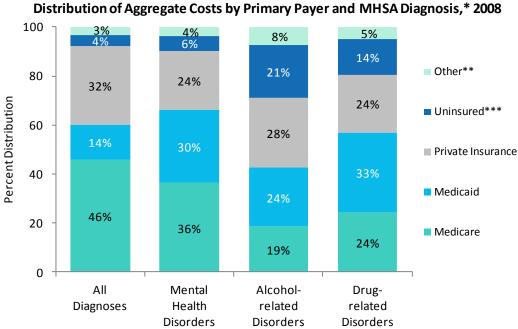
EXHIBIT 5.10 Costs for MH and SA Discharges by Payer



^{*}Based on principal CCS diagnosis.

Note: Excludes a small number of discharges (68,000 or 0.2 percent) with missing payer that have a small sum of missing costs (\$642 million or 0.2 percent).

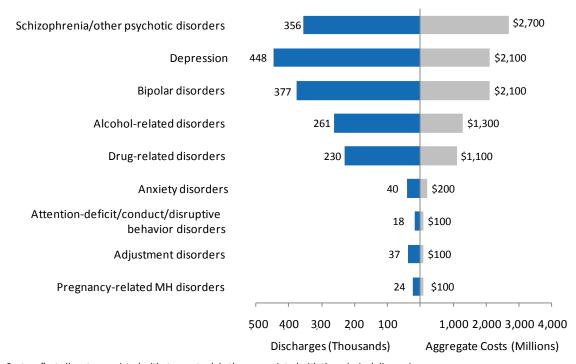
Note: Costs reflect all costs associated with stay, not solely those associated with the principal diagnosis. Source: AHRQ, Center for Delivery, Organization, and Markets, Healthcare Cost and Utilization Project, Nationwide Inpatient Sample, 2008.

- In 2008, the uninsured and Medicaid covered a disproportionate share of the costs for MH and SA hospital stays.
 - Medicaid insured 14 percent of costs for all hospitalizations, but was responsible for 33 percent of
 costs for stays with a drug-related diagnosis, 30 percent with a MH diagnosis, and 24 percent with an
 alcohol-related diagnosis.
 - The uninsured accounted for 4 percent of all hospital costs, but 21 percent of the costs for alcohol-related stays and 14 percent of the costs for drug-related stays.
- The costs of hospital stays with MH and SA diagnoses were less commonly the primary responsibility of Medicare and private insurance than were the costs for all hospital stays.
 - Costs associated with stays where Medicare was the primary payer accounted for 46 percent of the aggregate hospital costs in 2008, but for smaller shares of MHSA stays—36 percent of stays with a principal MH diagnosis, 19 percent with a principal alcohol-related diagnosis, and 24 percent with a principal drug-related diagnosis.
 - Overall, 32 percent of hospital costs were associated with discharges with private insurance as a primary payer, but only 24 percent of discharges with a MH or a drug-related diagnosis and 28 percent with an alcohol-related diagnosis.

^{**}Includes other payers such as Workers' Compensation, TRICARE, CHAMPUS, CHAMPVA, Title V, and other government programs.

^{***}Includes discharges classified as self-pay or no charge.

Number of Discharges and Aggregate Costs for the Most Frequent Principal MHSA Diagnoses, 2008



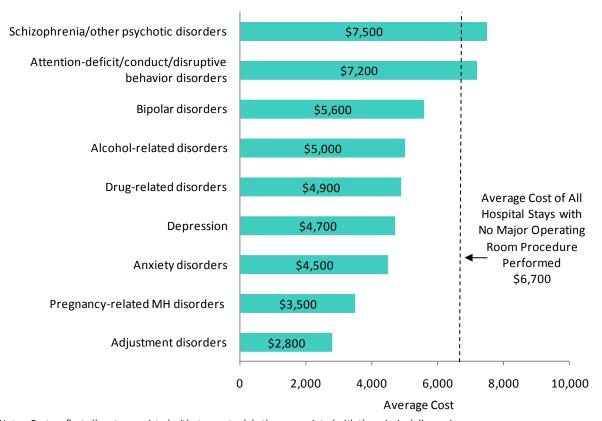
Note: Costs reflect all costs associated with stay, not solely those associated with the principal diagnosis.

Source: AHRQ, Centerfor Delivery, Organization, and Markets, Healthcare Cost and Utilization Project, Nationwide Inpatient Sample, 2008.

Schizophrenia/other psychotic disorders, depression, bipolar disorders, and alcohol- and drug-related disorders were the most costly MHSA diagnoses in 2008, in part because these diagnoses accounted for the majority of MHSA hospitalizations.

- The aggregate cost of hospitalizations for schizophrenia (\$2.7 billion) was greater than that for other MHSA conditions, although there were fewer hospitalizations for this condition than for a few other MHSA conditions.
- Hospitalizations for depression and bipolar disorders each cost \$2.1 billion. There were more hospitalizations for depression than for any other MHSA condition.
- Discharges for alcohol-related disorders cost \$1.3 billion in 2008 and those for drug-related disorders cost \$1.1 billion.
- The aggregate costs of hospital stays for other MHSA conditions (anxiety disorders, attention-deficit/conduct/disruptive behavior disorders, adjustment disorders, and pregnancy-related MH disorders) were smaller by comparison. Lower aggregate costs were mostly attributable to fewer inpatient hospitalizations for these conditions.





Note: Costs reflect all costs associated with stay, not solely those associated with the principal diagnosis.

Source: AHRQ, Center for Delivery, Organization, and Markets, Healthcare Cost and Utilization Project, Nationwide Inpatient Sample, 2008.

MHSA stays, unlike many other hospitalizations, seldom include costly major procedures, making these stays less expensive. In 2008, the average cost of a hospital stay without a major operating room procedure (\$6,700) was higher than the average cost of hospitalizations for most MHSA conditions.

- The average cost of a hospital stay for schizophrenia/other psychotic disorders (\$7,500) and for attention-deficit/conduct/disruptive behavior disorders (\$7,200) was greater than that of any other common MHSA condition, and greater than the average cost for all hospitalizations in which no major operating room procedure was performed.
- Two of the most frequent reasons for MHSA hospitalizations—depression and bipolar disorders—averaged costs of \$4,700 and \$5,600, respectively.
- Costs of stays for alcohol- and drug-related disorders were similar on average, at \$5,000 and \$4,900, respectively.