

TITLE XIX REPORT OF EXPENDITURES
(BY CATEGORY OF SERVICE)
(FISCAL YTD TOTALS AS OF 05/31/21)

CATEGORY OF SERVICE	RECIPIENTS SERVED	NUMBER OF CLAIMS	UNITS OF SERVICE	TOTAL PAYMENT
INPATIENT	5,285	6,404	35,256	\$137,023,763.74
OUTPATIENT	20,814	70,790	17,672,448	\$18,252,417.17
CHILD PART HOSP	0	0	0	\$0.00
CHILD DAY TREATMENT	0	0	0	\$0.00
ADULT PART HOSP	0	0	0	\$0.00
ADULT DAY TREATMENT	0	0	0	\$0.00
SKILLED NURSING FACILITY	205	433	6,983	\$1,841,217.97
IHAWP IOWA PLAN LITE	0	0	0	\$0.00
IHAWP IOWA PLAN FULL	0	0	0	\$0.00
IHAWP HMO	0	0	0	\$0.00
IHAWP PCP	0	0	0	\$0.00
INTERMEDIATE CARE FACILITY	466	3,186	92,485	\$31,489,848.81
INTER CARE MENTAL RETARDA	45	417	12,006	\$5,683,970.57
NURSING FAC FOR MENTAL ILL	0	0	0	\$0.00
HOME HEALTH	2,415	9,507	4,095,050	\$15,905,627.21
LEAD INSPECTION AGENCY	0	0	0	\$0.00
PHYSICIAN	23,532	147,021	433,705	\$13,088,829.96
CLINIC SERVICES	7,192	17,620	16,272	\$30,730,132.69
MEP CASE MANAGEMENT	1	0	0	\$0.00
EHR INCENTIVE PAYMENTS	1	0	0	\$161,500.00
LAB AND RADIOLOGICAL	4,925	11,080	28,050	\$384,245.44
HABILITATION SERVICES	65	1,129	7,694	\$1,051,321.46
BEHAVIORAL HLTH INTERVENTN SVC	224	2,801	17,677	\$409,977.24
REHAB SUPPORT SERVICES	7	113	609	\$33,899.94
AMBULANCE SERVICES	2,086	3,294	3,215	\$877,724.37
LOCAL EDUCATION AGENCY	4,204	267,106	1,423,684	\$37,967,411.68
INFANT TODDLER	895	4,429	8,042	\$116,481.51
IHAWP WELLNESS EXAM BONUS	0	0	0	\$0.00
ACO VIS PAYMENTS	0	0	0	\$0.00
PRESCRIBED DRUGS	9,571	156,025	125,383	\$10,668,498.15
IOWA-PLAN-PMIC	0	0	0	\$0.00
DRUG CAPITATION	0	0	0	\$0.00
NEMT SERVICES	17,911	115,875	102,006	\$248,742.43
INDIAN HEALTH SERVICES	1	0	0	\$6.17-
FAMILY PLANNING SERVICES	984	2,526	2,523	\$158,282.19
IOWA CARE MED HOME CAPITATION	0	0	0	\$0.00
IOWA PLAN PROGRAM	0	0	0	\$0.00
MANAGED SUBSTANCE ABUSE	0	0	0	\$0.00
MENTAL HEALTH ACCESS PLAN	0	0	0	\$0.00
EPSDT SCREENING	9,579	11,543	11,450	\$1,213,169.68
HMO SERVICES	0	0	0	\$0.00
PACE SERVICES	730	6,703	6,658	\$24,950,722.42
PATIENT MANAGEMENT	0	0	0	\$0.00
HEALTH INS PREMIUM PAYMENT	2,441	51,108	51,104	\$5,373,595.69
MEDICAL SUPPLIES	5,094	26,412	1,230,324	\$1,718,197.97
HEALTH HOME PROVIDER	319	2,105	2,101	\$332,633.10
TCM PAYMENTS TO IOWAPLAN	0	0	0	\$0.00
IHAWP QHP	2	0	0	\$101.17-
MCO	722,695	7,344,839	7,323,658	\$5,131,058,539.87
OTHER PRACTITIONER	15,699	223,168	485,082	\$30,716,398.29

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)
(FISCAL YTD TOTALS AS OF 05/31/21)

CATEGORY OF SERVICE	RECIPIENTS SERVED	NUMBER OF CLAIMS	UNITS OF SERVICE	TOTAL PAYMENT
FAMILY CENTERED PROGRAM	0	0	0	\$0.00
FAMILY PRESERVATION	0	0	0	\$0.00
TREATMENT FOSTER FAMILY CARE	0	0	0	\$0.00
GROUP TREATMENT THERAPY	1	0	0	\$82.63-
DENTAL	136,903	261,298	261,827	\$41,519,970.74
ACCOUNTABLE CARE ORGANIZATIONS	0	0	0	\$0.00
OPTOMETRIST	2,622	3,566	4,139	\$213,852.86
CHIROPRACTIC	1,108	6,468	7,640	\$127,910.07
IOWA-PLAN-HAB	0	0	0	\$0.00
PODIATRIC	833	2,261	3,575	\$82,103.62
DELTA DENTAL	424,744	4,192,331	4,175,026	\$71,413,654.63
PHYSICAL DISABILITIES SVCS	10	157	28,704	\$106,578.99
BRAIN INJ WAIVER SERVICES	169	3,369	124,193	\$4,307,278.96
PSYCHIATRIC	2,469	10,032	12,036	\$677,665.19
RESIDENTIAL CARE FACILITY	666	5,354	146,770	\$1,204,570.23
ID WAIVER SERVICE	746	10,196	517,718	\$20,508,397.25
CHILDRENS MENTAL HEALTH SVC	64	576	100,498	\$412,156.88
AIDS WAIVER SERVICES	0	0	0	\$0.00
ELDERLY WAIVER SERVICES	32	702	16,952	\$243,804.04
ILL & HANDICAPPED WAIVER SVCS	365	3,854	254,714	\$5,541,117.83
COUNTY OFFICE REIMBURSEMENT	0	0	0	\$0.00
MEP SERVICES	760	9,600	66,391	\$4,288,855.20
UNASSIGNED	1	0	0	\$48,323,612.23
* A L L C A T E G O R I E S *	762,122	12,995,398	38,913,648	\$5,700,428,488.30
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