

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 08/31/18)

CATEGORY OF SERVICE					* * * * * A V E R A G E S * * * * *			
	RECIPIENTS SERVED	NUMBER OF CLAIMS	UNITS OF SERVICE	TOTAL PAYMENT	COST PER UNIT OF SERVICE	COST PER ELIGIBLE RECIPIENT	UNITS PER RECIPIENT SERVED	COST PER RECIPIENT SERVED
INPATIENT	1,420	1,293	7,791	\$13,140,995.07	\$1,686.69	\$21.36	5.5	\$9,254.22
OUTPATIENT	8,938	12,017	1,073,366	\$3,075,800.27	\$2.87	\$5.00	120.1	\$344.13
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	89	102	1,429	\$171,531.72	\$120.04	\$0.28	16.1	\$1,927.32
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	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
INTERMEDIATE CARE FACILITY	700	829	23,358	\$5,114,904.95	\$218.98	\$8.31	33.4	\$7,307.01
INTER CARE MENTAL RETARDA	33	53	1,501	\$600,334.81	\$399.96	\$0.98	45.5	\$18,191.96
NURSING FAC FOR MENTAL ILL	4	0	8-	\$2,079.40-	\$259.93	\$0.01-	2.0-	\$519.85-
HOME HEALTH	917	1,208	212,844	\$2,336,544.05	\$10.98	\$3.80	232.1	\$2,548.03
LEAD INSPECTION AGENCY	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
PHYSICIAN	12,788	28,177	63,570	\$1,805,353.44	\$28.40	\$2.93	5.0	\$141.18
CLINIC SERVICES	2,786	3,883	3,696	\$3,997,207.17	\$1,081.50	\$6.50	1.3	\$1,434.75
MEP CASE MANAGEMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
EHR INCENTIVE PAYMENTS	1	0	0	\$64,180.22-	\$0.00	\$0.10-	.0	\$64,180.22-
LAB AND RADIOLOGICAL	1,397	2,110	5,179	\$91,025.98	\$17.58	\$0.15	3.7	\$65.16
HABILITATION SERVICES	54	142	1,630	\$81,136.17	\$49.78	\$0.13	30.2	\$1,502.52
BEHAVIORAL HLTH INTERVENTN SVC	156	495	5,172	\$125,309.51	\$24.23	\$0.20	33.2	\$803.27
REHAB SUPPORT SERVICES	2	3	15	\$766.05	\$51.07	\$0.00	7.5	\$383.03
AMBULANCE SERVICES	678	925	921	\$119,133.54	\$129.35	\$0.19	1.4	\$175.71
LOCAL EDUCATION AGENCY	478	4,080	206,585	\$2,495,561.34	\$12.08	\$4.06	432.2	\$5,220.84
INFANT TODDLER	52	96	201	\$1,963.57	\$9.77	\$0.00	3.9	\$37.76
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	10,297	28,626	19,065	\$1,126,454.53	\$59.08	\$15.59	1.9	\$109.40
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	14,886	16,159	16,158	\$38,940.65	\$2.41	\$0.06	1.1	\$2.62
INDIAN HEALTH SERVICES	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
FAMILY PLANNING SERVICES	206	235	237	\$12,382.54	\$52.25	\$0.02	1.2	\$60.11
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	2,520	2,558	2,555	\$407,401.22	\$159.45	\$16.92	1.0	\$161.67
HMO SERVICES	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
PACE SERVICES	484	483	483	\$1,817,402.10	\$3,762.74	\$2.95	1.0	\$3,754.96
PATIENT MANAGEMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
HEALTH INS PREMIUM PAYMENT	2,594	5,955	5,955	\$561,738.98	\$94.33	\$0.91	2.3	\$216.55
MEDICAL SUPPLIES	1,920	3,046	129,283	\$237,918.23	\$1.84	\$3.29	67.3	\$123.92
HEALTH HOME PROVIDER	350	481	481	\$67,570.59	\$140.48	\$0.11	1.4	\$193.06
TCH 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	706,020	571,679	570,707	\$405,985,050.22	\$711.37	\$659.96	.8	\$575.03

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					COST PER UNIT OF SERVICE	COST PER ELIGIBLE RECIPIENT	UNITS PER RECIPIENT SERVED	COST PER RECIPIENT SERVED
OTHER PRACTITIONER	3,870	7,584	26,901	\$1,023,983.43	\$38.06	\$1.66	7.0	\$264.60
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	24,301	27,653	27,697	\$3,918,114.07	\$141.46	\$54.21	1.1	\$161.23
ACCOUNTABLE CARE ORGANIZATIONS	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
OPTOMETRIST	683	768	852	\$49,096.33	\$57.62	\$0.08	1.2	\$71.88
CHIROPRACTIC	467	867	1,076	\$20,076.88	\$18.66	\$0.28	2.3	\$42.99
IOWA-PLAN-HAB	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
PODIATRIC	278	361	495	\$18,568.01	\$37.51	\$0.03	1.8	\$66.79
DELTA DENTAL	306,103	309,413	309,356	\$5,253,590.35	\$16.98	\$8.54	1.0	\$17.16
PHYSICAL DISABILITIES SVCS	7	13	3,274	\$10,018.47	\$3.06	\$0.02	467.7	\$1,431.21
BRAIN INJ WAIVER SERVICES	151	289	17,932	\$319,918.69	\$17.84	\$0.52	118.8	\$2,118.67
PSYCHIATRIC	1,229	2,041	2,520	\$153,909.92	\$61.08	\$0.25	2.1	\$125.23
RESIDENTIAL CARE FACILITY	531	593	16,958	\$138,949.09	\$8.19	\$0.23	31.9	\$261.67
ID WAIVER SERVICE	751	1,362	109,997	\$1,689,099.08	\$15.36	\$138.96	146.5	\$2,249.13
CHILDRENS MENTAL HEALTH SVC	50	96	19,755	\$74,569.33	\$3.77	\$69.11	395.1	\$1,491.39
AIDS WAIVER SERVICES	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
ELDERLY WAIVER SERVICES	96	156	1,709	\$28,737.62	\$16.82	\$3.57	17.8	\$299.35
ILL & HANDICAPPED WAIVER SVCS	341	418	31,374	\$509,353.68	\$16.23	\$219.27	92.0	\$1,493.71
COUNTY OFFICE REIMBURSEMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
MEP SERVICES	581	736	6,193	\$425,584.53	\$68.72	\$0.69	10.7	\$732.50
UNASSIGNED	1	0	0	\$460,390.87-	\$0.00	\$0.75-	.0	\$460,390.87-
* A L L C A T E G O R I E S *	728,942	1,036,985	2,928,263	\$456,519,345.69	\$155.90	\$742.11	4.0	\$626.28

*** END OF REPORT ***