

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 03/31/17)

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	1,768	1,707	9,626	\$15,710,701.29	\$1,632.11	\$25.91	5.4	\$8,886.14
OUTPATIENT	11,616	13,592	225,110	\$6,326,528.53	\$28.10	\$10.43	19.4	\$544.64
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	104	127	1,946	\$224,745.57	\$115.49	\$0.37	18.7	\$2,161.02
IHAWP IOWA PLAN LITE	1	0	6-	\$223.56-	\$37.26	\$0.00	6.0-	\$223.56-
IHAWP IOWA PLAN FULL	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
IHAWP HMO	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
IHAWP PCP	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
INTERMEDIATE CARE FACILITY	872	1,068	27,736	\$5,081,889.85	\$183.22	\$8.38	31.8	\$5,827.86
INTER CARE MENTAL RETARDA	41	51	1,202	\$617,183.97	\$513.46	\$1.02	29.3	\$15,053.27
NURSING FAC FOR MENTAL ILL	2	2	34	\$6,721.25	\$197.68	\$0.02	17.0	\$3,360.63
HOME HEALTH	1,100	1,190	230,123	\$1,912,902.39	\$8.31	\$3.15	209.2	\$1,739.00
LEAD INSPECTION AGENCY	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
PHYSICIAN	13,996	29,990	73,935	\$2,130,852.19	\$28.82	\$3.51	5.3	\$152.25
CLINIC SERVICES	2,747	3,685	3,593	\$1,949,962.50	\$542.71	\$3.22	1.3	\$709.85
MEP CASE MANAGEMENT	1	0	0	\$47,287.78-	\$0.00	\$0.08-	.0	\$47,287.78-
EHR INCENTIVE PAYMENTS	1	0	0	\$872,667.00	\$0.00	\$1.44	.0	\$872,667.00
LAB AND RADIOLOGICAL	1,658	2,408	4,258	\$108,186.08	\$25.41	\$0.18	2.6	\$65.25
HABILITATION SERVICES	48	155	3,000	\$154,945.16	\$51.65	\$0.26	62.5	\$3,228.02
BEHAVIORAL HLTH INTERVENTN SVC	326	1,147	11,170	\$247,990.83	\$22.20	\$0.41	34.3	\$760.71
REHAB SUPPORT SERVICES	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
AMBULANCE SERVICES	549	627	617	\$103,047.97	\$167.01	\$0.17	1.1	\$187.70
LOCAL EDUCATION AGENCY	2,406	42,376	670,063	\$8,307,368.01	\$12.40	\$13.70	278.5	\$3,452.77
INFANT TODDLER	280	535	1,176	\$15,587.53	\$13.25	\$0.03	4.2	\$55.67
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	6,858	23,468	19,613	\$1,073,891.11	\$54.75	\$4.47	2.9	\$156.59
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	12,190	12,699	12,677	\$30,555.35	\$2.41	\$0.05	1.0	\$2.51
INDIAN HEALTH SERVICES	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
FAMILY PLANNING SERVICES	420	508	511	\$47,763.61	\$93.47	\$0.08	1.2	\$113.72
IOWA CARE MED HOME CAPITATION	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
IOWA PLAN PROGRAM	2	0	8-	\$169.56-	\$21.20	\$0.00	4.0-	\$84.78-
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	5,096	5,117	5,094	\$506,663.80	\$99.46	\$5.18	1.0	\$99.42
HMO SERVICES	1	0	4-	\$2,541.75-	\$635.44	\$0.72-	4.0-	\$2,541.75-
PACE SERVICES	356	356	356	\$1,215,429.67	\$3,414.13	\$2.00	1.0	\$3,414.13
PATIENT MANAGEMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
HEALTH INS PREMIUM PAYMENT	3,245	7,631	7,631	\$638,983.32	\$83.74	\$1.05	2.4	\$196.91
MEDICAL SUPPLIES	2,559	4,111	182,643	\$418,301.37	\$2.29	\$1.74	71.4	\$163.46
HEALTH HOME PROVIDER	215	243	241	\$27,518.28	\$114.18	\$0.05	1.1	\$127.99
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	552,800	574,738	573,809	\$308,435,635.35	\$537.52	\$508.64	1.0	\$557.95

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OTHER PRACTITIONER	6,266	31,890	47,593	\$2,688,988.12	\$56.50	\$4.43	7.6	\$429.14
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	33,912	40,198	40,298	\$5,828,400.52	\$144.63	\$24.28	1.2	\$171.87
ACCOUNTABLE CARE ORGANIZATIONS	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
OPTOMETRIST	697	791	904	\$49,897.51	\$55.20	\$0.08	1.3	\$71.59
CHIROPRACTIC	582	1,074	1,335	\$30,914.74	\$23.16	\$0.13	2.3	\$53.12
IOWA-PLAN-HAB	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
PODIATRIC	303	366	566	\$20,390.34	\$36.03	\$0.03	1.9	\$67.29
DELTA DENTAL	139,577	141,930	141,894	\$3,802,764.38	\$26.80	\$6.27	1.0	\$27.24
PHYSICAL DISABILITIES SVCS	3	8	1,962	\$6,678.24	\$3.40	\$0.01	654.0	\$2,226.08
BRAIN INJ WAIVER SERVICES	184	346	11,219	\$258,540.97	\$23.04	\$0.43	61.0	\$1,405.11
PSYCHIATRIC	3,907	3,005	4,258	\$386,593.21	\$90.79	\$0.64	1.1	\$98.95
RESIDENTIAL CARE FACILITY	701	854	23,129	\$139,081.23	\$6.01	\$0.23	33.0	\$198.40
ID WAIVER SERVICE	2,122	1,352	70,494	\$1,228,734.39-	\$17.43-	\$103.26-	33.2	\$579.05-
CHILDRENS MENTAL HEALTH SVC	52	67	9,612	\$39,368.40	\$4.10	\$36.86	184.8	\$757.08
AIDS WAIVER SERVICES	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
ELDERLY WAIVER SERVICES	1,681	46	1,101	\$80,018.34-	\$72.68-	\$9.88-	.7	\$47.60-
ILL & HANDICAPPED WAIVER SVCS	323	413	27,463	\$448,126.08	\$16.32	\$199.43	85.0	\$1,387.39
COUNTY OFFICE REIMBURSEMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
MEP SERVICES	1,085	1,530	5,748	\$321,494.92	\$55.93	\$0.53	5.3	\$296.31
UNASSIGNED	1	0	0	\$579,642.61	\$0.00	\$0.96	.0	\$579,642.61
* A L L C A T E G O R I E S *	582,442	951,401	2,453,722	\$369,407,927.87	\$150.55	\$609.19	4.2	\$634.24

*** END OF REPORT ***