

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 03/31/18)

| 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                      | 2,194             | 2,001            | 10,904           | \$14,287,165.19  | \$1,310.27                          | \$23.46                     | 5.0                        | \$6,511.93                |
| OUTPATIENT                     | 15,223            | 18,646           | 1,061,006        | \$5,202,113.66   | \$4.90                              | \$8.54                      | 69.7                       | \$341.73                  |
| 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       | 154               | 138              | 1,203            | \$455,805.51     | \$378.89                            | \$0.75                      | 7.8                        | \$2,959.78                |
| IHAWP IOWA PLAN LITE           | 0                 | 0                | 0                | \$0.00           | \$0.00                              | \$0.00                      | .0                         | \$0.00                    |
| 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                      | 1                 | 0                | 1-               | \$3.00-          | \$3.00                              | \$0.00                      | 1.0-                       | \$3.00-                   |
| INTERMEDIATE CARE FACILITY     | 1,241             | 1,228            | 32,202           | \$5,658,882.49   | \$175.73                            | \$9.29                      | 25.9                       | \$4,559.94                |
| INTER CARE MENTAL RETARDA      | 246               | 263              | 6,970            | \$2,474,388.94   | \$355.01                            | \$4.06                      | 28.3                       | \$10,058.49               |
| NURSING FAC FOR MENTAL ILL     | 1                 | 1                | 28               | \$4,861.36       | \$173.62                            | \$0.01                      | 28.0                       | \$4,861.36                |
| HOME HEALTH                    | 1,743             | 2,490            | 443,520          | \$2,842,415.15   | \$6.41                              | \$4.67                      | 254.5                      | \$1,630.76                |
| LEAD INSPECTION AGENCY         | 0                 | 0                | 0                | \$0.00           | \$0.00                              | \$0.00                      | .0                         | \$0.00                    |
| PHYSICIAN                      | 17,501            | 37,853           | 73,202           | \$2,472,733.02   | \$33.78                             | \$4.06                      | 4.2                        | \$141.29                  |
| CLINIC SERVICES                | 3,443             | 4,656            | 4,408            | \$2,696,979.33   | \$611.84                            | \$4.43                      | 1.3                        | \$783.32                  |
| MEP CASE MANAGEMENT            | 1                 | 0                | 0                | \$9,750.42       | \$0.00                              | \$0.02                      | .0                         | \$9,750.42                |
| EHR INCENTIVE PAYMENTS         | 1                 | 0                | 0                | \$378,558.06     | \$0.00                              | \$0.62                      | .0                         | \$378,558.06              |
| LAB AND RADIOLOGICAL           | 2,181             | 3,051            | 7,327            | \$131,260.27     | \$17.91                             | \$0.22                      | 3.4                        | \$60.18                   |
| HABILITATION SERVICES          | 370               | 1,111            | 14,640           | \$1,045,703.68   | \$71.43                             | \$1.72                      | 39.6                       | \$2,826.23                |
| BEHAVIORAL HLTH INTERVENTN SVC | 352               | 1,376            | 12,881           | \$265,678.14     | \$20.63                             | \$0.44                      | 36.6                       | \$754.77                  |
| REHAB SUPPORT SERVICES         | 1                 | 0                | 0                | \$21.00-         | \$0.00                              | \$0.00                      | .0                         | \$21.00-                  |
| AMBULANCE SERVICES             | 685               | 791              | 774              | \$82,908.91      | \$107.12                            | \$0.14                      | 1.1                        | \$121.03                  |
| LOCAL EDUCATION AGENCY         | 2,906             | 50,668           | 570,756          | \$8,383,522.02   | \$14.69                             | \$13.77                     | 196.4                      | \$2,884.90                |
| INFANT TODDLER                 | 323               | 664              | 1,406            | \$18,737.59      | \$13.33                             | \$0.03                      | 4.4                        | \$58.01                   |
| 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               | 9,823             | 31,407           | 25,964           | \$1,476,886.32   | \$56.88                             | \$10.23                     | 2.6                        | \$150.35                  |
| 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                  | 15,912            | 17,456           | 16,303           | \$39,276.65      | \$2.41                              | \$0.06                      | 1.0                        | \$2.47                    |
| INDIAN HEALTH SERVICES         | 0                 | 0                | 0                | \$0.00           | \$0.00                              | \$0.00                      | .0                         | \$0.00                    |
| FAMILY PLANNING SERVICES       | 347               | 424              | 429              | \$27,592.01      | \$64.32                             | \$0.05                      | 1.2                        | \$79.52                   |
| IOWA CARE MED HOME CAPITATION  | 0                 | 0                | 0                | \$0.00           | \$0.00                              | \$0.00                      | .0                         | \$0.00                    |
| IOWA PLAN PROGRAM              | 0                 | 0                | 0                | \$0.00           | \$0.00                              | \$0.00                      | .0                         | \$0.00                    |
| 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                | 5,637             | 5,796            | 5,761            | \$670,259.89     | \$116.34                            | \$13.06                     | 1.0                        | \$118.90                  |
| HMO SERVICES                   | 0                 | 0                | 0                | \$0.00           | \$0.00                              | \$0.00                      | .0                         | \$0.00                    |
| PACE SERVICES                  | 442               | 445              | 442              | \$1,641,566.24   | \$3,713.95                          | \$2.70                      | 1.0                        | \$3,713.95                |
| PATIENT MANAGEMENT             | 0                 | 0                | 0                | \$0.00           | \$0.00                              | \$0.00                      | .0                         | \$0.00                    |
| HEALTH INS PREMIUM PAYMENT     | 2,736             | 6,431            | 6,431            | \$611,365.99     | \$95.07                             | \$1.00                      | 2.4                        | \$223.45                  |
| MEDICAL SUPPLIES               | 2,960             | 4,794            | 209,223          | \$412,071.41     | \$1.97                              | \$2.85                      | 70.7                       | \$139.21                  |
| HEALTH HOME PROVIDER           | 1,197             | 1,363            | 1,359            | \$243,170.66     | \$178.93                            | \$0.40                      | 1.1                        | \$203.15                  |
| 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                            | 744,100           | 565,462          | 562,766          | \$392,614,998.04 | \$697.65                            | \$644.71                    | .8                         | \$527.64                  |

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(BY CATEGORY OF SERVICE)  
(MONTHLY TOTALS AS OF 03/31/18)

| CATEGORY OF SERVICE            | RECIPIENTS<br>SERVED | NUMBER OF<br>CLAIMS | UNITS OF<br>SERVICE | TOTAL<br>PAYMENT | * * * * * A V E R A G E S * * * * * |                                   |                                  |                                 |
|--------------------------------|----------------------|---------------------|---------------------|------------------|-------------------------------------|-----------------------------------|----------------------------------|---------------------------------|
|                                |                      |                     |                     |                  | COST PER<br>UNIT OF<br>SERVICE      | COST PER<br>ELIGIBLE<br>RECIPIENT | UNITS PER<br>RECIPIENT<br>SERVED | COST PER<br>RECIPIENT<br>SERVED |
| OTHER PRACTITIONER             | 8,668                | 24,583              | 47,488              | \$5,280,139.99   | \$111.19                            | \$8.67                            | 5.5                              | \$609.15                        |
| 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                         | 22,877               | 26,198              | 26,234              | \$3,805,050.91   | \$145.04                            | \$26.35                           | 1.1                              | \$166.33                        |
| ACCOUNTABLE CARE ORGANIZATIONS | 0                    | 0                   | 0                   | \$0.00           | \$0.00                              | \$0.00                            | .0                               | \$0.00                          |
| OPTOMETRIST                    | 972                  | 1,095               | 1,204               | \$69,589.74      | \$57.80                             | \$0.11                            | 1.2                              | \$71.59                         |
| CHIROPRACTIC                   | 796                  | 1,400               | 1,751               | \$42,001.72      | \$23.99                             | \$0.29                            | 2.2                              | \$52.77                         |
| IOWA-PLAN-HAB                  | 0                    | 0                   | 0                   | \$0.00           | \$0.00                              | \$0.00                            | .0                               | \$0.00                          |
| PODIATRIC                      | 380                  | 465                 | 601                 | \$25,930.02      | \$43.14                             | \$0.04                            | 1.6                              | \$68.24                         |
| DELTA DENTAL                   | 298,697              | 301,754             | 298,952             | \$5,057,595.46   | \$16.92                             | \$8.30                            | 1.0                              | \$16.93                         |
| PHYSICAL DISABILITIES SVCS     | 23                   | 32                  | 4,074               | \$15,705.72      | \$3.86                              | \$0.03                            | 177.1                            | \$682.86                        |
| BRAIN INJ WAIVER SERVICES      | 257                  | 448                 | 28,991              | \$313,159.29     | \$10.80                             | \$0.51                            | 112.8                            | \$1,218.52                      |
| PSYCHIATRIC                    | 1,956                | 3,320               | 4,443               | \$277,611.83     | \$62.48                             | \$0.46                            | 2.3                              | \$141.93                        |
| RESIDENTIAL CARE FACILITY      | 568                  | 625                 | 16,252              | \$100,537.00     | \$6.19                              | \$0.17                            | 28.6                             | \$177.00                        |
| ID WAIVER SERVICE              | 1,836                | 3,357               | 212,224             | \$6,179,698.58   | \$29.12                             | \$521.01                          | 115.6                            | \$3,365.85                      |
| CHILDRENS MENTAL HEALTH SVC    | 78                   | 137                 | 20,895              | \$85,734.28      | \$4.10                              | \$92.19                           | 267.9                            | \$1,099.16                      |
| AIDS WAIVER SERVICES           | 6                    | 2                   | 27                  | \$195.95         | \$7.26                              | \$6.32                            | 4.5                              | \$32.66                         |
| ELDERLY WAIVER SERVICES        | 1,588                | 780                 | 50,822              | \$275,034.40     | \$5.41                              | \$33.88                           | 32.0                             | \$173.20                        |
| ILL & HANDICAPPED WAIVER SVCS  | 536                  | 516                 | 44,579              | \$501,991.34     | \$11.26                             | \$233.59                          | 83.2                             | \$936.55                        |
| COUNTY OFFICE REIMBURSEMENT    | 0                    | 0                   | 0                   | \$0.00           | \$0.00                              | \$0.00                            | .0                               | \$0.00                          |
| MEP SERVICES                   | 1,938                | 2,359               | 10,875              | \$591,476.57     | \$54.39                             | \$0.97                            | 5.6                              | \$305.20                        |
| UNASSIGNED                     | 1                    | 0                   | 0                   | \$15,249,789.93- | \$0.00                              | \$25.04-                          | .0                               | \$0.00                          |
| * A L L C A T E G O R I E S *  | 766,835              | 1,125,586           | 3,839,316           | \$451,520,289.82 | \$117.60                            | \$741.43                          | 5.0                              | \$588.81                        |

\*\*\* END OF REPORT \*\*\*