

TITLE XIX REPORT OF EXPENDITURES
(BY CATEGORY OF SERVICE)
(FISCAL YTD TOTALS AS OF 12/31/18)

| CATEGORY OF SERVICE | RECIPIENTS SERVED | NUMBER OF CLAIMS | UNITS OF SERVICE | TOTAL PAYMENT |
|--------------------------------|-------------------|------------------|------------------|--------------------|
| INPATIENT | 7,403 | 8,520 | 51,171 | \$88,593,616.98 |
| OUTPATIENT | 50,533 | 80,317 | 8,729,890 | \$20,038,792.33 |
| CHILD PART HOSP | 1 | 0 | 0 | \$18.07- |
| 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 | 417 | 783 | 10,637 | \$1,989,913.72 |
| IHAWP IOWA PLAN LITE | 0 | 0 | 0 | \$0.00 |
| IHAWP IOWA PLAN FULL | 0 | 0 | 0 | \$0.00 |
| IHAWP HMO | 0 | 0 | 0 | \$0.00 |
| IHAWP PCP | 0 | 0 | 0 | \$0.00 |
| INTERMEDIATE CARE FACILITY | 2,264 | 5,389 | 148,741 | \$31,315,582.01 |
| INTER CARE MENTAL RETARDA | 52 | 247 | 6,891 | \$2,768,805.34 |
| NURSING FAC FOR MENTAL ILL | 9 | 15 | 395 | \$69,794.77 |
| HOME HEALTH | 3,002 | 7,900 | 1,262,434 | \$11,857,180.52 |
| LEAD INSPECTION AGENCY | 0 | 0 | 0 | \$0.00 |
| PHYSICIAN | 47,963 | 185,990 | 393,558 | \$21,699,746.06 |
| CLINIC SERVICES | 14,823 | 27,439 | 28,260 | \$19,153,162.55 |
| MEP CASE MANAGEMENT | 0 | 0 | 0 | \$0.00 |
| EHR INCENTIVE PAYMENTS | 1 | 0 | 0 | \$383,394.30 |
| LAB AND RADIOLOGICAL | 7,555 | 14,241 | 33,414 | \$580,020.90 |
| HABILITATION SERVICES | 205 | 2,246 | 12,447 | \$921,786.17 |
| BEHAVIORAL HLTH INTERVENTN SVC | 377 | 3,862 | 51,969 | \$1,020,988.10 |
| REHAB SUPPORT SERVICES | 4 | 11 | 55 | \$2,925.67 |
| AMBULANCE SERVICES | 3,155 | 4,534 | 4,482 | \$551,421.47 |
| LOCAL EDUCATION AGENCY | 4,542 | 185,902 | 1,966,469 | \$29,012,725.47 |
| INFANT TODDLER | 275 | 879 | 2,198 | \$24,569.39 |
| IHAWP WELLNESS EXAM BONUS | 0 | 0 | 0 | \$0.00 |
| ACO VIS PAYMENTS | 0 | 0 | 0 | \$0.00 |
| PRESCRIBED DRUGS | 27,537 | 163,709 | 129,616 | \$7,649,186.87 |
| IOWA-PLAN-PMIC | 0 | 0 | 0 | \$0.00 |
| DRUG CAPITATION | 0 | 0 | 0 | \$0.00 |
| NEMT SERVICES | 60,225 | 96,353 | 94,056 | \$238,934.79 |
| INDIAN HEALTH SERVICES | 0 | 0 | 0 | \$0.00 |
| FAMILY PLANNING SERVICES | 1,066 | 1,926 | 1,925 | \$129,907.26 |
| IOWA CARE MED HOME CAPITATION | 0 | 0 | 0 | \$0.00 |
| IOWA PLAN PROGRAM | 0 | 0 | 0 | \$0.00 |
| MANAGED SUBSTANCE ABUSE | 0 | 0 | 0 | \$0.00 |
| MENTAL HEALTH ACCESS PLAN | 0 | 0 | 0 | \$0.00 |
| EPSDT SCREENING | 19,325 | 21,705 | 21,605 | \$2,893,153.85 |
| HMO SERVICES | 0 | 0 | 0 | \$0.00 |
| PACE SERVICES | 562 | 2,984 | 2,976 | \$10,187,074.61 |
| PATIENT MANAGEMENT | 1 | 0 | 0 | \$68.36- |
| HEALTH INS PREMIUM PAYMENT | 2,866 | 34,894 | 34,894 | \$3,230,034.81 |
| MEDICAL SUPPLIES | 6,724 | 21,676 | 905,821 | \$1,639,282.73 |
| HEALTH HOME PROVIDER | 718 | 2,559 | 2,530 | \$331,250.34 |
| TCM PAYMENTS TO IOWAPLAN | 0 | 0 | 0 | \$0.00 |
| IHAWP QHP | 0 | 0 | 0 | \$0.00 |
| MCO | 786,296 | 3,443,231 | 3,430,960 | \$2,520,503,373.24 |
| OTHER PRACTITIONER | 18,844 | 95,872 | 217,268 | \$10,914,561.84 |

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 12/31/18)

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|--------------------------------|----------------------|-----------------------|---------------------|--------------------|
| 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 | 117,023 | 169,039 | 169,379 | \$24,343,915.76 |
| ACCOUNTABLE CARE ORGANIZATIONS | 0 | 0 | 0 | \$0.00 |
| OPTOMETRIST | 3,880 | 4,860 | 5,413 | \$300,061.32 |
| CHIROPRACTIC | 1,742 | 6,105 | 7,447 | \$143,386.45 |
| IOWA-PLAN-HAB | 0 | 0 | 0 | \$0.00 |
| PODIATRIC | 1,147 | 2,152 | 3,108 | \$95,643.89 |
| DELTA DENTAL | 347,668 | 1,864,510 | 1,859,247 | \$31,008,982.28 |
| PHYSICAL DISABILITIES SVCS | 14 | 77 | 14,595 | \$49,247.57 |
| BRAIN INJ WAIVER SERVICES | 217 | 2,099 | 175,113 | \$1,983,704.38 |
| PSYCHIATRIC | 5,137 | 13,940 | 17,429 | \$1,074,033.71 |
| RESIDENTIAL CARE FACILITY | 708 | 3,593 | 100,636 | \$789,865.01 |
| ID WAIVER SERVICE | 1,026 | 8,580 | 569,018 | \$11,474,429.46 |
| CHILDRENS MENTAL HEALTH SVC | 67 | 426 | 73,821 | \$292,165.29 |
| AIDS WAIVER SERVICES | 1 | 0 | 0 | \$0.00 |
| ELDERLY WAIVER SERVICES | 542 | 1,353 | 36,619 | \$599,040.99 |
| ILL & HANDICAPPED WAIVER SVCS | 432 | 2,526 | 203,518 | \$3,107,772.55 |
| COUNTY OFFICE REIMBURSEMENT | 0 | 0 | 0 | \$0.00 |
| MEP SERVICES | 1,300 | 7,397 | 42,988 | \$2,948,394.11 |
| UNASSIGNED | 3 | 0 | 0 | \$1,302,110.53 |
| * A L L C A T E G O R I E S * | 818,127 | 6,499,841 | 20,822,993 | \$2,867,213,852.96 |
| | | *** END OF REPORT *** | | |