

TITLE XIX REPORT OF EXPENDITURES
(BY CATEGORY OF SERVICE)
(FISCAL YTD TOTALS AS OF 03/31/19)

CATEGORY OF SERVICE	RECIPIENTS SERVED	NUMBER OF CLAIMS	UNITS OF SERVICE	TOTAL PAYMENT
INPATIENT	10,837	12,755	77,317	\$160,979,475.35
OUTPATIENT	60,550	113,313	11,089,698	\$30,164,067.47
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	536	1,055	15,174	\$3,069,713.63
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	2,978	8,088	223,670	\$46,310,292.52
INTER CARE MENTAL RETARDA	59	363	10,123	\$4,221,551.56
NURSING FAC FOR MENTAL ILL	10	18	485	\$88,161.42
HOME HEALTH	3,752	11,149	3,141,239	\$18,035,211.53
LEAD INSPECTION AGENCY	0	0	0	\$0.00
PHYSICIAN	62,224	267,899	570,032	\$27,270,827.87
CLINIC SERVICES	20,138	39,862	40,330	\$29,736,719.83
MEP CASE MANAGEMENT	0	0	0	\$0.00
EHR INCENTIVE PAYMENTS	1	0	0	\$755,929.49
LAB AND RADIOLOGICAL	9,883	19,885	46,432	\$827,714.17
HABILITATION SERVICES	285	2,778	15,553	\$1,273,025.95
BEHAVIORAL HLTH INTERVENTN SVC	469	5,260	66,718	\$1,331,825.96
REHAB SUPPORT SERVICES	10	19	209	\$10,790.45
AMBULANCE SERVICES	4,349	6,531	6,455	\$800,715.22
LOCAL EDUCATION AGENCY	5,311	351,013	3,560,959	\$53,865,747.68
INFANT TODDLER	957	4,664	12,070	\$137,920.25
IHAWP WELLNESS EXAM BONUS	0	0	0	\$0.00
ACO VIS PAYMENTS	0	0	0	\$0.00
PRESCRIBED DRUGS	36,254	240,052	191,497	\$11,549,749.03
IOWA-PLAN-PMIC	0	0	0	\$0.00
DRUG CAPITATION	0	0	0	\$0.00
NEMT SERVICES	76,660	143,140	138,976	\$347,022.57
INDIAN HEALTH SERVICES	0	0	0	\$0.00
FAMILY PLANNING SERVICES	1,409	2,945	2,945	\$196,928.31
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	26,312	31,487	31,289	\$3,632,510.99
HMO SERVICES	0	0	0	\$0.00
PACE SERVICES	608	4,554	4,545	\$15,539,985.61
PATIENT MANAGEMENT	1	0	0	\$68.36-
HEALTH INS PREMIUM PAYMENT	3,004	51,992	51,992	\$4,875,614.46
MEDICAL SUPPLIES	8,302	30,674	1,282,466	\$2,416,257.80
HEALTH HOME PROVIDER	770	3,354	3,321	\$447,487.34
TCM PAYMENTS TO IOWAPLAN	0	0	0	\$0.00
IHAWP QHP	0	0	0	\$0.00
MCO	810,467	5,172,667	5,156,353	\$3,659,276,554.18
OTHER PRACTITIONER	26,527	166,457	354,521	\$18,669,377.81

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 03/31/19)

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	138,590	237,435	237,957	\$34,529,043.38
ACCOUNTABLE CARE ORGANIZATIONS	0	0	0	\$0.00
OPTOMETRIST	5,319	6,786	7,535	\$435,738.08
CHIROPRACTIC	2,261	8,403	10,313	\$174,082.21
IOWA-PLAN-HAB	0	0	0	\$0.00
PODIATRIC	1,463	2,882	4,352	\$140,268.88
DELTA DENTAL	368,159	2,801,316	2,794,401	\$46,601,752.24
PHYSICAL DISABILITIES SVCS	14	115	21,908	\$73,038.89
BRAIN INJ WAIVER SERVICES	239	3,080	146,978	\$2,683,827.84
PSYCHIATRIC	6,726	19,596	24,664	\$1,604,879.68
RESIDENTIAL CARE FACILITY	792	5,407	150,265	\$1,163,661.33
ID WAIVER SERVICE	1,080	12,524	769,333	\$13,676,310.52
CHILDRENS MENTAL HEALTH SVC	71	658	116,204	\$454,125.01
AIDS WAIVER SERVICES	1	0	0	\$0.00
ELDERLY WAIVER SERVICES	545	1,520	42,270	\$677,670.02
ILL & HANDICAPPED WAIVER SVCS	452	3,679	274,901	\$4,518,809.22
COUNTY OFFICE REIMBURSEMENT	0	0	0	\$0.00
MEP SERVICES	1,323	10,279	62,501	\$4,213,908.54
UNASSIGNED	3	0	0	\$583,056.28-
* A L L C A T E G O R I E S *	845,552	9,805,654	30,757,951	\$4,206,195,151.58
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