

TITLE XIX REPORT OF EXPENDITURES
(BY CATEGORY OF SERVICE)
(FISCAL YTD TOTALS AS OF 03/31/17)

CATEGORY OF SERVICE	RECIPIENTS SERVED	NUMBER OF CLAIMS	UNITS OF SERVICE	TOTAL PAYMENT
INPATIENT	35,901	14,756	84,137	\$123,229,838.74
OUTPATIENT	328,538	134,171	8,070,789	\$29,774,264.60
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	1,144	1,481	18,406	\$3,676,002.35
IHAWP IOWA PLAN LITE	148,169	0	4,024-	\$6,137,610.73
IHAWP IOWA PLAN FULL	4	0	4-	\$1,148.55-
IHAWP HMO	21,735	91	492-	\$1,779,455.08-
IHAWP PCP	12	0	24-	\$87.00-
INTERMEDIATE CARE FACILITY	4,869	9,280	249,617	\$51,342,910.05
INTER CARE MENTAL RETARDA	221	418	11,253	\$4,980,633.86
NURSING FAC FOR MENTAL ILL	72	37	669	\$605,256.98
HOME HEALTH	20,508	15,412	3,874,423	\$19,795,386.49
LEAD INSPECTION AGENCY	1	0	0	\$0.00
PHYSICIAN	109,000	332,895	1,103,803	\$48,334,129.20
CLINIC SERVICES	27,403	49,640	44,617	\$15,308,780.06
MEP CASE MANAGEMENT	1	0	0	\$1,468,464.99
EHR INCENTIVE PAYMENTS	1	0	0	\$7,008,476.00
LAB AND RADIOLOGICAL	14,123	24,761	43,794	\$1,053,510.18
HABILITATION SERVICES	1,137	8,863	51,643	\$2,489,797.89
BEHAVIORAL HLTH INTERVENTN SVC	1,339	9,637	110,478	\$2,259,598.56
REHAB SUPPORT SERVICES	56	67	1,059-	\$44,802.78-
AMBULANCE SERVICES	5,645	7,184	6,882	\$1,208,041.82
LOCAL EDUCATION AGENCY	5,137	259,860	3,151,449	\$47,275,523.60
INFANT TODDLER	1,197	6,229	14,320	\$189,237.49
IHAWP WELLNESS EXAM BONUS	0	0	0	\$0.00
ACO VIS PAYMENTS	33,703	0	0	\$684,310.00
PRESCRIBED DRUGS	43,079	219,592	183,348	\$9,209,584.00
IOWA-PLAN-PMIC	0	0	0	\$0.00
DRUG CAPITATION	1	0	0	\$17.69-
NEMT SERVICES	47,861	118,607	118,341	\$263,027.87
INDIAN HEALTH SERVICES	0	0	0	\$0.00
FAMILY PLANNING SERVICES	3,369	4,835	5,139	\$379,023.17
IOWA CARE MED HOME CAPITATION	0	0	0	\$0.00
IOWA PLAN PROGRAM	75	1	64-	\$6,645.76-
MANAGED SUBSTANCE ABUSE	0	0	0	\$0.00
MENTAL HEALTH ACCESS PLAN	0	0	0	\$0.00
EPSDT SCREENING	34,180	37,427	37,189	\$4,939,568.79
HMO SERVICES	54,122	213	178	\$1,887,201.47
PACE SERVICES	412	3,092	3,080	\$10,493,584.35
PATIENT MANAGEMENT	28	0	2-	\$4.00-
HEALTH INS PREMIUM PAYMENT	4,050	69,377	69,377	\$5,347,485.61
MEDICAL SUPPLIES	19,986	47,184	1,767,733	\$4,180,859.00
HEALTH HOME PROVIDER	6,058	14,502	14,450	\$1,563,035.42
TCM PAYMENTS TO IOWAPLAN	0	0	0	\$0.00
IHAWP QHP	2	0	0	\$16,757,928.51
MCO	678,043	5,153,545	5,148,145	\$2,770,837,331.00
OTHER PRACTITIONER	44,885	144,151	305,699	\$14,597,964.46

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 03/31/17)

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	194,086	378,439	379,171	\$54,249,224.76
ACCOUNTABLE CARE ORGANIZATIONS	8	0	17-	\$68.00-
OPTOMETRIST	7,486	8,673	9,691	\$516,964.52
CHIROPRACTIC	4,772	13,277	17,029	\$386,119.07
IOWA-PLAN-HAB	0	0	0	\$0.00
PODIATRIC	3,165	5,262	6,873	\$270,089.59
DELTA DENTAL	259,197	1,254,721	1,253,945	\$39,188,597.06
PHYSICAL DISABILITIES SVCS	46	117	26,103	\$87,544.84
BRAIN INJ WAIVER SERVICES	774	2,607	120,638	\$1,971,767.83
PSYCHIATRIC	13,204	27,580	35,132	\$2,311,292.81
RESIDENTIAL CARE FACILITY	1,126	8,094	227,899	\$1,800,753.07
ID WAIVER SERVICE	3,578	14,338	927,856	\$15,422,065.30
CHILDRENS MENTAL HEALTH SVC	136	759	107,103	\$402,524.75
AIDS WAIVER SERVICES	3	3	199	\$1,343.85
ELDERLY WAIVER SERVICES	7,892	2,532	48,125	\$48,935.09
ILL & HANDICAPPED WAIVER SVCS	572	4,160	352,503	\$4,350,472.32
COUNTY OFFICE REIMBURSEMENT	0	0	0	\$0.00
MEP SERVICES	10,396	13,677	48,819	\$1,432,079.09
UNASSIGNED	2	0	0	\$4,162,378.77
* A L L C A T E G O R I E S *	795,960	8,421,547	28,044,359	\$3,332,048,291.10
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