

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 11/30/17)

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	1,048	1,078	6,214	\$8,724,922.44	\$1,404.08	\$14.70	5.9	\$8,325.31
OUTPATIENT	7,384	10,278	582,455	\$2,061,228.53	\$3.54	\$3.47	78.9	\$279.15
CHILD PART HOSP	1	0	0	\$28.80	\$0.00	\$0.00	.0	\$28.80
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	74	93	1,486	\$275,050.56	\$185.09	\$0.46	20.1	\$3,716.90
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	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
IHAWP PCP	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
INTERMEDIATE CARE FACILITY	762	925	25,892	\$5,608,549.30	\$216.61	\$9.45	34.0	\$7,360.30
INTER CARE MENTAL RETARDA	45	44	1,276	\$595,197.14	\$466.46	\$1.00	28.4	\$13,226.60
NURSING FAC FOR MENTAL ILL	2	1	31	\$3,518.37	\$113.50	\$0.01	15.5	\$1,759.19
HOME HEALTH	813	1,025	429,504	\$1,766,578.99	\$4.11	\$2.98	528.3	\$2,172.91
LEAD INSPECTION AGENCY	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
PHYSICIAN	11,981	26,208	63,342	\$1,534,519.69	\$24.23	\$2.59	5.3	\$128.08
CLINIC SERVICES	2,636	3,629	4,495	\$2,222,634.34	\$494.47	\$3.74	1.7	\$843.18
MEP CASE MANAGEMENT	1	0	0	\$128,787.78	\$0.00	\$0.22	.0	\$128,787.78
EHR INCENTIVE PAYMENTS	1	0	0	\$3,041,336.80	\$0.00	\$5.12	.0	\$0.00
LAB AND RADIOLOGICAL	1,264	1,863	4,316	\$63,298.00	\$14.67	\$0.11	3.4	\$50.08
HABILITATION SERVICES	18	68	537	\$98,967.18	\$184.30	\$0.17	29.8	\$5,498.18
BEHAVIORAL HLTH INTERVENTN SVC	160	577	8,383	\$159,481.85	\$19.02	\$0.27	52.4	\$996.76
REHAB SUPPORT SERVICES	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
AMBULANCE SERVICES	481	544	534	\$58,541.35	\$109.63	\$0.10	1.1	\$121.71
LOCAL EDUCATION AGENCY	1,855	32,508	343,438	\$5,493,590.94	\$16.00	\$9.26	185.1	\$2,961.50
INFANT TODDLER	560	1,753	3,790	\$50,226.86	\$13.25	\$0.08	6.8	\$89.69
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	5,955	19,337	16,230	\$949,858.39	\$58.52	\$4.83	2.7	\$159.51
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	12,545	12,244	9,892	\$24,175.21	\$2.44	\$0.04	.8	\$1.93
INDIAN HEALTH SERVICES	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
FAMILY PLANNING SERVICES	353	421	425	\$23,897.99	\$56.23	\$0.04	1.2	\$67.70
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	3,002	3,123	3,115	\$338,078.81	\$108.53	\$4.80	1.0	\$112.62
HMO SERVICES	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
PACE SERVICES	415	416	415	\$1,539,663.02	\$3,710.03	\$2.59	1.0	\$3,710.03
PATIENT MANAGEMENT	237	237	237	\$474.00	\$2.00	\$0.76	1.0	\$2.00
HEALTH INS PREMIUM PAYMENT	3,153	7,178	7,178	\$639,786.79	\$89.13	\$1.08	2.3	\$202.91
MEDICAL SUPPLIES	1,830	2,803	123,542	\$216,740.95	\$1.75	\$1.10	67.5	\$118.44
HEALTH HOME PROVIDER	249	278	278	\$34,021.99	\$122.38	\$0.06	1.1	\$136.63
TCM PAYMENTS TO IOWAPLAN	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
IHAWP QHP	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
MCO	538,088	562,329	560,526	\$312,225,866.25	\$557.02	\$526.06	1.0	\$580.25

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OTHER PRACTITIONER	5,144	17,501	132,986	\$1,581,216.47	\$11.89	\$2.66	25.9	\$307.39
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	21,665	24,711	24,767	\$3,349,143.07	\$135.23	\$17.02	1.1	\$154.59
ACCOUNTABLE CARE ORGANIZATIONS	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
OPTOMETRIST	607	659	771	\$36,512.26	\$47.36	\$0.06	1.3	\$60.15
CHIROPRACTIC	513	1,181	1,372	\$23,176.05	\$16.89	\$0.12	2.7	\$45.18
IOWA-PLAN-HAB	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
PODIATRIC	234	288	366	\$10,703.44	\$29.24	\$0.02	1.6	\$45.74
DELTA DENTAL	285,395	290,993	288,536	\$4,885,848.37	\$16.93	\$8.23	1.0	\$17.12
PHYSICAL DISABILITIES SVCS	6	15	3,913	\$11,184.39	\$2.86	\$0.02	652.2	\$1,864.07
BRAIN INJ WAIVER SERVICES	162	416	10,728	\$248,306.27	\$23.15	\$0.42	66.2	\$1,532.75
PSYCHIATRIC	1,119	1,630	1,943	\$114,042.19	\$58.69	\$0.19	1.7	\$101.91
RESIDENTIAL CARE FACILITY	611	685	19,815	\$163,862.27	\$8.27	\$0.28	32.4	\$268.19
ID WAIVER SERVICE	794	1,360	76,254	\$1,973,787.71	\$25.88	\$165.63	96.0	\$2,485.88
CHILDRENS MENTAL HEALTH SVC	45	61	10,088	\$39,185.92	\$3.88	\$40.86	224.2	\$870.80
AIDS WAIVER SERVICES	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
ELDERLY WAIVER SERVICES	183	31	1,340	\$5,343.18	\$3.99	\$0.64	7.3	\$29.20
ILL & HANDICAPPED WAIVER SVCS	355	410	25,696	\$461,519.32	\$17.96	\$208.27	72.4	\$1,300.05
COUNTY OFFICE REIMBURSEMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
MEP SERVICES	965	1,352	5,105	\$278,308.98	\$54.52	\$0.47	5.3	\$288.40
UNASSIGNED	1	0	0	\$787,711.64-	\$0.00	\$1.33-	.0	\$787,711.64-
* A L L C A T E G O R I E S *	563,586	1,030,253	2,801,211	\$360,015,875.01	\$128.52	\$606.58	5.0	\$638.79

*** END OF REPORT ***