

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 05/31/19)

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	5,447	1,475	6,548	\$11,289,975.68	\$1,724.19	\$18.15	1.2	\$2,072.70
OUTPATIENT	8,905	11,737	961,324	\$2,629,389.71	\$2.74	\$4.23	108.0	\$295.27
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	69	71	1,201	\$461,770.66	\$384.49	\$0.74	17.4	\$6,692.33
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	760	997	27,224	\$5,408,126.52	\$198.65	\$8.69	35.8	\$7,115.96
INTER CARE MENTAL RETARDA	41	41	1,193	\$514,510.07	\$431.27	\$0.83	29.1	\$12,549.03
NURSING FAC FOR MENTAL ILL	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
HOME HEALTH	828	1,066	179,194	\$1,544,404.69	\$8.62	\$2.48	216.4	\$1,865.22
LEAD INSPECTION AGENCY	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
PHYSICIAN	12,590	27,861	62,239	\$1,978,804.05	\$31.79	\$3.18	4.9	\$157.17
CLINIC SERVICES	2,837	3,795	3,882	\$1,477,921.26	\$380.71	\$2.38	1.4	\$520.95
MEP CASE MANAGEMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
EHR INCENTIVE PAYMENTS	1	0	0	\$102,000.00	\$0.00	\$0.16	.0	\$102,000.00
LAB AND RADIOLOGICAL	1,399	2,083	4,909	\$85,516.39	\$17.42	\$0.14	3.5	\$61.13
HABILITATION SERVICES	44	155	1,408	\$177,807.47	\$126.28	\$0.29	32.0	\$4,041.08
BEHAVIORAL HLTH INTERVENTN SVC	143	454	4,393	\$92,736.57	\$21.11	\$0.15	30.7	\$648.51
REHAB SUPPORT SERVICES	8	8	135	\$6,894.45	\$51.07	\$0.01	16.9	\$861.81
AMBULANCE SERVICES	638	706	703	\$86,794.87	\$123.46	\$0.14	1.1	\$136.04
LOCAL EDUCATION AGENCY	3,268	75,516	749,683	\$11,648,470.96	\$15.54	\$18.72	229.4	\$3,564.40
INFANT TODDLER	306	623	1,390	\$19,176.80	\$13.80	\$0.03	4.5	\$62.67
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	6,590	23,640	19,324	\$1,180,528.93	\$61.09	\$12.08	2.9	\$179.14
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	32,816	15,363	13,553	\$38,634.38	\$2.85	\$0.06	.4	\$1.18
INDIAN HEALTH SERVICES	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
FAMILY PLANNING SERVICES	238	267	273	\$19,623.25	\$71.88	\$0.03	1.1	\$82.45
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	4,958	4,492	4,734	\$1,047,027.55	\$221.17	\$32.52	1.0	\$211.18
HMO SERVICES	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
PACE SERVICES	544	544	544	\$1,845,677.71	\$3,392.79	\$2.97	1.0	\$3,392.79
PATIENT MANAGEMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
HEALTH INS PREMIUM PAYMENT	2,451	5,480	5,480	\$578,790.61	\$105.62	\$0.93	2.2	\$236.14
MEDICAL SUPPLIES	1,743	2,698	131,793	\$216,980.35	\$1.65	\$2.22	75.6	\$124.49
HEALTH HOME PROVIDER	247	311	311	\$44,729.29	\$143.82	\$0.07	1.3	\$181.09
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	573,659	584,116	582,203	\$390,731,772.82	\$671.13	\$628.04	1.0	\$681.12

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OTHER PRACTITIONER	5,478	27,265	49,856	\$3,595,542.41	\$72.12	\$5.78	9.1	\$656.36
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	23,372	26,600	26,662	\$3,948,210.49	\$148.08	\$40.39	1.1	\$168.93
ACCOUNTABLE CARE ORGANIZATIONS	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
OPTOMETRIST	582	647	729	\$41,186.72	\$56.50	\$0.07	1.3	\$70.77
CHIROPRACTIC	514	975	1,273	\$26,859.16	\$21.10	\$0.27	2.5	\$52.26
IOWA-PLAN-HAB	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
PODIATRIC	212	260	383	\$11,362.98	\$29.67	\$0.02	1.8	\$53.60
DELTA DENTAL	313,502	317,417	316,103	\$5,269,336.38	\$16.67	\$8.47	1.0	\$16.81
PHYSICAL DISABILITIES SVCS	7	12	2,582	\$8,093.13	\$3.13	\$0.01	368.9	\$1,156.16
BRAIN INJ WAIVER SERVICES	148	312	14,402	\$282,691.59	\$19.63	\$0.45	97.3	\$1,910.08
PSYCHIATRIC	1,175	1,880	2,323	\$152,872.81	\$65.81	\$0.25	2.0	\$130.10
RESIDENTIAL CARE FACILITY	486	541	14,940	\$121,884.31	\$8.16	\$0.20	30.7	\$250.79
ID WAIVER SERVICE	713	1,237	65,376	\$2,180,700.22	\$33.36	\$180.01	91.7	\$3,058.49
CHILDRENS MENTAL HEALTH SVC	48	72	14,286	\$53,869.19	\$3.77	\$66.34	297.6	\$1,122.27
AIDS WAIVER SERVICES	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
ELDERLY WAIVER SERVICES	18	61	1,623	\$25,414.12	\$15.66	\$3.12	90.2	\$1,411.90
ILL & HANDICAPPED WAIVER SVCS	319	378	23,640	\$458,664.03	\$19.40	\$196.35	74.1	\$1,437.82
COUNTY OFFICE REIMBURSEMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
MEP SERVICES	761	990	7,146	\$464,334.95	\$64.98	\$0.75	9.4	\$610.16
UNASSIGNED	1	0	0	\$328,450.96	\$0.00	\$0.53	.0	\$328,450.96
* A L L C A T E G O R I E S *	603,414	1,142,146	3,304,965	\$450,197,538.49	\$136.22	\$723.63	5.5	\$746.08

*** END OF REPORT ***