

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)
 (MONTHLY TOTALS AS OF 05/31/17)

CATEGORY OF SERVICE	RECIPIENTS SERVED	NUMBER OF CLAIMS	UNITS OF SERVICE	TOTAL PAYMENT	* * * * * A V E R A G E S * * * * *			
					COST PER UNIT OF SERVICE	COST PER ELIGIBLE RECIPIENT	UNITS PER RECIPIENT SERVED	COST PER RECIPIENT SERVED
INPATIENT	1,668	1,663	9,400	\$14,362,459.75	\$1,527.92	\$23.80	5.6	\$8,610.59
OUTPATIENT	10,901	14,757	477,112	\$3,865,030.75	\$8.10	\$6.40	43.8	\$354.56
CHILD PART HOSP	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
CHILD DAY TREATMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
ADULT PART HOSP	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
ADULT DAY TREATMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
SKILLED NURSING FACILITY	143	187	2,410	\$205,063.42	\$85.09	\$0.34	16.9	\$1,434.01
IHAWP IOWA PLAN LITE	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
IHAWP IOWA PLAN FULL	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
IHAWP HMO	1	0	0	\$419,043.88-	\$0.00	\$0.69-	.0	\$419,043.88-
IHAWP PCP	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
INTERMEDIATE CARE FACILITY	880	1,144	30,606	\$5,728,807.24	\$187.18	\$9.49	34.8	\$6,510.01
INTER CARE MENTAL RETARDA	42	69	1,296	\$608,390.22	\$469.44	\$1.01	30.9	\$14,485.48
NURSING FAC FOR MENTAL ILL	1	1	30	\$5,641.83	\$188.06	\$0.02	30.0	\$5,641.83
HOME HEALTH	1,219	1,609	488,680	\$3,036,329.40	\$6.21	\$5.03	400.9	\$2,490.84
LEAD INSPECTION AGENCY	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
PHYSICIAN	17,714	40,486	78,810	\$2,785,614.44	\$35.35	\$4.62	4.4	\$157.25
CLINIC SERVICES	3,193	4,363	3,596	\$3,027,716.45	\$841.97	\$5.02	1.1	\$948.24
MEP CASE MANAGEMENT	1	0	0	\$53,707.18	\$0.00	\$0.09	.0	\$53,707.18
EHR INCENTIVE PAYMENTS	1	0	0	\$178,500.00	\$0.00	\$0.30	.0	\$178,500.00
LAB AND RADIOLOGICAL	1,406	1,926	2,636	\$72,148.86	\$27.37	\$0.12	1.9	\$51.31
HABILITATION SERVICES	98	119	2,065	\$80,361.30	\$38.92	\$0.13	21.1	\$820.01
BEHAVIORAL HLTH INTERVENTN SVC	194	964	13,994	\$268,180.75	\$19.16	\$0.44	72.1	\$1,382.38
REHAB SUPPORT SERVICES	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
AMBULANCE SERVICES	697	821	794	\$127,213.80	\$160.22	\$0.21	1.1	\$182.52
LOCAL EDUCATION AGENCY	3,307	109,902	1,128,823	\$15,104,653.11	\$13.38	\$25.03	341.3	\$4,567.48
INFANT TODDLER	108	261	620	\$7,629.98	\$12.31	\$0.01	5.7	\$70.65
IHAWP WELLNESS EXAM BONUS	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
ACO VIS PAYMENTS	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
PRESCRIBED DRUGS	7,258	27,628	23,012	\$1,194,247.39	\$51.90	\$5.24	3.2	\$164.54
IOWA-PLAN-PMIC	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
DRUG CAPITATION	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
NEMT SERVICES	15,450	11,962	11,951	\$30,456.94	\$2.55	\$0.05	.8	\$1.97
INDIAN HEALTH SERVICES	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
FAMILY PLANNING SERVICES	370	457	455	\$40,629.19	\$89.29	\$0.07	1.2	\$109.81
IOWA CARE MED HOME CAPITATION	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
IOWA PLAN PROGRAM	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
MANAGED SUBSTANCE ABUSE	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
MENTAL HEALTH ACCESS PLAN	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
EPSDT SCREENING	4,650	4,895	4,890	\$496,519.89	\$101.54	\$5.58	1.1	\$106.78
HMO SERVICES	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
PACE SERVICES	437	369	360	\$2,589,453.96	\$7,192.93	\$4.29	.8	\$5,925.52
PATIENT MANAGEMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
HEALTH INS PREMIUM PAYMENT	3,285	8,455	8,455	\$658,816.99	\$77.92	\$1.09	2.6	\$200.55
MEDICAL SUPPLIES	2,829	4,416	159,553	\$345,601.08	\$2.17	\$1.52	56.4	\$122.16
HEALTH HOME PROVIDER	287	386	388	\$46,833.71	\$120.71	\$0.08	1.4	\$163.18
TCM PAYMENTS TO IOWAPLAN	316	0	0	\$1,287.25	\$0.00	\$0.00	.0	\$4.07
IHAWP QHP	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
MCO	552,773	572,161	567,455	\$310,151,873.44	\$546.57	\$513.88	1.0	\$561.08

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OTHER PRACTITIONER	6,293	48,081	76,687	\$5,093,402.39	\$66.42	\$8.44	12.2	\$809.38
FAMILY CENTERED PROGRAM	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
FAMILY PRESERVATION	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
TREATMENT FOSTER FAMILY CARE	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
GROUP TREATMENT THERAPY	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
DENTAL	42,838	52,414	52,511	\$7,633,844.51	\$145.38	\$33.48	1.2	\$178.20
ACCOUNTABLE CARE ORGANIZATIONS	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
OPTOMETRIST	797	907	1,041	\$59,608.40	\$57.26	\$0.10	1.3	\$74.79
CHIROPRACTIC	610	1,286	1,663	\$30,677.31	\$18.45	\$0.13	2.7	\$50.29
IOWA-PLAN-HAB	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
PODIATRIC	398	508	633	\$26,225.00	\$41.43	\$0.04	1.6	\$65.89
DELTA DENTAL	141,022	143,119	139,676	\$3,745,467.98	\$26.82	\$6.21	1.0	\$26.56
PHYSICAL DISABILITIES SVCS	47	6	1,516	\$21,455.48-	\$14.15-	\$0.04-	32.3	\$456.50-
BRAIN INJ WAIVER SERVICES	745	329	18,113	\$1,101,384.35-	\$60.81-	\$1.82-	24.3	\$1,478.37-
PSYCHIATRIC	1,651	2,741	3,356	\$409,412.33	\$121.99	\$0.68	2.0	\$247.98
RESIDENTIAL CARE FACILITY	699	916	24,884	\$186,232.21	\$7.48	\$0.31	35.6	\$266.43
ID WAIVER SERVICE	2,621	1,660	93,133	\$3,576,508.97-	\$38.40-	\$298.49-	35.5	\$1,364.56-
CHILDRENS MENTAL HEALTH SVC	50	75	16,889	\$62,365.37	\$3.69	\$55.68	337.8	\$1,247.31
AIDS WAIVER SERVICES	1	1	56	\$453.60	\$8.10	\$13.34	56.0	\$453.60
ELDERLY WAIVER SERVICES	1,306	40	2,326	\$168,820.65-	\$72.58-	\$20.48-	1.8	\$129.27-
ILL & HANDICAPPED WAIVER SVCS	637	546	47,499	\$298,147.38-	\$6.28-	\$132.27-	74.6	\$468.05-
COUNTY OFFICE REIMBURSEMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
MEP SERVICES	6,737	1,072	3,845	\$502,516.44-	\$130.69-	\$0.83-	.6	\$74.59-
UNASSIGNED	1	0	0	\$7,702,997.94	\$0.00	\$12.76	.0	\$0.00
* A L L C A T E G O R I E S *	582,883	1,062,702	3,501,219	\$383,935,978.21	\$109.66	\$636.13	6.0	\$658.68

*** END OF REPORT ***