

TITLE XIX REPORT OF EXPENDITURES
(BY CATEGORY OF SERVICE)
(FISCAL YTD TOTALS AS OF 01/31/17)

CATEGORY OF SERVICE	RECIPIENTS SERVED	NUMBER OF CLAIMS	UNITS OF SERVICE	TOTAL PAYMENT
INPATIENT	33,665	11,665	66,680	\$95,396,894.37
OUTPATIENT	321,884	107,796	7,519,902	\$16,858,802.96
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	1,021	1,226	14,819	\$3,157,499.43
IHAWP IOWA PLAN LITE	148,169	0	4,004-	\$6,138,013.41
IHAWP IOWA PLAN FULL	4	0	4-	\$1,148.55-
IHAWP HMO	21,735	91	492-	\$1,779,455.08-
IHAWP PCP	11	0	12-	\$48.00-
INTERMEDIATE CARE FACILITY	4,198	7,166	193,470	\$40,536,128.64
INTER CARE MENTAL RETARDA	209	316	8,583	\$3,802,873.44
NURSING FAC FOR MENTAL ILL	69	32	590	\$589,247.90
HOME HEALTH	19,932	12,955	3,535,126	\$16,297,784.99
LEAD INSPECTION AGENCY	1	0	0	\$33.41-
PHYSICIAN	97,470	271,932	855,611	\$19,016,769.93
CLINIC SERVICES	23,882	41,844	37,489	\$9,437,529.44
MEP CASE MANAGEMENT	1	0	0	\$1,499,980.61
EHR INCENTIVE PAYMENTS	1	0	0	\$5,800,059.00
LAB AND RADIOLOGICAL	11,935	19,972	35,504	\$846,690.37
HABILITATION SERVICES	1,099	8,495	46,871	\$2,242,535.30
BEHAVIORAL HLTH INTERVENTN SVC	1,101	7,211	88,115	\$1,774,353.25
REHAB SUPPORT SERVICES	56	67	1,059-	\$44,802.78-
AMBULANCE SERVICES	4,799	5,917	5,653	\$1,004,978.06
LOCAL EDUCATION AGENCY	4,424	184,386	1,431,171	\$27,932,348.64
INFANT TODDLER	1,100	4,980	11,569	\$153,637.96
IHAWP WELLNESS EXAM BONUS	0	0	0	\$0.00
ACO VIS PAYMENTS	33,703	0	0	\$684,310.00
PRESCRIBED DRUGS	36,372	170,541	142,229	\$7,352,513.32
IOWA-PLAN-PMIC	0	0	0	\$0.00
DRUG CAPITATION	1	0	0	\$17.69-
NEMT SERVICES	40,217	93,039	92,827	\$201,530.76
INDIAN HEALTH SERVICES	0	0	0	\$0.00
FAMILY PLANNING SERVICES	2,743	3,875	4,178	\$297,104.67
IOWA CARE MED HOME CAPITATION	0	0	0	\$0.00
IOWA PLAN PROGRAM	73	1	56-	\$6,476.20-
MANAGED SUBSTANCE ABUSE	0	0	0	\$0.00
MENTAL HEALTH ACCESS PLAN	0	0	0	\$0.00
EPSDT SCREENING	28,256	27,855	27,660	\$3,811,615.93
HMO SERVICES	54,122	213	182	\$1,889,743.22
PACE SERVICES	393	2,384	2,372	\$8,058,119.77
PATIENT MANAGEMENT	28	0	2-	\$4.00-
HEALTH INS PREMIUM PAYMENT	3,869	54,456	54,456	\$4,150,295.79
MEDICAL SUPPLIES	18,255	38,639	1,365,928	\$3,286,510.04
HEALTH HOME PROVIDER	5,893	13,716	13,672	\$1,476,828.64
TCM PAYMENTS TO IOWAPLAN	0	0	0	\$0.00
IHAWP QHP	1	0	0	\$0.00
MCO	652,206	4,003,209	3,999,471	\$2,153,204,300.12
OTHER PRACTITIONER	38,572	98,012	204,813	\$8,987,111.20

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 01/31/17)

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	172,773	298,435	299,020	\$42,618,725.80
ACCOUNTABLE CARE ORGANIZATIONS	7	0	5-	\$20.00-
OPTOMETRIST	6,352	7,128	7,951	\$418,627.05
CHIROPRACTIC	4,297	11,182	14,323	\$320,337.74
IOWA-PLAN-HAB	0	0	0	\$0.00
PODIATRIC	2,855	4,498	5,753	\$224,121.62
DELTA DENTAL	246,926	971,547	970,939	\$31,603,981.24
PHYSICAL DISABILITIES SVCS	45	101	21,921	\$73,592.76
BRAIN INJ WAIVER SERVICES	718	2,019	97,750	\$1,563,134.87
PSYCHIATRIC	9,763	22,323	28,036	\$1,739,298.97
RESIDENTIAL CARE FACILITY	1,066	6,516	184,376	\$1,496,787.56
ID WAIVER SERVICE	2,281	11,501	732,436	\$14,755,404.15
CHILDRENS MENTAL HEALTH SVC	121	615	87,268	\$324,233.65
AIDS WAIVER SERVICES	3	3	199	\$1,343.85
ELDERLY WAIVER SERVICES	6,764	2,394	46,429	\$247,606.85
ILL & HANDICAPPED WAIVER SVCS	551	3,314	294,004	\$3,471,323.33
COUNTY OFFICE REIMBURSEMENT	0	0	0	\$0.00
MEP SERVICES	10,012	11,233	40,755	\$1,034,517.80
UNASSIGNED	2	0	0	\$4,986,467.52
* A L L C A T E G O R I E S *	772,193	6,544,800	22,584,467	\$2,548,933,610.21
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