
Children's Residential	Days	312.1	182.03	4.73	-	-	-	4.73
RPTC - In State	Days	-	-	-	-	-	-	-
RPTC - Out of State	Days	9.1	350.66	0.27	-	-	-	0.27
Detoxification	Procedures	-	-	-	-	-	-	-
Medical Evaluation	Procedures	11.3	254.16	0.24	-	-	-	0.24
Psychological Testing	Procedures	20.3	624.90	1.06	0.4	603.00	0.02	1.08
Peer Support Services	Units	-	-	-	-	-	-	-
Psychosocial Rehabilitation Services	Procedures	778.6	159.72	10.36	76.7	602.10	3.85	14.21
BH Case Management	Units	240.2	16.00	0.32	13.4	244.35	0.27	0.59
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	11.3	136.51	0.13	1.8	601.80	0.09	0.22
Other Professional MH/SA	Visits	42.1	40.87	0.14	6.2	601.82	0.31	0.45
Subtotal - Behavioral Health		1,942.0	\$ 229.44	\$ 37.13	230.4	\$ 656.42	\$ 12.60	\$ 49.73
Total All Services		10,349.3	\$ 207.50	\$ 178.95	2,380.6	\$ 387.12	\$ 76.80	\$ 255.75

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska, Department of Health and Social Services
Statewide Databook- Appendix C
SFY 2016 and SFY 2017 Data Book - Detailed Summary

Fiscal Year:		SFY 2016						
Population:		Low-Income Family						
Rate Cell:		26-39 Female						
Region:		Statewide						
Member Months:		125,626						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid
		Utilization per 1,000	Paid per Unit	PMPM	Utilization per 1,000	Paid per Unit	PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	156.2	\$ 2,941.06	\$ 38.28	58.2	\$ 3,267.24	\$ 15.84	\$ 54.12
Inpatient Maternity Delivery	Days	28.1	2,946.02	6.89	23.4	3,169.66	6.18	13.08
Inpatient Well Newborn	Days	-	-	-	-	-	-	-
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		184.3	\$ 2,941.81	\$ 45.17	81.6	\$ 3,239.24	\$ 22.02	\$ 67.19
Outpatient Hospital								
Outpatient Emergency Room	Visits	704.5	\$ 828.07	\$ 48.61	396.0	\$ 590.82	\$ 19.50	\$ 68.11
Outpatient Surgery	Visits	90.6	3,009.57	22.73	33.9	970.53	2.74	25.48
Outpatient Radiology	Procedures	228.1	414.27	7.87	84.2	508.44	3.57	11.44
Outpatient Pathology/Lab	Procedures	1,264.1	23.44	2.47	751.5	386.52	24.20	26.67
Outpatient Pharmacy	Procedures	93.0	429.32	3.33	55.9	271.60	1.26	4.59
Other Outpatient	Procedures	307.9	142.92	3.67	341.6	514.95	14.66	18.33
Subtotal - Outpatient Hospital		2,688.3	\$ 395.88	\$ 88.69	1,663.0	\$ 475.77	\$ 65.93	\$ 154.62
Professional								
Inpatient and Outpatient Surgery	Procedures	455.5	\$ 417.84	\$ 15.86	79.9	\$ 475.85	\$ 3.17	\$ 19.03
Anesthesia	Procedures	105.5	472.53	4.15	36.1	504.39	1.52	5.67
Inpatient Visits	Visits	140.0	269.13	3.14	53.1	268.32	1.19	4.33
Emergency Room	Visits	717.0	189.08	11.30	239.5	145.05	2.89	14.19
Office/Home Visits/Consults	Visits	2,764.6	139.06	32.04	559.1	121.00	5.64	37.67
Maternity	Procedures	43.7	631.91	2.30	20.6	864.74	1.49	3.79
Pathology/Lab	Procedures	4,784.7	24.78	9.88	167.6	34.67	0.48	10.37
Radiology	Procedures	1,189.6	108.82	10.79	221.1	64.13	1.18	11.97
Office Administered Drugs	Procedures	348.1	160.99	4.67	36.2	39.35	0.12	4.79
FQHC/RHC/Tribal Clinic	Visits	364.0	284.57	8.63	1,221.4	602.94	61.37	70.00
Physical Exams	Visits	44.8	49.80	0.19	8.3	33.77	0.02	0.21
Therapy	Visits	519.2	143.16	6.19	18.4	54.27	0.08	6.28
Vision	Visits	542.9	110.89	5.02	11.7	127.77	0.13	5.14
Other Professional	Procedures	518.7	152.90	6.61	43.9	99.20	0.36	6.97
Telemedicine	Procedures	2.0	130.24	0.02	45.9	375.19	1.44	1.46
Subtotal - Professional		12,540.3	\$ 115.59	\$ 120.79	2,763.1	\$ 352.12	\$ 81.08	\$ 201.87
Pharmacy								
Psychotropic Drugs	Scripts	877.0	\$ 48.58	\$ 3.55	256.0	\$ 23.47	\$ 0.50	\$ 4.05
Opioid Drugs	Scripts	1,207.1	72.08	7.25	235.7	27.20	0.53	7.79
All Other Drugs	Scripts	5,117.8	72.46	30.90	2,027.5	59.02	9.97	40.87
Subtotal - Pharmacy		7,201.8	\$ 69.49	\$ 41.70	2,519.2	\$ 52.43	\$ 11.01	\$ 52.71
Ancillary								
Ground Transportation	Trips	1,509.4	\$ 46.51	\$ 5.85	1.0	\$ 318.44	\$ 0.03	\$ 5.88
Air Transportation	Trips	473.6	657.38	25.94	1.6	8,023.68	1.09	27.03
Accommodations	Claims	222.9	276.96	5.15	-	-	-	5.15
DME/Prosthetics	Procedures	187.5	131.89	2.06	0.3	97.96	0.00	2.06
Dental	Procedures	2,736.1	166.75	38.02	419.1	376.83	13.16	51.18
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		5,129.6	\$ 180.18	\$ 77.02	422.0	\$ 405.93	\$ 14.28	\$ 91.30
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Nursing Home	Days	1.7	626.15	0.09	-	-	-	0.09
Skilled Nursing Facility	Days	0.3	795.87	0.02	-	-	-	0.02
HCBS	Procedures	24.6	125.17	0.26	-	-	-	0.26
Case Management	Procedures	0.3	249.60	0.01	-	-	-	0.01
Personal Care	Procedures	111.7	83.74	0.78	-	-	-	0.78
Subtotal - LTSS		138.6	\$ 99.65	\$ 1.15	-	\$ 0.00	\$ 0.00	\$ 1.15
Behavioral Health								
IP Psych Hospital - API	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
IP Psych Hospital - All Other	Days	-	-	-	-	-	-	-
IP General Hospital - MH/SA	Days	34.5	2,806.40	8.06	1.8	4,398.41	0.67	8.73
OP General Hospital - MH/SA	Visits	0.6	170.38	0.01	-	-	-	0.01
Screening	Procedures	24.5	35.00	0.07	11.7	598.18	0.59	0.66
Assessment	Procedures	43.0	193.54	0.69	18.9	602.32	0.95	1.64
Crisis Services	Procedures	8.5	145.65	0.10	23.5	598.00	1.17	1.27
Medication Services	Procedures	61.3	70.07	0.36	3.4	595.22	0.17	0.53
Methadone Medication Services	Procedures	1,272.8	12.50	1.33	-	-	-	1.33
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	309.3	97.41	2.51	82.3	601.11	4.12	6.64
Family Therapy OP	Procedures	61.9	109.99	0.57	3.2	512.25	0.14	0.71
Group Therapy OP	Procedures	148.2	52.01	0.64	11.1	601.64	0.56	1.20
SBIRT	Procedures	0.4	43.80	0.00	14.2	601.82	0.71	0.72
Substance Abuse Residential	Days	351.0	256.03	7.49	458.4	330.43	12.62	20.11
Children's Residential	Days	-	-	-	-	-	-	-
RPTC - In State	Days	-	-	-	-	-	-	-
RPTC - Out of State	Days	-	-	-	-	-	-	-
Detoxification	Procedures	-	-	-	7.7	602.09	0.39	0.39
Medical Evaluation	Procedures	23.2	251.86	0.49	0.1	603.00	0.00	0.49
Psychological Testing	Procedures	11.9	707.64	0.70	0.7	472.45	0.03	0.73
Peer Support Services	Units	2.5	16.88	0.00	-	-	-	0.00
Psychosocial Rehabilitation Services	Procedures	419.6	75.52	2.64	150.4	602.31	7.55	10.19
BH Case Management	Units	237.1	15.97	0.32	38.2	212.24	0.68	0.99
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	20.7	108.93	0.19	5.3	593.69	0.26	0.45
Other Professional MH/SA	Visits	67.0	40.63	0.23	22.5	602.17	1.13	1.36
Subtotal - Behavioral Health		3,098.0	\$ 102.27	\$ 26.40	853.7	\$ 446.09	\$ 31.73	\$ 58.14
Total All Services		30,980.9	\$ 155.29	\$ 400.93	8,302.5	\$ 326.72	\$ 226.05	\$ 626.98

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska, Department of Health and Social Services
Statewide Databook- Appendix C
SFY 2016 and SFY 2017 Data Book - Detailed Summary

Fiscal Year: SFY 2016
Population: Low-Income Family
Rate Cell: 26-39 Male
Region: Statewide

Member Months: 69,614

Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	175.3	\$ 3,415.26	\$ 49.89	54.5	\$ 3,177.73	\$ 14.42	\$ 64.32
Inpatient Maternity Delivery	Days	0.3	2,829.91	0.08	-	-	-	0.08
Inpatient Well Newborn	Days	-	-	-	-	-	-	-
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal – Inpatient Hospital		175.7	\$ 3,414.11	\$ 49.98	54.5	\$ 3,177.73	\$ 14.42	\$ 64.40
Outpatient Hospital								
Outpatient Emergency Room	Visits	417.7	\$ 827.39	\$ 28.80	201.5	\$ 582.90	\$ 9.79	\$ 38.59
Outpatient Surgery	Visits	61.7	2,867.25	14.75	22.2	1,097.57	2.03	16.78
Outpatient Radiology	Procedures	95.5	494.04	3.93	35.7	532.33	1.58	5.51
Outpatient Pathology/Lab	Procedures	478.7	19.79	0.79	181.7	403.61	6.11	6.90
Outpatient Pharmacy	Procedures	84.8	618.39	4.37	32.9	286.19	0.79	5.16
Other Outpatient	Procedures	260.6	205.81	4.47	201.0	516.61	8.65	13.12
Subtotal – Outpatient Hospital		1,399.0	\$ 489.81	\$ 57.11	675.0	\$ 514.71	\$ 28.95	\$ 86.06
Professional								
Inpatient and Outpatient Surgery	Procedures	311.0	\$ 455.69	\$ 11.81	57.6	\$ 514.02	\$ 2.47	\$ 14.28
Anesthesia	Procedures	67.6	471.91	2.66	20.5	488.34	0.83	3.49
Inpatient Visits	Visits	127.6	285.73	3.04	29.3	343.11	0.84	3.88
Emergency Room	Visits	436.5	181.89	6.62	108.6	132.41	1.20	7.81
Office/Home Visits/Consults	Visits	1,205.3	143.02	14.36	304.8	123.06	3.13	17.49
Maternity	Procedures	0.7	666.91	0.04	-	-	-	0.04
Pathology/Lab	Procedures	1,899.3	25.81	4.09	46.9	29.37	0.11	4.20
Radiology	Procedures	644.2	91.45	4.91	106.9	55.20	0.49	5.40
Office Administered Drugs	Procedures	136.2	110.60	1.26	18.4	39.25	0.06	1.32
FQHC/RHC/Tribal Clinic	Visits	193.6	288.74	4.66	423.5	607.55	21.44	26.10
Physical Exams	Visits	20.9	51.85	0.09	10.0	34.50	0.03	0.12
Therapy	Visits	239.3	142.22	2.84	2.6	69.80	0.02	2.85
Vision	Visits	333.7	114.35	3.18	10.2	113.49	0.10	3.28
Other Professional	Procedures	269.1	122.22	2.74	31.4	93.57	0.24	2.99
Telemedicine	Procedures	0.5	67.39	0.00	39.5	383.92	1.26	1.27
Subtotal – Professional		5,885.2	\$ 126.99	\$ 62.28	1,210.1	\$ 319.51	\$ 32.22	\$ 94.50
Pharmacy								
Psychotropic Drugs	Scripts	319.2	\$ 63.09	\$ 1.68	79.5	\$ 27.76	\$ 0.18	\$ 1.86
Opioid Drugs	Scripts	736.7	73.89	4.54	139.6	42.85	0.50	5.04
All Other Drugs	Scripts	2,160.6	196.73	35.42	837.6	80.20	5.60	41.02
Subtotal – Pharmacy		3,216.6	\$ 155.33	\$ 41.64	1,056.7	\$ 71.32	\$ 6.28	\$ 47.92
Ancillary								
Ground Transportation	Trips	786.9	\$ 56.08	\$ 3.68	0.7	\$ 219.95	\$ 0.01	\$ 3.69
Air Transportation	Trips	245.3	741.64	15.16	0.7	6,896.00	0.40	15.56
Accommodations	Claims	115.5	229.60	2.21	-	-	-	2.21
DME/Prosthetics	Procedures	213.7	126.98	2.26	-	-	-	2.26
Dental	Procedures	2,239.4	170.34	31.79	265.6	383.97	8.50	40.29
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		3,600.8	\$ 183.62	\$ 55.10	267.0	\$ 400.36	\$ 8.91	\$ 64.01
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Nursing Home	Days	-	-	-	-	-	-	-
Skilled Nursing Facility	Days	5.7	677.89	0.32	-	-	-	0.32
HCBS	Procedures	24.5	113.80	0.23	-	-	-	0.23
Case Management	Procedures	-	-	-	-	-	-	-
Personal Care	Procedures	-	-	-	-	-	-	-
Subtotal – LTSS		30.2	\$ 220.17	\$ 0.55	-	\$ 0.00	\$ 0.00	\$ 0.55
Behavioral Health								
IP Psych Hospital - API	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
IP Psych Hospital - All Other	Days	-	-	-	-	-	-	-
IP General Hospital - MH/SA	Days	16.9	2,975.66	4.19	0.7	3,852.06	0.22	4.41
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	18.8	34.72	0.05	10.2	602.49	0.51	0.57
Assessment	Procedures	28.3	200.50	0.47	16.2	596.83	0.81	1.28
Crisis Services	Procedures	3.6	123.76	0.04	7.8	579.82	0.37	0.41
Medication Services	Procedures	15.7	64.73	0.08	1.9	506.09	0.08	0.16
Methadone Medication Services	Procedures	358.5	12.50	0.37	-	-	-	0.37
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	73.3	93.23	0.57	31.9	582.39	1.55	2.12
Family Therapy OP	Procedures	26.9	97.22	0.22	1.4	520.74	0.06	0.28
Group Therapy OP	Procedures	18.8	65.96	0.10	6.2	601.44	0.31	0.41
SBIRT	Procedures	0.7	43.80	0.00	9.3	602.11	0.47	0.47
Substance Abuse Residential	Days	123.8	242.48	2.50	93.6	505.40	3.94	6.44
Children's Residential	Days	-	-	-	-	-	-	-
RPTC - In State	Days	-	-	-	-	-	-	-
RPTC - Out of State	Days	-	-	-	-	-	-	-
Detoxification	Procedures	-	-	-	2.1	601.83	0.10	0.10
Medical Evaluation	Procedures	8.8	249.62	0.18	-	-	-	0.18
Psychological Testing	Procedures	4.1	820.25	0.28	0.5	601.00	0.03	0.31
Peer Support Services	Units	-	-	-	0.7	150.75	0.01	0.01
Psychosocial Rehabilitation Services	Procedures	229.4	77.05	1.47	107.6	600.53	5.38	6.86
BH Case Management	Units	45.3	15.97	0.06	6.6	269.45	0.15	0.21
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	6.9	132.25	0.08	2.2	601.46	0.11	0.19
Other Professional MH/SA	Visits	31.7	40.01	0.11	15.9	595.47	0.79	0.89
Subtotal – Behavioral Health		1,011.5	\$ 127.96	\$ 10.79	314.6	\$ 567.90	\$ 14.89	\$ 25.67
Total All Services		15,319.0	\$ 217.32	\$ 277.43	3,577.9	\$ 354.43	\$ 105.68	\$ 383.11

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska, Department of Health and Social Services
Statewide Databook- Appendix C
SFY 2016 and SFY 2017 Data Book - Detailed Summary

Fiscal Year:		SFY 2016						
Population:		Low-Income Family						
Rate Cell:		3-12 Months						
Region:		Statewide						
Member Months:		58,484						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	461.9	\$ 3,958.14	\$ 152.34	266.7	\$ 3,234.41	\$ 71.89	\$ 224.24
Inpatient Maternity Delivery	Days	-	-	-	-	-	-	-
Inpatient Well Newborn	Days	-	-	-	-	-	-	-
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		461.9	\$ 3,958.14	\$ 152.34	266.7	\$ 3,234.41	\$ 71.89	\$ 224.24
Outpatient Hospital								
Outpatient Emergency Room	Visits	555.8	\$ 399.96	\$ 18.53	536.3	\$ 568.34	\$ 25.40	\$ 43.93
Outpatient Surgery	Visits	23.8	2,088.93	4.14	12.7	1,280.96	1.36	5.50
Outpatient Radiology	Procedures	60.7	237.08	1.20	28.1	525.53	1.23	2.43
Outpatient Pathology/Lab	Procedures	392.3	26.41	0.86	119.2	379.42	3.77	4.63
Outpatient Pharmacy	Procedures	16.4	35.70	0.05	31.8	472.56	1.25	1.30
Other Outpatient	Procedures	91.9	132.80	1.02	424.1	557.59	19.71	20.72
Subtotal - Outpatient Hospital		1,141.0	\$ 271.32	\$ 25.80	1,152.3	\$ 549.02	\$ 52.72	\$ 78.52
Professional								
Inpatient and Outpatient Surgery	Procedures	159.6	\$ 444.34	\$ 5.91	30.2	\$ 337.45	\$ 0.85	\$ 6.76
Anesthesia	Procedures	66.3	346.40	1.91	29.1	251.63	0.61	2.52
Inpatient Visits	Visits	500.0	410.04	17.09	143.6	414.00	4.96	22.04
Emergency Room	Visits	572.9	151.97	7.26	252.6	123.31	2.60	9.85
Office/Home Visits/Consults	Visits	2,014.9	120.50	20.23	833.2	112.23	7.79	28.02
Maternity	Procedures	-	-	-	-	-	-	-
Pathology/Lab	Procedures	243.6	13.33	0.27	35.5	8.03	0.02	0.29
Radiology	Procedures	435.2	33.49	1.21	126.0	41.24	0.43	1.65
Office Administered Drugs	Procedures	58.3	31.09	0.15	5.3	36.32	0.02	0.17
FQHC/RHC/Tribal Clinic	Visits	225.7	301.28	5.67	1,367.7	601.30	68.54	74.20
Physical Exams	Visits	2,191.8	196.83	35.95	196.8	150.86	2.47	38.42
Therapy	Visits	516.9	182.69	7.87	3.1	106.35	0.03	7.90
Vision	Visits	77.6	93.25	0.60	6.0	179.48	0.09	0.69
Other Professional	Procedures	447.7	84.39	3.15	167.8	34.90	0.49	3.64
Telemedicine	Procedures	0.2	70.39	0.00	78.4	450.41	2.94	2.94
Subtotal - Professional		7,510.5	\$ 171.39	\$ 107.27	3,275.3	\$ 336.45	\$ 91.83	\$ 199.10
Pharmacy								
Psychotropic Drugs	Scripts	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Opioid Drugs	Scripts	4.1	6.36	0.00	1.2	6.02	0.00	0.00
All Other Drugs	Scripts	1,481.6	107.91	13.32	767.8	35.25	2.26	15.58
Subtotal - Pharmacy		1,485.7	\$ 107.63	\$ 13.33	769.0	\$ 35.21	\$ 2.26	\$ 15.58
Ancillary								
Ground Transportation	Trips	1,442.6	\$ 30.45	\$ 3.66	1.4	\$ 307.37	\$ 0.04	\$ 3.70
Air Transportation	Trips	471.9	904.23	35.56	2.1	7,103.69	1.21	36.77
Accommodations	Claims	250.5	228.51	4.77	-	-	-	4.77
DME/Prosthetics	Procedures	995.5	257.01	21.32	-	-	-	21.32
Dental	Procedures	117.2	80.79	0.79	48.4	570.38	2.30	3.09
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		3,277.8	\$ 242.00	\$ 66.10	51.9	\$ 821.34	\$ 3.55	\$ 69.66
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Nursing Home	Days	-	-	-	-	-	-	-
Skilled Nursing Facility	Days	-	-	-	-	-	-	-
HCBS	Procedures	223.2	659.90	12.28	-	-	-	12.28
Case Management	Procedures	210.1	303.08	5.31	38.2	303.06	0.96	6.27
Personal Care	Procedures	-	-	-	-	-	-	-
Subtotal - LTSS		433.3	\$ 486.90	\$ 17.58	38.2	\$ 303.06	\$ 0.96	\$ 18.55
Behavioral Health								
IP Psych Hospital - API	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
IP Psych Hospital - All Other	Days	-	-	-	-	-	-	-
IP General Hospital - MH/SA	Days	-	-	-	-	-	-	-
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	-	-	-	-	-	-	-
Assessment	Procedures	-	-	-	-	-	-	-
Crisis Services	Procedures	0.2	184.00	0.00	0.2	601.00	0.01	0.01
Medication Services	Procedures	-	-	-	-	-	-	-
Methadone Medication Services	Procedures	-	-	-	-	-	-	-
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	0.8	100.00	0.01	-	-	-	0.01
Family Therapy OP	Procedures	0.4	110.00	0.00	-	-	-	0.00
Group Therapy OP	Procedures	-	-	-	-	-	-	-
SBIRT	Procedures	-	-	-	-	-	-	-
Substance Abuse Residential	Days	-	-	-	-	-	-	-
Children's Residential	Days	-	-	-	-	-	-	-
RPTC - In State	Days	-	-	-	-	-	-	-
RPTC - Out of State	Days	-	-	-	-	-	-	-
Detoxification	Procedures	-	-	-	-	-	-	-
Medical Evaluation	Procedures	0.2	265.27	0.00	-	-	-	0.00
Psychological Testing	Procedures	423.1	18.02	0.64	2.1	121.70	0.02	0.66
Peer Support Services	Units	-	-	-	-	-	-	-
Psychosocial Rehabilitation Services	Procedures	-	-	-	-	-	-	-
BH Case Management	Units	3.3	16.00	0.00	-	-	-	0.00
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	-	-	-	-	-	-	-
Other Professional MH/SA	Visits	-	-	-	-	-	-	-
Subtotal - Behavioral Health		428.0	\$ 18.45	\$ 0.66	2.3	\$ 165.27	\$ 0.03	\$ 0.69
Total All Services		14,738.3	\$ 311.91	\$ 383.08	5,555.7	\$ 482.21	\$ 223.25	\$ 606.33

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska, Department of Health and Social Services
 Statewide Databook- Appendix C
 SFY 2016 and SFY 2017 Data Book - Detailed Summary

Fiscal Year:		SFY 2016						
Population:		Low-Income Family						
Rate Cell:		40+						
Region:		Statewide						
Member Months:		117,117						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid
		Utilization per 1,000	Paid per Unit	PMPM	Utilization per 1,000	Paid per Unit	PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	306.1	\$ 3,141.39	\$ 80.12	150.1	\$ 2,867.07	\$ 35.86	\$ 115.98
Inpatient Maternity Delivery	Days	1.1	3,339.44	0.31	0.8	3,079.38	0.21	0.52
Inpatient Well Newborn	Days	-	-	-	-	-	-	-
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		307.2	\$ 3,142.11	\$ 80.43	150.9	\$ 2,868.22	\$ 36.07	\$ 116.51
Outpatient Hospital								
Outpatient Emergency Room	Visits	426.3	\$ 959.59	\$ 34.09	301.6	\$ 604.64	\$ 15.20	\$ 49.29
Outpatient Surgery	Visits	117.7	2,649.70	26.00	77.8	984.96	6.38	32.38
Outpatient Radiology	Procedures	260.7	473.49	10.29	108.7	477.70	4.33	14.61
Outpatient Pathology/Lab	Procedures	1,159.7	21.22	2.05	658.2	371.11	20.36	22.41
Outpatient Pharmacy	Procedures	238.7	200.35	3.99	55.1	314.44	1.44	5.43
Other Outpatient	Procedures	629.7	200.31	10.51	542.7	476.81	21.57	32.08
Subtotal - Outpatient Hospital		2,832.9	\$ 368.20	\$ 86.92	1,744.2	\$ 476.61	\$ 69.28	\$ 156.20
Professional								
Inpatient and Outpatient Surgery	Procedures	580.5	\$ 471.87	\$ 22.83	137.4	\$ 524.86	\$ 6.01	\$ 28.84
Anesthesia	Procedures	110.0	509.71	4.67	44.2	457.34	1.68	6.36
Inpatient Visits	Visits	236.7	276.47	5.45	63.7	390.12	2.07	7.52
Emergency Room	Visits	453.2	200.36	7.57	173.8	146.24	2.12	9.68
Office/Home Visits/Consults	Visits	2,331.6	141.04	27.40	791.3	121.76	8.03	35.43
Maternity	Procedures	4.0	334.39	0.11	0.8	665.45	0.05	0.16
Pathology/Lab	Procedures	2,995.4	25.45	6.35	173.0	50.28	0.72	7.08
Radiology	Procedures	1,380.3	147.82	17.00	286.7	51.65	1.23	18.24
Office Administered Drugs	Procedures	363.9	225.71	6.85	32.2	38.55	0.10	6.95
FQHC/RHC/Tribal Clinic	Visits	439.3	285.76	10.46	1,015.5	587.67	49.73	60.19
Physical Exams	Visits	46.3	51.90	0.20	13.3	34.23	0.04	0.24
Therapy	Visits	599.5	143.21	7.15	15.6	57.37	0.07	7.23
Vision	Visits	687.6	108.10	6.19	18.4	118.76	0.18	6.38
Other Professional	Procedures	645.0	124.45	6.69	106.9	115.67	1.03	7.72
Telemedicine	Procedures	2.2	134.13	0.02	85.0	401.48	2.85	2.87
Subtotal - Professional		10,875.5	\$ 142.29	\$ 128.96	2,957.8	\$ 308.02	\$ 75.92	\$ 204.88
Pharmacy								
Psychotropic Drugs	Scripts	735.3	\$ 40.47	\$ 2.48	250.4	\$ 21.15	\$ 0.44	\$ 2.92
Opioid Drugs	Scripts	1,114.3	59.74	5.55	329.0	11.66	0.32	5.87
All Other Drugs	Scripts	6,194.6	110.31	56.94	3,282.5	61.51	16.83	73.77
Subtotal - Pharmacy		8,044.2	\$ 96.92	\$ 64.97	3,861.9	\$ 54.65	\$ 17.59	\$ 82.56
Ancillary								
Ground Transportation	Trips	2,414.2	\$ 40.88	\$ 8.23	1.0	\$ 324.18	\$ 0.03	\$ 8.25
Air Transportation	Trips	769.8	666.41	42.75	2.2	8,778.22	1.57	44.32
Accommodations	Claims	360.1	240.41	7.21	-	-	-	7.21
DME/Prosthetics	Procedures	470.2	119.56	4.68	0.1	13.60	0.00	4.68
Dental	Procedures	2,166.8	168.59	30.44	346.6	417.28	12.05	42.49
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		6,181.0	\$ 181.16	\$ 93.31	349.9	\$ 468.30	\$ 13.66	\$ 106.97
LTSS								
Hospice	Days	0.8	\$ 6,276.93	\$ 0.43	-	\$ 0.00	\$ 0.00	\$ 0.43
Nursing Home	Days	3.3	638.76	0.17	0.8	3,335.00	0.23	0.40
Skilled Nursing Facility	Days	20.0	697.21	1.16	-	-	-	1.16
HCBS	Procedures	98.5	75.95	0.62	-	-	-	0.62
Case Management	Procedures	0.7	240.77	0.01	0.1	358.74	0.00	0.02
Personal Care	Procedures	762.4	57.78	3.67	-	-	-	3.67
Subtotal - LTSS		885.7	\$ 82.28	\$ 6.07	0.9	\$ 3,004.30	\$ 0.23	\$ 6.30
Behavioral Health								
IP Psych Hospital - API	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
IP Psych Hospital - All Other	Days	-	-	-	-	-	-	-
IP General Hospital - MH/SA	Days	18.8	2,976.39	4.65	0.3	2,926.00	0.07	4.73
OP General Hospital - MH/SA	Visits	0.3	21.94	0.00	0.2	10.46	0.00	0.00
Screening	Procedures	13.6	35.82	0.04	6.1	593.42	0.30	0.34
Assessment	Procedures	19.8	204.44	0.34	11.3	594.87	0.56	0.90
Crisis Services	Procedures	3.8	106.18	0.03	10.2	596.06	0.51	0.54
Medication Services	Procedures	14.9	66.64	0.08	2.9	602.43	0.14	0.23
Methadone Medication Services	Procedures	215.6	12.50	0.22	-	-	-	0.22
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	154.3	106.21	1.37	59.5	602.14	2.99	4.35
Family Therapy OP	Procedures	25.1	112.40	0.24	1.3	565.43	0.06	0.30
Group Therapy OP	Procedures	19.8	60.79	0.10	3.3	602.19	0.16	0.26
SBIRT	Procedures	0.3	39.20	0.00	10.2	601.94	0.51	0.51
Substance Abuse Residential	Days	49.3	221.62	0.91	140.7	348.70	4.09	5.00
Children's Residential	Days	-	-	-	-	-	-	-
RPTC - In State	Days	-	-	-	-	-	-	-
RPTC - Out of State	Days	-	-	-	-	-	-	-
Detoxification	Procedures	-	-	-	2.0	602.40	0.10	0.10
Medical Evaluation	Procedures	9.9	243.24	0.20	0.1	603.00	0.01	0.21
Psychological Testing	Procedures	6.5	767.54	0.41	0.7	528.88	0.03	0.44
Peer Support Services	Units	0.1	17.00	0.00	0.4	150.25	0.01	0.01
Psychosocial Rehabilitation Services	Procedures	192.0	76.98	1.23	116.6	602.18	5.85	7.08
BH Case Management	Units	148.0	16.00	0.20	22.2	227.52	0.42	0.62
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	10.0	107.37	0.09	2.5	581.69	0.12	0.21
Other Professional MH/SA	Visits	30.7	40.49	0.10	10.9	601.79	0.54	0.65
Subtotal - Behavioral Health		932.7	\$ 131.47	\$ 10.22	401.5	\$ 492.75	\$ 16.49	\$ 26.71
Total All Services		30,059.1	\$ 187.99	\$ 470.89	9,467.2	\$ 290.56	\$ 229.23	\$ 700.12

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska, Department of Health and Social Services
Statewide Databook- Appendix C
SFY 2016 and SFY 2017 Data Book - Detailed Summary

Fiscal Year:		SFY 2016						
Population:		Low-Income Family						
Rate Cell:		5-13 Male and Female						
Region:		Statewide						
Member Months:		431,847						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid
		Utilization per 1,000	Paid per Unit	PMPM	Utilization per 1,000	Paid per Unit	PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	25.8	\$ 3,912.09	\$ 8.41	13.8	\$ 3,203.83	\$ 3.69	\$ 12.10
Inpatient Maternity Delivery	Days	-	-	-	-	-	-	-
Inpatient Well Newborn	Days	-	-	-	-	-	-	-
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal – Inpatient Hospital		25.8	\$ 3,912.09	\$ 8.41	13.8	\$ 3,203.83	\$ 3.69	\$ 12.10
Outpatient Hospital								
Outpatient Emergency Room	Visits	173.7	\$ 514.39	\$ 7.45	122.2	\$ 557.17	\$ 5.68	\$ 13.12
Outpatient Surgery	Visits	37.7	2,397.32	7.52	18.4	1,073.53	1.65	9.17
Outpatient Radiology	Procedures	40.3	291.73	0.98	19.2	494.40	0.79	1.77
Outpatient Pathology/Lab	Procedures	314.5	19.63	0.51	155.8	429.95	5.58	6.10
Outpatient Pharmacy	Procedures	57.5	369.86	1.77	10.7	288.04	0.26	2.03
Other Outpatient	Procedures	87.7	166.61	1.22	153.6	543.16	6.95	8.17
Subtotal – Outpatient Hospital		711.4	\$ 328.15	\$ 19.45	480.0	\$ 522.70	\$ 20.91	\$ 40.36
Professional								
Inpatient and Outpatient Surgery	Procedures	102.9	\$ 310.83	\$ 2.67	31.9	\$ 462.12	\$ 1.23	\$ 3.90
Anesthesia	Procedures	47.8	431.49	1.72	20.4	445.92	0.76	2.48
Inpatient Visits	Visits	95.1	457.20	3.62	7.7	282.37	0.18	3.80
Emergency Room	Visits	175.1	146.04	2.13	70.5	113.49	0.67	2.80
Office/Home Visits/Consults	Visits	917.3	133.65	10.22	348.7	120.89	3.51	13.73
Maternity	Procedures	0.0	358.67	0.00	-	-	-	0.00
Pathology/Lab	Procedures	237.5	18.65	0.37	74.2	12.87	0.08	0.45
Radiology	Procedures	207.6	49.97	0.86	40.7	42.34	0.14	1.01
Office Administered Drugs	Procedures	22.4	62.43	0.12	18.8	34.19	0.05	0.17
FQHC/RHC/Tribal Clinic	Visits	145.2	293.42	3.55	474.1	597.80	23.62	27.17
Physical Exams	Visits	269.5	152.13	3.42	37.6	103.25	0.32	3.74
Therapy	Visits	982.8	139.50	11.43	0.8	54.26	0.00	11.43
Vision	Visits	628.5	94.53	4.95	10.9	67.48	0.06	5.01
Other Professional	Procedures	332.3	95.97	2.66	32.1	70.28	0.19	2.85
Telemedicine	Procedures	8.1	168.17	0.11	63.0	366.39	1.92	2.04
Subtotal – Professional		4,172.1	\$ 137.54	\$ 47.82	1,231.4	\$ 319.07	\$ 32.74	\$ 80.56
Pharmacy								
Psychotropic Drugs	Scripts	182.5	\$ 72.51	\$ 1.10	9.5	\$ 28.61	\$ 0.02	\$ 1.13
Opioid Drugs	Scripts	31.1	12.51	0.03	11.2	13.52	0.01	0.04
All Other Drugs	Scripts	1,387.7	117.84	13.63	397.3	65.79	2.18	15.81
Subtotal – Pharmacy		1,601.4	\$ 110.63	\$ 14.76	418.0	\$ 63.55	\$ 2.21	\$ 16.98
Ancillary								
Ground Transportation	Trips	1,104.7	\$ 32.59	\$ 3.00	0.3	\$ 286.85	\$ 0.01	\$ 3.01
Air Transportation	Trips	523.1	533.36	23.25	0.4	7,742.84	0.27	23.52
Accommodations	Claims	134.6	262.41	2.94	-	-	-	2.94
DME/Prosthetics	Procedures	131.0	134.96	1.47	0.1	36.87	0.00	1.47
Dental	Procedures	4,302.3	83.48	29.93	508.0	605.21	25.62	55.55
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		6,195.8	\$ 117.36	\$ 60.60	508.8	\$ 610.74	\$ 25.89	\$ 86.49
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Nursing Home	Days	-	-	-	-	-	-	-
Skilled Nursing Facility	Days	-	-	-	-	-	-	-
HCBS	Procedures	34.3	220.65	0.63	0.0	559.92	0.00	0.63
Case Management	Procedures	3.3	142.23	0.04	0.1	358.74	0.00	0.04
Personal Care	Procedures	4.4	74.32	0.03	-	-	-	0.03
Subtotal – LTSS		42.0	\$ 199.24	\$ 0.70	0.1	\$ 398.98	\$ 0.00	\$ 0.70
Behavioral Health								
IP Psych Hospital - API	Days	5.5	\$ 1,372.70	\$ 0.63	-	\$ 0.00	\$ 0.00	\$ 0.63
IP Psych Hospital - All Other	Days	254.8	716.61	15.22	-	-	-	15.22
IP General Hospital - MH/SA	Days	11.4	2,658.01	2.53	0.5	4,283.90	0.17	2.70
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	19.9	35.05	0.06	3.4	602.42	0.17	0.23
Assessment	Procedures	32.1	222.68	0.60	7.4	596.63	0.37	0.96
Crisis Services	Procedures	5.2	118.64	0.05	5.0	599.02	0.25	0.30
Medication Services	Procedures	71.8	30.01	0.18	1.0	583.60	0.05	0.23
Methadone Medication Services	Procedures	11.6	12.50	0.01	-	-	-	0.01
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	514.0	91.64	3.93	65.4	599.35	3.27	7.19
Family Therapy OP	Procedures	176.6	100.32	1.48	21.6	594.40	1.07	2.54
Group Therapy OP	Procedures	215.9	77.12	1.39	4.6	600.18	0.23	1.62
SBIRT	Procedures	-	-	-	0.2	598.20	0.01	0.01
Substance Abuse Residential	Days	-	-	-	6.9	602.66	0.34	0.34
Children's Residential	Days	1,182.8	173.09	17.06	66.0	460.81	2.54	19.60
RPTC - In State	Days	172.5	335.93	4.83	-	-	-	4.83
RPTC - Out of State	Days	253.2	369.76	7.80	-	-	-	7.80
Detoxification	Procedures	-	-	-	-	-	-	-
Medical Evaluation	Procedures	11.1	247.35	0.23	0.1	265.27	0.00	0.23
Psychological Testing	Procedures	64.8	595.22	3.22	1.1	601.80	0.06	3.27
Peer Support Services	Units	10.3	17.00	0.01	-	-	-	0.01
Psychosocial Rehabilitation Services	Procedures	2,257.9	199.51	37.54	91.1	601.01	4.56	42.10
BH Case Management	Units	1,086.0	15.97	1.45	23.7	310.48	0.61	2.06
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	11.8	98.82	0.10	2.7	587.08	0.13	0.23
Other Professional MH/SA	Visits	79.9	43.29	0.29	10.7	602.04	0.54	0.82
Subtotal – Behavioral Health		6,449.3	\$ 183.43	\$ 98.58	311.3	\$ 553.64	\$ 14.36	\$ 112.95
Total All Services		19,197.8	\$ 156.47	\$ 250.32	2,963.5	\$ 404.21	\$ 99.82	\$ 350.14

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska, Department of Health and Social Services
Statewide Databook- Appendix C
SFY 2016 and SFY 2017 Data Book - Detailed Summary

Fiscal Year: SFY 2016
Population: Medicaid Expansion
Rate Cell: 19-25 Female
Region: Statewide

Member Months: 10,420

Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	286.8	\$ 2,787.35	\$ 66.61	108.3	\$ 3,199.45	\$ 28.86	\$ 95.47
Inpatient Maternity Delivery	Days	19.6	3,426.35	5.59	2.3	3,335.00	0.64	6.23
Inpatient Well Newborn	Days	-	-	-	-	-	-	-
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal – Inpatient Hospital		306.3	\$ 2,828.19	\$ 72.20	110.6	\$ 3,202.27	\$ 29.50	\$ 101.70
Outpatient Hospital								
Outpatient Emergency Room	Visits	1,011.2	\$ 810.84	\$ 68.32	416.9	\$ 531.15	\$ 18.45	\$ 86.78
Outpatient Surgery	Visits	54.1	2,099.33	9.47	13.8	804.50	0.93	10.40
Outpatient Radiology	Procedures	131.3	336.17	3.68	39.2	520.91	1.70	5.38
Outpatient Pathology/Lab	Procedures	1,069.9	22.75	2.03	700.2	349.20	20.38	22.40
Outpatient Pharmacy	Procedures	38.0	57.53	0.18	33.4	230.48	0.64	0.82
Other Outpatient	Procedures	163.5	149.80	2.04	171.6	532.82	7.62	9.66
Subtotal – Outpatient Hospital		2,468.0	\$ 416.80	\$ 85.72	1,375.1	\$ 433.86	\$ 49.72	\$ 135.44
Professional								
Inpatient and Outpatient Surgery	Procedures	255.7	\$ 398.78	\$ 8.50	57.6	\$ 442.55	\$ 2.12	\$ 10.62
Anesthesia	Procedures	72.6	466.07	2.82	29.9	444.02	1.11	3.93
Inpatient Visits	Visits	418.1	274.17	9.55	63.3	448.66	2.37	11.92
Emergency Room	Visits	1,007.7	191.58	16.09	314.4	157.94	4.14	20.23
Office/Home Visits/Consults	Visits	1,695.3	149.46	21.11	313.3	114.55	2.99	24.11
Maternity	Procedures	38.0	451.67	1.43	4.6	884.25	0.34	1.77
Pathology/Lab	Procedures	2,560.2	21.32	4.55	95.6	31.15	0.25	4.80
Radiology	Procedures	987.0	80.04	6.58	215.4	62.28	1.12	7.70
Office Administered Drugs	Procedures	153.2	42.57	0.54	21.9	41.16	0.08	0.62
FQHC/RHC/Tribal Clinic	Visits	451.5	282.72	10.64	1,110.2	598.35	55.36	65.99
Physical Exams	Visits	64.5	67.20	0.36	3.5	27.44	0.01	0.37
Therapy	Visits	382.4	150.75	4.80	5.8	52.75	0.03	4.83
Vision	Visits	497.5	110.28	4.57	11.5	135.99	0.13	4.70
Other Professional	Procedures	425.0	165.48	5.86	43.8	55.94	0.20	6.06
Telemedicine	Procedures	23.0	98.53	0.19	28.8	331.49	0.80	0.98
Subtotal – Professional		9,031.5	\$ 129.68	\$ 97.60	2,319.5	\$ 367.48	\$ 71.03	\$ 168.63
Pharmacy								
Psychotropic Drugs	Scripts	551.7	\$ 54.54	\$ 2.51	180.8	\$ 16.10	\$ 0.24	\$ 2.75
Opioid Drugs	Scripts	491.8	59.29	2.43	158.9	19.58	0.26	2.69
All Other Drugs	Scripts	2,772.1	66.30	15.32	1,141.3	48.99	4.66	19.98
Subtotal – Pharmacy		3,815.5	\$ 63.70	\$ 20.25	1,481.1	\$ 41.82	\$ 5.16	\$ 25.42
Ancillary								
Ground Transportation	Trips	730.2	\$ 102.61	\$ 6.24	-	\$ 0.00	\$ 0.00	\$ 6.24
Air Transportation	Trips	191.2	884.03	14.08	-	-	-	14.08
Accommodations	Claims	81.8	209.28	1.43	-	-	-	1.43
DME/Prosthetics	Procedures	95.6	216.28	1.72	-	-	-	1.72
Dental	Procedures	3,092.3	171.54	44.20	452.6	372.77	14.06	58.26
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		4,191.0	\$ 193.79	\$ 67.68	452.6	\$ 372.77	\$ 14.06	\$ 81.74
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Nursing Home	Days	-	-	-	-	-	-	-
Skilled Nursing Facility	Days	26.5	770.23	1.70	-	-	-	1.70
HCBS	Procedures	175.1	226.26	3.30	-	-	-	3.30
Case Management	Procedures	4.6	243.18	0.09	2.3	358.74	0.07	0.16
Personal Care	Procedures	-	-	-	-	-	-	-
Subtotal – LTSS		206.2	\$ 296.53	\$ 5.09	2.3	\$ 358.74	\$ 0.07	\$ 5.16
Behavioral Health								
IP Psych Hospital - API	Days	24.2	\$ 1,319.13	\$ 2.66	-	\$ 0.00	\$ 0.00	\$ 2.66
IP Psych Hospital - All Other	Days	-	-	-	-	-	-	-
IP General Hospital - MH/SA	Days	202.7	2,847.34	48.10	8.1	5,212.31	3.50	51.60
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	63.3	36.01	0.19	9.2	603.00	0.46	0.65
Assessment	Procedures	63.3	186.65	0.99	24.2	596.90	1.20	2.19
Crisis Services	Procedures	27.6	133.63	0.31	32.2	602.43	1.62	1.93
Medication Services	Procedures	61.0	41.74	0.21	9.2	602.50	0.46	0.67
Methadone Medication Services	Procedures	221.1	12.50	0.23	-	-	-	0.23
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	266.0	95.38	2.11	70.3	595.42	3.49	5.60
Family Therapy OP	Procedures	32.2	108.77	0.29	3.5	601.00	0.17	0.47
Group Therapy OP	Procedures	152.0	60.96	0.77	53.0	602.96	2.66	3.43
SBIRT	Procedures	-	-	-	12.7	602.27	0.64	0.64
Substance Abuse Residential	Days	661.1	233.62	12.87	1,006.6	228.84	19.19	32.06
Children's Residential	Days	-	-	-	-	-	-	-
RPTC - In State	Days	-	-	-	-	-	-	-
RPTC - Out of State	Days	34.6	366.00	1.05	-	-	-	1.05
Detoxification	Procedures	-	-	-	25.3	602.00	1.27	1.27
Medical Evaluation	Procedures	56.4	247.74	1.17	-	-	-	1.17
Psychological Testing	Procedures	4.6	482.58	0.19	-	-	-	0.19
Peer Support Services	Units	-	-	-	-	-	-	-
Psychosocial Rehabilitation Services	Procedures	597.7	107.72	5.37	210.8	583.25	10.24	15.61
BH Case Management	Units	844.2	16.00	1.13	59.9	301.23	1.50	2.63
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	25.3	152.47	0.32	5.8	602.60	0.29	0.61
Other Professional MH/SA	Visits	99.0	39.31	0.32	21.9	602.68	1.10	1.42
Subtotal – Behavioral Health		3,436.6	\$ 273.31	\$ 78.27	1,552.5	\$ 369.53	\$ 47.81	\$ 126.08
Total All Services		23,455.1	\$ 218.37	\$ 426.82	7,293.6	\$ 357.60	\$ 217.35	\$ 644.17

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska, Department of Health and Social Services
Statewide Databook- Appendix C
SFY 2016 and SFY 2017 Data Book - Detailed Summary

Fiscal Year: SFY 2016
Population: Medicaid Expansion
Rate Cell: 19-25 Male
Region: Statewide

Member Months: 13,696

Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	720.2	\$ 2,432.11	\$ 145.97	127.0	\$ 3,097.73	\$ 32.80	\$ 178.77
Inpatient Maternity Delivery	Days	-	-	-	-	-	-	-
Inpatient Well Newborn	Days	-	-	-	-	-	-	-
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal – Inpatient Hospital		720.2	\$ 2,432.11	\$ 145.97	127.0	\$ 3,097.73	\$ 32.80	\$ 178.77
Outpatient Hospital								
Outpatient Emergency Room	Visits	594.1	\$ 866.12	\$ 42.88	318.9	\$ 563.40	\$ 14.97	\$ 57.85
Outpatient Surgery	Visits	42.9	3,291.41	11.78	19.3	883.00	1.42	13.19
Outpatient Radiology	Procedures	79.7	395.13	2.63	32.4	493.95	1.33	3.96
Outpatient Pathology/Lab	Procedures	421.4	19.94	0.70	181.4	392.87	5.94	6.64
Outpatient Pharmacy	Procedures	22.8	38.28	0.07	41.2	302.82	1.04	1.11
Other Outpatient	Procedures	253.2	167.77	3.54	129.7	482.19	5.21	8.75
Subtotal – Outpatient Hospital		1,414.2	\$ 522.64	\$ 61.59	722.9	\$ 496.61	\$ 29.91	\$ 91.51
Professional								
Inpatient and Outpatient Surgery	Procedures	356.6	\$ 530.98	\$ 15.78	59.6	\$ 655.95	\$ 3.26	\$ 19.04
Anesthesia	Procedures	88.5	493.61	3.64	39.4	409.59	1.35	4.99
Inpatient Visits	Visits	540.6	299.83	13.51	85.0	372.08	2.64	16.14
Emergency Room	Visits	580.0	187.54	9.06	212.9	157.33	2.79	11.86
Office/Home Visits/Consults	Visits	859.5	144.79	10.37	241.0	124.61	2.50	12.87
Maternity	Procedures	-	-	-	-	-	-	-
Pathology/Lab	Procedures	1,800.6	25.17	3.78	27.2	23.21	0.05	3.83
Radiology	Procedures	878.8	127.04	9.30	198.0	56.43	0.93	10.23
Office Administered Drugs	Procedures	204.2	232.10	3.95	7.0	49.60	0.03	3.98
FQHC/RHC/Tribal Clinic	Visits	228.7	289.45	5.52	543.2	607.13	27.48	33.00
Physical Exams	Visits	23.7	146.47	0.29	10.5	56.05	0.05	0.34
Therapy	Visits	118.3	156.04	1.54	0.9	46.85	0.00	1.54
Vision	Visits	312.8	104.71	2.73	5.3	113.41	0.05	2.78
Other Professional	Procedures	304.9	116.71	2.97	30.7	72.51	0.19	3.15
Telemedicine	Procedures	5.3	119.98	0.05	45.6	333.62	1.27	1.32
Subtotal – Professional		6,302.4	\$ 157.05	\$ 82.48	1,506.2	\$ 339.27	\$ 42.58	\$ 125.06
Pharmacy								
Psychotropic Drugs	Scripts	280.4	\$ 110.52	\$ 2.58	172.6	\$ 39.69	\$ 0.57	\$ 3.15
Opioid Drugs	Scripts	457.4	50.45	1.92	95.5	5.90	0.05	1.97
All Other Drugs	Scripts	1,306.4	156.57	17.05	547.6	110.68	5.05	22.10
Subtotal – Pharmacy		2,044.1	\$ 126.51	\$ 21.55	815.7	\$ 83.39	\$ 5.67	\$ 27.22
Ancillary								
Ground Transportation	Trips	636.1	\$ 124.81	\$ 6.62	0.9	\$ 373.10	\$ 0.03	\$ 6.64
Air Transportation	Trips	208.5	1,153.21	20.04	0.9	31,435.85	2.30	22.34
Accommodations	Claims	86.7	195.32	1.41	-	-	-	1.41
DME/Prosthetics	Procedures	137.6	192.41	2.21	0.9	44.63	0.00	2.21
Dental	Procedures	2,238.7	185.16	34.54	332.1	355.70	9.84	44.39
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		3,307.6	\$ 235.15	\$ 64.82	334.7	\$ 436.30	\$ 12.17	\$ 76.98
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Nursing Home	Days	-	-	-	-	-	-	-
Skilled Nursing Facility	Days	23.7	549.94	1.08	-	-	-	1.08
HCBS	Procedures	291.8	238.12	5.79	-	-	-	5.79
Case Management	Procedures	-	-	-	4.4	358.74	0.13	0.13
Personal Care	Procedures	-	-	-	-	-	-	-
Subtotal – LTSS		315.4	\$ 261.51	\$ 6.87	4.4	\$ 358.74	\$ 0.13	\$ 7.00
Behavioral Health								
IP Psych Hospital - API	Days	1.8	\$ 1,288.00	\$ 0.19	-	\$ 0.00	\$ 0.00	\$ 0.19
IP Psych Hospital - All Other	Days	-	-	-	-	-	-	-
IP General Hospital - MH/SA	Days	156.8	3,125.65	40.85	2.6	4,160.74	0.91	41.76
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	59.6	35.00	0.17	12.3	602.57	0.62	0.79
Assessment	Procedures	66.6	193.71	1.07	15.8	569.78	0.75	1.82
Crisis Services	Procedures	22.8	126.50	0.24	34.2	602.44	1.72	1.96
Medication Services	Procedures	35.0	39.25	0.11	14.0	601.88	0.70	0.82
Methadone Medication Services	Procedures	429.3	12.50	0.45	-	-	-	0.45
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	120.0	88.86	0.89	80.6	599.16	4.02	4.91
Family Therapy OP	Procedures	23.7	117.26	0.23	0.9	603.00	0.04	0.28
Group Therapy OP	Procedures	103.4	76.64	0.66	-	-	-	0.66
SBIRT	Procedures	1.8	43.80	0.01	11.4	602.38	0.57	0.58
Substance Abuse Residential	Days	283.9	226.77	5.36	61.3	601.20	3.07	8.44
Children's Residential	Days	-	-	-	-	-	-	-
RPTC - In State	Days	-	-	-	-	-	-	-
RPTC - Out of State	Days	-	-	-	-	-	-	-
Detoxification	Procedures	-	-	-	8.8	603.00	0.44	0.44
Medical Evaluation	Procedures	26.3	265.33	0.58	0.9	603.00	0.04	0.63
Psychological Testing	Procedures	21.9	1,020.73	1.86	1.8	603.00	0.09	1.95
Peer Support Services	Units	25.4	17.00	0.04	-	-	-	0.04
Psychosocial Rehabilitation Services	Procedures	1,029.5	196.12	16.83	396.9	602.23	19.92	36.74
BH Case Management	Units	881.4	16.00	1.18	54.3	243.02	1.10	2.28
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	6.1	121.30	0.06	5.3	602.33	0.26	0.33
Other Professional MH/SA	Visits	94.6	40.06	0.32	28.9	602.27	1.45	1.77
Subtotal – Behavioral Health		3,390.0	\$ 251.69	\$ 71.10	729.9	\$ 587.21	\$ 35.72	\$ 106.82
Total All Services		17,493.9	\$ 311.69	\$ 454.39	4,240.7	\$ 449.86	\$ 158.98	\$ 613.36

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska, Department of Health and Social Services
Statewide Databook- Appendix C
SFY 2016 and SFY 2017 Data Book - Detailed Summary

Fiscal Year:		SFY 2016						
Population:		Medicaid Expansion						
Rate Cell:		26-39 Female						
Region:		Statewide						
Member Months:		18,744						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid
		Utilization per 1,000	Paid per Unit	PMPM	Utilization per 1,000	Paid per Unit	PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	942.4	\$ 2,858.17	\$ 224.46	444.9	\$ 3,010.46	\$ 111.62	\$ 336.08
Inpatient Maternity Delivery	Days	14.1	3,566.45	4.19	12.8	3,294.10	3.51	7.70
Inpatient Well Newborn	Days	-	-	-	-	-	-	-
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		956.5	\$ 2,868.60	\$ 228.64	457.7	\$ 3,018.40	\$ 115.14	\$ 343.78
Outpatient Hospital								
Outpatient Emergency Room	Visits	1,332.3	\$ 860.64	\$ 95.55	572.3	\$ 567.91	\$ 27.09	\$ 122.64
Outpatient Surgery	Visits	95.4	2,936.43	23.34	42.9	930.26	3.33	26.67
Outpatient Radiology	Procedures	240.1	406.13	8.13	60.2	504.80	2.53	10.66
Outpatient Pathology/Lab	Procedures	1,708.7	26.57	3.78	538.4	427.77	19.19	22.98
Outpatient Pharmacy	Procedures	79.4	232.47	1.54	29.4	280.62	0.69	2.23
Other Outpatient	Procedures	582.6	129.86	6.30	320.7	478.84	12.80	19.10
Subtotal - Outpatient Hospital		4,038.4	\$ 411.97	\$ 138.64	1,564.0	\$ 503.50	\$ 65.62	\$ 204.27
Professional								
Inpatient and Outpatient Surgery	Procedures	607.6	\$ 472.44	\$ 23.92	128.7	\$ 556.62	\$ 5.97	\$ 29.89
Anesthesia	Procedures	145.3	495.90	6.01	73.6	438.68	2.69	8.70
Inpatient Visits	Visits	801.5	315.33	21.06	194.0	482.76	7.80	28.87
Emergency Room	Visits	1,420.6	199.79	23.65	511.5	164.77	7.02	30.68
Office/Home Visits/Consults	Visits	2,622.9	147.63	32.27	350.8	130.32	3.81	36.08
Maternity	Procedures	31.4	549.96	1.44	7.0	808.50	0.47	1.91
Pathology/Lab	Procedures	6,362.3	23.72	12.58	76.8	63.22	0.40	12.98
Radiology	Procedures	1,811.1	74.85	11.30	509.6	49.94	2.12	13.42
Office Administered Drugs	Procedures	312.4	322.30	8.39	10.2	44.39	0.04	8.43
FQHC/RHC/Tribal Clinic	Visits	807.3	286.04	19.24	1,384.8	609.61	70.35	89.59
Physical Exams	Visits	46.1	69.93	0.27	1.9	29.33	0.00	0.27
Therapy	Visits	494.2	149.34	6.15	16.6	56.06	0.08	6.23
Vision	Visits	530.7	111.23	4.92	12.2	153.74	0.16	5.08
Other Professional	Procedures	586.4	143.60	7.02	83.9	77.39	0.54	7.56
Telemedicine	Procedures	9.0	141.42	0.11	30.7	198.64	0.51	0.61
Subtotal - Professional		16,588.9	\$ 128.99	\$ 178.32	3,392.4	\$ 360.70	\$ 101.97	\$ 280.29
Pharmacy								
Psychotropic Drugs	Scripts	1,151.7	\$ 56.81	\$ 5.45	407.8	\$ 40.75	\$ 1.38	\$ 6.84
Opioid Drugs	Scripts	1,221.5	49.90	5.08	254.8	23.82	0.51	5.59
All Other Drugs	Scripts	5,466.1	80.05	36.47	2,434.7	45.31	9.19	45.66
Subtotal - Pharmacy		7,839.3	\$ 71.94	\$ 47.00	3,097.3	\$ 42.94	\$ 11.08	\$ 58.08
Ancillary								
Ground Transportation	Trips	1,427.7	\$ 114.94	\$ 13.67	0.6	\$ 286.85	\$ 0.02	\$ 13.69
Air Transportation	Trips	336.7	1,083.99	30.42	1.9	7,442.25	1.19	31.61
Accommodations	Claims	147.2	257.43	3.16	-	-	-	3.16
DME/Prosthetics	Procedures	247.1	160.41	3.30	-	-	-	3.30
Dental	Procedures	3,984.6	190.14	63.14	320.7	376.25	10.06	73.19
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		6,143.4	\$ 222.08	\$ 113.69	323.3	\$ 418.05	\$ 11.26	\$ 124.96
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Nursing Home	Days	46.7	724.77	2.82	17.3	3,335.00	4.80	7.63
Skilled Nursing Facility	Days	228.6	757.41	14.43	-	-	-	14.43
HCBS	Procedures	41.0	107.55	0.37	-	-	-	0.37
Case Management	Procedures	-	-	-	-	-	-	-
Personal Care	Procedures	83.2	50.40	0.35	-	-	-	0.35
Subtotal - LTSS		399.5	\$ 539.64	\$ 17.97	17.3	\$ 3,335.00	\$ 4.80	\$ 22.77
Behavioral Health								
IP Psych Hospital - API	Days	0.6	\$ 1,288.00	\$ 0.07	-	\$ 0.00	\$ 0.00	\$ 0.07
IP Psych Hospital - All Other	Days	-	-	-	-	-	-	-
IP General Hospital - MH/SA	Days	185.7	2,921.20	45.20	8.3	6,060.35	4.20	49.40
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	91.5	35.00	0.27	21.8	602.29	1.09	1.36
Assessment	Procedures	128.0	207.69	2.22	34.6	602.56	1.74	3.95
Crisis Services	Procedures	28.2	131.73	0.31	26.9	602.24	1.35	1.66
Medication Services	Procedures	90.9	57.57	0.44	9.0	602.29	0.45	0.89
Methadone Medication Services	Procedures	895.6	12.50	0.93	-	-	-	0.93
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	469.3	96.99	3.79	194.6	602.49	9.77	13.56
Family Therapy OP	Procedures	60.2	118.77	0.60	4.5	530.52	0.20	0.79
Group Therapy OP	Procedures	372.0	65.67	2.04	54.4	593.18	2.69	4.73
SBIRT	Procedures	0.6	43.80	0.00	23.7	602.51	1.19	1.19
Substance Abuse Residential	Days	1,058.3	230.52	20.33	1,210.0	350.27	35.32	55.65
Children's Residential	Days	-	-	-	-	-	-	-
RPTC - In State	Days	-	-	-	-	-	-	-
RPTC - Out of State	Days	-	-	-	-	-	-	-
Detoxification	Procedures	-	-	-	28.2	602.00	1.41	1.41
Medical Evaluation	Procedures	49.9	256.16	1.07	-	-	-	1.07
Psychological Testing	Procedures	29.4	697.93	1.71	3.2	603.00	0.16	1.87
Peer Support Services	Units	7.7	17.00	0.01	-	-	-	0.01
Psychosocial Rehabilitation Services	Procedures	1,511.5	83.45	10.51	521.1	602.58	26.17	36.68
BH Case Management	Units	1,007.7	16.00	1.34	170.3	299.05	4.24	5.59
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	32.0	137.34	0.37	4.5	602.71	0.23	0.59
Other Professional MH/SA	Visits	165.2	40.91	0.56	42.3	602.45	2.12	2.68
Subtotal - Behavioral Health		6,184.4	\$ 178.04	\$ 91.76	2,357.2	\$ 470.03	\$ 92.33	\$ 184.09
Total All Services		42,150.3	\$ 232.32	\$ 816.01	11,209.3	\$ 430.59	\$ 402.21	\$ 1,218.23

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska, Department of Health and Social Services
Statewide Databook- Appendix C
SFY 2016 and SFY 2017 Data Book - Detailed Summary

Fiscal Year:	SFY 2016							
Population:	Medicaid Expansion							
Rate Cell:	26-39 Male							
Region:	Statewide							
Member Months:	27,665							
		Non-Tribal Providers			Tribal Providers			Total Paid
Category of Service	Unit Description	Utilization per 1,000	Paid per Unit	PMPM	Utilization per 1,000	Paid per Unit	PMPM	PMPM
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	723.1	\$ 2,919.61	\$ 175.92	238.6	\$ 3,378.01	\$ 67.16	\$ 243.08
Inpatient Maternity Delivery	Days	-	-	-	-	-	-	-
Inpatient Well Newborn	Days	-	-	-	-	-	-	-
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal – Inpatient Hospital		723.1	\$ 2,919.61	\$ 175.92	238.6	\$ 3,378.01	\$ 67.16	\$ 243.08
Outpatient Hospital								
Outpatient Emergency Room	Visits	1,039.7	\$ 822.29	\$ 71.25	453.3	\$ 566.28	\$ 21.39	\$ 92.64
Outpatient Surgery	Visits	92.0	2,591.22	19.86	28.6	1,067.30	2.55	22.40
Outpatient Radiology	Procedures	137.5	590.59	6.77	44.2	515.31	1.90	8.67
Outpatient Pathology/Lab	Procedures	910.5	23.40	1.78	223.4	453.08	8.43	10.21
Outpatient Pharmacy	Procedures	162.2	530.56	7.17	30.8	407.18	1.04	8.22
Other Outpatient	Procedures	351.8	114.47	3.36	301.5	467.92	11.76	15.11
Subtotal – Outpatient Hospital		2,693.6	\$ 490.82	\$ 110.17	1,081.8	\$ 522.14	\$ 47.07	\$ 157.24
Professional								
Inpatient and Outpatient Surgery	Procedures	481.5	\$ 490.27	\$ 19.67	135.8	\$ 619.63	\$ 7.01	\$ 26.68
Anesthesia	Procedures	126.7	476.00	5.02	66.4	475.82	2.63	7.66
Inpatient Visits	Visits	627.6	322.83	16.89	124.5	335.16	3.48	20.36
Emergency Room	Visits	1,064.0	192.86	17.10	340.9	160.66	4.56	21.66
Office/Home Visits/Consults	Visits	1,652.6	148.53	20.45	280.6	145.39	3.40	23.85
Maternity	Procedures	-	-	-	-	-	-	-
Pathology/Lab	Procedures	4,424.7	24.11	8.89	51.2	53.89	0.23	9.12
Radiology	Procedures	1,193.7	70.39	7.00	321.8	44.85	1.20	8.20
Office Administered Drugs	Procedures	129.7	151.15	1.63	10.0	46.11	0.04	1.67
FQHC/RHC/Tribal Clinic	Visits	665.4	290.49	16.11	698.3	604.17	35.16	51.27
Physical Exams	Visits	50.7	99.65	0.42	4.8	33.88	0.01	0.43
Therapy	Visits	306.7	157.40	4.02	1.7	48.23	0.01	4.03
Vision	Visits	340.1	106.99	3.03	9.1	158.62	0.12	3.15
Other Professional	Procedures	429.9	104.14	3.73	62.0	91.31	0.47	4.20
Telemedicine	Procedures	2.6	203.01	0.04	43.4	363.28	1.31	1.36
Subtotal – Professional		11,495.8	\$ 129.46	\$ 124.02	2,150.6	\$ 332.79	\$ 59.64	\$ 183.66
Pharmacy								
Psychotropic Drugs	Scripts	639.8	\$ 45.60	\$ 2.43	226.9	\$ 26.51	\$ 0.50	\$ 2.93
Opioid Drugs	Scripts	913.1	82.42	6.27	154.9	45.30	0.58	6.86
All Other Drugs	Scripts	2,798.6	148.62	34.66	1,100.0	121.43	11.13	45.79
Subtotal – Pharmacy		4,351.4	\$ 119.58	\$ 43.36	1,481.7	\$ 98.94	\$ 12.22	\$ 55.58
Ancillary								
Ground Transportation	Trips	1,116.9	\$ 145.87	\$ 13.58	1.3	\$ 305.97	\$ 0.03	\$ 13.61
Air Transportation	Trips	221.6	1,301.39	24.04	2.2	12,113.09	2.19	26.23
Accommodations	Claims	106.3	277.51	2.46	-	-	-	2.46
DME/Prosthetics	Procedures	193.0	161.87	2.60	0.4	13.60	0.00	2.60
Dental	Procedures	2,985.5	189.80	47.22	206.5	357.69	6.15	53.38
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		4,623.4	\$ 233.33	\$ 89.90	210.4	\$ 477.85	\$ 8.38	\$ 98.27
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Nursing Home	Days	47.3	570.87	2.25	-	-	-	2.25
Skilled Nursing Facility	Days	-	-	-	-	-	-	-
HCBS	Procedures	50.3	122.44	0.51	-	-	-	0.51
Case Management	Procedures	0.9	240.77	0.02	0.4	358.74	0.01	0.03
Personal Care	Procedures	-	-	-	-	-	-	-
Subtotal – LTSS		98.5	\$ 338.81	\$ 2.78	0.4	\$ 358.74	\$ 0.01	\$ 2.79
Behavioral Health								
IP Psych Hospital - API	Days	0.9	\$ 1,288.00	\$ 0.09	-	\$ 0.00	\$ 0.00	\$ 0.09
IP Psych Hospital - All Other	Days	-	-	-	-	-	-	-
IP General Hospital - MH/SA	Days	144.0	2,968.09	35.62	1.7	3,232.75	0.47	36.09
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	84.1	35.29	0.25	20.8	602.42	1.05	1.29
Assessment	Procedures	101.9	207.23	1.76	31.2	602.44	1.57	3.33
Crisis Services	Procedures	23.4	221.59	0.43	30.8	602.35	1.55	1.98
Medication Services	Procedures	95.0	53.90	0.43	26.9	593.90	1.33	1.76
Methadone Medication Services	Procedures	1,508.2	12.50	1.57	-	-	-	1.57
Other Opioid Medication Services	Procedures	0.4	15.99	0.00	-	-	-	0.00
Individual Therapy OP	Procedures	307.1	93.91	2.40	90.2	600.34	4.51	6.92
Family Therapy OP	Procedures	39.9	105.92	0.35	1.3	435.88	0.05	0.40
Group Therapy OP	Procedures	177.0	67.13	0.99	8.2	554.95	0.38	1.37
SBIRT	Procedures	3.0	43.80	0.01	8.2	602.79	0.41	0.43
Substance Abuse Residential	Days	1,164.2	217.47	21.10	393.4	599.74	19.66	40.76
Children's Residential	Days	-	-	-	-	-	-	-
RPTC - In State	Days	-	-	-	-	-	-	-
RPTC - Out of State	Days	-	-	-	-	-	-	-
Detoxification	Procedures	-	-	-	66.4	602.35	3.33	3.33
Medical Evaluation	Procedures	48.6	256.84	1.04	3.9	602.78	0.20	1.24
Psychological Testing	Procedures	19.5	711.64	1.16	3.9	576.20	0.19	1.34
Peer Support Services	Units	3.5	17.00	0.00	-	-	-	0.00
Psychosocial Rehabilitation Services	Procedures	1,137.7	88.37	8.38	427.2	602.04	21.43	29.81
BH Case Management	Units	903.5	16.00	1.20	101.9	202.65	1.72	2.93
Day Treatment	Procedures	29.5	-	-	-	-	-	-
BH Telemedicine	Procedures	152.2	112.67	0.28	12.1	584.02	0.59	0.87
Other Professional MH/SA	Visits	152.2	40.66	0.52	28.6	602.88	1.44	1.95
Subtotal – Behavioral Health		5,943.8	\$ 156.64	\$ 77.58	1,257.0	\$ 571.60	\$ 59.88	\$ 137.46
Total All Services		29,929.6	\$ 250.08	\$ 623.74	6,420.5	\$ 475.39	\$ 254.35	\$ 878.09

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska, Department of Health and Social Services
Statewide Databook- Appendix C
SFY 2016 and SFY 2017 Data Book - Detailed Summary

Fiscal Year: SFY 2016
Population: Medicaid Expansion
Rate Cell: 40-54 Female
Region: Statewide

Member Months: 23,667

Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	995.3	\$ 2,986.72	\$ 247.73	566.9	\$ 2,986.87	\$ 141.10	\$ 388.82
Inpatient Maternity Delivery	Days	-	-	-	-	-	-	-
Inpatient Well Newborn	Days	-	-	-	-	-	-	-
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		995.3	\$ 2,986.72	\$ 247.73	566.9	\$ 2,986.87	\$ 141.10	\$ 388.82
Outpatient Hospital								
Outpatient Emergency Room	Visits	1,271.6	\$ 1,021.29	\$ 108.23	566.4	\$ 527.66	\$ 24.90	\$ 133.13
Outpatient Surgery	Visits	244.4	2,376.28	48.40	106.5	917.13	8.14	56.53
Outpatient Radiology	Procedures	614.5	432.30	22.14	128.8	507.39	5.45	27.58
Outpatient Pathology/Lab	Procedures	2,395.2	22.32	4.45	675.9	447.83	25.22	29.68
Outpatient Pharmacy	Procedures	380.3	170.57	5.41	76.1	443.29	2.81	8.21
Other Outpatient	Procedures	1,278.2	145.23	15.47	797.1	457.01	30.36	45.83
Subtotal - Outpatient Hospital		6,184.3	\$ 396.01	\$ 204.09	2,350.6	\$ 494.55	\$ 96.88	\$ 300.96
Professional								
Inpatient and Outpatient Surgery	Procedures	1,006.0	\$ 488.06	\$ 40.91	267.2	\$ 495.54	\$ 11.03	\$ 51.95
Anesthesia	Procedures	223.6	488.63	9.10	86.7	456.10	3.30	12.40
Inpatient Visits	Visits	696.7	342.39	19.88	265.2	441.14	9.75	29.63
Emergency Room	Visits	1,356.3	204.97	23.17	509.6	171.90	7.30	30.47
Office/Home Visits/Consults	Visits	3,757.1	152.48	47.74	718.5	141.07	8.45	56.19
Maternity	Procedures	-	-	-	-	-	-	-
Pathology/Lab	Procedures	5,753.3	25.79	12.36	123.7	87.48	0.90	13.27
Radiology	Procedures	3,237.4	119.79	32.32	894.4	45.28	3.37	35.69
Office Administered Drugs	Procedures	633.8	282.45	14.92	18.3	427.09	0.06	14.98
FQHC/RHC/Tribal Clinic	Visits	1,290.4	285.33	30.68	2,139.2	60.69	108.33	139.01
Physical Exams	Visits	61.4	54.30	0.28	6.1	67.17	0.03	0.31
Therapy	Visits	761.1	149.66	9.49	16.7	100.62	0.14	9.63
Vision	Visits	866.5	106.31	7.68	25.9	168.81	0.36	8.04
Other Professional	Procedures	1,079.0	127.52	11.47	200.8	110.87	1.86	13.32
Telemedicine	Procedures	8.1	124.31	0.08	41.1	280.86	0.96	1.05
Subtotal - Professional		20,730.7	\$ 150.55	\$ 260.08	5,313.2	\$ 351.99	\$ 155.85	\$ 415.93
Pharmacy								
Psychotropic Drugs	Scripts	1,661.1	\$ 50.60	\$ 7.00	624.2	\$ 15.15	\$ 0.79	\$ 7.79
Opioid Drugs	Scripts	1,918.1	38.89	6.22	486.8	26.05	1.06	7.27
All Other Drugs	Scripts	9,742.7	89.55	72.70	4,769.2	61.82	24.57	97.27
Subtotal - Pharmacy		13,321.9	\$ 77.40	\$ 85.93	5,880.1	\$ 53.91	\$ 26.42	\$ 112.34
Ancillary								
Ground Transportation	Trips	2,391.7	\$ 94.95	\$ 18.92	-	\$ 0.00	\$ 0.00	\$ 18.92
Air Transportation	Trips	494.4	1,012.14	41.70	0.5	4,263.65	0.18	41.88
Accommodations	Claims	277.3	264.39	6.11	-	-	-	6.11
DME/Prosthetics	Procedures	752.9	127.48	8.00	-	-	-	8.00
Dental	Procedures	3,925.5	210.20	68.76	384.3	380.84	12.20	80.96
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		7,841.8	\$ 219.58	\$ 143.49	384.8	\$ 385.96	\$ 12.38	\$ 155.87
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.03	-	\$ 0.00	\$ 0.00	\$ 0.03
Nursing Home	Days	33.0	618.12	1.70	12.2	2,977.13	3.02	4.72
Skilled Nursing Facility	Days	-	-	-	-	-	-	-
HCBS	Procedures	143.0	111.78	1.33	-	-	-	1.33
Case Management	Procedures	2.5	242.70	0.05	-	-	-	0.05
Personal Care	Procedures	274.3	53.81	1.23	-	-	-	1.23
Subtotal - LTSS		452.8	\$ 114.97	\$ 4.34	12.2	\$ 2,977.13	\$ 3.02	\$ 7.36
Behavioral Health								
IP Psych Hospital - API	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
IP Psych Hospital - All Other	Days	-	-	-	-	-	-	-
IP General Hospital - MH/SA	Days	118.1	2,841.32	27.97	11.7	2,306.17	2.24	30.21
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	63.9	36.82	0.20	9.6	602.05	0.48	0.68
Assessment	Procedures	84.2	205.62	1.44	24.3	602.38	1.22	2.66
Crisis Services	Procedures	23.3	96.50	0.19	30.9	601.03	1.55	1.74
Medication Services	Procedures	113.1	50.09	0.47	10.6	602.33	0.53	1.01
Methadone Medication Services	Procedures	921.3	12.50	0.96	-	-	-	0.96
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	468.0	90.82	3.54	170.4	602.46	8.55	12.10
Family Therapy OP	Procedures	65.4	121.99	0.66	2.0	126.47	0.02	0.69
Group Therapy OP	Procedures	256.6	89.62	1.92	3.5	602.14	0.18	2.09
SBIRT	Procedures	1.0	43.80	0.00	20.8	602.37	1.04	1.05
Substance Abuse Residential	Days	493.3	204.29	8.40	707.8	284.98	16.81	25.21
Children's Residential	Days	-	-	-	-	-	-	-
RPTC - In State	Days	-	-	-	-	-	-	-
RPTC - Out of State	Days	-	-	-	-	-	-	-
Detoxification	Procedures	-	-	-	16.7	602.94	0.84	0.84
Medical Evaluation	Procedures	29.9	247.00	0.62	-	-	-	0.62
Psychological Testing	Procedures	20.3	800.24	1.35	-	-	-	1.35
Peer Support Services	Units	65.4	16.66	0.09	-	-	-	0.09
Psychosocial Rehabilitation Services	Procedures	903.0	97.97	7.37	224.6	602.50	11.28	18.65
BH Case Management	Units	1,331.0	16.00	1.77	102.4	241.65	2.06	3.84
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	23.3	138.07	0.27	8.1	602.50	0.41	0.68
Other Professional MH/SA	Visits	135.9	40.08	0.45	38.5	602.37	1.93	2.39
Subtotal - Behavioral Health		5,117.0	\$ 135.28	\$ 57.68	1,382.2	\$ 426.79	\$ 49.16	\$ 106.84
Total All Services		54,643.8	\$ 220.34	\$ 1,003.34	15,890.0	\$ 366.11	\$ 484.79	\$ 1,488.13

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska, Department of Health and Social Services
 Statewide Databook- Appendix C
 SFY 2016 and SFY 2017 Data Book - Detailed Summary

Fiscal Year: SFY 2016
 Population: Medicaid Expansion
 Rate Cell: 40-54 Male
 Region: Statewide

Member Months: 27,093

Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	1,699.0	\$ 2,780.77	\$ 393.72	466.4	\$ 3,172.31	\$ 123.30	\$ 517.02
Inpatient Maternity Delivery	Days	-	-	-	-	-	-	-
Inpatient Well Newborn	Days	-	-	-	-	-	-	-
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		1,699.0	\$ 2,780.77	\$ 393.72	466.4	\$ 3,172.31	\$ 123.30	\$ 517.02
Outpatient Hospital								
Outpatient Emergency Room	Visits	1,140.1	\$ 1,010.58	\$ 96.01	541.7	\$ 544.04	\$ 24.56	\$ 120.57
Outpatient Surgery	Visits	212.2	2,862.03	50.60	88.6	951.60	7.02	57.63
Outpatient Radiology	Procedures	458.4	481.58	18.40	89.0	509.40	3.78	22.18
Outpatient Pathology/Lab	Procedures	1,832.4	20.09	3.07	399.5	449.90	14.98	18.05
Outpatient Pharmacy	Procedures	380.5	155.20	4.92	47.4	413.28	1.63	6.55
Other Outpatient	Procedures	1,008.1	170.17	14.30	604.1	506.76	25.51	39.81
Subtotal - Outpatient Hospital		5,031.6	\$ 446.68	\$ 187.29	1,770.4	\$ 525.23	\$ 77.49	\$ 264.78
Professional								
Inpatient and Outpatient Surgery	Procedures	983.3	\$ 548.39	\$ 44.94	267.1	\$ 539.43	\$ 12.01	\$ 56.94
Anesthesia	Procedures	247.2	508.36	10.47	91.2	463.72	3.53	14.00
Inpatient Visits	Visits	1,122.8	310.84	29.08	224.1	447.60	8.36	37.44
Emergency Room	Visits	1,217.6	205.60	20.86	463.3	172.54	6.66	27.52
Office/Home Visits/Consults	Visits	2,299.2	153.92	29.49	558.5	144.70	6.73	36.23
Maternity	Procedures	-	-	-	-	-	-	-
Pathology/Lab	Procedures	4,136.9	24.19	8.34	92.1	81.15	0.62	8.96
Radiology	Procedures	2,336.4	130.27	25.36	660.0	46.78	2.57	27.94
Office Administered Drugs	Procedures	422.5	256.10	9.02	9.3	39.10	0.03	9.05
FQHC/RHC/Tribal Clinic	Visits	947.0	288.16	22.74	1,190.1	605.70	60.07	82.81
Physical Exams	Visits	50.5	49.20	0.21	6.2	44.66	0.02	0.23
Therapy	Visits	386.2	158.71	5.11	18.2	65.61	0.10	5.21
Vision	Visits	625.0	105.63	5.50	33.2	161.53	0.45	5.95
Other Professional	Procedures	948.3	115.78	9.15	157.7	139.32	1.83	10.98
Telemedicine	Procedures	11.1	169.61	0.16	54.5	248.22	1.13	1.28
Subtotal - Professional		15,733.9	\$ 168.11	\$ 220.42	3,825.5	\$ 326.58	\$ 104.11	\$ 324.54
Pharmacy								
Psychotropic Drugs	Scripts	745.9	\$ 23.17	\$ 1.44	287.5	\$ 10.46	\$ 0.25	\$ 1.69
Opioid Drugs	Scripts	1,318.6	39.59	4.35	395.1	33.23	1.09	5.44
All Other Drugs	Scripts	5,585.7	134.83	62.76	2,786.9	75.53	17.54	80.30
Subtotal - Pharmacy		7,650.1	\$ 107.53	\$ 68.55	3,469.4	\$ 65.32	\$ 18.89	\$ 87.44
Ancillary								
Ground Transportation	Trips	2,138.0	\$ 113.67	\$ 20.25	1.3	\$ 315.60	\$ 0.03	\$ 20.29
Air Transportation	Trips	400.8	1,203.77	40.21	1.8	7,520.45	1.11	41.32
Accommodations	Claims	228.1	346.11	6.58	-	-	-	6.58
DME/Prosthetics	Procedures	577.1	201.62	9.70	-	-	-	9.70
Dental	Procedures	3,586.3	218.88	65.42	328.2	383.88	10.50	75.92
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		6,930.4	\$ 246.14	\$ 142.15	331.3	\$ 421.77	\$ 11.64	\$ 153.80
LTSS								
Hospice	Days	2.7	\$ 1,844.98	\$ 0.41	-	\$ 0.00	\$ 0.00	\$ 0.41
Nursing Home	Days	27.0	629.96	1.42	6.2	3,335.00	1.72	3.14
Skilled Nursing Facility	Days	131.5	818.04	8.97	-	-	-	8.97
HCBS	Procedures	162.6	112.16	1.52	-	-	-	1.52
Case Management	Procedures	1.8	240.77	0.04	-	-	-	0.04
Personal Care	Procedures	233.4	57.24	1.11	-	-	-	1.11
Subtotal - LTSS		559.0	\$ 289.02	\$ 13.46	6.2	\$ 3,335.00	\$ 1.72	\$ 15.19
Behavioral Health								
IP Psych Hospital - API	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
IP Psych Hospital - All Other	Days	-	-	-	-	-	-	-
IP General Hospital - MH/SA	Days	133.3	2,856.25	31.73	-	-	-	31.73
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	63.8	35.77	0.19	14.2	602.75	0.71	0.90
Assessment	Procedures	75.3	198.00	1.24	19.0	595.37	0.94	2.19
Crisis Services	Procedures	16.8	128.26	0.18	19.9	602.33	1.00	1.18
Medication Services	Procedures	118.3	36.14	0.36	29.2	602.58	1.47	1.82
Methadone Medication Services	Procedures	498.7	12.50	0.52	-	-	-	0.52
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	265.8	93.36	2.07	65.6	602.69	3.29	5.36
Family Therapy OP	Procedures	8.0	110.38	0.07	-	-	-	0.07
Group Therapy OP	Procedures	167.9	58.64	0.82	19.5	602.36	0.98	1.80
SBIRT	Procedures	2.7	43.80	0.01	14.6	602.70	0.73	0.74
Substance Abuse Residential	Days	735.2	172.65	10.58	327.3	528.06	14.40	24.98
Children's Residential	Days	-	-	-	-	-	-	-
RPTC - In State	Days	-	-	-	-	-	-	-
RPTC - Out of State	Days	-	-	-	-	-	-	-
Detoxification	Procedures	-	-	-	96.6	602.64	4.85	4.85
Medical Evaluation	Procedures	22.6	259.14	0.49	3.1	602.71	0.16	0.64
Psychological Testing	Procedures	21.7	853.79	1.54	-	-	-	1.54
Peer Support Services	Units	0.9	17.00	0.00	-	-	-	0.00
Psychosocial Rehabilitation Services	Procedures	855.7	77.13	5.50	456.7	602.25	22.92	28.42
BH Case Management	Units	1,520.5	16.00	2.03	102.8	251.94	2.16	4.18
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	21.7	129.10	0.23	2.7	602.33	0.13	0.37
Other Professional MH/SA	Visits	120.0	41.89	0.42	28.3	602.34	1.42	1.84
Subtotal - Behavioral Health		4,648.9	\$ 149.67	\$ 57.98	1,199.4	\$ 551.96	\$ 55.17	\$ 113.15
Total All Services		42,252.9	\$ 307.74	\$ 1,083.59	11,068.6	\$ 425.33	\$ 392.32	\$ 1,475.91

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska, Department of Health and Social Services
Statewide Databook- Appendix C
SFY 2016 and SFY 2017 Data Book - Detailed Summary

Fiscal Year:		SFY 2016						
Population:		Medicaid Expansion						
Rate Cell:		55-64 Female						
Region:		Statewide						
Member Months:		17,518						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	1,136.4	\$ 2,957.58	\$ 280.08	298.7	\$ 3,131.09	\$ 77.93	\$ 358.01
Inpatient Maternity Delivery	Days	-	-	-	-	-	-	-
Inpatient Well Newborn	Days	-	-	-	-	-	-	-
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal – Inpatient Hospital		1,136.4	\$ 2,957.58	\$ 280.08	298.7	\$ 3,131.09	\$ 77.93	\$ 358.01
Outpatient Hospital								
Outpatient Emergency Room	Visits	535.7	\$ 1,255.48	\$ 56.04	352.8	\$ 578.98	\$ 17.02	\$ 73.06
Outpatient Surgery	Visits	218.5	2,712.34	49.39	90.4	912.89	6.88	56.27
Outpatient Radiology	Procedures	545.9	431.57	19.63	123.3	509.03	5.23	24.86
Outpatient Pathology/Lab	Procedures	2,299.5	17.99	3.45	630.2	398.98	20.95	24.40
Outpatient Pharmacy	Procedures	426.8	88.40	3.14	69.2	474.56	2.74	5.88
Other Outpatient	Procedures	1,213.8	179.81	18.19	767.2	480.87	30.74	48.93
Subtotal – Outpatient Hospital		5,240.2	\$ 343.15	\$ 149.85	2,033.1	\$ 493.22	\$ 83.56	\$ 233.41
Professional								
Inpatient and Outpatient Surgery	Procedures	946.7	\$ 569.96	\$ 44.96	205.5	\$ 599.46	\$ 10.27	\$ 55.23
Anesthesia	Procedures	239.1	510.32	10.17	69.9	437.55	2.55	12.71
Inpatient Visits	Visits	822.0	308.65	21.14	111.7	516.21	4.80	25.95
Emergency Room	Visits	602.1	221.92	11.14	276.1	167.58	3.86	14.99
Office/Home Visits/Consults	Visits	2,814.6	154.10	36.15	730.2	134.39	8.18	44.32
Maternity	Procedures	-	-	-	-	-	-	-
Pathology/Lab	Procedures	4,456.6	25.88	9.61	119.2	87.77	0.87	10.48
Radiology	Procedures	3,078.4	186.33	47.80	624.0	43.59	2.27	50.07
Office Administered Drugs	Procedures	706.9	182.20	10.73	11.0	40.95	0.04	10.77
FQHC/RHC/Tribal Clinic	Visits	1,108.3	290.65	26.84	1,796.1	599.57	89.74	116.58
Physical Exams	Visits	71.2	59.76	0.35	6.2	37.85	0.02	0.37
Therapy	Visits	742.5	148.51	9.19	13.7	67.84	0.08	9.27
Vision	Visits	871.3	107.95	7.84	29.5	168.21	0.41	8.25
Other Professional	Procedures	1,146.7	123.06	11.76	216.5	114.52	2.07	13.82
Telemedicine	Procedures	7.5	43.81	0.03	58.2	243.78	1.18	1.21
Subtotal – Professional		17,614.0	\$ 168.76	\$ 247.71	4,267.5	\$ 355.21	\$ 126.32	\$ 374.03
Pharmacy								
Psychotropic Drugs	Scripts	975.4	\$ 35.18	\$ 2.86	395.9	\$ 19.58	\$ 0.65	\$ 3.51
Opioid Drugs	Scripts	1,096.7	34.77	3.18	395.9	19.94	0.66	3.84
All Other Drugs	Scripts	8,291.9	114.71	79.27	3,893.5	123.00	39.91	119.18
Subtotal – Pharmacy		10,364.0	\$ 98.77	\$ 85.30	4,685.4	\$ 105.55	\$ 41.21	\$ 126.52
Ancillary								
Ground Transportation	Trips	1,932.4	\$ 74.50	\$ 12.00	1.4	\$ 286.85	\$ 0.03	\$ 12.03
Air Transportation	Trips	477.4	892.08	35.49	4.1	7,743.55	2.65	38.15
Accommodations	Claims	281.5	272.45	6.39	-	-	-	6.39
DME/Prosthetics	Procedures	676.8	148.89	8.40	-	-	-	8.40
Dental	Procedures	2,836.6	218.04	51.54	369.9	421.47	12.99	64.53
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		6,204.7	\$ 220.13	\$ 113.82	375.4	\$ 501.15	\$ 15.68	\$ 129.50
LTSS								
Hospice	Days	-	\$ 0.00	\$ 3.37	-	\$ 0.00	\$ 0.00	\$ 3.37
Nursing Home	Days	19.2	627.70	1.00	2.1	3,335.00	0.57	1.57
Skilled Nursing Facility	Days	498.7	700.01	29.09	-	-	-	29.09
HCBS	Procedures	158.2	94.99	1.25	-	-	-	1.25
Case Management	Procedures	1.4	240.77	0.03	-	-	-	0.03
Personal Care	Procedures	340.4	55.17	1.57	-	-	-	1.57
Subtotal – LTSS		1,017.9	\$ 428.00	\$ 36.31	2.1	\$ 3,335.00	\$ 0.57	\$ 36.88
Behavioral Health								
IP Psych Hospital - API	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
IP Psych Hospital - All Other	Days	-	-	-	-	-	-	-
IP General Hospital - MH/SA	Days	80.1	2,980.66	19.91	-	-	-	19.91
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	17.8	35.00	0.05	7.5	602.45	0.38	0.43
Assessment	Procedures	30.1	212.55	0.53	6.2	591.22	0.30	0.84
Crisis Services	Procedures	8.9	120.31	0.09	18.5	602.48	0.93	1.02
Medication Services	Procedures	24.0	68.71	0.14	6.2	602.11	0.31	0.45
Methadone Medication Services	Procedures	343.2	12.50	0.36	-	-	-	0.36
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	140.4	95.64	1.12	93.8	597.88	4.68	5.79
Family Therapy OP	Procedures	41.1	102.66	0.35	-	-	-	0.35
Group Therapy OP	Procedures	52.1	64.11	0.28	-	-	-	0.28
SBIRT	Procedures	-	-	-	5.5	602.25	0.28	0.28
Substance Abuse Residential	Days	84.9	264.31	1.87	73.3	608.06	3.71	5.58
Children's Residential	Days	-	-	-	-	-	-	-
RPTC - In State	Days	-	-	-	-	-	-	-
RPTC - Out of State	Days	-	-	-	-	-	-	-
Detoxification	Procedures	-	-	-	19.2	601.93	0.96	0.96
Medical Evaluation	Procedures	12.3	249.82	0.26	-	-	-	0.26
Psychological Testing	Procedures	13.0	606.40	0.66	0.7	603.00	0.03	0.69
Peer Support Services	Units	-	-	-	-	-	-	-
Psychosocial Rehabilitation Services	Procedures	124.7	64.79	0.67	121.2	602.64	6.09	6.76
BH Case Management	Units	511.7	16.00	0.68	76.7	166.85	1.07	1.75
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	13.0	69.65	0.08	7.5	603.00	0.38	0.45
Other Professional MH/SA	Visits	43.8	40.60	0.15	8.9	602.38	0.45	0.60
Subtotal – Behavioral Health		1,541.2	\$ 211.70	\$ 27.19	445.2	\$ 527.23	\$ 19.56	\$ 46.75
Total All Services		43,118.4	\$ 261.68	\$ 940.26	12,107.3	\$ 361.60	\$ 364.84	\$ 1,305.10

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska, Department of Health and Social Services
 Statewide Databook- Appendix C
 SFY 2016 and SFY 2017 Data Book - Detailed Summary

Fiscal Year:		SFY 2016						
Population:		Medicaid Expansion						
Rate Cell:		55-64 Male						
Region:		Statewide						
Member Months:		19,054						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	1,607.2	\$ 3,018.75	\$ 404.32	432.7	\$ 3,300.65	\$ 119.01	\$ 523.32
Inpatient Maternity Delivery	Days	-	-	-	-	-	-	-
Inpatient Well Newborn	Days	-	-	-	-	-	-	-
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal – Inpatient Hospital		1,607.2	\$ 3,018.75	\$ 404.32	432.7	\$ 3,300.65	\$ 119.01	\$ 523.32
Outpatient Hospital								
Outpatient Emergency Room	Visits	661.9	\$ 1,161.10	\$ 64.05	362.8	\$ 603.45	\$ 18.24	\$ 82.29
Outpatient Surgery	Visits	226.7	2,881.29	54.44	95.7	954.45	7.61	62.05
Outpatient Radiology	Procedures	354.6	497.48	14.70	95.1	500.05	3.96	18.66
Outpatient Pathology/Lab	Procedures	1,961.2	22.54	3.68	520.8	408.47	17.73	21.41
Outpatient Pharmacy	Procedures	246.2	209.56	4.30	76.8	415.88	2.66	6.96
Other Outpatient	Procedures	1,062.5	171.74	15.21	663.8	474.53	26.25	41.46
Subtotal – Outpatient Hospital		4,513.1	\$ 415.79	\$ 156.37	1,815.0	\$ 505.51	\$ 76.46	\$ 232.83
Professional								
Inpatient and Outpatient Surgery	Procedures	1,085.1	\$ 593.74	\$ 53.69	276.5	\$ 563.62	\$ 12.99	\$ 66.68
Anesthesia	Procedures	256.3	535.87	11.45	80.0	493.16	3.29	14.73
Inpatient Visits	Visits	1,111.6	316.68	29.33	192.7	478.71	7.69	37.02
Emergency Room	Visits	722.4	219.41	13.21	327.5	166.05	4.53	17.74
Office/Home Visits/Consults	Visits	2,151.4	152.17	27.28	655.0	140.31	7.66	34.94
Maternity	Procedures	-	-	-	-	-	-	-
Pathology/Lab	Procedures	3,218.8	25.60	6.87	136.7	104.78	1.19	8.06
Radiology	Procedures	2,416.5	248.12	49.96	535.3	49.46	2.21	52.17
Office Administered Drugs	Procedures	469.2	367.62	14.37	10.1	62.72	0.05	14.43
FQHC/RHC/Tribal Clinic	Visits	949.7	291.44	23.07	1,228.1	605.62	61.98	85.04
Physical Exams	Visits	53.5	56.90	0.25	5.0	38.73	0.02	0.27
Therapy	Visits	561.8	141.54	6.63	3.1	111.49	0.03	6.66
Vision	Visits	585.7	108.89	5.31	23.9	150.84	0.30	5.62
Other Professional	Procedures	1,162.6	130.52	12.65	229.9	164.68	3.15	15.80
Telemedicine	Procedures	6.9	85.72	0.05	40.3	194.63	0.65	0.70
Subtotal – Professional		14,751.5	\$ 206.72	\$ 254.12	3,744.1	\$ 338.89	\$ 105.74	\$ 359.86
Pharmacy								
Psychotropic Drugs	Scripts	496.3	\$ 47.58	\$ 1.97	195.2	\$ 8.02	\$ 0.13	\$ 2.10
Opioid Drugs	Scripts	1,000.7	27.28	2.27	347.6	21.63	0.63	2.90
All Other Drugs	Scripts	5,940.8	177.29	87.77	3,051.3	82.73	21.04	108.81
Subtotal – Pharmacy		7,437.8	\$ 148.45	\$ 92.01	3,594.2	\$ 72.76	\$ 21.79	\$ 113.81
Ancillary								
Ground Transportation	Trips	1,805.0	\$ 97.01	\$ 14.59	2.5	\$ 344.32	\$ 0.07	\$ 14.66
Air Transportation	Trips	485.6	1,123.73	45.47	3.1	11,304.41	2.97	48.44
Accommodations	Claims	250.7	256.49	5.36	-	-	-	5.36
DME/Prosthetics	Procedures	564.9	152.48	7.18	-	-	-	7.18
Dental	Procedures	2,745.9	233.03	53.32	253.2	440.22	9.29	62.61
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		5,852.0	\$ 258.21	\$ 125.92	258.8	\$ 571.45	\$ 12.33	\$ 138.25
LTSS								
Hospice	Days	7.6	\$ 6,160.49	\$ 3.88	-	\$ 0.00	\$ 0.00	\$ 3.88
Nursing Home	Days	27.1	637.80	1.44	29.0	3,335.00	8.05	9.49
Skilled Nursing Facility	Days	306.1	589.44	15.03	-	-	-	15.03
HCBS	Procedures	239.3	230.83	4.60	-	-	-	4.60
Case Management	Procedures	3.8	240.77	0.08	-	-	-	0.08
Personal Care	Procedures	137.3	101.63	1.16	-	-	-	1.16
Subtotal – LTSS		721.1	\$ 435.92	\$ 26.20	29.0	\$ 3,335.00	\$ 8.05	\$ 34.25
Behavioral Health								
IP Psych Hospital - API	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
IP Psych Hospital - All Other	Days	-	-	-	-	-	-	-
IP General Hospital - MH/SA	Days	43.5	2,800.92	10.14	-	-	-	10.14
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	25.2	35.00	0.07	8.2	563.38	0.38	0.46
Assessment	Procedures	34.0	201.14	0.57	9.4	577.33	0.45	1.02
Crisis Services	Procedures	10.1	94.63	0.08	10.1	602.25	0.51	0.59
Medication Services	Procedures	25.8	53.54	0.12	15.7	602.68	0.79	0.91
Methadone Medication Services	Procedures	318.7	12.50	0.33	-	-	-	0.33
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	100.8	110.17	0.93	37.8	602.23	1.90	2.82
Family Therapy OP	Procedures	12.6	114.84	0.12	-	-	-	0.12
Group Therapy OP	Procedures	37.8	57.71	0.18	8.2	603.00	0.41	0.59
SBIRT	Procedures	-	-	-	6.3	602.80	0.32	0.32
Substance Abuse Residential	Days	135.4	110.70	1.25	132.3	582.90	6.42	7.67
Children's Residential	Days	-	-	-	-	-	-	-
RPTC - In State	Days	-	-	-	-	-	-	-
RPTC - Out of State	Days	-	-	-	-	-	-	-
Detoxification	Procedures	-	-	-	31.5	602.44	1.58	1.58
Medical Evaluation	Procedures	13.2	266.74	0.29	1.9	603.00	0.09	0.39
Psychological Testing	Procedures	17.0	954.19	1.35	-	-	-	1.35
Peer Support Services	Units	8.2	17.00	0.01	-	-	-	0.01
Psychosocial Rehabilitation Services	Procedures	324.3	86.58	2.34	148.6	602.60	7.46	9.80
BH Case Management	Units	734.3	15.99	0.98	133.5	250.09	2.78	3.76
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	3.1	175.23	0.05	5.0	602.25	0.25	0.30
Other Professional MH/SA	Visits	54.2	40.49	0.18	17.0	602.33	0.85	1.04
Subtotal – Behavioral Health		1,898.2	\$ 120.08	\$ 18.99	565.5	\$ 513.74	\$ 24.21	\$ 43.21
Total All Services		36,780.8	\$ 351.68	\$ 1,077.93	10,439.4	\$ 422.54	\$ 367.59	\$ 1,445.52

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska, Department of Health and Social Services
 Statewide Databook- Appendix C
 SFY 2016 and SFY 2017 Data Book - Detailed Summary

Fiscal Year:		SFY 2016						
Population:		Pregnant Women						
Rate Cell:		Pregnant Women						
Region:		Statewide						
Member Months:		52,722						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	351.2	\$ 2,694.23	\$ 78.85	98.8	\$ 3,131.45	\$ 25.78	\$ 104.63
Inpatient Maternity Delivery	Days	1,380.7	2,818.91	324.33	533.7	3,104.40	138.08	462.41
Inpatient Well Newborn	Days	-	-	-	-	-	-	-
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal - Inpatient Hospital		1,731.9	\$ 2,793.62	\$ 403.18	632.5	\$ 3,108.63	\$ 163.86	\$ 567.04
Outpatient Hospital								
Outpatient Emergency Room	Visits	972.1	\$ 752.64	\$ 60.97	471.8	\$ 613.86	\$ 24.14	\$ 85.11
Outpatient Surgery	Visits	38.5	2,788.79	8.94	19.1	846.27	1.35	10.29
Outpatient Radiology	Procedures	532.4	283.94	12.60	404.2	518.19	17.46	30.05
Outpatient Pathology/Lab	Procedures	4,272.7	23.92	8.52	2,139.7	370.75	66.11	74.63
Outpatient Pharmacy	Procedures	358.7	66.71	1.99	72.6	283.89	1.72	3.71
Other Outpatient	Procedures	896.1	171.25	12.79	771.4	530.19	34.08	46.87
Subtotal - Outpatient Hospital		7,070.4	\$ 179.57	\$ 105.80	3,878.9	\$ 448.11	\$ 144.85	\$ 250.65
Professional								
Inpatient and Outpatient Surgery	Procedures	234.4	\$ 320.09	\$ 6.25	57.8	\$ 309.94	\$ 1.49	\$ 7.75
Anesthesia	Procedures	537.8	688.45	30.86	131.8	683.95	7.51	38.37
Inpatient Visits	Visits	483.9	210.60	8.49	417.4	150.24	5.23	13.72
Emergency Room	Visits	768.2	198.75	12.72	245.6	160.32	3.28	16.00
Office/Home Visits/Consults	Visits	6,660.7	125.13	69.45	1,004.2	110.98	9.29	78.74
Maternity	Procedures	1,548.4	705.49	91.03	549.4	775.36	35.50	126.53
Pathology/Lab	Procedures	7,919.4	23.28	15.37	249.5	38.61	0.80	16.17
Radiology	Procedures	2,755.9	134.55	30.90	745.9	87.26	5.42	36.32
Office Administered Drugs	Procedures	302.3	60.38	1.52	32.8	43.21	0.12	1.64
FQHC/RHC/Tribal Clinic	Visits	544.7	289.17	13.13	2,891.3	592.56	142.77	155.90
Physical Exams	Visits	306.4	54.82	1.40	12.7	50.03	0.05	1.45
Therapy	Visits	305.0	133.22	3.39	72.2	55.50	0.33	3.72
Vision	Visits	452.0	109.91	4.14	8.9	86.63	0.06	4.20
Other Professional	Procedures	607.3	223.82	11.33	78.8	57.68	0.38	11.70
Telemedicine	Procedures	1.6	202.03	0.03	28.7	423.14	1.01	1.04
Subtotal - Professional		23,427.9	\$ 153.66	\$ 300.00	6,526.9	\$ 392.08	\$ 213.26	\$ 513.26
Pharmacy								
Psychotropic Drugs	Scripts	324.1	\$ 28.97	\$ 0.78	93.3	\$ 14.17	\$ 0.11	\$ 0.89
Opioid Drugs	Scripts	737.2	29.29	1.80	164.3	14.93	0.20	2.00
All Other Drugs	Scripts	3,352.7	61.81	17.27	1,964.5	50.72	8.30	25.57
Subtotal - Pharmacy		4,414.0	\$ 53.97	\$ 19.85	2,222.1	\$ 46.54	\$ 8.62	\$ 28.47
Ancillary								
Ground Transportation	Trips	4,132.9	\$ 30.88	\$ 10.64	4.6	\$ 327.07	\$ 0.12	\$ 10.76
Air Transportation	Trips	1,139.2	672.67	63.86	8.9	8,455.51	6.25	70.11
Accommodations	Claims	875.8	527.70	38.52	-	-	-	38.52
DME/Prosthetics	Procedures	77.6	119.83	0.78	-	-	-	0.78
Dental	Procedures	2,312.3	157.31	30.31	404.7	375.53	12.66	42.98
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal - Ancillary		8,537.8	\$ 202.53	\$ 144.10	418.1	\$ 546.54	\$ 19.04	\$ 163.14
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Nursing Home	Days	-	-	-	-	-	-	-
Skilled Nursing Facility	Days	1.4	972.17	0.11	-	-	-	0.11
HCBS	Procedures	32.3	79.10	0.21	-	-	-	0.21
Case Management	Procedures	-	-	-	-	-	-	-
Personal Care	Procedures	82.6	97.68	0.67	-	-	-	0.67
Subtotal - LTSS		116.3	\$ 102.79	\$ 1.00	-	\$ 0.00	\$ 0.00	\$ 1.00
Behavioral Health								
IP Psych Hospital - API	Days	4.6	\$ 1,319.13	\$ 0.50	-	\$ 0.00	\$ 0.00	\$ 0.50
IP Psych Hospital - All Other	Days	-	-	-	-	-	-	-
IP General Hospital - MH/SA	Days	15.7	2,981.31	3.90	0.2	3,335.00	0.06	3.97
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	24.6	35.51	0.07	6.8	602.53	0.34	0.42
Assessment	Procedures	32.5	182.79	0.50	18.2	594.16	0.90	1.40
Crisis Services	Procedures	7.3	130.54	0.08	22.5	600.57	1.13	1.21
Medication Services	Procedures	24.8	75.00	0.16	3.2	602.43	0.16	0.32
Methadone Medication Services	Procedures	866.3	12.50	0.90	-	-	-	0.90
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	128.1	94.12	1.01	74.0	583.88	3.60	4.60
Family Therapy OP	Procedures	17.3	110.00	0.16	7.7	571.74	0.37	0.53
Group Therapy OP	Procedures	34.1	59.27	0.17	29.6	594.80	1.47	1.64
SBIRT	Procedures	-	-	-	12.5	600.03	0.63	0.63
Substance Abuse Residential	Days	119.0	261.09	2.59	812.6	276.79	18.74	21.33
Children's Residential	Days	46.0	155.76	0.60	-	-	-	0.60
RPTC - In State	Days	23.7	445.04	0.88	-	-	-	0.88
RPTC - Out of State	Days	-	-	-	-	-	-	-
Detoxification	Procedures	-	-	-	1.4	603.00	0.07	0.07
Medical Evaluation	Procedures	15.9	272.67	0.36	0.2	265.27	0.01	0.37
Psychological Testing	Procedures	2.0	845.91	0.14	0.7	191.29	0.01	0.16
Peer Support Services	Units	10.0	17.00	0.01	-	-	-	0.01
Psychosocial Rehabilitation Services	Procedures	437.2	166.31	6.06	151.8	601.12	7.60	13.66
BH Case Management	Units	222.6	16.00	0.30	55.1	206.48	0.95	1.24
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	8.2	135.60	0.09	3.2	602.00	0.16	0.25
Other Professional MH/SA	Visits	46.2	40.47	0.16	18.9	607.96	0.96	1.11
Subtotal - Behavioral Health		2,086.3	\$ 107.16	\$ 18.63	1,218.6	\$ 365.85	\$ 37.15	\$ 55.78
Total All Services		47,384.5	\$ 251.36	\$ 992.56	14,897.2	\$ 472.66	\$ 586.78	\$ 1,579.34

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska, Department of Health and Social Services
Statewide Databook- Appendix C
SFY 2016 and SFY 2017 Data Book - Detailed Summary

Fiscal Year:		SFY 2016						
Population:		SSI/Disabled						
Rate Cell:		Adult						
Region:		Statewide						
Member Months:		109,255						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid
		Utilization per 1,000	Paid per Unit	PMPM	Utilization per 1,000	Paid per Unit	PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	862.3	\$ 2,864.22	\$ 205.82	220.2	\$ 2,984.90	\$ 54.78	\$ 260.60
Inpatient Maternity Delivery	Days	7.1	2,845.20	1.69	0.4	3,130.50	0.11	1.81
Inpatient Well Newborn	Days	-	-	-	-	-	-	-
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal – Inpatient Hospital		869.4	\$ 2,864.07	\$ 207.51	220.7	\$ 2,985.19	\$ 54.89	\$ 262.41
Outpatient Hospital								
Outpatient Emergency Room	Visits	1,050.5	\$ 821.47	\$ 71.91	292.4	\$ 538.28	\$ 13.12	\$ 85.02
Outpatient Surgery	Visits	219.6	1,917.41	35.08	39.7	886.13	2.93	38.01
Outpatient Radiology	Procedures	526.1	363.26	15.93	60.2	486.57	2.44	18.37
Outpatient Pathology/Lab	Procedures	2,585.0	19.02	4.10	351.4	409.82	12.00	16.10
Outpatient Pharmacy	Procedures	554.3	273.06	12.61	53.5	403.49	1.80	14.41
Other Outpatient	Procedures	2,438.9	133.66	27.17	918.4	277.56	21.24	48.41
Subtotal – Outpatient Hospital		7,374.3	\$ 271.42	\$ 166.79	1,715.5	\$ 374.41	\$ 53.53	\$ 220.32
Professional								
Inpatient and Outpatient Surgery	Procedures	1,340.2	\$ 321.03	\$ 35.85	157.5	\$ 347.16	\$ 4.56	\$ 40.41
Anesthesia	Procedures	252.7	342.10	7.20	49.5	307.79	1.27	8.48
Inpatient Visits	Visits	1,147.1	217.51	20.79	202.2	330.08	5.56	26.35
Emergency Room	Visits	1,201.0	167.22	16.74	335.5	151.82	4.25	20.98
Office/Home Visits/Consults	Visits	5,215.6	106.65	46.35	623.1	104.43	5.42	51.78
Maternity	Procedures	7.6	497.03	0.31	1.5	639.17	0.08	0.40
Pathology/Lab	Procedures	4,867.1	25.60	10.38	72.9	51.04	0.31	10.69
Radiology	Procedures	3,110.7	114.87	29.78	556.6	36.37	1.69	31.46
Office Administered Drugs	Procedures	1,028.4	205.57	17.62	18.6	40.01	0.06	17.68
FQHC/RHC/Tribal Clinic	Visits	1,023.7	222.65	18.99	1,485.7	448.23	55.50	74.49
Physical Exams	Visits	89.5	44.22	0.33	5.6	34.38	0.02	0.35
Therapy	Visits	1,057.2	105.58	9.30	6.0	53.07	0.03	9.33
Vision	Visits	835.6	92.08	6.41	21.2	103.67	0.18	6.60
Other Professional	Procedures	1,964.4	87.01	14.24	189.9	112.34	1.78	16.02
Telemedicine	Procedures	17.4	146.68	0.21	40.6	307.64	1.04	1.25
Subtotal – Professional		23,158.1	\$ 121.52	\$ 234.52	3,766.7	\$ 260.41	\$ 81.74	\$ 316.26
Pharmacy								
Psychotropic Drugs	Scripts	3,556.5	\$ 63.58	\$ 18.84	1,101.4	\$ 33.60	\$ 3.08	\$ 21.93
Opioid Drugs	Scripts	2,092.1	64.60	11.26	306.9	27.05	0.69	11.95
All Other Drugs	Scripts	17,000.6	122.82	174.00	4,593.1	81.23	31.09	205.09
Subtotal – Pharmacy		22,649.3	\$ 108.14	\$ 204.10	6,001.3	\$ 69.72	\$ 34.87	\$ 238.97
Ancillary								
Ground Transportation	Trips	3,405.2	\$ 71.99	\$ 20.43	2.1	\$ 282.30	\$ 0.05	\$ 20.48
Air Transportation	Trips	811.7	691.91	46.80	2.6	6,180.40	1.36	48.16
Accommodations	Claims	377.1	312.09	9.81	-	-	-	9.81
DME/Prosthetics	Procedures	3,052.5	92.29	23.48	-	-	-	23.48
Dental	Procedures	2,549.6	184.56	39.21	305.2	374.10	9.52	48.73
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		10,196.0	\$ 164.44	\$ 139.72	310.0	\$ 422.86	\$ 10.92	\$ 150.65
LTSS								
Hospice	Days	7.0	\$ 4,194.62	\$ 2.46	-	\$ 0.00	\$ 0.00	\$ 2.46
Nursing Home	Days	31.3	495.97	1.29	22.8	2,984.34	5.68	6.98
Skilled Nursing Facility	Days	2,253.5	649.27	121.93	160.5	931.61	12.46	134.38
HCBS	Procedures	254.6	106.50	2.26	0.1	370.00	0.00	2.26
Case Management	Procedures	3.5	244.38	0.07	1.5	319.51	0.04	0.11
Personal Care	Procedures	25,798.5	69.22	148.81	-	-	-	148.81
Subtotal – LTSS		28,348.5	\$ 117.18	\$ 276.82	185.0	\$ 1,179.73	\$ 18.18	\$ 295.01
Behavioral Health								
IP Psych Hospital - API	Days	28.0	\$ 1,317.40	\$ 3.07	-	\$ 0.00	\$ 0.00	\$ 3.07
IP Psych Hospital - All Other	Days	-	-	-	-	-	-	-
IP General Hospital - MH/SA	Days	93.1	2,891.46	22.44	4.1	4,324.27	1.46	23.91
OP General Hospital - MH/SA	Visits	18.8	94.80	0.15	2.7	22.56	0.01	0.15
Screening	Procedures	35.3	46.14	0.14	6.7	526.79	0.29	0.43
Assessment	Procedures	49.6	202.74	0.84	11.2	584.79	0.55	1.38
Crisis Services	Procedures	24.4	135.52	0.28	27.1	594.76	1.34	1.62
Medication Services	Procedures	579.0	30.57	1.48	49.8	600.56	2.49	3.97
Methadone Medication Services	Procedures	333.9	12.50	0.35	-	-	-	0.35
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	711.5	86.62	5.14	112.9	580.37	5.46	10.60
Family Therapy OP	Procedures	88.3	93.80	0.69	2.6	269.90	0.06	0.75
Group Therapy OP	Procedures	135.3	60.73	0.68	54.0	475.90	2.14	2.83
SBIRT	Procedures	0.2	43.80	0.00	6.4	601.83	0.32	0.32
Substance Abuse Residential	Days	34.6	205.88	0.59	112.8	294.08	2.76	3.36
Children's Residential	Days	-	-	-	-	-	-	-
RPTC - In State	Days	-	-	-	-	-	-	-
RPTC - Out of State	Days	-	-	-	-	-	-	-
Detoxification	Procedures	-	-	-	14.8	602.10	0.74	0.74
Medical Evaluation	Procedures	42.0	207.77	0.73	1.0	502.47	0.04	0.77
Psychological Testing	Procedures	23.8	616.70	1.22	0.5	537.90	0.02	1.25
Peer Support Services	Units	141.7	16.96	0.20	-	-	-	0.20
Psychosocial Rehabilitation Services	Procedures	3,745.6	170.60	53.25	898.8	601.63	45.06	98.31
BH Case Management	Units	3,780.1	16.00	5.04	306.9	200.32	5.12	10.16
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	24.9	86.54	0.18	11.0	585.48	0.54	0.72
Other Professional MH/SA	Visits	187.4	39.64	0.62	29.3	604.29	1.48	2.10
Subtotal – Behavioral Health		10,077.5	\$ 115.60	\$ 97.08	1,652.7	\$ 507.52	\$ 69.90	\$ 166.98
Total All Services		102,673.1	\$ 155.04	\$ 1,326.56	13,851.8	\$ 280.71	\$ 324.03	\$ 1,650.59

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska, Department of Health and Social Services
 Statewide Databook- Appendix C
 SFY 2016 and SFY 2017 Data Book - Detailed Summary

Fiscal Year: SFY 2016
 Population: SSI/Disabled
 Rate Cell: Child
 Region: Statewide

Member Months: 31,218

Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid PMPM
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	234.5	\$ 3,770.00	\$ 73.67	48.0	\$ 3,470.90	\$ 13.90	\$ 87.56
Inpatient Maternity Delivery	Days	1.5	3,071.25	0.39	0.8	2,926.00	0.19	0.58
Inpatient Well Newborn	Days	-	-	-	0.8	2,926.00	0.19	0.19
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal – Inpatient Hospital		236.0	\$ 3,765.45	\$ 74.06	49.6	\$ 3,454.00	\$ 14.27	\$ 88.33
Outpatient Hospital								
Outpatient Emergency Room	Visits	329.8	\$ 792.12	\$ 21.77	130.3	\$ 544.73	\$ 5.92	\$ 27.69
Outpatient Surgery	Visits	76.1	3,334.42	21.15	16.5	1,145.15	1.58	22.73
Outpatient Radiology	Procedures	133.8	449.74	5.01	17.7	517.13	0.76	5.78
Outpatient Pathology/Lab	Procedures	2,204.1	26.60	4.89	157.6	392.29	5.15	10.04
Outpatient Pharmacy	Procedures	432.8	482.80	17.41	15.0	229.44	0.29	17.70
Other Outpatient	Procedures	1,160.5	143.65	13.89	209.9	522.23	9.13	23.03
Subtotal – Outpatient Hospital		4,337.1	\$ 232.76	\$ 84.13	547.0	\$ 500.79	\$ 22.83	\$ 106.95
Professional								
Inpatient and Outpatient Surgery	Procedures	272.5	\$ 328.07	\$ 7.45	33.8	\$ 454.26	\$ 1.28	\$ 8.73
Anesthesia	Procedures	150.7	371.35	4.66	24.2	409.92	0.83	5.49
Inpatient Visits	Visits	602.0	345.15	17.31	29.6	337.18	0.83	18.15
Emergency Room	Visits	351.0	176.12	5.15	100.3	139.52	1.17	6.32
Office/Home Visits/Consults	Visits	2,127.2	142.96	25.34	164.1	129.35	1.77	27.11
Maternity	Procedures	4.2	472.42	0.17	1.5	629.55	0.08	0.25
Pathology/Lab	Procedures	622.3	21.38	1.11	20.4	16.48	0.03	1.14
Radiology	Procedures	623.1	53.92	2.80	82.3	41.73	0.29	3.09
Office Administered Drugs	Procedures	85.7	72.88	0.52	3.5	41.47	0.01	0.53
FQHC/RHC/Tribal Clinic	Visits	178.7	272.48	4.06	573.9	584.96	27.98	32.03
Physical Exams	Visits	308.7	148.40	3.82	6.5	87.34	0.05	3.86
Therapy	Visits	11,424.9	154.51	147.10	2.7	78.30	0.02	147.12
Vision	Visits	737.3	83.81	5.15	7.3	118.36	0.07	5.22
Other Professional	Procedures	2,055.4	102.27	17.52	48.0	164.04	0.66	18.17
Telemedicine	Procedures	34.6	189.02	0.54	25.0	407.17	0.85	1.39
Subtotal – Professional		19,578.3	\$ 148.76	\$ 242.71	1,123.2	\$ 383.54	\$ 35.90	\$ 278.61
Pharmacy								
Psychotropic Drugs	Scripts	2,109.6	\$ 71.98	\$ 12.65	90.7	\$ 116.95	\$ 0.88	\$ 13.54
Opioid Drugs	Scripts	125.7	10.70	0.11	20.4	13.00	0.02	0.13
All Other Drugs	Scripts	6,512.8	268.40	145.67	754.9	95.63	6.02	151.68
Subtotal – Pharmacy		8,748.0	\$ 217.33	\$ 158.43	866.0	\$ 95.92	\$ 6.92	\$ 165.36
Ancillary								
Ground Transportation	Trips	1,659.0	\$ 83.35	\$ 11.52	1.5	\$ 358.61	\$ 0.05	\$ 11.57
Air Transportation	Trips	740.7	781.25	48.22	1.9	8,064.17	1.29	49.52
Accommodations	Claims	302.9	361.15	9.12	-	-	-	9.12
DME/Prosthetics	Procedures	2,501.6	139.90	29.16	-	-	-	29.16
Dental	Procedures	3,613.3	102.21	30.78	265.6	602.32	13.33	44.11
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		8,817.6	\$ 175.29	\$ 128.81	269.1	\$ 654.22	\$ 14.67	\$ 143.48
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Nursing Home	Days	900.6	38.46	2.89	6.5	2,926.00	1.59	4.48
Skilled Nursing Facility	Days	264.5	572.80	12.62	-	-	-	12.62
HCBS	Procedures	1,125.9	295.14	27.69	-	-	-	27.69
Case Management	Procedures	207.2	286.09	4.94	6.2	295.29	0.15	5.09
Personal Care	Procedures	2,154.1	52.94	9.50	-	-	-	9.50
Subtotal – LTSS		4,652.3	\$ 148.69	\$ 57.65	12.7	\$ 1,650.50	\$ 1.74	\$ 59.39
Behavioral Health								
IP Psych Hospital - API	Days	227.6	\$ 1,346.28	\$ 25.53	-	\$ 0.00	\$ 0.00	\$ 25.53
IP Psych Hospital - All Other	Days	899.9	707.72	53.07	-	-	-	53.07
IP General Hospital - MH/SA	Days	21.5	2,423.19	4.35	3.8	5,893.48	1.89	6.23
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	76.9	57.05	0.37	2.3	602.33	0.12	0.48
Assessment	Procedures	94.9	221.54	1.75	8.5	601.91	0.42	2.18
Crisis Services	Procedures	12.7	180.09	0.19	17.7	598.46	0.88	1.07
Medication Services	Procedures	389.0	35.00	1.13	4.6	601.83	0.23	1.37
Methadone Medication Services	Procedures	-	-	-	-	-	-	-
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	1,439.2	92.29	11.07	104.2	591.53	5.13	16.20
Family Therapy OP	Procedures	463.2	100.05	3.86	14.6	563.00	0.69	4.55
Group Therapy OP	Procedures	693.1	72.80	4.20	16.1	593.89	0.80	5.00
SBIRT	Procedures	-	-	-	0.4	601.00	0.02	0.02
Substance Abuse Residential	Days	107.6	231.25	2.07	49.6	602.15	2.49	4.56
Children's Residential	Days	6,877.2	179.34	102.78	104.6	176.84	1.54	104.32
RPTC - In State	Days	1,288.5	339.54	36.46	-	-	-	36.46
RPTC - Out of State	Days	4,426.3	364.05	134.28	-	-	-	134.28
Detoxification	Procedures	-	-	-	-	-	-	-
Medical Evaluation	Procedures	43.4	238.03	0.86	-	-	-	0.86
Psychological Testing	Procedures	225.3	586.69	11.01	3.5	580.22	0.17	11.18
Peer Support Services	Units	608.9	16.99	0.86	-	-	-	0.86
Psychosocial Rehabilitation Services	Procedures	6,117.2	221.24	112.78	339.0	602.08	17.01	129.79
BH Case Management	Units	3,456.5	15.94	4.59	54.2	307.30	1.39	5.98
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	26.1	90.46	0.20	15.0	589.94	0.74	0.93
Other Professional MH/SA	Visits	225.6	38.99	0.73	18.5	602.08	0.93	1.66
Subtotal – Behavioral Health		27,720.5	\$ 221.71	\$ 512.16	756.5	\$ 546.27	\$ 34.44	\$ 546.60
Total All Services		74,089.9	\$ 203.74	\$ 1,257.94	3,624.1	\$ 433.02	\$ 130.77	\$ 1,388.71

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska, Department of Health and Social Services
Statewide Databook- Appendix C
SFY 2016 and SFY 2017 Data Book - Detailed Summary

Fiscal Year:		SFY 2016						
Population:		Waiver/Institutional						
Rate Cell:		Adult						
Region:		Statewide						
Member Months:		26,814						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid
		Utilization per 1,000	Paid per Unit	Paid PMPM	Utilization per 1,000	Paid per Unit	Paid PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	817.2	\$ 2,595.37	\$ 176.74	269.0	\$ 3,101.62	\$ 69.52	\$ 246.26
Inpatient Maternity Delivery	Days	-	-	-	-	-	-	-
Inpatient Well Newborn	Days	-	-	-	-	-	-	-
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal – Inpatient Hospital		817.2	\$ 2,595.37	\$ 176.74	269.0	\$ 3,101.62	\$ 69.52	\$ 246.26
Outpatient Hospital								
Outpatient Emergency Room	Visits	737.1	\$ 648.15	\$ 39.81	111.9	\$ 514.36	\$ 4.80	\$ 44.61
Outpatient Surgery	Visits	156.6	1,938.94	25.31	17.0	852.13	1.21	26.52
Outpatient Radiology	Procedures	357.6	250.49	7.46	34.0	482.97	1.37	8.83
Outpatient Pathology/Lab	Procedures	1,794.1	14.85	2.22	167.8	473.93	6.63	8.85
Outpatient Pharmacy	Procedures	446.6	245.70	9.14	12.5	348.33	0.36	9.51
Other Outpatient	Procedures	5,957.0	111.80	55.50	735.3	224.72	13.77	69.27
Subtotal – Outpatient Hospital		9,449.0	\$ 177.10	\$ 139.45	1,078.5	\$ 313.02	\$ 28.13	\$ 167.58
Professional								
Inpatient and Outpatient Surgery	Procedures	1,181.9	\$ 214.61	\$ 21.14	119.5	\$ 263.10	\$ 2.62	\$ 23.76
Anesthesia	Procedures	217.0	259.60	4.70	30.0	337.23	0.84	5.54
Inpatient Visits	Visits	2,294.4	113.18	21.64	220.2	356.04	6.53	28.17
Emergency Room	Visits	945.6	123.83	9.76	185.3	146.45	2.26	12.02
Office/Home Visits/Consults	Visits	4,546.4	83.18	31.52	280.6	92.27	2.16	33.67
Maternity	Procedures	-	-	-	-	-	-	-
Pathology/Lab	Procedures	2,388.9	21.08	4.20	24.6	58.36	0.12	4.32
Radiology	Procedures	2,763.9	61.88	14.25	430.1	31.82	1.14	15.39
Office Administered Drugs	Procedures	756.3	120.78	7.61	0.9	6.05	0.00	7.61
FQHC/RHC/Tribal Clinic	Visits	719.6	171.71	10.30	845.8	375.38	26.46	36.76
Physical Exams	Visits	55.0	39.72	0.18	0.4	27.44	0.00	0.18
Therapy	Visits	1,315.7	106.89	11.72	2.2	14.65	0.00	11.72
Vision	Visits	697.2	81.18	4.72	9.0	116.80	0.09	4.80
Other Professional	Procedures	12,407.1	38.96	40.28	93.1	176.26	1.37	41.65
Telemedicine	Procedures	12.1	100.27	0.10	16.1	243.45	0.33	0.43
Subtotal – Professional		30,301.3	\$ 72.12	\$ 182.11	2,257.8	\$ 233.43	\$ 43.92	\$ 226.03
Pharmacy								
Psychotropic Drugs	Scripts	5,100.0	\$ 34.76	\$ 14.77	1,312.6	\$ 18.75	\$ 2.05	\$ 16.82
Opioid Drugs	Scripts	924.1	84.06	6.47	78.8	15.84	0.10	6.58
All Other Drugs	Scripts	19,854.8	68.56	113.43	4,344.6	39.90	14.44	127.88
Subtotal – Pharmacy		25,878.9	\$ 62.45	\$ 134.68	5,735.9	\$ 34.73	\$ 16.60	\$ 151.28
Ancillary								
Ground Transportation	Trips	8,074.2	\$ 105.17	\$ 70.77	0.4	\$ 120.93	\$ 0.00	\$ 70.77
Air Transportation	Trips	402.3	577.34	19.36	0.4	1,609.94	0.06	19.42
Accommodations	Claims	109.6	270.18	2.47	-	-	-	2.47
DME/Prosthetics	Procedures	19,500.4	82.11	133.43	-	-	-	133.43
Dental	Procedures	2,248.4	142.27	26.66	250.6	283.05	5.91	32.57
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		30,334.9	\$ 99.95	\$ 252.67	251.5	\$ 285.12	\$ 5.98	\$ 258.65
LTSS								
Hospice	Days	49.2	\$ 1,600.75	\$ 6.57	-	\$ 0.00	\$ 0.00	\$ 6.57
Nursing Home	Days	225.1	536.36	10.06	15.2	3,046.29	3.86	13.92
Skilled Nursing Facility	Days	40,396.1	523.92	1,763.70	2,248.4	1,008.60	188.97	1,952.67
HCBS	Procedures	310,517.7	171.95	4,449.34	24.6	338.93	0.70	4,450.03
Case Management	Procedures	8,971.5	236.85	177.08	423.8	277.55	9.80	186.88
Personal Care	Procedures	78,454.3	103.62	677.48	-	-	-	677.48
Subtotal – LTSS		438,614.0	\$ 193.82	\$ 7,084.21	2,712.0	\$ 899.71	\$ 203.33	\$ 7,287.55
Behavioral Health								
IP Psych Hospital - API	Days	2.7	\$ 1,278.67	\$ 0.29	-	\$ 0.00	\$ 0.00	\$ 0.29
IP Psych Hospital - All Other	Days	-	-	-	-	-	-	-
IP General Hospital - MH/SA	Days	20.1	2,950.22	4.95	0.9	2,926.00	0.22	5.17
OP General Hospital - MH/SA	Visits	26.0	36.19	0.08	0.9	63.35	0.00	0.08
Screening	Procedures	60.9	80.85	0.41	3.6	160.96	0.05	0.46
Assessment	Procedures	38.0	195.67	0.62	5.4	517.43	0.23	0.85
Crisis Services	Procedures	550.0	163.62	7.50	13.0	601.48	0.65	8.15
Medication Services	Procedures	56.8	56.14	0.27	2.2	602.60	0.11	0.38
Methadone Medication Services	Procedures	1.3	12.50	0.00	-	-	-	0.00
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	755.4	68.57	4.32	55.9	572.60	2.67	6.99
Family Therapy OP	Procedures	77.4	72.98	0.47	0.9	298.09	0.02	0.49
Group Therapy OP	Procedures	243.9	42.33	0.86	0.4	603.00	0.02	0.88
SBIRT	Procedures	-	-	-	1.3	603.00	0.07	0.07
Substance Abuse Residential	Days	-	-	-	-	-	-	-
Children's Residential	Days	-	-	-	-	-	-	-
RPTC - In State	Days	-	-	-	-	-	-	-
RPTC - Out of State	Days	-	-	-	-	-	-	-
Detoxification	Procedures	-	-	-	-	-	-	-
Medical Evaluation	Procedures	33.6	179.24	0.50	-	-	-	0.50
Psychological Testing	Procedures	33.1	536.65	1.48	-	-	-	1.48
Peer Support Services	Units	80.1	10.16	0.07	-	-	-	0.07
Psychosocial Rehabilitation Services	Procedures	3,406.1	173.55	49.26	42.1	602.51	2.11	51.37
BH Case Management	Units	1,261.1	15.81	1.66	33.6	168.71	0.47	2.13
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	9.8	77.45	0.06	5.8	512.74	0.25	0.31
Other Professional MH/SA	Visits	148.6	29.74	0.37	2.7	495.65	0.11	0.48
Subtotal – Behavioral Health		6,805.0	\$ 129.02	\$ 73.16	168.7	\$ 497.20	\$ 6.99	\$ 80.15
Total All Services		542,200.3	\$ 178.01	\$ 8,043.02	12,473.4	\$ 360.26	\$ 374.47	\$ 8,417.49

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

State of Alaska, Department of Health and Social Services
 Statewide Databook- Appendix C
 SFY 2016 and SFY 2017 Data Book - Detailed Summary

Fiscal Year:		SFY 2016						
Population:		Waiver/Institutional						
Rate Cell:		Child						
Region:		Statewide						
Member Months:		10,312						
Category of Service	Unit Description	Non-Tribal Providers			Tribal Providers			Total Paid
		Utilization per 1,000	Paid per Unit	PMPM	Utilization per 1,000	Paid per Unit	PMPM	
Inpatient Hospital								
Inpatient Medical/Surgical/Non-Delivery	Days	769.2	\$ 3,230.80	\$ 207.09	150.1	\$ 3,113.87	\$ 38.95	\$ 246.05
Inpatient Maternity Delivery	Days	2.3	3,636.15	0.71	-	-	-	0.71
Inpatient Well Newborn	Days	-	-	-	-	-	-	-
Other Inpatient	Days	-	-	-	-	-	-	-
Subtotal – Inpatient Hospital		771.5	\$ 3,232.02	\$ 207.80	150.1	\$ 3,113.87	\$ 38.95	\$ 246.75
Outpatient Hospital								
Outpatient Emergency Room	Visits	393.3	\$ 598.05	\$ 19.60	125.7	\$ 515.59	\$ 5.40	\$ 25.00
Outpatient Surgery	Visits	132.7	2,390.25	26.42	20.9	898.98	1.57	27.99
Outpatient Radiology	Procedures	138.5	263.03	3.04	38.4	459.02	1.47	4.50
Outpatient Pathology/Lab	Procedures	2,113.3	21.51	3.79	192.0	454.81	7.28	11.06
Outpatient Pharmacy	Procedures	142.0	192.64	2.28	19.8	327.68	0.54	2.82
Other Outpatient	Procedures	2,532.2	171.05	36.10	393.3	389.15	12.76	48.85
Subtotal – Outpatient Hospital		5,451.9	\$ 200.79	\$ 91.22	790.1	\$ 440.59	\$ 29.01	\$ 120.23
Professional								
Inpatient and Outpatient Surgery	Procedures	431.7	\$ 458.19	\$ 16.48	38.4	\$ 357.55	\$ 1.14	\$ 17.63
Anesthesia	Procedures	190.8	510.25	8.11	33.7	516.21	1.45	9.57
Inpatient Visits	Visits	749.4	311.09	19.43	96.6	376.32	3.03	22.46
Emergency Room	Visits	416.6	158.40	5.50	153.6	129.50	1.86	7.16
Office/Home Visits/Consults	Visits	2,954.6	137.75	33.92	242.0	126.70	2.56	36.47
Maternity	Procedures	5.8	318.23	0.15	2.3	112.68	0.02	0.18
Pathology/Lab	Procedures	493.4	20.03	0.82	38.4	33.66	0.11	0.93
Radiology	Procedures	898.4	42.44	3.18	197.8	35.66	0.59	3.77
Office Administered Drugs	Procedures	88.4	38.40	0.28	2.3	33.10	0.01	0.29
FQHC/RHC/Tribal Clinic	Visits	193.2	205.18	3.30	879.8	555.50	40.72	44.03
Physical Exams	Visits	289.8	135.87	3.28	1.2	27.00	0.00	3.28
Therapy	Visits	22,683.9	160.19	302.80	8.1	13.21	0.01	302.81
Vision	Visits	725.0	68.14	4.12	12.8	141.81	0.15	4.27
Other Professional	Procedures	6,004.7	90.70	45.38	110.6	78.04	0.72	46.10
Telemedicine	Procedures	117.5	160.19	1.57	30.3	314.73	0.79	2.36
Subtotal – Professional		36,243.2	\$ 148.44	\$ 448.34	1,847.9	\$ 343.92	\$ 52.96	\$ 501.30
Pharmacy								
Psychotropic Drugs	Scripts	4,554.7	\$ 78.71	\$ 29.87	366.6	\$ 138.61	\$ 4.23	\$ 34.11
Opioid Drugs	Scripts	131.5	49.80	0.55	10.5	5.82	0.01	0.55
All Other Drugs	Scripts	14,737.0	128.47	157.77	2,285.5	153.53	29.24	187.01
Subtotal – Pharmacy		19,423.2	\$ 116.26	\$ 188.19	2,662.5	\$ 150.90	\$ 33.48	\$ 221.67
Ancillary								
Ground Transportation	Trips	2,681.1	\$ 68.54	\$ 15.31	-	\$ 0.00	\$ 0.00	\$ 15.31
Air Transportation	Trips	1,181.1	964.41	94.93	-	-	-	94.93
Accommodations	Claims	384.0	344.34	11.02	-	-	-	11.02
DME/Prosthetics	Procedures	18,867.0	154.54	242.97	-	-	-	242.97
Dental	Procedures	3,516.7	100.83	29.55	256.0	576.88	12.31	41.86
Other Ancillary	Procedures	-	-	-	-	-	-	-
Subtotal – Ancillary		26,629.9	\$ 177.44	\$ 393.78	256.0	\$ 576.88	\$ 12.31	\$ 406.09
LTSS								
Hospice	Days	-	\$ 0.00	\$ 0.00	-	\$ 0.00	\$ 0.00	\$ 0.00
Nursing Home	Days	5,126.1	57.35	24.50	-	-	-	24.50
Skilled Nursing Facility	Days	-	-	-	-	-	-	-
HCBS	Procedures	235,374.3	196.82	3,860.56	9.3	568.80	0.44	3,861.00
Case Management	Procedures	20,273.9	160.73	271.55	296.7	354.85	8.77	280.32
Personal Care	Procedures	18,372.4	123.84	189.60	-	-	-	189.60
Subtotal – LTSS		279,146.6	\$ 186.84	\$ 4,346.21	306.1	\$ 361.36	\$ 9.22	\$ 4,355.42
Behavioral Health								
IP Psych Hospital - API	Days	280.4	\$ 1,138.44	\$ 26.61	-	\$ 0.00	\$ 0.00	\$ 26.61
IP Psych Hospital - All Other	Days	357.3	713.73	21.25	-	-	-	21.25
IP General Hospital - MH/SA	Days	81.5	2,321.71	15.76	3.5	2,909.33	0.85	16.61
OP General Hospital - MH/SA	Visits	-	-	-	-	-	-	-
Screening	Procedures	73.3	72.00	0.44	2.3	603.00	0.12	0.56
Assessment	Procedures	50.0	213.56	0.89	4.7	602.50	0.23	1.12
Crisis Services	Procedures	3,019.8	244.55	61.54	12.8	599.64	0.64	62.18
Medication Services	Procedures	87.3	63.85	0.46	2.3	601.00	0.12	0.58
Methadone Medication Services	Procedures	-	-	-	-	-	-	-
Other Opioid Medication Services	Procedures	-	-	-	-	-	-	-
Individual Therapy OP	Procedures	1,330.1	84.11	9.32	23.3	576.20	1.12	10.44
Family Therapy OP	Procedures	347.9	93.45	2.71	14.0	588.32	0.68	3.39
Group Therapy OP	Procedures	398.0	68.46	2.27	-	-	-	2.27
SBIRT	Procedures	-	-	-	-	-	-	-
Substance Abuse Residential	Days	-	-	-	10.5	601.00	0.52	0.52
Children's Residential	Days	2,897.6	162.59	39.26	-	-	-	39.26
RPTC - In State	Days	59.3	371.29	1.84	-	-	-	1.84
RPTC - Out of State	Days	1,328.9	378.84	41.96	-	-	-	41.96
Detoxification	Procedures	-	-	-	-	-	-	-
Medical Evaluation	Procedures	59.3	232.75	1.15	-	-	-	1.15
Psychological Testing	Procedures	202.5	536.68	9.06	-	-	-	9.06
Peer Support Services	Units	-	-	-	-	-	-	-
Psychosocial Rehabilitation Services	Procedures	4,693.2	188.88	73.87	151.3	591.29	7.45	81.33
BH Case Management	Units	5,895.3	16.00	7.86	23.3	241.20	0.47	8.33
Day Treatment	Procedures	-	-	-	-	-	-	-
BH Telemedicine	Procedures	54.7	66.75	0.30	8.1	602.71	0.41	0.71
Other Professional MH/SA	Visits	223.4	96.55	1.80	5.8	602.60	0.29	2.09
Subtotal – Behavioral Health		21,439.9	\$ 178.18	\$ 318.34	261.8	\$ 591.37	\$ 12.90	\$ 331.25
Total All Services		389,106.3	\$ 184.85	\$ 5,993.88	6,274.6	\$ 361.14	\$ 188.83	\$ 6,182.71

Note: Tribal health provider reimbursement and claiming policies are different than those for non-tribal providers; therefore, specific service breakdowns are not expected to correspond between tribal and non-tribal providers.

APPENDIX D: CDPS RISK SCORE SUMMARIES

**State of Alaska Department of Health and Social Services
Statewide Databook
Appendix D: CDPS Risk Score Summaries**

Fiscal Year: SFY 2017

Metric: Prevalence Report

Weights: CDPS+Rx Disabled Concurrent

CDPS+Rx Category	CDPS+Rx Cost Weight ¹	Percent of Scored Recipients	
		SSI/Disabled	Waiver/ Institutional
Demographic Categories			
Less than 1	2.1307	0.2%	0.0%
Age 1 to 4	0.0242	2.2%	1.5%
Male age 5 to 14	0.0452	8.0%	9.4%
Female age 5 to 14	0.0047	4.6%	5.3%
Male age 15 to 24	0.0732	5.5%	11.5%
Female age 15 to 24	0.0355	3.9%	6.6%
Male age 25 to 44	0.0000	8.4%	13.0%
Female age 25 to 44	-0.0325	7.5%	8.9%
Male age 45 to 64	-0.0849	18.1%	8.5%
Female age 45 to 64	-0.0986	21.6%	8.5%
Age 65 and over	-0.0918	20.0%	26.9%
Age Subtotal		100.0%	100.0%
Diagnostic Categories			
Cardiovascular			
Very high	2.4547	0.7%	1.0%
Medium	0.7044	6.3%	9.4%
Low	0.4939	9.7%	9.5%
Extra low	0.1332	19.5%	11.9%
Psychiatric			
High	0.9023	7.1%	4.0%
Medium	0.5197	9.6%	22.3%
Medium Low	0.3607	14.4%	11.5%
Low	0.1483	5.1%	9.4%
Skeletal			
Medium	0.5336	7.5%	8.8%
Low	0.2541	9.9%	10.8%
Very low	0.1412	7.8%	6.1%
Central Nervous System			
High	0.8663	0.6%	7.3%
Medium	0.3426	3.2%	11.9%
Low	0.2625	13.0%	27.2%
Pulmonary			
Very high	2.6613	1.2%	3.6%
High	1.5185	0.4%	0.4%
Medium	1.3000	3.6%	6.0%
Low	0.1792	16.4%	11.8%
Gastrointestinal			
High	1.3867	1.8%	7.4%
Medium	0.4446	4.0%	3.0%
Low	0.2611	13.5%	12.0%
Diabetes			
Type 1 high	0.3293	0.2%	0.2%
Type 1 medium	0.3293	1.0%	1.1%
Type 2 medium	0.2011	4.8%	5.7%
Type 2 low	0.2011	10.0%	8.2%

**State of Alaska Department of Health and Social Services
Statewide Databook
Appendix D: CDPS Risk Score Summaries**

Fiscal Year: SFY 2017
Metric: Prevalence Report
Weights: CDPS+Rx Disabled Concurrent

CDPS+Rx Category	CDPS+Rx Cost Weight ¹	Percent of Scored Recipients	
		SSI/Disabled	Waiver/ Institutional
Diagnostic Categories (cont.)			
Skin			
High	1.0529	0.8%	6.0%
Low	0.3972	1.1%	1.9%
Very low	0.1435	7.9%	7.5%
Renal			
Extra high	2.8336	0.7%	1.2%
Very high	0.5636	4.4%	6.2%
Medium	0.4827	0.4%	1.1%
Low	0.3189	8.3%	35.5%
Substance Abuse			
Low	0.4354	7.1%	2.2%
Very low	0.0845	6.5%	2.4%
Cancer			
Very High	2.7895	0.8%	0.7%
High	1.4739	1.3%	1.2%
Medium	0.2380	0.5%	0.8%
Low	0.2380	1.4%	1.3%
Development Disability			
Medium	0.3071	0.2%	3.2%
Low	0.2200	3.2%	27.1%
Genital			
Extra low	0.0931	4.3%	4.0%
Metabolic			
High	1.0434	1.7%	2.2%
Medium	1.0434	4.3%	8.2%
Very low	0.3468	7.2%	12.0%
Pregnancy			
Complete	0.4159	0.5%	0.3%
Incomplete	0.1642	0.1%	0.1%
Eye			
Low	0.1897	1.3%	0.7%
Very low	0.0516	10.3%	7.4%
Cerebrovascular			
Low	0.3189	2.5%	9.4%
Infectious Disease			
AIDS high	1.8925	0.6%	0.4%
Infectious high	1.8925	0.2%	0.3%
HIV medium	1.4143	0.1%	0.2%
Infectious medium	1.4143	2.6%	4.3%
Infectious low	0.1189	4.3%	2.5%
Hematological			
Extra high	20.4343	0.0%	0.1%
Very high	1.7119	0.1%	0.0%
Medium	1.4267	1.0%	0.7%
Low	0.8226	1.8%	1.8%

**State of Alaska Department of Health and Social Services
Statewide Databook
Appendix D: CDPS Risk Score Summaries**

Fiscal Year: SFY 2017

Metric: Prevalence Report

Weights: CDPS+Rx Disabled Concurrent

CDPS+Rx Category	CDPS+Rx Cost Weight ¹	Percent of Scored Recipients	
		SSI/Disabled	Waiver/ Institutional
Pharmacy NDC Categories			
Anti-coagulants	0.7044	1.4%	1.2%
Cardiac	0.1332	6.4%	6.3%
Depression/Psychosis/Bipolar	0.1483	7.8%	10.2%
Diabetes	0.2011	1.4%	1.8%
ESRD / Renal	0.5636	0.1%	0.1%
Hemophilia/von Willebrands	20.4343	0.0%	0.0%
Hepatitis	1.4143	0.5%	0.0%
HIV	1.4143	0.1%	0.0%
Infections, high	1.8925	0.4%	0.6%
Inflammatory /Autoimmune	0.1412	0.3%	0.1%
Malignancies	0.2380	1.4%	0.4%
Multiple Sclerosis	0.3426	0.0%	0.0%
Parkinsons / Tremor	0.2625	2.3%	1.5%
Seizure disorders	0.2625	0.5%	0.6%
Tuberculosis	0.1792	0.1%	0.0%
Child Interaction Factors			
Children's CARVH	4.3579	0.1%	0.1%
Children's CARM	1.9439	0.2%	0.6%
Children's PULVH	1.5868	0.2%	1.1%
Children's PULH	1.5868	0.0%	0.1%
Children's GIH	0.7658	0.5%	3.9%
Children's METH	0.5532	0.6%	1.3%
Children's HIVM	2.5371	0.0%	0.0%
Children's INFM	2.5371	0.1%	0.4%
Children's HEMEH	8.6389	0.0%	0.1%
Population Statistics			
No claims data/encounter data	n/a	13.0%	3.5%
No classified CDPS+Rx categories	n/a	16.6%	4.2%
Risk-Adjusted Results			
Recipients			
- Scored		11,445	2,902
- Total (scored and unscored)		11,982	2,999
Aggregate Risk Score			
- Scored Population		1.102	1.816
<p>1. The cost weights for the Demographic Categories include the 0 intercept, which is assumed for all recipients.</p> <p>2. Scored recipients reflect members eligible on June 1, 2017, who had at least six months of eligibility from July 2016 through June 2017.</p> <p>3. Total recipients reflect members eligible on June 1, 2017, including those who were not scored.</p>			

**State of Alaska Department of Health and Social Services
Statewide Databook
Appendix D: CDPS Risk Score Summaries**

Fiscal Year: SFY 2017
Metric: Prevalence Report
Weights: CDPS+Rx TANF Adult Concurrent

Percent of Scored Recipients

CDPS+Rx Category	CDPS+Rx Cost Weight ¹	Medicaid Expansion	Low-Income Family	Pregnant Women
Demographic Categories				
Less than 1	0.0000	0.0%	0.0%	0.0%
Age 1 to 4	0.0000	0.0%	0.0%	0.0%
Male age 5 to 14	0.0000	0.0%	0.0%	0.0%
Female age 5 to 14	0.0000	0.0%	0.0%	0.0%
Male age 15 to 24	0.0566	7.5%	8.8%	0.0%
Female age 15 to 24	0.1314	6.2%	13.7%	35.9%
Male age 25 to 44	0.0844	26.0%	21.4%	0.0%
Female age 25 to 44	0.1438	16.9%	39.6%	63.8%
Male age 45 to 64	0.1221	23.4%	7.9%	0.0%
Female age 45 to 64	0.1175	19.9%	8.2%	0.2%
Age 65 and over	0.1198	0.0%	0.3%	0.0%
Age Subtotal		100.0%	100.0%	100.0%
Diagnostic Categories				
Cardiovascular				
Very high	9.3655	0.1%	0.0%	0.0%
Medium	2.1192	2.3%	0.9%	0.6%
Low	1.0537	4.7%	2.3%	3.2%
Extra low	0.2104	11.7%	6.6%	2.2%
Psychiatric				
High	2.1920	1.0%	0.2%	0.6%
Medium	1.0358	2.6%	1.1%	1.3%
Medium Low	0.5771	8.7%	7.1%	7.7%
Low	0.2467	4.1%	3.5%	4.6%
Skeletal				
Medium	1.1012	3.6%	2.2%	1.8%
Low	0.6436	4.7%	3.5%	1.7%
Very low	0.4661	5.4%	3.5%	2.5%
Central Nervous System				
High	5.5780	0.1%	0.0%	0.0%
Medium	2.5199	0.7%	0.4%	0.4%
Low	0.5704	5.2%	2.5%	1.8%
Pulmonary				
Very high	0.0000	0.0%	0.0%	0.0%
High	6.6361	0.4%	0.1%	0.0%
Medium	3.4382	1.7%	0.5%	0.6%
Low	0.4549	8.4%	6.1%	7.7%
Gastrointestinal				
High	5.8702	0.5%	0.3%	0.1%
Medium	1.5793	2.8%	1.1%	0.8%
Low	0.5645	7.2%	5.6%	8.5%
Diabetes				
Type 1 high	1.1094	0.0%	0.0%	0.0%
Type 1 medium	1.1094	0.6%	0.4%	0.5%
Type 2 medium	0.5014	1.3%	0.5%	0.1%
Type 2 low	0.5014	3.8%	2.4%	1.1%

**State of Alaska Department of Health and Social Services
Statewide Databook
Appendix D: CDPS Risk Score Summaries**

Fiscal Year: SFY 2017
Metric: Prevalence Report
Weights: CDPS+Rx TANF Adult Concurrent

Percent of Scored Recipients

CDPS+Rx Category	CDPS+Rx Cost Weight ¹	Medicaid Expansion	Low-Income Family	Pregnant Women
Diagnostic Categories (cont.)				
Skin				
High	6.3130	0.2%	0.0%	0.0%
Low	1.5411	0.5%	0.1%	0.1%
Very low	0.2426	8.1%	5.2%	4.8%
Renal				
Extra high	9.8694	0.1%	0.0%	0.0%
Very high	2.3010	0.8%	0.3%	0.2%
Medium	1.9563	0.1%	0.1%	0.2%
Low	0.7798	1.5%	1.0%	0.6%
Substance Abuse				
Low	0.7858	10.0%	4.1%	7.9%
Very low	0.3288	10.5%	4.4%	4.0%
Cancer				
Very High	9.7040	0.2%	0.1%	0.0%
High	5.6123	0.5%	0.2%	0.0%
Medium	0.8934	0.2%	0.1%	0.0%
Low	0.6586	0.5%	0.3%	0.2%
Development Disability				
Medium	0.0000	0.0%	0.0%	0.0%
Low	0.3119	0.2%	0.1%	0.2%
Genital				
Extra low	0.4241	2.3%	2.8%	5.5%
Metabolic				
High	1.9887	0.5%	0.4%	0.2%
Medium	1.9887	1.8%	0.7%	0.4%
Very low	0.7590	2.3%	1.1%	1.4%
Pregnancy				
Complete	1.3813	1.0%	8.1%	54.8%
Incomplete	0.2643	0.2%	1.0%	30.7%
Eye				
Low	0.4848	0.6%	0.4%	0.2%
Very low	0.2236	3.3%	1.1%	0.2%
Cerebrovascular				
Low	1.8100	0.5%	0.2%	0.2%
Infectious Disease				
AIDS high	3.5823	0.3%	0.1%	0.2%
Infectious high	3.5823	0.1%	0.1%	0.2%
HIV medium	3.5823	0.1%	0.0%	0.0%
Infectious medium	3.5823	1.7%	0.5%	0.8%
Infectious low	0.3690	3.1%	1.3%	2.0%
Hematological				
Extra high	16.9373	0.0%	0.0%	0.0%
Very high	3.2499	0.0%	0.0%	0.0%
Medium	2.6462	0.5%	0.2%	0.2%
Low	1.4769	1.0%	0.4%	1.0%

**State of Alaska Department of Health and Social Services
Statewide Databook
Appendix D: CDPS Risk Score Summaries**

Fiscal Year: SFY 2017
Metric: Prevalence Report
Weights: CDPS+Rx TANF Adult Concurrent

Percent of Scored Recipients

CDPS+Rx Category	CDPS+Rx Cost Weight ¹	Medicaid Expansion	Low-Income Family	Pregnant Women
<i>Pharmacy NDC Categories</i>				
Anti-coagulants	2.1192	0.9%	0.4%	0.5%
Cardiac	0.2104	5.2%	4.1%	3.4%
Depression/Psychosis/Bipolar	0.2467	7.0%	5.9%	3.6%
Diabetes	0.5014	0.9%	1.1%	2.5%
ESRD / Renal	2.3010	0.0%	0.0%	0.0%
Hemophilia/von Willebrands	16.9373	0.0%	0.0%	0.0%
Hepatitis	3.5823	0.4%	0.1%	0.0%
HIV	3.5823	0.1%	0.0%	0.1%
Infections, high	3.5823	0.3%	0.1%	0.0%
Inflammatory /Autoimmune	0.4661	0.2%	0.2%	0.0%
Malignancies	0.8934	0.7%	0.5%	0.2%
Multiple Sclerosis	2.5199	0.0%	0.0%	0.0%
Parkinsons / Tremor	0.5704	0.5%	0.2%	0.2%
Seizure disorders	0.5704	0.2%	0.1%	0.1%
Tuberculosis	0.4549	0.1%	0.0%	0.0%
<i>Population Statistics</i>				
No claims data/encounter data	n/a	34.0%	37.3%	6.5%
No classified CDPS+Rx categories	n/a	42.8%	51.2%	10.3%

Risk-Adjusted Results

Recipients			
- Scored	32,573	40,634	2,568
- Total (scored and unscored)	37,911	43,817	3,353
Aggregate Risk Score			
- Scored Population	1.330	0.842	1.592

1. The cost weights for the Demographic Categories include the 0.0844 intercept, which is assumed for all recipients.
2. Scored recipients reflect members eligible on June 1, 2017, who had at least six months of eligibility from July 2016 through June 2017.
3. Total recipients reflect members eligible on June 1, 2017, including those who were not scored.

**State of Alaska Department of Health and Social Services
Statewide Databook
Appendix D: CDPS Risk Score Summaries**

Fiscal Year: SFY 2017

Metric: Prevalence Report

Weights: CDPS+Rx TANF Child Concurrent

CDPS+Rx Category	CDPS+Rx Cost Weight ¹	Percent of Scored Recipients	
		Low-Income Family	Pregnant Women
Demographic Categories			
Less than 1	0.9157	7.2%	0.0%
Age 1 to 4	0.2297	24.5%	0.9%
Male age 5 to 14	0.2203	26.9%	0.0%
Female age 5 to 14	0.2287	26.0%	5.5%
Male age 15 to 24	0.2991	7.9%	0.0%
Female age 15 to 24	0.3220	7.5%	93.6%
Male age 25 to 44	0.0000	0.0%	0.0%
Female age 25 to 44	0.0000	0.0%	0.0%
Male age 45 to 64	0.0000	0.0%	0.0%
Female age 45 to 64	0.0000	0.0%	0.0%
Age 65 and over	0.0000	0.0%	0.0%
Age Subtotal		100.0%	100.0%
Diagnostic Categories			
Cardiovascular			
Very high	50.5461	0.0%	0.0%
Medium	7.6776	0.2%	0.0%
Low	3.8054	1.0%	3.6%
Extra low	0.8822	0.3%	0.9%
Psychiatric			
High	6.0191	0.1%	0.0%
Medium	2.9871	1.1%	0.9%
Medium Low	1.4063	6.3%	10.0%
Low	0.6213	1.2%	3.6%
Skeletal			
Medium	1.6694	1.0%	0.9%
Low	0.8230	1.8%	0.9%
Very low	0.5447	2.5%	3.6%
Central Nervous System			
High	5.4982	0.0%	0.0%
Medium	1.8988	0.2%	0.0%
Low	1.4909	1.1%	0.9%
Pulmonary			
Very high	0.0000	0.0%	0.0%
High	12.0191	0.2%	0.0%
Medium	6.3345	0.5%	0.0%
Low	0.5177	6.2%	6.4%
Gastrointestinal			
High	21.7846	0.1%	0.0%
Medium	4.7415	0.1%	0.0%
Low	1.0049	2.5%	5.5%
Diabetes			
Type 1 high	0.0000	0.0%	0.0%
Type 1 medium	0.0000	0.0%	0.0%
Type 2 medium	0.0000	0.0%	0.0%
Type 2 low	1.3205	0.2%	0.0%

**State of Alaska Department of Health and Social Services
Statewide Databook
Appendix D: CDPS Risk Score Summaries**

Fiscal Year: SFY 2017

Metric: Prevalence Report

Weights: CDPS+Rx TANF Child Concurrent

CDPS+Rx Category	CDPS+Rx Cost Weight ¹	Percent of Scored Recipients	
		Low-Income Family	Pregnant Women
Diagnostic Categories (cont.)			
Skin			
High	9.5764	0.0%	0.0%
Low	2.6662	0.0%	0.0%
Very low	0.2822	3.7%	3.6%
Renal			
Extra high	39.1349	0.0%	0.0%
Very high	4.5190	0.0%	0.0%
Medium	2.3190	0.0%	0.0%
Low	0.7080	0.7%	0.0%
Substance Abuse			
Low	3.6084	0.4%	1.8%
Very low	1.4562	0.3%	3.6%
Cancer			
Very High	6.5721	0.0%	0.0%
High	6.5721	0.1%	0.0%
Medium	1.5671	0.0%	0.0%
Low	1.5671	0.0%	0.0%
Development Disability			
Medium	1.5344	0.0%	0.0%
Low	1.5344	0.3%	0.0%
Genital			
Extra low	0.7348	0.5%	0.0%
Metabolic			
High	5.3201	0.5%	0.0%
Medium	5.3201	0.2%	0.9%
Very low	2.0104	3.1%	0.9%
Pregnancy			
Complete	2.3947	0.2%	43.6%
Incomplete	0.4863	0.1%	39.1%
Eye			
Low	0.0000	0.0%	0.0%
Very low	1.1068	0.5%	0.9%
Cerebrovascular			
Low	1.1469	0.1%	0.0%
Infectious Disease			
AIDS high	9.0484	0.0%	0.0%
Infectious high	9.0484	0.0%	0.0%
HIV medium	6.0780	0.0%	0.0%
Infectious medium	6.0780	0.1%	0.0%
Infectious low	0.4197	0.9%	1.8%
Hematological			
Extra high	35.0118	0.0%	0.0%
Very high	6.6077	0.0%	0.0%
Medium	3.0585	0.2%	0.0%
Low	3.0585	0.1%	0.0%

**State of Alaska Department of Health and Social Services
Statewide Databook
Appendix D: CDPS Risk Score Summaries**

Fiscal Year: SFY 2017

Metric: Prevalence Report

Weights: CDPS+Rx TANF Child Concurrent

CDPS+Rx Category	CDPS+Rx Cost Weight ¹	Percent of Scored Recipients	
		Low-Income Family	Pregnant Women
Pharmacy NDC Categories			
Anti-coagulants	7.6776	0.0%	0.9%
Cardiac	0.8822	0.7%	0.0%
Depression/Psychosis/Bipolar	0.6213	0.4%	1.8%
Diabetes	1.3205	0.3%	0.0%
ESRD / Renal	4.5190	0.0%	0.0%
Hemophilia/von Willebrands	35.0118	0.0%	0.0%
Hepatitis	6.0780	0.0%	0.0%
HIV	6.0780	0.0%	0.0%
Infections, high	9.0484	0.0%	0.0%
Inflammatory /Autoimmune	0.5447	0.0%	0.0%
Malignancies	1.5671	0.1%	0.0%
Multiple Sclerosis	1.8988	0.0%	0.0%
Parkinsons / Tremor	1.4909	0.0%	0.0%
Seizure disorders	1.4909	0.0%	0.0%
Tuberculosis	0.5177	0.0%	0.0%
Population Statistics			
No claims data/encounter data	n/a	51.5%	10.0%
No classified CDPS+Rx categories	n/a	66.8%	14.5%
Risk-Adjusted Results			
Recipients			
- Scored		82,814	110
- Total (scored and unscored)		88,818	139
Aggregate Risk Score			
- Scored Population		0.908	2.326

- The cost weights for the Demographic Categories include the 0.2991 intercept, which is assumed for all recipients.
- ed recipients reflect members eligible on June 1, 2017, who had at least six months of eligibility from July 2016 through June 2017.
- Total recipients reflect members eligible on June 1, 2017, including those who were not scored.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix D: CDPS Risk Score Summaries

Fiscal Year: SFY 2017
Metric: Average CDPS+Rx Risk Score
Weights: CDPS+Rx Disabled Concurrent

Rate Cell	Gulf					Northern		Southern		Western Region	Statewide
	Anchorage Municipality	Fairbanks North Star Borough	Coast/Aleutian Region	Kenai Peninsula Borough	MatSu Borough	Southeast Region	Northern and Interior Region	Southeast Region			
SSI/Disabled											
<i>Adult</i>	1.224	1.129	1.029	1.218	1.207	1.156	0.970	1.083	0.848	1.164	
<i>Child</i>	0.888	0.832	0.757	0.861	0.778	0.687	0.570	2.323	1.031	0.877	
SSI/Disabled Composite	1.147	1.061	0.978	1.151	1.104	1.069	0.906	1.232	0.891	1.102	
Waiver/Institutional											
<i>Adult</i>	1.946	1.270	1.296	1.878	1.788	1.339	2.364	1.434	1.283	1.775	
<i>Child</i>	1.726	2.285	3.470	2.147	2.114	1.742	1.307	1.390	2.631	1.924	
Waiver/Institutional Composite	1.883	1.597	1.731	1.923	1.877	1.462	1.685	1.420	1.772	1.816	

Note: We excluded members with fewer than six months of eligibility in SFY 2017.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix D: CDPS Risk Score Summaries

Fiscal Year: SFY 2017

Metric: Average CDPS+Rx Risk Score

Weights: CDPS+Rx TANF Adult Concurrent

Rate Cell	Anchorage Municipality	Fairbanks North Star Borough	Gulf			Northern Southeast Region	Northern and Interior Region	Southern		Western Region	Statewide
			Coast/Aleutian Region	Kenai Peninsula Borough	MatSu Borough			Southeast Region	Region		
Medicaid Expansion											
<i>19-25 Female</i>	0.815	0.641	0.572	0.742	0.907	0.785	0.841	0.753	0.663	0.780	
<i>19-25 Male</i>	0.587	0.496	0.473	0.527	0.547	0.577	0.726	0.586	0.312	0.522	
<i>26-39 Female</i>	1.319	1.269	1.081	1.384	1.474	1.162	1.091	1.078	1.162	1.297	
<i>26-39 Male</i>	1.127	0.788	0.699	0.865	1.028	1.008	0.915	0.975	0.708	0.984	
<i>40-54 Female</i>	1.867	1.640	1.615	1.721	1.675	1.547	1.591	1.771	1.217	1.704	
<i>40-54 Male</i>	1.949	1.555	1.389	1.407	1.519	1.404	1.250	1.350	1.152	1.613	
<i>55-64 Female</i>	1.890	1.722	1.593	1.499	1.731	1.589	1.441	1.757	1.430	1.702	
<i>55-64 Male</i>	2.043	1.622	1.581	1.643	1.806	1.748	1.415	1.835	1.203	1.750	
Medicaid Expansion Composite	1.478	1.253	1.213	1.289	1.355	1.275	1.243	1.335	0.925	1.330	
Pregnant Women											
<i>Pregnant Women</i>	1.791	1.475	1.287	1.332	1.688	1.592	1.235	2.204	1.366	1.592	
Pregnant Women Composite	1.791	1.475	1.287	1.332	1.688	1.592	1.235	2.204	1.366	1.592	
Low-Income Family											
<i>19-25 Female</i>	0.776	0.861	0.676	0.798	0.918	0.757	0.788	0.779	0.819	0.807	
<i>19-25 Male</i>	0.354	0.335	0.349	0.380	0.388	0.362	0.210	0.416	0.282	0.344	
<i>26-39 Female</i>	1.072	0.927	0.945	1.030	1.095	1.006	0.936	1.316	0.902	1.029	
<i>26-39 Male</i>	0.538	0.401	0.443	0.485	0.556	0.494	0.440	0.591	0.350	0.484	
<i>40+</i>	1.119	1.057	1.037	1.026	1.118	0.986	1.006	1.177	0.823	1.028	
Low-Income Family Adult Composite	0.886	0.815	0.800	0.839	0.910	0.819	0.785	1.014	0.715	0.842	

Note: We excluded members with fewer than six months of eligibility in SFY 2017.

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix D: CDPS Risk Score Summaries

Fiscal Year: SFY 2017

Metric: Average CDPS+Rx Risk Score

Weights: CDPS+Rx TANF Child Concurrent

Rate Cell	Anchorage Municipality	Fairbanks North Star Borough	Gulf			Northern Southeast Region	Northern and Interior Region	Southern Southeast Region	Western Region	Statewide
			Coast/Aleutian Region	Kenai Peninsula Borough	MatSu Borough					
Pregnant Women										
<i>Pregnant Women</i>	2.278	2.486	2.755	2.798	2.397	1.070	1.172	2.073	2.466	2.326
Pregnant Women Composite	2.278	2.486	2.755	2.798	2.397	1.070	1.172	2.073	2.466	2.326
Low-Income Family										
<i>0-2 Months</i>	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
<i>3-12 Months</i>	2.646	2.668	2.754	1.938	2.414	2.673	2.565	2.824	3.791	2.738
<i>5-13 Male and Female</i>	0.663	0.707	0.569	0.715	0.701	0.752	0.454	0.722	0.560	0.653
<i>1-4 Male and Female</i>	0.974	0.927	0.793	0.939	0.883	0.882	0.786	1.013	1.309	0.983
<i>14-18 Female</i>	1.079	1.091	1.078	0.976	1.052	0.956	1.161	1.166	0.955	1.047
<i>14-18 Male</i>	1.004	1.068	0.854	1.264	0.948	1.000	0.632	1.351	0.841	0.984
Low-Income Family Child Composite	0.916	0.940	0.819	0.917	0.885	0.911	0.722	0.996	0.951	0.908

Note: We excluded members with fewer than six months of eligibility in SFY 2017.

APPENDIX E: ADDITIONAL SUMMARIES

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix E - Additional Summaries

Fiscal Year: SFY 2016

Metric: Average Monthly Enrollment

Membership: Tribal

Population	Anchorage Municipality	Fairbanks North Star Borough	Gulf Coast/Aleutian Region	Kenai Peninsula Borough	MatSu Borough	Northern Southeast Region	Northern and Interior Region	Southern Southeast Region	Western Region	Statewide
Excluded-Dual Tribal										
<i>None</i>	903	244	297	154	182	366	270	185	996	3,598
Excluded-Dual Tribal Composite	903	244	297	154	182	366	270	185	996	3,598
Excluded-Other Tribal										
<i>None</i>	1	0	0	0	0	-	0	-	1	2
Excluded-Other Tribal Composite	1	0	0	0	0	-	0	-	1	2
Low-Income Family Tribal										
<i>0-2 Months</i>	94	39	37	25	34	34	35	20	170	489
<i>3-12 Months</i>	434	151	158	103	164	129	145	86	698	2,069
<i>1-4 Male and Female</i>	1,753	527	535	361	573	578	535	344	2,910	8,117
<i>5-13 Male and Female</i>	3,413	1,007	1,068	748	1,205	1,057	1,054	678	5,953	16,181
<i>14-18 Female</i>	745	201	227	157	246	307	232	138	1,199	3,452
<i>14-18 Male</i>	732	219	254	149	269	283	233	154	1,348	3,641
<i>19-25 Female</i>	468	138	154	92	144	144	116	92	890	2,238
<i>19-25 Male</i>	206	62	102	42	81	87	63	43	550	1,238
<i>26-39 Female</i>	1,013	265	292	193	280	313	299	216	1,531	4,401
<i>26-39 Male</i>	340	93	193	85	112	145	179	105	1,074	2,326
<i>40+</i>	579	161	304	137	157	226	289	164	2,329	4,344
Low-Income Family Tribal Composite	9,777	2,863	3,325	2,092	3,265	3,301	3,179	2,041	18,652	48,497
Medicaid Expansion Tribal										
<i>19-25 Female</i>	89	16	21	16	32	31	11	13	96	324
<i>19-25 Male</i>	98	19	39	22	31	36	24	15	195	479
<i>26-39 Female</i>	171	61	32	29	36	44	22	21	76	490
<i>26-39 Male</i>	211	53	52	28	35	65	46	37	201	728
<i>40-54 Female</i>	247	64	54	41	46	79	57	49	104	743
<i>40-54 Male</i>	251	54	57	37	31	84	60	41	172	786
<i>55-64 Female</i>	131	45	57	21	26	36	53	23	107	498
<i>55-64 Male</i>	133	29	60	20	21	61	61	24	118	529
Medicaid Expansion Tribal Composite	1,332	340	372	213	256	438	335	222	1,069	4,577
Pregnant Women Tribal										
<i>Pregnant Women</i>	343	157	131	90	108	117	136	77	588	1,747
Pregnant Women Tribal Composite	343	157	131	90	108	117	136	77	588	1,747
SSI/Disabled Tribal										
<i>Child</i>	318	87	47	43	118	73	38	21	156	900
<i>Adult</i>	896	244	161	98	142	268	154	129	500	2,592
SSI/Disabled Tribal Composite	1,213	331	207	141	260	341	192	150	656	3,492
Waiver/Institutional Tribal										
<i>Child</i>	126	25	9	20	35	27	4	11	35	291
<i>Adult</i>	239	38	23	33	51	38	4	22	55	504
Waiver/Institutional Tribal Composite	365	62	32	53	86	65	8	33	90	795
All Populations Tribal Composite	13,934	3,998	4,365	2,743	4,158	4,628	4,120	2,708	22,052	62,708

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix E - Additional Summaries

Fiscal Year: SFY 2016

Metric: Average Monthly Enrollment

Membership: Non-Tribal

Population	Anchorage Municipality	Fairbanks North Star Borough	Gulf Coast/Aleutian Region	Kenai Peninsula Borough	MatSu Borough	Northern Southeast Region	Northern and Interior Region	Southern Southeast Region	Western Region	Statewide
Excluded-Dual Non-Tribal										
<i>None</i>	3,817	759	260	957	1,376	553	144	234	64	8,164
Excluded-Dual Non-Tribal Composite	3,817	759	260	957	1,376	553	144	234	64	8,164
Excluded-Other Non-Tribal										
<i>None</i>	8	1	1	2	1	1	-	-	-	13
Excluded-Other Non-Tribal Composite	8	1	1	2	1	1	-	-	-	13
Low-Income Family Non-Tribal										
<i>0-2 Months</i>	299	75	22	68	134	31	11	13	4	657
<i>3-12 Months</i>	1,301	330	96	277	560	122	52	50	16	2,805
<i>1-4 Male and Female</i>	4,772	1,070	343	1,053	2,010	436	184	231	21	10,120
<i>5-13 Male and Female</i>	9,128	2,040	669	2,015	4,167	874	415	446	53	19,806
<i>14-18 Female</i>	2,153	394	169	470	898	197	102	93	12	4,488
<i>14-18 Male</i>	2,141	414	143	470	927	230	119	128	6	4,579
<i>19-25 Female</i>	1,287	260	81	257	530	120	32	68	3	2,636
<i>19-25 Male</i>	721	120	39	165	326	72	28	39	4	1,514
<i>26-39 Female</i>	2,665	648	197	654	1,261	336	91	202	13	6,068
<i>26-39 Male</i>	1,404	327	120	424	809	195	70	110	15	3,475
<i>40+</i>	2,327	417	223	644	1,116	323	159	167	37	5,415
Low-Income Family Non-Tribal Composite	28,200	6,097	2,102	6,498	12,738	2,936	1,263	1,547	184	61,564
Medicaid Expansion Non-Tribal										
<i>19-25 Female</i>	241	52	17	58	120	34	6	16	0	544
<i>19-25 Male</i>	289	60	17	70	144	46	5	28	3	662
<i>26-39 Female</i>	461	127	31	131	196	90	10	24	3	1,072
<i>26-39 Male</i>	707	170	43	168	276	135	15	55	8	1,578
<i>40-54 Female</i>	478	118	33	183	260	86	15	53	3	1,230
<i>40-54 Male</i>	597	124	53	181	289	140	13	65	10	1,471
<i>55-64 Female</i>	369	86	45	130	208	70	18	33	3	962
<i>55-64 Male</i>	399	97	44	147	199	88	26	47	12	1,059
Medicaid Expansion Non-Tribal Composite	3,542	833	282	1,068	1,693	690	107	321	42	8,578
Pregnant Women Non-Tribal										
<i>Pregnant Women</i>	1,130	333	90	287	555	137	45	63	7	2,646
Pregnant Women Non-Tribal Composite	1,130	333	90	287	555	137	45	63	7	2,646
SSI/Disabled Non-Tribal										
<i>Child</i>	867	187	40	152	311	90	24	27	5	1,701
<i>Adult</i>	3,100	604	189	725	1,089	397	129	237	43	6,513
SSI/Disabled Non-Tribal Composite	3,968	791	229	876	1,399	487	153	264	48	8,214
Waiver/Institutional Non-Tribal										
<i>Child</i>	305	59	8	45	90	41	7	11	3	568
<i>Adult</i>	836	112	51	298	294	99	6	32	4	1,731
Waiver/Institutional Non-Tribal Composite	1,141	170	59	343	383	140	14	43	7	2,299
All Populations Non-Tribal Composite	41,805	8,984	3,022	10,031	18,146	4,942	1,725	2,471	353	91,479

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix E - Additional Summaries

Fiscal Year: SFY 2016

Metric: Average Monthly Enrollment

Membership: All Members

Population	Anchorage Municipality	Fairbanks North Star Borough	Gulf Coast/Aleutian Region	Kenai Peninsula Borough	MatSu Borough	Northern Southeast Region	Northern and Interior Region	Southern Southeast Region	Western Region	Statewide
Excluded-Dual										
<i>None</i>	4,720	1,003	558	1,111	1,558	919	413	420	1,061	11,762
Excluded-Dual Composite	4,720	1,003	558	1,111	1,558	919	413	420	1,061	11,762
Excluded-Other										
<i>None</i>	9	1	1	2	2	1	0	-	1	15
Excluded-Other Composite	9	1	1	2	2	1	0	-	1	15
Low-Income Family										
<i>0-2 Months</i>	393	115	59	94	168	65	46	33	174	1,147
<i>3-12 Months</i>	1,735	482	254	380	725	251	197	136	714	4,874
<i>1-4 Male and Female</i>	6,525	1,597	878	1,415	2,584	1,015	718	575	2,931	18,237
<i>5-13 Male and Female</i>	12,540	3,047	1,737	2,763	5,372	1,930	1,469	1,124	6,006	35,987
<i>14-18 Female</i>	2,899	595	396	626	1,144	504	334	231	1,212	7,940
<i>14-18 Male</i>	2,873	633	398	619	1,196	513	352	282	1,354	8,220
<i>19-25 Female</i>	1,755	398	235	349	673	263	148	160	892	4,874
<i>19-25 Male</i>	928	182	142	207	407	159	92	81	554	2,752
<i>26-39 Female</i>	3,678	913	489	847	1,541	649	389	418	1,544	10,469
<i>26-39 Male</i>	1,744	421	313	509	921	340	249	215	1,089	5,801
<i>40+</i>	2,906	578	528	781	1,273	549	448	331	2,366	9,760
Low-Income Family Composite	37,977	8,960	5,427	8,589	16,003	6,237	4,442	3,588	18,836	110,061
Medicaid Expansion										
<i>19-25 Female</i>	331	68	38	73	151	64	17	29	96	868
<i>19-25 Male</i>	387	79	56	92	175	82	29	43	198	1,141
<i>26-39 Female</i>	632	188	62	159	232	134	32	44	78	1,562
<i>26-39 Male</i>	918	223	95	197	311	201	61	92	209	2,305
<i>40-54 Female</i>	725	182	88	224	306	165	72	101	108	1,972
<i>40-54 Male</i>	848	177	110	217	320	225	73	106	182	2,258
<i>55-64 Female</i>	499	130	102	151	234	106	71	56	110	1,460
<i>55-64 Male</i>	532	126	104	168	219	149	88	72	130	1,588
Medicaid Expansion Composite	4,873	1,173	654	1,282	1,949	1,127	442	543	1,111	13,155
Pregnant Women										
<i>Pregnant Women</i>	1,473	490	221	377	663	254	181	139	595	4,394
Pregnant Women Composite	1,473	490	221	377	663	254	181	139	595	4,394
SSI/Disabled										
<i>Child</i>	1,185	274	87	194	428	163	62	49	161	2,602
<i>Adult</i>	3,996	848	349	823	1,231	665	284	365	544	9,105
SSI/Disabled Composite	5,181	1,122	436	1,017	1,660	828	345	414	704	11,706
Waiver/Institutional										
<i>Child</i>	431	83	17	65	125	68	11	21	38	859
<i>Adult</i>	1,075	149	75	331	345	137	11	54	59	2,235
Waiver/Institutional Composite	1,506	232	91	396	469	205	21	75	97	3,094
All Populations Composite	55,739	12,982	7,387	12,774	22,304	9,571	5,845	5,179	22,405	154,187

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix E - Additional Summaries

Fiscal Year: SFY 2017

Metric: Average Monthly Enrollment

Membership: Tribal

Population	Anchorage Municipality	Fairbanks North Star Borough	Gulf Coast/Aleutian Region	Kenai Peninsula Borough	MatSu Borough	Northern Southeast Region	Northern and Interior Region	Southern Southeast Region	Western Region	Statewide
Excluded-Dual Tribal										
<i>None</i>	936	250	295	162	189	381	289	192	1,059	3,753
Excluded-Dual Tribal Composite	936	250	295	162	189	381	289	192	1,059	3,753
Excluded-Other Tribal										
<i>None</i>	1	-	0	0	1	1	0	-	1	4
Excluded-Other Tribal Composite	1	-	0	0	1	1	0	-	1	4
Low-Income Family Tribal										
<i>0-2 Months</i>	109	35	36	25	33	29	37	16	172	492
<i>3-12 Months</i>	459	168	156	112	145	135	152	81	738	2,147
<i>1-4 Male and Female</i>	1,944	598	617	417	701	613	585	340	3,030	8,845
<i>5-13 Male and Female</i>	3,897	1,141	1,198	845	1,360	1,183	1,236	732	6,422	18,012
<i>14-18 Female</i>	820	227	250	176	264	353	259	144	1,288	3,780
<i>14-18 Male</i>	816	249	278	176	296	307	254	166	1,426	3,968
<i>19-25 Female</i>	600	172	193	131	195	187	157	103	1,043	2,779
<i>19-25 Male</i>	289	76	133	62	129	112	101	55	667	1,624
<i>26-39 Female</i>	1,209	346	362	236	342	360	362	235	1,761	5,211
<i>26-39 Male</i>	405	120	212	101	146	165	208	111	1,175	2,643
<i>40+</i>	668	182	340	170	196	248	337	181	2,498	4,819
Low-Income Family Tribal Composite	11,214	3,313	3,774	2,451	3,807	3,692	3,688	2,163	20,218	54,319
Medicaid Expansion Tribal										
<i>19-25 Female</i>	234	44	52	42	79	66	35	30	224	805
<i>19-25 Male</i>	275	53	87	44	102	83	59	44	462	1,208
<i>26-39 Female</i>	475	118	84	78	94	120	65	49	189	1,273
<i>26-39 Male</i>	644	136	136	85	124	163	140	96	550	2,074
<i>40-54 Female</i>	531	122	119	83	99	148	123	83	262	1,569
<i>40-54 Male</i>	573	114	146	84	85	170	148	85	444	1,849
<i>55-64 Female</i>	291	90	114	49	69	89	124	57	243	1,125
<i>55-64 Male</i>	307	66	146	55	49	123	158	62	316	1,282
Medicaid Expansion Tribal Composite	3,330	743	882	519	702	962	851	506	2,690	11,186
Pregnant Women Tribal										
<i>Pregnant Women</i>	315	129	109	67	111	94	127	53	492	1,498
Pregnant Women Tribal Composite	315	129	109	67	111	94	127	53	492	1,498
SSI/Disabled Tribal										
<i>Child</i>	318	82	46	40	114	74	36	24	158	891
<i>Adult</i>	918	236	178	97	150	275	157	127	496	2,633
SSI/Disabled Tribal Composite	1,235	318	223	137	264	349	193	152	654	3,524
Waiver/Institutional Tribal										
<i>Child</i>	121	25	9	18	35	23	2	11	30	274
<i>Adult</i>	240	43	20	37	54	41	4	19	52	510
Waiver/Institutional Tribal Composite	361	68	30	54	89	65	6	30	83	784
All Populations Tribal Composite	17,392	4,821	5,313	3,391	5,163	5,543	5,153	3,095	25,197	75,068

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix E - Additional Summaries

Fiscal Year: SFY 2017

Metric: Average Monthly Enrollment

Membership: Non-Tribal

Population	Anchorage Municipality	Fairbanks North Star Borough	Gulf Coast/Aleutian Region	Kenai Peninsula Borough	MatSu Borough	Northern Southeast Region	Northern and Interior Region	Southern Southeast Region	Western Region	Statewide
Excluded-Dual Non-Tribal										
<i>None</i>	3,989	762	262	987	1,440	559	154	260	78	8,491
Excluded-Dual Non-Tribal Composite	3,989	762	262	987	1,440	559	154	260	78	8,491
Excluded-Other Non-Tribal										
<i>None</i>	9	3	0	4	1	1	0	1	-	19
Excluded-Other Non-Tribal Composite	9	3	0	4	1	1	0	1	-	19
Low-Income Family Non-Tribal										
<i>0-2 Months</i>	307	75	25	66	134	29	11	11	7	665
<i>3-12 Months</i>	1,324	326	105	297	576	141	45	57	21	2,891
<i>1-4 Male and Female</i>	5,464	1,314	416	1,232	2,374	517	207	256	37	11,818
<i>5-13 Male and Female</i>	10,150	2,335	755	2,312	4,710	1,017	448	516	56	22,299
<i>14-18 Female</i>	2,421	454	196	543	1,031	241	104	121	12	5,122
<i>14-18 Male</i>	2,417	483	179	531	1,072	270	120	144	8	5,224
<i>19-25 Female</i>	1,634	331	97	339	684	156	42	81	5	3,370
<i>19-25 Male</i>	1,012	174	66	240	453	100	43	58	6	2,150
<i>26-39 Female</i>	3,251	825	254	828	1,609	420	111	243	14	7,555
<i>26-39 Male</i>	1,742	414	144	566	1,009	245	83	131	15	4,348
<i>40+</i>	2,813	521	305	801	1,388	417	169	204	43	6,661
Low-Income Family Non-Tribal Composite	32,535	7,252	2,541	7,755	15,040	3,551	1,383	1,821	225	72,103
Medicaid Expansion Non-Tribal										
<i>19-25 Female</i>	651	142	47	148	291	97	17	34	1	1,428
<i>19-25 Male</i>	744	140	40	199	367	98	13	57	5	1,663
<i>26-39 Female</i>	1,189	304	74	312	442	231	32	65	9	2,658
<i>26-39 Male</i>	2,023	451	114	473	716	344	45	135	26	4,327
<i>40-54 Female</i>	1,011	277	82	368	540	169	43	100	8	2,599
<i>40-54 Male</i>	1,447	299	124	415	643	284	32	130	29	3,403
<i>55-64 Female</i>	830	196	106	322	447	149	43	84	10	2,187
<i>55-64 Male</i>	920	224	120	356	450	209	61	114	30	2,483
Medicaid Expansion Non-Tribal Composite	8,816	2,034	707	2,593	3,895	1,581	285	718	117	20,748
Pregnant Women Non-Tribal										
<i>Pregnant Women</i>	1,023	327	89	253	482	122	42	48	6	2,392
Pregnant Women Non-Tribal Composite	1,023	327	89	253	482	122	42	48	6	2,392
SSI/Disabled Non-Tribal										
<i>Child</i>	858	183	39	148	296	88	22	26	6	1,666
<i>Adult</i>	3,136	638	194	715	1,122	418	136	240	48	6,647
SSI/Disabled Non-Tribal Composite	3,994	821	233	863	1,418	506	158	266	54	8,313
Waiver/Institutional Non-Tribal										
<i>Child</i>	301	53	7	45	90	37	7	12	4	556
<i>Adult</i>	835	117	47	277	284	100	4	36	4	1,703
Waiver/Institutional Non-Tribal Composite	1,136	170	54	323	373	137	11	48	8	2,260
All Populations Non-Tribal Composite	51,502	11,369	3,888	12,777	22,650	6,456	2,033	3,162	488	114,325

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix E - Additional Summaries

Fiscal Year: SFY 2017

Metric: Average Monthly Enrollment

Membership: All Members

Population	Anchorage Municipality	Fairbanks North Star Borough	Gulf Coast/Aleutian Region	Kenai Peninsula Borough	MatSu Borough	Northern Southeast Region	Northern and Interior Region	Southern Southeast Region	Western Region	Statewide
Excluded-Dual										
<i>None</i>	4,925	1,012	557	1,149	1,629	940	442	452	1,136	12,244
Excluded-Dual Composite	4,925	1,012	557	1,149	1,629	940	442	452	1,136	12,244
Excluded-Other										
<i>None</i>	10	3	1	4	2	1	0	1	1	23
Excluded-Other Composite	10	3	1	4	2	1	0	1	1	23
Low-Income Family										
<i>0-2 Months</i>	416	110	61	91	167	57	48	27	179	1,157
<i>3-12 Months</i>	1,783	494	261	409	721	277	197	138	759	5,038
<i>1-4 Male and Female</i>	7,408	1,913	1,033	1,649	3,075	1,130	792	596	3,068	20,663
<i>5-13 Male and Female</i>	14,046	3,476	1,953	3,157	6,070	2,199	1,684	1,248	6,478	40,311
<i>14-18 Female</i>	3,241	680	446	719	1,294	594	363	265	1,300	8,902
<i>14-18 Male</i>	3,233	731	457	707	1,368	577	374	309	1,435	9,191
<i>19-25 Female</i>	2,234	503	289	470	879	343	198	184	1,048	6,149
<i>19-25 Male</i>	1,300	250	199	302	582	211	144	113	673	3,774
<i>26-39 Female</i>	4,460	1,171	616	1,063	1,951	780	473	478	1,775	12,767
<i>26-39 Male</i>	2,147	535	355	666	1,155	410	290	243	1,190	6,991
<i>40+</i>	3,481	703	644	971	1,584	665	506	384	2,540	11,480
Low-Income Family Composite	43,750	10,565	6,315	10,206	18,847	7,243	5,071	3,984	20,443	126,423
Medicaid Expansion										
<i>19-25 Female</i>	885	186	99	189	371	164	52	64	224	2,233
<i>19-25 Male</i>	1,019	193	127	243	469	181	72	101	467	2,871
<i>26-39 Female</i>	1,664	422	158	391	536	351	97	114	199	3,931
<i>26-39 Male</i>	2,667	587	250	558	840	508	185	231	575	6,401
<i>40-54 Female</i>	1,542	399	201	451	639	316	166	184	270	4,168
<i>40-54 Male</i>	2,021	413	269	499	728	454	179	216	473	5,252
<i>55-64 Female</i>	1,122	286	220	371	516	238	167	141	253	3,313
<i>55-64 Male</i>	1,227	291	265	411	499	331	219	175	347	3,765
Medicaid Expansion Composite	12,146	2,778	1,589	3,112	4,598	2,543	1,136	1,225	2,808	31,934
Pregnant Women										
<i>Pregnant Women</i>	1,338	456	199	320	593	216	169	101	499	3,890
Pregnant Women Composite	1,338	456	199	320	593	216	169	101	499	3,890
SSI/Disabled										
<i>Child</i>	1,176	264	85	188	410	162	58	50	164	2,557
<i>Adult</i>	4,054	874	372	812	1,271	693	293	367	544	9,280
SSI/Disabled Composite	5,230	1,138	456	1,000	1,682	855	351	418	708	11,837
Waiver/Institutional										
<i>Child</i>	421	78	17	63	124	60	9	23	34	830
<i>Adult</i>	1,075	160	67	314	338	142	7	55	57	2,214
Waiver/Institutional Composite	1,496	238	84	377	462	201	17	78	91	3,043
All Populations Composite	68,894	16,190	9,201	16,168	27,813	11,999	7,185	6,257	25,685	189,393

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix E - Additional Summaries

Fiscal Year: SFY 2017
Metric: Inpatient PMPM

Population	SFY 2017 Inpatient PMPM			AHRQ PQI % of Total Inpatient
	No PQI Assigned	AHRQ PQI Assigned	Total	
Excluded-Dual				
<i>None</i>	\$ 27.90	\$ 3.16	\$ 31.06	10.2%
Excluded-Dual Composite	\$ 27.90	\$ 3.16	\$ 31.06	10.2%
Excluded-Other				
<i>None</i>	\$ 3,415.19	\$ 364.57	\$ 3,779.76	9.6%
Excluded-Other Composite	\$ 3,415.19	\$ 364.57	\$ 3,779.76	9.6%
Low-Income Family				
0-2 Months	\$ 4,323.72	\$ 388.04	\$ 4,711.76	8.2%
3-12 Months	179.94	14.60	194.54	7.5%
1-4 Male and Female	27.50	3.06	30.56	10.0%
5-13 Male and Female	9.42	0.97	10.39	9.3%
14-18 Female	21.00	2.93	23.93	12.2%
14-18 Male	24.92	1.41	26.33	5.4%
19-25 Female	51.23	4.17	55.41	7.5%
19-25 Male	26.78	1.85	28.63	6.5%
26-39 Female	62.99	9.83	72.83	13.5%
26-39 Male	44.20	5.40	49.60	10.9%
40+	81.98	8.63	90.61	9.5%
Low-Income Family Composite	\$ 77.06	\$ 7.58	\$ 84.64	9.0%
Medicaid Expansion				
19-25 Female	\$ 75.80	\$ 3.75	\$ 79.55	4.7%
19-25 Male	96.02	5.74	101.76	5.6%
26-39 Female	187.37	19.08	206.45	9.2%
26-39 Male	155.25	12.82	168.07	7.6%
40-54 Female	217.95	33.32	251.27	13.3%
40-54 Male	334.70	32.39	367.09	8.8%
55-64 Female	219.17	18.95	238.12	8.0%
55-64 Male	333.69	44.69	378.38	11.8%
Medicaid Expansion Composite	\$ 213.69	\$ 22.61	\$ 236.29	9.6%
Pregnant Women				
<i>Pregnant Women</i>	\$ 588.78	\$ 63.86	\$ 652.64	9.8%
Pregnant Women Composite	\$ 588.78	\$ 63.86	\$ 652.64	9.8%
SSI/Disabled				
<i>Child</i>	\$ 144.27	\$ 34.74	\$ 179.02	19.4%
<i>Adult</i>	256.08	33.60	289.68	11.6%
SSI/Disabled Composite	\$ 231.93	\$ 33.85	\$ 265.78	12.7%
Waiver/Institutional				
<i>Child</i>	\$ 225.42	\$ 29.79	\$ 255.21	11.7%
<i>Adult</i>	269.26	29.00	298.26	9.7%
Waiver/Institutional Composite	\$ 257.31	\$ 29.22	\$ 286.52	10.2%
All Populations Composite	\$ 120.40	\$ 13.02	\$ 133.42	9.8%

**State of Alaska Department of Health and Social Services
Statewide Databook
Appendix E - Additional Summaries**

Fiscal Year: SFY 2017

Metric: Inpatient Readmissions

Population	Inpatient Readmissions by DRG		Total Readmissions
	Same DRG	Different DRG	
	SFY 2017	SFY 2017	SFY 2017
Excluded-Dual			
<i>None</i>	<u>1.9%</u>	<u>2.8%</u>	<u>4.7%</u>
Excluded-Dual Composite	1.9%	2.8%	4.7%
Excluded-Other			
<i>None</i>	<u>3.6%</u>	<u>14.5%</u>	<u>18.1%</u>
Excluded-Other Composite	3.6%	14.5%	18.1%
Low-Income Family			
<i>0-2 Months</i>	3.3%	4.5%	7.8%
<i>3-12 Months</i>	9.8%	14.3%	24.1%
<i>1-4 Male and Female</i>	5.7%	11.3%	17.0%
<i>5-13 Male and Female</i>	5.0%	6.6%	11.6%
<i>14-18 Female</i>	5.3%	5.3%	10.5%
<i>14-18 Male</i>	7.1%	10.6%	17.7%
<i>19-25 Female</i>	9.9%	5.2%	15.0%
<i>19-25 Male</i>	6.8%	14.8%	21.6%
<i>26-39 Female</i>	5.0%	8.0%	13.0%
<i>26-39 Male</i>	10.0%	10.4%	20.5%
<i>40+</i>	<u>5.3%</u>	<u>11.3%</u>	<u>16.6%</u>
Low-Income Family Composite	4.9%	7.0%	11.9%
Medicaid Expansion			
<i>19-25 Female</i>	6.6%	5.0%	11.6%
<i>19-25 Male</i>	15.8%	9.0%	24.9%
<i>26-39 Female</i>	8.7%	11.2%	19.9%
<i>26-39 Male</i>	15.7%	9.3%	25.0%
<i>40-54 Female</i>	10.7%	10.5%	21.2%
<i>40-54 Male</i>	12.8%	14.1%	26.9%
<i>55-64 Female</i>	9.7%	10.6%	20.3%
<i>55-64 Male</i>	<u>15.1%</u>	<u>13.5%</u>	<u>28.6%</u>
Medicaid Expansion Composite	12.5%	11.5%	24.1%
Pregnant Women			
<i>Pregnant Women</i>	<u>2.0%</u>	<u>4.0%</u>	<u>5.9%</u>
Pregnant Women Composite	2.0%	4.0%	5.9%
SSI/Disabled			
<i>Child</i>	11.8%	18.6%	30.4%
<i>Adult</i>	<u>10.0%</u>	<u>13.9%</u>	<u>23.9%</u>
SSI/Disabled Composite	10.1%	14.3%	24.4%
Waiver/Institutional			
<i>Child</i>	5.6%	12.0%	17.6%
<i>Adult</i>	<u>17.2%</u>	<u>12.6%</u>	<u>29.8%</u>
Waiver/Institutional Composite	15.2%	12.5%	27.7%
All Populations Composite	6.8%	8.2%	15.1%

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix E - Additional Summaries

Fiscal Year: SFY 2017

Metric: ER Potentially Avoidable Costs

Population	Emergency Room - PMPM			% of Total PMPM		ER Super User Percentage of Total PMPM
	Potentially Avoidable	Not Avoidable	Total	Potentially Avoidable	Not Avoidable	
Excluded-Dual						
<i>None</i>	3.30	11.53	14.83	22.2%	77.8%	52.3%
Excluded-Dual Composite	\$ 3.30	\$ 11.53	\$ 14.83	22.2%	77.8%	52.3%
Excluded-Other						
<i>None</i>	15.06	56.83	71.89	20.9%	79.1%	69.3%
Excluded-Other Composite	\$ 15.06	\$ 56.83	\$ 71.89	20.9%	79.1%	69.3%
Low-Income Family						
<i>0-2 Months</i>	\$ 17.61	\$ 24.88	\$ 42.49	41.4%	58.6%	40.8%
<i>3-12 Months</i>	25.41	21.44	46.85	54.2%	45.8%	52.8%
<i>1-4 Male and Female</i>	10.69	11.98	22.67	47.1%	52.9%	39.2%
<i>5-13 Male and Female</i>	4.47	7.98	12.45	35.9%	64.1%	24.5%
<i>14-18 Female</i>	7.39	19.66	27.05	27.3%	72.7%	40.6%
<i>14-18 Male</i>	3.78	15.28	19.07	19.8%	80.2%	26.7%
<i>19-25 Female</i>	16.39	36.04	52.43	31.3%	68.7%	53.2%
<i>19-25 Male</i>	6.18	22.87	29.05	21.3%	78.7%	39.0%
<i>26-39 Female</i>	18.54	42.39	60.93	30.4%	69.6%	55.8%
<i>26-39 Male</i>	8.75	24.90	33.64	26.0%	74.0%	43.8%
<i>40+</i>	12.56	34.83	47.39	26.5%	73.5%	46.1%
Low-Income Family Composite	\$ 9.62	\$ 19.34	\$ 28.96	33.2%	66.8%	43.7%
Medicaid Expansion						
<i>19-25 Female</i>	\$ 17.15	\$ 54.21	\$ 71.37	24.0%	76.0%	62.6%
<i>19-25 Male</i>	9.18	41.82	51.00	18.0%	82.0%	44.9%
<i>26-39 Female</i>	25.85	82.99	108.84	23.7%	76.3%	69.0%
<i>26-39 Male</i>	13.33	67.70	81.03	16.4%	83.6%	61.3%
<i>40-54 Female</i>	25.43	83.01	108.44	23.4%	76.6%	63.9%
<i>40-54 Male</i>	18.45	80.25	98.70	18.7%	81.3%	65.6%
<i>55-64 Female</i>	15.59	50.98	66.57	23.4%	76.6%	47.8%
<i>55-64 Male</i>	12.44	58.62	71.06	17.5%	82.5%	53.3%
Medicaid Expansion Composite	\$ 17.32	\$ 67.57	\$ 84.89	20.4%	79.6%	61.1%
Pregnant Women						
<i>Pregnant Women</i>	24.73	60.70	85.43	28.9%	71.1%	53.9%
Pregnant Women Composite	\$ 24.73	\$ 60.70	\$ 85.43	28.9%	71.1%	53.9%
SSI/Disabled						
<i>Child</i>	\$ 8.20	\$ 20.43	\$ 28.63	28.6%	71.4%	55.2%
<i>Adult</i>	18.48	62.89	81.37	22.7%	77.3%	65.6%
SSI/Disabled Composite	\$ 16.26	\$ 53.72	\$ 69.98	23.2%	76.8%	64.7%
Waiver/Institutional						
<i>Child</i>	\$ 8.46	\$ 23.91	\$ 32.37	26.1%	73.9%	58.8%
<i>Adult</i>	9.08	32.26	41.34	22.0%	78.0%	62.1%
Waiver/Institutional Composite	\$ 8.91	\$ 29.98	\$ 38.89	22.9%	77.1%	61.4%
All Populations Composite	\$ 11.22	\$ 30.14	\$ 41.36	27.1%	72.9%	52.8%

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix E - Additional Summaries

Fiscal Year: SFY 2017
Metric: Emergency Room PMPM

Population	Anchorage Municipality	Fairbanks North Star Borough	Gulf Coast/Aleutian Region	Kenai Peninsula Borough	MatSu Borough	Northern Southeast Region	Northern and Interior Region	Southern Southeast Region	Western Region	Statewide
Excluded-Dual										
<i>None</i>	12.77	12.79	26.03	31.42	7.22	13.83	5.38	45.31	6.62	14.83
Excluded-Dual Composite	\$ 12.77	\$ 12.79	\$ 26.03	\$ 31.42	\$ 7.22	\$ 13.83	\$ 5.38	\$ 45.31	\$ 6.62	\$ 14.83
Excluded-Other										
<i>None</i>	31.38	-	-	-	-	15.95	-	-	-	71.89
Excluded-Other Composite	\$ 31.38	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 15.95	\$ 0.00	\$ 0.00	\$ 0.00	\$ 71.89
Low-Income Family										
<i>0-2 Months</i>	\$ 25.69	\$ 31.68	\$ 28.41	\$ 28.68	\$ 14.90	\$ 28.61	\$ 47.72	\$ 59.36	\$ 126.47	\$ 42.49
<i>3-12 Months</i>	36.94	36.10	34.61	38.09	20.01	21.83	47.57	31.27	123.32	46.85
<i>1-4 Male and Female</i>	20.50	21.21	19.19	20.50	11.06	18.15	19.73	14.36	46.84	22.67
<i>5-13 Male and Female</i>	11.79	13.13	12.47	14.02	6.94	11.25	12.37	13.25	18.20	12.45
<i>14-18 Female</i>	29.56	32.05	20.35	30.44	20.08	16.82	28.15	29.24	29.44	27.05
<i>14-18 Male</i>	18.57	21.46	20.74	25.16	12.77	18.36	14.74	18.28	23.03	19.07
<i>19-25 Female</i>	52.60	63.36	25.19	68.50	35.42	43.86	33.21	61.84	66.21	52.43
<i>19-25 Male</i>	32.58	25.97	18.48	36.37	20.85	29.08	14.22	29.48	33.38	29.05
<i>26-39 Female</i>	63.00	75.68	37.37	57.77	38.95	60.50	49.60	82.53	77.63	60.93
<i>26-39 Male</i>	33.65	41.58	19.27	39.65	23.80	41.12	27.06	57.45	34.71	33.64
<i>40+</i>	49.06	73.38	28.85	55.25	36.32	52.91	39.91	55.67	45.31	47.39
Low-Income Family Composite	\$ 28.20	\$ 32.73	\$ 21.05	\$ 31.42	\$ 18.08	\$ 26.78	\$ 24.46	\$ 33.59	\$ 40.85	\$ 28.96
Medicaid Expansion										
<i>19-25 Female</i>	\$ 77.40	\$ 73.62	\$ 30.80	\$ 62.11	\$ 47.47	\$ 54.28	\$ 100.05	\$ 143.66	\$ 96.28	\$ 71.37
<i>19-25 Male</i>	52.74	71.26	37.41	70.64	34.60	66.00	52.57	71.96	38.20	51.00
<i>26-39 Female</i>	107.94	131.32	67.88	89.86	79.45	102.53	141.71	137.15	196.67	108.84
<i>26-39 Male</i>	81.41	80.81	61.77	85.58	58.35	96.27	56.64	144.09	85.67	81.03
<i>40-54 Female</i>	112.96	141.02	57.36	109.06	61.56	109.13	79.80	196.85	139.02	108.44
<i>40-54 Male</i>	104.47	132.37	50.95	120.72	54.52	118.79	56.93	144.58	92.21	98.70
<i>55-64 Female</i>	65.78	81.21	36.60	58.54	46.32	69.95	56.46	190.25	67.31	66.57
<i>55-64 Male</i>	81.60	105.43	42.37	59.79	46.07	84.22	60.81	93.08	59.01	71.06
Medicaid Expansion Composite	\$ 88.76	\$ 106.27	\$ 49.39	\$ 85.93	\$ 54.67	\$ 93.87	\$ 69.79	\$ 143.51	\$ 87.78	\$ 84.89
Pregnant Women										
<i>Pregnant Women</i>	94.10	64.34	60.79	71.96	49.48	134.66	46.51	76.76	136.22	85.43
Pregnant Women Composite	\$ 94.10	\$ 64.34	\$ 60.79	\$ 71.96	\$ 49.48	\$ 134.66	\$ 46.51	\$ 76.76	\$ 136.22	\$ 85.43
SSI/Disabled										
<i>Child</i>	\$ 28.66	\$ 33.34	\$ 22.45	\$ 37.74	\$ 18.38	\$ 23.77	\$ 14.09	\$ 56.36	\$ 40.63	\$ 28.63
<i>Adult</i>	80.41	103.15	62.39	117.22	52.00	77.49	47.25	120.38	78.58	81.37
SSI/Disabled Composite	\$ 68.78	\$ 86.94	\$ 55.00	\$ 102.27	\$ 43.80	\$ 67.31	\$ 41.80	\$ 112.65	\$ 69.79	\$ 69.98
Waiver/Institutional										
<i>Child</i>	25.46	38.25	27.71	71.51	25.40	31.16	14.64	62.11	46.22	32.37
<i>Adult</i>	46.75	18.30	50.73	50.23	30.60	38.97	14.36	36.32	21.45	41.34
Waiver/Institutional Composite	\$ 40.76	\$ 24.85	\$ 46.15	\$ 53.79	\$ 29.20	\$ 36.65	\$ 14.51	\$ 43.99	\$ 30.80	\$ 38.89
All Populations Composite	\$ 42.41	\$ 48.68	\$ 29.01	\$ 47.61	\$ 25.90	\$ 44.98	\$ 31.79	\$ 62.05	\$ 47.08	\$ 41.36

State of Alaska Department of Health and Social Services
Statewide Databook
Appendix E - Additional Summaries

Fiscal Year: SFY 2017

Metric: Summary of Prescription Drug Cost by the Monthly Utilization

Population	Under 10 scripts/month		10-14 scripts/month		15+ scripts/month	
	Dollars	Unique Recipients	Dollars	Unique Recipients	Dollars	Unique Recipients
Excluded-Dual						
None	\$ 1,177,567	1,532	\$ 262,761	110	\$ 177,849	54
Excluded-Dual Composite	\$ 1,177,567	1,532	\$ 262,761	110	\$ 177,849	54
Excluded-Other						
None	\$ 15,137	23	\$ 0	-	\$ 0	-
Excluded-Other Composite	\$ 15,137	23	\$ 0	-	\$ 0	-
Low-Income Family						
0-2 Months	\$ 62,526	728	\$ 1,051	2	\$ 0	-
3-12 Months	1,303,664	3,743	26,406	20	16,139	6
1-4 Male and Female	2,385,616	10,160	107,969	54	29,168	6
5-13 Male and Female	7,730,129	16,221	199,390	143	16,969	21
14-18 Female	2,331,559	5,079	70,614	69	111,468	23
14-18 Male	1,658,032	3,969	137,934	47	12,369	12
19-25 Female	1,120,703	4,313	35,842	66	3,739	11
19-25 Male	720,999	1,403	7,727	18	15,520	4
26-39 Female	6,715,231	9,823	590,448	447	207,203	101
26-39 Male	2,749,054	3,414	216,213	83	254,306	18
40+	8,024,866	8,222	960,322	601	386,517	156
Low-Income Family Composite	\$ 34,802,379	67,075	\$ 2,353,916	1,550	\$ 1,053,398	358
Medicaid Expansion						
19-25 Female	\$ 646,305	1,600	\$ 38,188	44	\$ 2,285	5
19-25 Male	951,843	1,228	74,810	23	34,510	5
26-39 Female	2,233,157	3,226	321,337	220	202,599	73
26-39 Male	3,673,683	3,669	147,751	131	46,443	27
40-54 Female	4,196,229	3,860	657,954	464	407,624	134
40-54 Male	3,724,226	3,995	379,190	269	167,363	85
55-64 Female	3,257,873	2,971	414,567	285	185,566	91
55-64 Male	2,931,900	2,941	292,276	201	92,700	55
Medicaid Expansion Composite	\$ 21,615,217	23,490	\$ 2,326,073	1,637	\$ 1,139,091	475
Pregnant Women						
Pregnant Women	\$ 1,550,856	5,239	\$ 43,975	69	\$ 10,513	17
Pregnant Women Composite	\$ 1,550,856	5,239	\$ 43,975	69	\$ 10,513	17
SSI/Disabled						
Child	\$ 4,602,076	1,700	\$ 523,613	87	\$ 352,391	24
Adult	13,810,502	6,114	2,929,840	1,336	2,436,940	656
SSI/Disabled Composite	\$ 18,412,578	7,814	\$ 3,453,453	1,423	\$ 2,789,331	680
Waiver/Institutional						
Child	\$ 1,634,586	649	\$ 188,235	69	\$ 225,069	35
Adult	1,616,624	988	608,920	321	840,713	235
Waiver/Institutional Composite	\$ 3,251,209	1,637	\$ 797,155	390	\$ 1,065,782	270
All Populations Composite	\$ 80,824,944	106,810	\$ 9,237,334	5,179	\$ 6,235,963	1,854

REFERENCE A: POPULATION LOGIC

**State of Alaska Department of Health and Social Services
Statewide Databook
Reference A: Population Logic**

Eligibility Code	Medicaid Subtype Code	Population
20	BB	Low-income Family
11	SI	Pregnant Women
11	ST	Pregnant Women
20	ST	SSI/Disabled
10	SI	SSI/Disabled
11	DW	SSI/Disabled
20	AI	SSI/Disabled
20	BC	SSI/Disabled
20	DW	SSI/Disabled
20	PM	SSI/Disabled
20	RC	SSI/Disabled
20	SS	SSI/Disabled
10	ST	SSI/Disabled
20	SI	SSI/Disabled
54	DC	SSI/Disabled
24	IN	Waiver/Institutional
19	WD	Waiver/Institutional
20	NH	Waiver/Institutional
25	DE	Waiver/Institutional
20	QM	Excluded - Other
10	PM	Excluded - Other
53	IL	Excluded - Other
50	H1	Low-income Family
50	H2	Low-income Family
50	S2	Low-income Family
50	CI	Low-Income Family
50	CP	Low-income Family
11	H2	Pregnant Women
11	CP	Pregnant Women
11	S2	Pregnant Women
51	JC	Low-income Family
51	FC	Low-income Family
11	JC	Pregnant Women
20	FF	Low-income Family
50	FF	Low-income Family
20	AF	Low-income Family
50	BA	Low-income Family
50	H2	Low-income Family
50	HC	Low-income Family
50	H1	Low-income Family
50	S1	Low-income Family
50	SU	Low-income Family
50	S2	Low-income Family
52	T1	Low-income Family
50	NI	Low-Income Family
50	TI	Low-Income Family
50	CP	Low-income Family
50	TO	Low-income Family
20	XP	Low-income Family
20	MX	Medicaid Expansion

**State of Alaska Department of Health and Social Services
Statewide Databook
Reference A: Population Logic**

Eligibility Code	Medicaid Subtype Code	Population
11	AF	Pregnant Women
11	PB	Pregnant Women
11	PC	Pregnant Women
11	KI	Pregnant Women
11	PX	Pregnant Women
11	TI	Pregnant Women
11	S2	Pregnant Women
11	PR	Pregnant Women
50	SO	SSI/Disabled
11	AL	Excluded - Other
53	AL	Excluded - Other
20	AF	Low-income Family
50	BA	Low-income Family
50	HC	Low-income Family
50	S1	Low-income Family
50	SU	Low-income Family
52	T1	Low-income Family
50	NI	Low-Income Family
50	AF	Low-Income Family
50	TO	Low-income Family
20	MX	Medicaid Expansion
11	PB	Pregnant Women
11	PR	Pregnant Women
50	SO	SSI/Disabled
20	XI	Low-Income Family
20	XP	Low-income Family
20	MX	Medicaid Expansion
20	MI	Medicaid Expansion
11	MX	Pregnant Women
11	MI	Pregnant Women
11	XP	Pregnant Women
20	NS	Low-Income Family
20	ST	SSI/Disabled
10	SI	SSI/Disabled
20	AI	SSI/Disabled
20	DW	SSI/Disabled
20	RC	SSI/Disabled
20	SS	SSI/Disabled
20	PM	SSI/Disabled
20	SI	SSI/Disabled
24	IN	Waiver/Institutional
19	WD	Waiver/Institutional
20	NH	Waiver/Institutional
25	DE	Waiver/Institutional
20	QM	Waiver/Institutional
53	IL	Excluded - Other
11	AF	Pregnant Women
11	PB	Pregnant Women
11	PC	Pregnant Women
11	TO	Pregnant Women

**State of Alaska Department of Health and Social Services
Statewide Databook
Reference A: Population Logic**

Eligibility Code	Medicaid Subtype Code	Population
11	SU	Pregnant Women
11	PX	Pregnant Women
11	T1	Pregnant Women
11	PR	Pregnant Women
54	DK	SSI/Disabled
50	IV	Low-income Family
21	GJ	Low-income Family
20	XP	Low-income Family
20	MX	Medicaid Expansion
41	AF	Waiver/Institutional
41	ST	Waiver/Institutional
70	IN	Waiver/Institutional
71	AF	Waiver/Institutional
71	IV	Waiver/Institutional
71	SO	Waiver/Institutional
80	IN	Waiver/Institutional
81	SI	Waiver/Institutional
71	FC	Waiver/Institutional
71	JC	Waiver/Institutional
81	JC	Waiver/Institutional
30	AS	Waiver/Institutional
30	IN	Waiver/Institutional
31	DW	Waiver/Institutional
40	AS	Waiver/Institutional
41	DW	Waiver/Institutional
70	AS	Waiver/Institutional
71	DW	Waiver/Institutional
71	PB	Waiver/Institutional
71	PR	Waiver/Institutional
81	BA	Waiver/Institutional
81	HC	Waiver/Institutional
31	PM	Waiver/Institutional
81	AF	Waiver/Institutional
81	SO	Waiver/Institutional
71	DC	Waiver/Institutional
81	DC	Waiver/Institutional
31	SI	Waiver/Institutional
31	ST	Waiver/Institutional
40	IN	Waiver/Institutional
41	SI	Waiver/Institutional
71	SI	Waiver/Institutional
71	ST	Waiver/Institutional
71	SU	Waiver/Institutional
71	TO	Waiver/Institutional
81	FC	Waiver/Institutional
81	IV	Waiver/Institutional
81	ST	Waiver/Institutional
34	SI	Excluded - Other
34	ST	Excluded - Other
44	SI	Excluded - Other

**State of Alaska Department of Health and Social Services
Statewide Databook
Reference A: Population Logic**

Eligibility Code	Medicaid Subtype Code	Population
74	SI	Excluded - Other
74	ST	Excluded - Other
74	DW	Excluded - Other
44	ST	Excluded - Other
69	AI	Excluded - Dual
69	NH	Excluded - Dual
69	RC	Excluded - Dual
69	SA	Excluded - Dual
69	SS	Excluded - Dual
69	BB	Excluded - Dual
69	SI	Excluded - Dual
69	ST	Excluded - Dual
67	QM	Excluded - Other
68	SL	Excluded - Other
78	SL	Excluded - Other
66	QD	Excluded - Other

REFERENCE B: ZIP CODE TO REGION CROSSWALK

State of Alaska Department of Health and Social Services Statewide Databook Reference B: Zip Code to Region Crosswalk	
ZIP Code	Region
99509	Anchorage Municipality
99511	Anchorage Municipality
99512	Anchorage Municipality
99513	Anchorage Municipality
99514	Anchorage Municipality
99520	Anchorage Municipality
99521	Anchorage Municipality
99522	Anchorage Municipality
99523	Anchorage Municipality
99524	Anchorage Municipality
99501	Anchorage Municipality
99502	Anchorage Municipality
99503	Anchorage Municipality
99504	Anchorage Municipality
99505	Anchorage Municipality
99506	Anchorage Municipality
99507	Anchorage Municipality
99508	Anchorage Municipality
99515	Anchorage Municipality
99516	Anchorage Municipality
99517	Anchorage Municipality
99518	Anchorage Municipality
99540	Anchorage Municipality
99567	Anchorage Municipality
99577	Anchorage Municipality
99587	Anchorage Municipality
99510	Anchorage Municipality
99519	Anchorage Municipality
99599	Anchorage Municipality
99701	Fairbanks North Star Borough
99702	Fairbanks North Star Borough
99703	Fairbanks North Star Borough
99705	Fairbanks North Star Borough
99709	Fairbanks North Star Borough
99712	Fairbanks North Star Borough
99714	Fairbanks North Star Borough
99775	Fairbanks North Star Borough
99707	Fairbanks North Star Borough
99708	Fairbanks North Star Borough
99710	Fairbanks North Star Borough
99711	Fairbanks North Star Borough
99716	Fairbanks North Star Borough
99725	Fairbanks North Star Borough
99801	Northern Southeast Region
99824	Northern Southeast Region
99802	Northern Southeast Region
99803	Northern Southeast Region
99811	Northern Southeast Region
99821	Northern Southeast Region
99850	Northern Southeast Region
99556	Kenai Peninsula Borough
99568	Kenai Peninsula Borough

State of Alaska Department of Health and Social Services Statewide Databook Reference B: Zip Code to Region Crosswalk	
ZIP Code	Region
99572	Kenai Peninsula Borough
99603	Kenai Peninsula Borough
99605	Kenai Peninsula Borough
99610	Kenai Peninsula Borough
99611	Kenai Peninsula Borough
99631	Kenai Peninsula Borough
99639	Kenai Peninsula Borough
99663	Kenai Peninsula Borough
99664	Kenai Peninsula Borough
99669	Kenai Peninsula Borough
99672	Kenai Peninsula Borough
99682	Kenai Peninsula Borough
99635	Kenai Peninsula Borough
99588	Gulf Coast/Aleutian Region
99645	MatSu Borough
99652	MatSu Borough
99654	MatSu Borough
99667	MatSu Borough
99674	MatSu Borough
99676	MatSu Borough
99683	MatSu Borough
99688	MatSu Borough
99694	MatSu Borough
99623	MatSu Borough
99629	MatSu Borough
99687	MatSu Borough
99827	Northern Southeast Region
99820	Northern Southeast Region
99825	Northern Southeast Region
99826	Northern Southeast Region
99829	Northern Southeast Region
99832	Northern Southeast Region
99841	Northern Southeast Region
99830	Northern Southeast Region
99833	Northern Southeast Region
99836	Northern Southeast Region
99835	Northern Southeast Region
99840	Northern Southeast Region
99903	Northern Southeast Region
99929	Northern Southeast Region
99689	Northern Southeast Region
99659	Western Region
99671	Western Region
99684	Western Region
99739	Western Region
99742	Western Region
99753	Western Region
99762	Western Region
99769	Western Region
99771	Western Region
99772	Western Region
99778	Western Region

State of Alaska Department of Health and Social Services Statewide Databook Reference B: Zip Code to Region Crosswalk	
ZIP Code	Region
99783	Western Region
99784	Western Region
99785	Western Region
99721	Northern and Interior Region
99723	Northern and Interior Region
99734	Northern and Interior Region
99747	Northern and Interior Region
99759	Northern and Interior Region
99766	Northern and Interior Region
99782	Northern and Interior Region
99789	Northern and Interior Region
99791	Northern and Interior Region
99727	Western Region
99736	Western Region
99749	Western Region
99750	Western Region
99751	Western Region
99752	Western Region
99761	Western Region
99763	Western Region
99770	Western Region
99773	Western Region
99786	Western Region
99704	Northern and Interior Region
99729	Northern and Interior Region
99743	Northern and Interior Region
99744	Northern and Interior Region
99755	Northern and Interior Region
99760	Northern and Interior Region
99706	Fairbanks North Star Borough
99732	Northern and Interior Region
99737	Northern and Interior Region
99738	Northern and Interior Region
99764	Northern and Interior Region
99776	Northern and Interior Region
99780	Northern and Interior Region
99731	Northern and Interior Region
99779	Northern and Interior Region
99566	Gulf Coast/Aleutian Region
99573	Gulf Coast/Aleutian Region
99574	Gulf Coast/Aleutian Region
99586	Gulf Coast/Aleutian Region
99677	Gulf Coast/Aleutian Region
99686	Gulf Coast/Aleutian Region
99693	Gulf Coast/Aleutian Region
99558	Northern and Interior Region
99590	Northern and Interior Region
99602	Northern and Interior Region
99627	Northern and Interior Region
99665	Northern and Interior Region
99691	Northern and Interior Region
99720	Northern and Interior Region

State of Alaska Department of Health and Social Services Statewide Databook Reference B: Zip Code to Region Crosswalk	
ZIP Code	Region
99722	Northern and Interior Region
99724	Northern and Interior Region
99726	Northern and Interior Region
99730	Northern and Interior Region
99733	Northern and Interior Region
99740	Northern and Interior Region
99741	Northern and Interior Region
99745	Northern and Interior Region
99746	Northern and Interior Region
99748	Northern and Interior Region
99754	Northern and Interior Region
99756	Northern and Interior Region
99757	Northern and Interior Region
99758	Northern and Interior Region
99765	Northern and Interior Region
99767	Northern and Interior Region
99768	Northern and Interior Region
99774	Northern and Interior Region
99777	Northern and Interior Region
99781	Northern and Interior Region
99788	Northern and Interior Region
99790	Fairbanks North Star Borough
99675	Northern and Interior Region
99901	Southern Southeast Region
99928	Southern Southeast Region
99918	Southern Southeast Region
99919	Southern Southeast Region
99921	Southern Southeast Region
99922	Southern Southeast Region
99923	Southern Southeast Region
99925	Southern Southeast Region
99926	Southern Southeast Region
99950	Southern Southeast Region
99927	Southern Southeast Region
99553	Gulf Coast/Aleutian Region
99571	Gulf Coast/Aleutian Region
99583	Gulf Coast/Aleutian Region
99612	Gulf Coast/Aleutian Region
99661	Gulf Coast/Aleutian Region
99999	Unknown
99546	Gulf Coast/Aleutian Region
99547	Gulf Coast/Aleutian Region
99591	Gulf Coast/Aleutian Region
99638	Gulf Coast/Aleutian Region
99660	Gulf Coast/Aleutian Region
99685	Gulf Coast/Aleutian Region
99692	Gulf Coast/Aleutian Region
99613	Gulf Coast/Aleutian Region
99633	Gulf Coast/Aleutian Region
99670	Gulf Coast/Aleutian Region
99555	Gulf Coast/Aleutian Region
99569	Gulf Coast/Aleutian Region

State of Alaska Department of Health and Social Services Statewide Databook Reference B: Zip Code to Region Crosswalk	
ZIP Code	Region
99576	Gulf Coast/Aleutian Region
99580	Gulf Coast/Aleutian Region
99628	Gulf Coast/Aleutian Region
99636	Gulf Coast/Aleutian Region
99678	Gulf Coast/Aleutian Region
99550	Gulf Coast/Aleutian Region
99615	Gulf Coast/Aleutian Region
99624	Gulf Coast/Aleutian Region
99643	Gulf Coast/Aleutian Region
99644	Gulf Coast/Aleutian Region
99697	Gulf Coast/Aleutian Region
99608	Gulf Coast/Aleutian Region
99548	Gulf Coast/Aleutian Region
99549	Gulf Coast/Aleutian Region
99564	Gulf Coast/Aleutian Region
99565	Gulf Coast/Aleutian Region
99579	Gulf Coast/Aleutian Region
99606	Gulf Coast/Aleutian Region
99625	Gulf Coast/Aleutian Region
99640	Gulf Coast/Aleutian Region
99647	Gulf Coast/Aleutian Region
99648	Gulf Coast/Aleutian Region
99649	Gulf Coast/Aleutian Region
99653	Gulf Coast/Aleutian Region
99695	Gulf Coast/Aleutian Region
99551	Western Region
99552	Western Region
99557	Western Region
99559	Western Region
99561	Western Region
99575	Western Region
99578	Western Region
99589	Western Region
99607	Western Region
99609	Western Region
99614	Western Region
99621	Western Region
99622	Western Region
99626	Western Region
99630	Western Region
99634	Western Region
99637	Western Region
99641	Western Region
99651	Western Region
99655	Western Region
99656	Western Region
99668	Western Region
99679	Western Region
99680	Western Region
99681	Western Region
99690	Western Region
99545	Western Region

State of Alaska Department of Health and Social Services Statewide Databook Reference B: Zip Code to Region Crosswalk	
ZIP Code	Region
99554	Western Region
99563	Western Region
99581	Western Region
99585	Western Region
99604	Western Region
99620	Western Region
99632	Western Region
99650	Western Region
99657	Western Region
99658	Western Region
99662	Western Region
99666	Western Region
XXXXX	Unknown