

TITLE XIX REPORT OF EXPENDITURES
(BY CATEGORY OF SERVICE)
(FISCAL YTD TOTALS AS OF 04/30/17)

CATEGORY OF SERVICE	RECIPIENTS SERVED	NUMBER OF CLAIMS	UNITS OF SERVICE	TOTAL PAYMENT
INPATIENT	36,995	16,133	91,028	\$135,722,469.62
OUTPATIENT	331,475	146,413	8,368,503	\$31,909,479.65
CHILD PART HOSP	0	0	0	\$0.00
CHILD DAY TREATMENT	0	0	0	\$0.00
ADULT PART HOSP	0	0	0	\$0.00
ADULT DAY TREATMENT	0	0	0	\$0.00
SKILLED NURSING FACILITY	1,223	1,626	20,420	\$3,856,844.02
IHAWP IOWA PLAN LITE	148,169	0	4,024-	\$6,137,610.73
IHAWP IOWA PLAN FULL	5	0	5-	\$1,444.32-
IHAWP HMO	21,735	91	492-	\$1,779,455.08-
IHAWP PCP	12	0	24-	\$87.00-
INTERMEDIATE CARE FACILITY	5,250	10,368	279,245	\$57,038,094.65
INTER CARE MENTAL RETARDA	226	464	12,576	\$5,644,101.67
NURSING FAC FOR MENTAL ILL	72	39	731	\$623,579.60
HOME HEALTH	20,744	16,579	4,447,917	\$21,624,175.18
LEAD INSPECTION AGENCY	1	0	0	\$0.00
PHYSICIAN	113,753	361,829	1,171,532	\$50,151,132.48
CLINIC SERVICES	29,008	53,267	47,979	\$15,891,287.59
MEP CASE MANAGEMENT	1	0	0	\$1,271,877.99
EHR INCENTIVE PAYMENTS	1	0	0	\$7,531,226.00
LAB AND RADIOLOGICAL	14,760	26,234	45,999	\$1,120,267.91
HABILITATION SERVICES	1,155	9,047	54,298	\$2,686,880.42
BEHAVIORAL HLTH INTERVENTN SVC	1,373	10,320	119,280	\$2,433,884.07
REHAB SUPPORT SERVICES	56	67	1,059-	\$44,802.78-
AMBULANCE SERVICES	6,034	7,812	7,496	\$1,308,202.77
LOCAL EDUCATION AGENCY	5,367	314,147	3,854,059	\$57,135,370.81
INFANT TODDLER	1,237	6,961	16,041	\$212,511.81
IHAWP WELLNESS EXAM BONUS	0	0	0	\$0.00
ACO VIS PAYMENTS	33,703	0	0	\$684,310.00
PRESCRIBED DRUGS	45,478	242,798	202,728	\$10,215,348.42
IOWA-PLAN-PMIC	0	0	0	\$0.00
DRUG CAPITATION	1	0	0	\$17.69-
NEMT SERVICES	51,827	131,561	131,290	\$294,235.77
INDIAN HEALTH SERVICES	0	0	0	\$0.00
FAMILY PLANNING SERVICES	3,623	5,210	5,515	\$415,437.46
IOWA CARE MED HOME CAPITATION	0	0	0	\$0.00
IOWA PLAN PROGRAM	76	1	65-	\$6,846.00-
MANAGED SUBSTANCE ABUSE	0	0	0	\$0.00
MENTAL HEALTH ACCESS PLAN	0	0	0	\$0.00
EPSDT SCREENING	36,661	41,223	40,976	\$5,416,395.72
HMO SERVICES	54,122	213	178	\$1,887,201.47
PACE SERVICES	424	3,462	3,450	\$11,759,576.30
PATIENT MANAGEMENT	28	0	2-	\$4.00-
HEALTH INS PREMIUM PAYMENT	4,154	75,929	75,929	\$5,919,248.17
MEDICAL SUPPLIES	20,643	50,853	1,929,654	\$4,476,102.48
HEALTH HOME PROVIDER	6,094	14,767	14,713	\$1,602,065.18
TCM PAYMENTS TO IOWAPLAN	0	0	0	\$0.00
IHAWP QHP	2	0	0	\$16,757,928.51
MCO	690,090	5,731,331	5,716,045	\$3,088,562,508.15
OTHER PRACTITIONER	46,963	165,433	351,557	\$17,611,136.35

T I T L E X I X R E P O R T O F E X P E N D I T U R E S
(BY CATEGORY OF SERVICE)
(FISCAL YTD TOTALS AS OF 04/30/17)

CATEGORY OF SERVICE	RECIPIENTS SERVED	NUMBER OF CLAIMS	UNITS OF SERVICE	TOTAL PAYMENT
FAMILY CENTERED PROGRAM	0	0	0	\$0.00
FAMILY PRESERVATION	0	0	0	\$0.00
TREATMENT FOSTER FAMILY CARE	0	0	0	\$0.00
GROUP TREATMENT THERAPY	0	0	0	\$0.00
DENTAL	203,735	419,143	419,950	\$60,060,617.68
ACCOUNTABLE CARE ORGANIZATIONS	8	0	17-	\$68.00-
OPTOMETRIST	8,099	9,487	10,627	\$566,920.19
CHIROPRACTIC	4,980	14,310	18,275	\$411,651.44
IOWA-PLAN-HAB	0	0	0	\$0.00
PODIATRIC	3,290	5,651	7,392	\$286,377.58
DELTA DENTAL	264,623	1,398,239	1,397,434	\$43,034,105.22
PHYSICAL DISABILITIES SVCS	46	122	27,619	\$92,693.08
BRAIN INJ WAIVER SERVICES	798	2,875	132,274	\$2,124,270.42
PSYCHIATRIC	13,726	29,548	37,588	\$2,522,676.98
RESIDENTIAL CARE FACILITY	1,145	8,703	245,594	\$1,941,166.43
ID WAIVER SERVICE	3,609	15,836	1,013,713	\$17,069,571.83
CHILDRENS MENTAL HEALTH SVC	141	827	116,770	\$440,590.37
AIDS WAIVER SERVICES	3	3	199	\$1,343.85
ELDERLY WAIVER SERVICES	8,177	2,798	53,084	\$159,210.51
ILL & HANDICAPPED WAIVER SVCS	584	4,602	384,066	\$4,818,080.68
COUNTY OFFICE REIMBURSEMENT	0	0	0	\$0.00
MEP SERVICES	10,554	15,252	54,163	\$1,593,095.40
UNASSIGNED	2	0	0	\$1,207,798.59
* A L L C A T E G O R I E S *	806,692	9,371,574	30,922,199	\$3,702,397,936.33
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