

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 07/31/18)

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	1,560	1,557	9,290	\$15,029,150.96	\$1,617.78	\$24.45	6.0	\$9,634.07
OUTPATIENT	10,430	15,321	1,335,160	\$4,246,691.14	\$3.18	\$6.91	128.0	\$407.16
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	164	263	1,979	\$206,237.83	\$104.21	\$0.34	12.1	\$1,257.55
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	809	975	26,513	\$5,514,472.18	\$207.99	\$8.97	32.8	\$6,816.41
INTER CARE MENTAL RETARDA	34	39	916	\$385,429.26	\$420.77	\$0.63	26.9	\$11,336.15
NURSING FAC FOR MENTAL ILL	3	3	90	\$11,861.87	\$131.80	\$0.03	30.0	\$3,953.96
HOME HEALTH	1,107	1,603	242,136	\$2,288,473.86	\$9.45	\$3.72	218.7	\$2,067.28
LEAD INSPECTION AGENCY	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
PHYSICIAN	14,891	34,322	75,143	\$2,094,526.57	\$27.87	\$3.41	5.0	\$140.66
CLINIC SERVICES	3,468	4,834	4,644	\$1,788,053.58	\$385.02	\$2.91	1.3	\$515.59
MEP CASE MANAGEMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
EHR INCENTIVE PAYMENTS	1	0	0	\$278,324.12	\$0.00	\$0.45	.0	\$278,324.12
LAB AND RADIOLOGICAL	1,732	2,486	5,857	\$94,409.04	\$16.12	\$0.15	3.4	\$54.51
HABILITATION SERVICES	143	1,610	6,286	\$458,773.55	\$72.98	\$0.75	44.0	\$3,208.21
BEHAVIORAL HLTH INTERVENTN SVC	185	743	8,523	\$184,711.96	\$21.67	\$0.30	46.1	\$998.44
REHAB SUPPORT SERVICES	3	8	40	\$2,159.62	\$53.99	\$0.00	13.3	\$719.87
AMBULANCE SERVICES	564	689	679	\$71,633.86	\$105.50	\$0.12	1.2	\$127.01
LOCAL EDUCATION AGENCY	1,410	41,446	320,422	\$4,578,944.97	\$14.29	\$7.45	227.2	\$3,247.48
INFANT TODDLER	65	124	320	\$3,908.15	\$12.21	\$0.01	4.9	\$60.13
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	7,709	29,210	23,905	\$1,320,931.33	\$55.26	\$18.70	3.1	\$171.35
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	14,848	16,311	16,310	\$39,307.10	\$2.41	\$0.06	1.1	\$2.65
INDIAN HEALTH SERVICES	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
FAMILY PLANNING SERVICES	286	362	363	\$22,423.13	\$61.77	\$0.04	1.3	\$78.40
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	4,360	4,481	4,477	\$535,996.80	\$119.72	\$22.66	1.0	\$122.94
HMO SERVICES	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
PACE SERVICES	464	463	462	\$1,733,673.77	\$3,752.54	\$2.82	1.0	\$3,736.37
PATIENT MANAGEMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
HEALTH INS PREMIUM PAYMENT	2,663	6,804	6,804	\$626,594.07	\$92.09	\$1.02	2.6	\$235.30
MEDICAL SUPPLIES	2,283	3,915	174,061	\$336,564.04	\$1.93	\$4.76	76.2	\$147.42
HEALTH HOME PROVIDER	419	490	486	\$62,607.17	\$128.82	\$0.10	1.2	\$149.42
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	726,229	567,410	565,267	\$422,736,637.25	\$747.85	\$687.86	.8	\$582.10

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OTHER PRACTITIONER	5,156	16,799	45,965	\$2,207,032.41	\$48.02	\$3.59	8.9	\$428.05
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	24,183	27,926	27,945	\$4,176,192.38	\$149.44	\$59.12	1.2	\$172.69
ACCOUNTABLE CARE ORGANIZATIONS	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
OPTOMETRIST	809	911	1,011	\$56,408.01	\$55.79	\$0.09	1.2	\$69.73
CHIROPRACTIC	617	1,183	1,401	\$26,005.46	\$18.56	\$0.37	2.3	\$42.15
IOWA-PLAN-HAB	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
PODIATRIC	347	431	694	\$18,195.72	\$26.22	\$0.03	2.0	\$52.44
DELTA DENTAL	305,369	307,786	307,580	\$5,220,704.55	\$16.97	\$8.49	1.0	\$17.10
PHYSICAL DISABILITIES SVCS	8	12	2,451	\$7,870.41	\$3.21	\$0.01	306.4	\$983.80
BRAIN INJ WAIVER SERVICES	153	329	15,918	\$287,949.92	\$18.09	\$0.47	104.0	\$1,882.03
PSYCHIATRIC	1,483	2,549	3,032	\$180,063.65	\$59.39	\$0.29	2.0	\$121.42
RESIDENTIAL CARE FACILITY	536	615	17,477	\$133,611.27	\$7.64	\$0.22	32.6	\$249.27
ID WAIVER SERVICE	806	1,531	102,943	\$2,018,485.23	\$19.61	\$166.93	127.7	\$2,504.32
CHILDRENS MENTAL HEALTH SVC	56	90	16,050	\$62,118.72	\$3.87	\$58.33	286.6	\$1,109.26
AIDS WAIVER SERVICES	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
ELDERLY WAIVER SERVICES	441	838	25,545	\$422,240.59	\$16.53	\$52.14	57.9	\$957.46
ILL & HANDICAPPED WAIVER SVCS	346	427	34,695	\$538,644.91	\$15.53	\$236.14	100.3	\$1,556.78
COUNTY OFFICE REIMBURSEMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
MEP SERVICES	745	1,153	6,589	\$410,466.23	\$62.30	\$0.67	8.8	\$550.96
UNASSIGNED	1	0	0	\$246,841.42	\$0.00	\$0.40	.0	\$246,841.42
* A L L C A T E G O R I E S *	748,286	1,098,049	3,439,429	\$480,665,328.06	\$139.75	\$782.12	4.6	\$642.36

*** END OF REPORT ***