

TITLE XIX REPORT OF EXPENDITURES
(BY CATEGORY OF SERVICE)
(FISCAL YTD TOTALS AS OF 10/31/16)

CATEGORY OF SERVICE	RECIPIENTS SERVED	NUMBER OF CLAIMS	UNITS OF SERVICE	TOTAL PAYMENT
INPATIENT	30,415	7,400	42,581	\$57,030,078.86
OUTPATIENT	83,711	67,748	2,342,491	\$15,420,094.05
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	792	841	10,008	\$2,240,797.23
IHAWP IOWA PLAN LITE	148,164	0	3,997-	\$6,138,207.06
IHAWP IOWA PLAN FULL	1	0	1-	\$244.38-
IHAWP HMO	59	91	91	\$32,372.40
IHAWP PCP	1	0	1-	\$4.00-
INTERMEDIATE CARE FACILITY	3,135	3,848	101,340	\$20,897,416.44
INTER CARE MENTAL RETARDA	136	198	5,283	\$2,389,552.88
NURSING FAC FOR MENTAL ILL	36	28	519	\$270,564.40
HOME HEALTH	18,848	8,291	3,029,841	\$10,121,623.00
LEAD INSPECTION AGENCY	0	0	0	\$0.00
PHYSICIAN	75,147	172,849	530,245	\$11,865,385.60
CLINIC SERVICES	17,279	28,834	25,919	\$6,421,570.89
MEP CASE MANAGEMENT	1	0	0	\$1,557,780.61
EHR INCENTIVE PAYMENTS	1	0	0	\$2,795,303.00
LAB AND RADIOLOGICAL	8,231	12,573	22,339	\$512,352.31
HABILITATION SERVICES	780	5,661	29,965	\$1,227,225.36
BEHAVIORAL HLTH INTERVENTN SVC	893	4,631	54,871	\$1,112,544.06
REHAB SUPPORT SERVICES	3	67	67	\$1,544.59
AMBULANCE SERVICES	3,277	3,761	3,567	\$639,231.26
LOCAL EDUCATION AGENCY	2,919	68,281	765,674	\$11,934,898.45
INFANT TODDLER	634	2,314	5,460	\$70,508.88
IHAWP WELLNESS EXAM BONUS	0	0	0	\$0.00
ACO VIS PAYMENTS	33,703	0	0	\$684,310.00
PRESCRIBED DRUGS	23,814	97,550	82,075	\$4,185,935.08
IOWA-PLAN-PMIC	0	0	0	\$0.00
DRUG CAPITATION	0	0	0	\$0.00
NEMT SERVICES	27,904	54,305	54,171	\$115,925.94
INDIAN HEALTH SERVICES	0	0	0	\$0.00
FAMILY PLANNING SERVICES	1,723	2,365	2,520	\$171,123.67
IOWA CARE MED HOME CAPITATION	0	0	0	\$0.00
IOWA PLAN PROGRAM	6	1	13-	\$529.37-
MANAGED SUBSTANCE ABUSE	0	0	0	\$0.00
MENTAL HEALTH ACCESS PLAN	0	0	0	\$0.00
EPSDT SCREENING	17,519	14,541	14,396	\$2,276,228.50
HMO SERVICES	24	2	2-	\$95,885.90
PACE SERVICES	365	1,346	1,339	\$4,547,127.97
PATIENT MANAGEMENT	1	0	2-	\$4.00-
HEALTH INS PREMIUM PAYMENT	3,686	30,829	30,829	\$2,318,285.06
MEDICAL SUPPLIES	14,744	24,636	820,183	\$2,142,882.02
HEALTH HOME PROVIDER	4,919	11,204	11,184	\$1,246,175.89
TCM PAYMENTS TO IOWAPLAN	0	0	0	\$0.00
IHAWP QHP	0	0	0	\$0.00
MCO	0	0	2,275,012	\$1,221,007,338.16
OTHER PRACTITIONER	26,768	60,502	130,497	\$6,027,462.36

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 10/31/16)

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	0	0	0	\$0.00
DENTAL	118,410	176,824	177,125	\$24,969,596.70
ACCOUNTABLE CARE ORGANIZATIONS	0	0	0	\$0.00
OPTOMETRIST	4,173	4,548	5,056	\$257,618.48
CHIROPRACTIC	3,335	7,382	9,532	\$216,021.52
IOWA-PLAN-HAB	0	0	0	\$0.00
PODIATRIC	2,042	2,821	3,616	\$140,278.71
DELTA DENTAL	230,320	551,031	550,553	\$19,172,570.03
PHYSICAL DISABILITIES SVCS	38	67	15,171	\$52,092.03
BRAIN INJ WAIVER SERVICES	357	1,211	62,787	\$1,018,058.12
PSYCHIATRIC	6,637	13,755	16,961	\$970,565.96
RESIDENTIAL CARE FACILITY	981	4,181	117,804	\$955,584.24
ID WAIVER SERVICE	2,106	6,949	454,732	\$9,339,022.32
CHILDRENS MENTAL HEALTH SVC	92	367	52,115	\$193,029.11
AIDS WAIVER SERVICES	2	2	118	\$918.60
ELDERLY WAIVER SERVICES	2,536	1,013	48,433	\$249,662.37
ILL & HANDICAPPED WAIVER SVCS	514	1,901	180,620	\$2,048,381.32
COUNTY OFFICE REIMBURSEMENT	0	0	0	\$0.00
MEP SERVICES	2,425	6,296	24,906	\$1,242,281.91
UNASSIGNED	2	0	0	\$5,281,476.31
* A L L C A T E G O R I E S *	486,468	1,463,045	12,107,980	\$1,463,604,107.86
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