

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 11/30/15)

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	7,646	7,642	34,909	\$47,118,372.87	\$1,349.75	\$79.35	4.6	\$6,162.49
OUTPATIENT	100,943	156,410	2,655,751	\$42,819,240.09	\$16.12	\$72.11	26.3	\$424.19
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	1,037	1,327	16,652	\$2,508,185.46	\$150.62	\$4.22	16.1	\$2,418.69
IHAWP IOWA PLAN LITE	114,534	124,739	124,693	\$1,640,581.95	\$13.16	\$2.76	1.1	\$14.32
IHAWP IOWA PLAN FULL	19,450	20,158	20,151	\$9,460,599.16	\$469.49	\$15.93	1.0	\$486.41
IHAWP HMO	16,924	17,237	17,219	\$5,404,133.65	\$313.85	\$9.10	1.0	\$319.32
IHAWP PCP	54,176	54,171	54,163	\$162,489.00	\$3.00	\$0.27	1.0	\$3.00
INTERMEDIATE CARE FACILITY	11,637	13,566	392,382	\$55,643,945.81	\$141.81	\$93.70	33.7	\$4,781.64
INTER CARE MENTAL RETARDA	1,882	1,853	55,602	\$23,313,954.24	\$419.30	\$39.26	29.5	\$12,387.86
NURSING FAC FOR MENTAL ILL	73	72	2,196	\$432,155.28	\$196.79	\$1.28	30.1	\$5,919.94
HOME HEALTH	14,192	19,967	2,431,627	\$16,055,074.42	\$6.60	\$27.04	171.3	\$1,131.28
LEAD INSPECTION AGENCY	3	3	3	\$1,081.36	\$360.45	\$0.00	1.0	\$360.45
PHYSICIAN	170,465	389,024	725,866	\$28,659,267.06	\$39.48	\$48.26	4.3	\$168.12
CLINIC SERVICES	33,050	45,061	42,529	\$8,576,067.11	\$201.65	\$14.44	1.3	\$259.49
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	23,607	34,766	66,043	\$1,419,979.63	\$21.50	\$2.39	2.8	\$60.15
HABILITATION SERVICES	5	15	443	\$5,407.82	\$12.21	\$0.01	88.6	\$1,081.56
BEHAVIORAL HLTH INTERVENTN SVC	7	0	0	\$21.83	\$0.00	\$0.00	.0	\$3.12
REHAB SUPPORT SERVICES	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
AMBULANCE SERVICES	3,535	4,255	4,239	\$606,859.30	\$143.16	\$1.02	1.2	\$171.67
LOCAL EDUCATION AGENCY	2,402	42,219	530,352	\$7,875,763.61	\$14.85	\$13.26	220.8	\$3,278.84
INFANT TODDLER	139	349	815	\$10,205.62	\$12.52	\$0.02	5.9	\$73.42
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	207,156	832,888	690,068	\$46,177,647.70	\$66.92	\$81.69	3.3	\$222.91
IOWA-PLAN-PMIC	6	0	0	\$49.24	\$0.00	\$0.00	.0	\$8.21
DRUG CAPITATION	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
NEMT SERVICES	434,020	447,060	446,848	\$956,254.72	\$2.14	\$1.61	1.0	\$2.20
INDIAN HEALTH SERVICES	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
FAMILY PLANNING SERVICES	5,067	5,698	6,445	\$522,186.35	\$81.02	\$0.88	1.3	\$103.06
IOWA CARE MED HOME CAPITATION	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
IOWA PLAN PROGRAM	404,767	430,482	430,111	\$29,734,448.29	\$69.13	\$50.07	1.1	\$73.46
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	4,944	5,258	5,249	\$1,867,159.26	\$355.72	\$7.03	1.1	\$377.66
HMO SERVICES	43,526	45,877	45,833	\$8,097,600.94	\$176.68	\$2,469.53	1.1	\$186.04
PACE SERVICES	264	270	268	\$871,083.21	\$3,250.31	\$1.47	1.0	\$3,299.56
PATIENT MANAGEMENT	153,037	153,029	153,013	\$306,026.00	\$2.00	\$51.32	1.0	\$2.00
HEALTH INS PREMIUM PAYMENT	3,061	6,224	6,224	\$430,152.26	\$69.11	\$0.72	2.0	\$140.53
MEDICAL SUPPLIES	39,794	72,883	2,453,019	\$6,887,440.02	\$2.81	\$12.18	61.6	\$173.08
HEALTH HOME PROVIDER	29,010	30,035	30,026	\$4,633,547.40	\$154.32	\$7.80	1.0	\$159.72
TCM PAYMENTS TO IOWAPLAN	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
IHAWP QHP	3,238	3,238	3,238	\$1,831,149.15	\$565.52	\$3.08	1.0	\$565.52
OTHER PRACTITIONER	36,385	67,685	129,695	\$6,113,280.42	\$47.14	\$10.29	3.6	\$168.02

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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	38,932	47,429	47,557	\$6,693,065.06	\$140.74	\$11.84	1.2	\$171.92
ACCOUNTABLE CARE ORGANIZATIONS	34,772	34,767	34,760	\$139,040.00	\$4.00	\$0.23	1.0	\$4.00
OPTOMETRIST	18,465	22,256	23,374	\$1,384,759.93	\$59.24	\$2.33	1.3	\$74.99
CHIROPRACTIC	12,889	25,103	30,472	\$811,640.05	\$26.64	\$1.44	2.4	\$62.97
IOWA-PLAN-HAB	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
PODIATRIC	6,530	7,853	9,698	\$344,959.27	\$35.57	\$0.58	1.5	\$52.83
DELTA DENTAL	136,928	136,872	136,780	\$3,099,434.80	\$22.66	\$5.22	1.0	\$22.64
PHYSICAL DISABILITIES SVCS	579	835	87,887	\$333,832.96	\$3.80	\$0.56	151.8	\$576.57
BRAIN INJ WAIVER SERVICES	1,205	3,021	173,902	\$3,546,440.41	\$20.39	\$5.97	144.3	\$2,943.10
PSYCHIATRIC	5,415	9,913	11,394	\$221,877.15	\$19.47	\$0.37	2.1	\$40.97
RESIDENTIAL CARE FACILITY	722	802	23,018	\$173,728.84	\$7.55	\$0.29	31.9	\$240.62
ID WAIVER SERVICE	11,626	27,997	1,711,271	\$45,116,819.70	\$26.36	\$3,666.25	147.2	\$3,880.68
CHILDRENS MENTAL HEALTH SVC	588	939	126,944	\$588,976.15	\$4.64	\$765.90	215.9	\$1,001.66
AIDS WAIVER SERVICES	24	43	7,435	\$26,821.69	\$3.61	\$1,117.57	309.8	\$1,117.57
ELDERLY WAIVER SERVICES	8,181	24,888	1,124,338	\$6,750,537.68	\$6.00	\$811.17	137.4	\$825.15
ILL & HANDICAPPED WAIVER SVCS	1,651	2,995	260,008	\$2,335,942.35	\$8.98	\$1,164.48	157.5	\$1,414.87
COUNTY OFFICE REIMBURSEMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
MEP SERVICES	12,349	19,749	86,117	\$4,499,765.17	\$52.25	\$7.58	7.0	\$364.38
UNASSIGNED	2	0	0	\$12,996,052.26-	\$0.00	\$21.88-	.0	\$0.00
* A L L C A T E G O R I E S *	582,945	3,398,923	15,470,627	\$423,212,900.70	\$27.36	\$712.67	26.5	\$725.99

*** END OF REPORT ***