

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 06/30/19)

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	1,209	1,177	6,815	\$15,482,659.23	\$2,271.85	\$24.91	5.6	\$12,806.17
OUTPATIENT	8,834	11,110	1,207,973	\$3,171,690.89	\$2.63	\$5.10	136.7	\$359.03
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	90	82	1,452	\$80,002.37	\$55.10	\$0.13	16.1	\$888.92
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	824	1,111	31,243	\$6,020,899.26	\$192.71	\$9.69	37.9	\$7,306.92
INTER CARE MENTAL RETARDA	43	43	1,258	\$552,017.28	\$438.81	\$0.89	29.3	\$12,837.61
NURSING FAC FOR MENTAL ILL	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
HOME HEALTH	853	1,049	203,665	\$1,592,220.97	\$7.82	\$2.56	238.8	\$1,866.61
LEAD INSPECTION AGENCY	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
PHYSICIAN	12,021	27,130	63,108	\$1,707,214.83	\$27.05	\$2.75	5.2	\$142.02
CLINIC SERVICES	2,800	3,833	3,547	\$1,356,059.25	\$382.31	\$2.18	1.3	\$484.31
MEP CASE MANAGEMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
EHR INCENTIVE PAYMENTS	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
LAB AND RADIOLOGICAL	1,532	2,325	5,193	\$81,449.60	\$15.68	\$0.13	3.4	\$53.17
HABILITATION SERVICES	35	112	824	\$100,336.42	\$121.77	\$0.16	23.5	\$2,866.75
BEHAVIORAL HLTH INTERVENTN SVC	141	352	2,568	\$69,437.61	\$27.04	\$0.11	18.2	\$492.47
REHAB SUPPORT SERVICES	9	9	199	\$10,162.93	\$51.07	\$0.02	22.1	\$1,129.21
AMBULANCE SERVICES	463	540	536	\$58,740.79	\$109.59	\$0.09	1.2	\$126.87
LOCAL EDUCATION AGENCY	3,975	122,187	1,283,633	\$19,300,742.18	\$15.04	\$31.06	322.9	\$4,855.53
INFANT TODDLER	500	677	2,096	\$23,997.61	\$11.45	\$0.04	4.2	\$48.00
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	6,817	23,844	19,502	\$1,436,596.62	\$73.66	\$14.97	2.9	\$210.74
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	19,715	21,796	21,792	\$52,518.72	\$2.41	\$0.08	1.1	\$2.66
INDIAN HEALTH SERVICES	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
FAMILY PLANNING SERVICES	299	333	348	\$24,878.27	\$71.49	\$0.04	1.2	\$83.20
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	3,797	4,001	3,869	\$451,800.93	\$116.77	\$14.36	1.0	\$118.99
HMO SERVICES	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
PACE SERVICES	551	549	547	\$1,859,149.42	\$3,398.81	\$2.99	1.0	\$3,374.14
PATIENT MANAGEMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
HEALTH INS PREMIUM PAYMENT	2,303	4,586	4,586	\$420,184.71	\$91.62	\$0.68	2.0	\$182.45
MEDICAL SUPPLIES	1,702	2,609	124,200	\$187,901.41	\$1.51	\$1.96	73.0	\$110.40
HEALTH HOME PROVIDER	173	203	203	\$33,272.38	\$163.90	\$0.05	1.2	\$192.33
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	206,472	208,692	207,970	\$137,491,835.17	\$661.11	\$221.23	1.0	\$665.91

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OTHER PRACTITIONER	7,430	47,196	99,310	\$5,172,444.79	\$52.08	\$8.32	13.4	\$696.16
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	21,255	23,880	23,947	\$3,826,002.08	\$159.77	\$39.87	1.1	\$180.00
ACCOUNTABLE CARE ORGANIZATIONS	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
OPTOMETRIST	518	576	672	\$32,090.85	\$47.75	\$0.05	1.3	\$61.95
CHIROPRACTIC	468	811	1,066	\$21,912.82	\$20.56	\$0.23	2.3	\$46.82
IOWA-PLAN-HAB	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
PODIATRIC	263	343	426	\$19,399.84	\$45.54	\$0.03	1.6	\$73.76
DELTA DENTAL	314,388	317,577	317,503	\$5,287,838.52	\$16.65	\$8.51	1.0	\$16.82
PHYSICAL DISABILITIES SVCS	5	10	1,872	\$6,469.23	\$3.46	\$0.01	374.4	\$1,293.85
BRAIN INJ WAIVER SERVICES	160	317	11,408	\$315,535.57	\$27.66	\$0.51	71.3	\$1,972.10
PSYCHIATRIC	1,181	1,890	2,368	\$145,720.80	\$61.54	\$0.23	2.0	\$123.39
RESIDENTIAL CARE FACILITY	500	645	17,760	\$153,749.89	\$8.66	\$0.25	35.5	\$307.50
ID WAIVER SERVICE	695	1,233	74,650	\$2,269,664.01	\$30.40	\$187.45	107.4	\$3,265.70
CHILDRENS MENTAL HEALTH SVC	43	63	13,269	\$50,200.74	\$3.78	\$62.36	308.6	\$1,167.46
AIDS WAIVER SERVICES	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
ELDERLY WAIVER SERVICES	18	65	1,772	\$27,341.33	\$15.43	\$3.38	98.4	\$1,518.96
ILL & HANDICAPPED WAIVER SVCS	283	356	17,677	\$424,788.36	\$24.03	\$182.86	62.5	\$1,501.02
COUNTY OFFICE REIMBURSEMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
MEP SERVICES	755	914	6,590	\$431,614.40	\$65.50	\$0.69	8.7	\$571.67
UNASSIGNED	1	0	0	\$633,843.44-	\$0.00	\$1.02-	.0	\$633,843.44-
* A L L C A T E G O R I E S *	453,511	834,226	3,787,417	\$209,116,698.64	\$55.21	\$336.48	8.4	\$461.11

*** END OF REPORT ***