

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 06/30/16)

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	3,323	2,285	13,757	\$16,418,585.79	\$1,193.47	\$27.44	4.1	\$4,940.89
OUTPATIENT	19,534	20,094	618,942	\$4,095,718.11	\$6.62	\$6.85	31.7	\$209.67
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	520	312	2,466	\$623,549.09	\$252.86	\$1.04	4.7	\$1,199.13
IHAWP IOWA PLAN LITE	1	0	1-	\$12.87-	\$12.87	\$0.00	1.0-	\$12.87-
IHAWP IOWA PLAN FULL	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
IHAWP HMO	1	0	18-	\$6,033.00-	\$335.17	\$0.01-	18.0-	\$6,033.00-
IHAWP PCP	1	0	4-	\$12.00-	\$3.00	\$0.00	4.0-	\$12.00-
INTERMEDIATE CARE FACILITY	2,437	1,531	40,344	\$10,690,003.71	\$264.97	\$17.87	16.6	\$4,386.54
INTER CARE MENTAL RETARDA	136	41	977	\$625,428.26	\$640.15	\$1.05	7.2	\$4,598.74
NURSING FAC FOR MENTAL ILL	56	0	8-	\$206,981.08-	\$25,872.64	\$0.61-	.1-	\$3,696.09-
HOME HEALTH	2,676	2,733	1,720,552	\$3,134,035.02	\$1.82	\$5.24	643.0	\$1,171.16
LEAD INSPECTION AGENCY	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
PHYSICIAN	36,282	56,181	114,116	\$41,174,148.89	\$360.81	\$68.82	3.1	\$1,134.84
CLINIC SERVICES	6,003	7,951	6,678	\$916,108.38	\$137.18	\$1.53	1.1	\$152.61
MEP CASE MANAGEMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
EHR INCENTIVE PAYMENTS	1	0	0	\$1,063,038.00	\$0.00	\$1.78	.0	\$0.00
LAB AND RADIOLOGICAL	3,811	4,809	8,906	\$224,693.39	\$25.23	\$0.38	2.3	\$58.96
HABILITATION SERVICES	433	737	9,494	\$963,834.42	\$101.52	\$1.61	21.9	\$2,225.95
BEHAVIORAL HLTH INTERVENTN SVC	482	1,077	16,809	\$306,958.45	\$18.26	\$0.51	34.9	\$636.84
REHAB SUPPORT SERVICES	56	369	1,777	\$65,707.34	\$36.98	\$0.11	31.7	\$1,173.35
AMBULANCE SERVICES	1,864	1,986	1,903	\$334,508.03	\$175.78	\$0.56	1.0	\$179.46
LOCAL EDUCATION AGENCY	3,527	95,675	1,357,903	\$17,743,291.44	\$13.07	\$29.66	385.0	\$5,030.70
INFANT TODDLER	393	1,188	2,550	\$34,948.13	\$13.71	\$0.06	6.5	\$88.93
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	12,282	21,248	17,912	\$798,840.42	\$44.60	\$1.98	1.5	\$65.04
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	12,429	13,307	13,307	\$28,476.98	\$2.14	\$0.05	1.1	\$2.29
INDIAN HEALTH SERVICES	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
FAMILY PLANNING SERVICES	902	730	734	\$39,449.22	\$53.75	\$0.07	.8	\$43.74
IOWA CARE MED HOME CAPITATION	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
IOWA PLAN PROGRAM	1	0	0	\$13.20-	\$0.00	\$0.00	.0	\$13.20-
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	4,536	4,508	4,490	\$666,821.60	\$148.51	\$3.66	1.0	\$147.01
HMO SERVICES	17	0	7-	\$69,207.31	\$9,886.76-	\$33.11	.4-	\$4,071.02
PACE SERVICES	317	318	317	\$1,068,614.23	\$3,371.02	\$1.79	1.0	\$3,371.02
PATIENT MANAGEMENT	46	0	379-	\$758.00-	\$2.00	\$1.06-	8.2-	\$16.48-
HEALTH INS PREMIUM PAYMENT	3,405	8,798	8,798	\$662,463.04	\$75.30	\$1.11	2.6	\$194.56
MEDICAL SUPPLIES	6,059	9,487	344,800	\$1,203,888.87	\$3.49	\$2.98	56.9	\$198.69
HEALTH HOME PROVIDER	2,991	5,658	5,672	\$957,391.72	\$168.79	\$1.60	1.9	\$320.09
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	0	0	566,091	\$304,640,010.61	\$538.15	\$509.18	.0	\$0.00

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OTHER PRACTITIONER	12,874	46,513	84,878	\$5,077,821.64	\$59.82	\$8.49	6.6	\$394.42
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	30,126	35,017	35,111	\$4,949,810.97	\$140.98	\$12.25	1.2	\$164.30
ACCOUNTABLE CARE ORGANIZATIONS	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
OPTOMETRIST	1,565	1,319	1,466	\$56,646.10	\$38.64	\$0.09	.9	\$36.20
CHIROPRACTIC	1,666	2,288	3,277	\$66,036.73	\$20.15	\$0.16	2.0	\$39.64
IOWA-PLAN-HAB	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
PODIATRIC	883	1,017	1,254	\$67,473.93	\$53.81	\$0.11	1.4	\$76.41
DELTA DENTAL	141,039	141,040	141,040	\$3,195,966.40	\$22.66	\$5.34	1.0	\$22.66
PHYSICAL DISABILITIES SVCS	33	42	4,844	\$19,903.23	\$4.11	\$0.03	146.8	\$603.13
BRAIN INJ WAIVER SERVICES	209	292	16,025	\$112,465.24	\$7.02	\$0.19	76.7	\$538.11
PSYCHIATRIC	2,525	3,879	5,179	\$311,678.84	\$60.18	\$0.52	2.1	\$123.44
RESIDENTIAL CARE FACILITY	559	687	18,895	\$155,034.14	\$8.21	\$0.26	33.8	\$277.34
ID WAIVER SERVICE	1,368	1,631	93,613	\$2,330,441.93	\$24.89	\$194.92	68.4	\$1,703.54
CHILDRENS MENTAL HEALTH SVC	97	147	102,998	\$93,829.10	\$0.91	\$132.71	.0	\$967.31
AIDS WAIVER SERVICES	2	2	464	\$1,455.00	\$3.14	\$51.96	232.0	\$727.50
ELDERLY WAIVER SERVICES	2,320	1,487	27,929	\$410,048.61	\$14.68	\$51.03	12.0	\$176.75
ILL & HANDICAPPED WAIVER SVCS	381	444	97,538	\$457,764.06	\$4.69	\$227.86	256.0	\$1,201.48
COUNTY OFFICE REIMBURSEMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
MEP SERVICES	1,297	1,314	4,774	\$233,164.62	\$48.84	\$0.39	3.7	\$179.77
UNASSIGNED	1	0	0	\$344,963.16	\$0.00	\$0.58	.0	\$344,963.16
* A L L C A T E G O R I E S *	253,754	498,142	5,518,163	\$426,220,414.00	\$77.24	\$712.39	21.7	\$1,679.66

*** END OF REPORT ***