

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 12/31/10)

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	5,974	6,180	34,814	\$31,453,064.34	\$903.46	\$68.10	5.8	\$5,264.99
OUTPATIENT	59,846	84,228	1,101,063	\$18,612,986.12	\$16.90	\$40.30	18.4	\$311.01
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	606	709	10,209	\$2,137,941.63	\$209.42	\$4.63	16.8	\$3,527.96
INTERMEDIATE CARE FACILITY	11,412	12,033	344,552	\$40,849,672.26	\$118.56	\$88.45	30.2	\$3,579.54
INTER CARE MENTAL RETARDA	2,069	3,692	109,068	\$59,997,976.12	\$550.10	\$129.90	52.7	\$28,998.54
NURSING FAC FOR MENTAL ILL	24	24	695	\$128,613.62	\$185.06	\$0.55	29.0	\$5,358.90
HOME HEALTH	13,960	17,260	284,684	\$10,276,109.59	\$36.10	\$22.25	20.4	\$736.11
LEAD INSPECTION AGENCY	3	3	3	\$1,074.12	\$358.04	\$0.00	1.0	\$358.04
PHYSICIAN	124,197	252,117	371,470	\$16,145,551.39	\$43.46	\$34.96	3.0	\$130.00
CLINIC SERVICES	22,581	32,508	32,023	\$5,217,551.04	\$162.93	\$11.30	1.4	\$231.06
MEP CASE MANAGEMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
LAB AND RADIOLOGICAL	14,319	19,823	32,000	\$599,957.43	\$18.75	\$1.30	2.2	\$41.90
HABILITATION SERVICES	3,256	7,294	88,183	\$4,588,202.59	\$52.03	\$9.93	27.1	\$1,409.15
REMEDIAL SERVICES	11,967	21,151	299,889	\$4,956,726.88	\$16.53	\$10.73	25.1	\$414.20
REHAB SUPPORT SERVICES	1	0	0	\$2,000.00-	\$0.00	\$0.00	.0	\$2,000.00-
AMBULANCE SERVICES	2,657	3,079	3,048	\$362,475.79	\$118.92	\$0.78	1.1	\$136.42
LOCAL EDUCATION AGENCY	1,330	4,005	326,737	\$4,219,373.46	\$12.91	\$9.14	245.7	\$3,172.46
EARLY ACCESS SERVICES	462	1,027	1,679	\$16,417.32	\$9.78	\$0.04	3.6	\$35.54
PRESCRIBED DRUGS	134,765	397,561	357,278	\$20,963,903.33	\$58.68	\$45.39	2.7	\$155.56
DRUG CAPITATION	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
NEMT SERVICES	363,732	378,053	377,869	\$808,639.66	\$2.14	\$1.75	1.0	\$2.22
INDIAN HEALTH SERVICES	60	68	68	\$19,652.00	\$289.00	\$0.04	1.1	\$327.53
FAMILY PLANNING SERVICES	7,431	8,381	8,490	\$784,727.93	\$92.43	\$1.70	1.1	\$105.60
IOWA PLAN PROGRAM	423,127	391,368	391,084	\$11,447,515.23	\$29.27	\$24.79	.9	\$27.05
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	6,718	7,331	7,319	\$1,018,818.74	\$139.20	\$3.98	1.1	\$151.66
HMO SERVICES	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
PACE SERVICES	89	88	86	\$254,325.17	\$2,957.27	\$0.55	1.0	\$2,857.59
PATIENT MANAGEMENT	173,489	173,473	173,449	\$346,900.00	\$2.00	\$37.68	1.0	\$2.00
HEALTH INS PREMIUM PAYMENT	3,451	9,651	9,651	\$538,713.31	\$55.82	\$1.17	2.8	\$156.10
MEDICAL SUPPLIES	23,167	38,340	1,922,643	\$3,857,962.41	\$2.01	\$8.35	83.0	\$166.53
OTHER PRACTITIONER	15,947	25,107	67,511	\$2,578,046.59	\$38.19	\$5.58	4.2	\$161.66
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	25,994	32,358	32,642	\$5,141,162.94	\$157.50	\$11.13	1.3	\$197.78
OPTOMETRIST	11,897	13,839	14,761	\$812,441.32	\$55.04	\$1.76	1.2	\$68.29
CHIROPRACTIC	8,601	15,363	18,566	\$458,796.90	\$24.71	\$0.99	2.2	\$53.34
PODIATRIC	4,012	4,817	6,493	\$192,758.85	\$29.69	\$0.42	1.6	\$48.05
PHYSICAL DISABILITIES SVCS	711	982	26,609	\$325,882.74	\$12.25	\$0.71	37.4	\$458.34
BRAIN INJ WAIVER SERVICES	1,030	2,304	56,260	\$1,766,738.03	\$31.40	\$3.83	54.6	\$1,715.28
PSYCHIATRIC	4,196	6,048	7,469	\$226,615.19	\$30.34	\$0.49	1.8	\$54.01
RESIDENTIAL CARE FACILITY	1,539	1,688	47,476	\$352,515.92	\$7.43	\$0.76	30.8	\$229.06

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 12/31/10)

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
ID WAIVER SERVICE	10,149	19,611	606,547	\$27,040,509.85	\$44.58	\$2,506.77	59.8	\$2,664.35
CHILDRENS MENTAL HEALTH SVC	564	745	32,341	\$534,843.78	\$16.54	\$731.66	57.3	\$948.30
AIDS WAIVER SERVICES	36	60	3,000	\$34,710.34	\$11.57	\$846.59	83.3	\$964.18
ELDERLY WAIVER SERVICES	9,469	31,715	470,253	\$6,495,268.59	\$13.81	\$678.64	49.7	\$685.95
ILL & HANDICAPPED WAIVER SVCS	2,005	3,143	99,628	\$1,679,710.15	\$16.86	\$668.94	49.7	\$837.76
COUNTY OFFICE REIMBURSEMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
MEP SERVICES	10,202	16,378	93,178	\$2,541,899.90	\$27.28	\$5.50	9.1	\$249.16
UNASSIGNED	10	0	0	\$683,826.42-	\$0.00	\$1.48-	.0	\$68,382.64-
* A L L C A T E G O R I E S *	441,212	2,043,605	7,870,788	\$289,100,926.15	\$36.73	\$625.94	17.8	\$655.24

\*\*\* END OF REPORT \*\*\*