

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 04/30/19)

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	1,811	1,833	10,469	\$18,727,636.26	\$1,788.87	\$30.04	5.8	\$10,341.05
OUTPATIENT	10,510	15,956	1,004,799	\$5,020,823.21	\$5.00	\$8.05	95.6	\$477.72
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	97	109	1,935	\$473,729.45	\$244.82	\$0.76	19.9	\$4,883.81
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	728	925	25,757	\$5,301,407.95	\$205.82	\$8.50	35.4	\$7,282.15
INTER CARE MENTAL RETARDA	44	53	1,498	\$731,855.05	\$488.55	\$1.17	34.0	\$16,633.07
NURSING FAC FOR MENTAL ILL	2	5	153	\$36,577.24	\$239.07	\$0.10	76.5	\$18,288.62
HOME HEALTH	957	1,332	178,548	\$2,087,559.21	\$11.69	\$3.35	186.6	\$2,181.36
LEAD INSPECTION AGENCY	1	0	0	\$97.20-	\$0.00	\$0.00	.0	\$97.20-
PHYSICIAN	15,557	37,836	84,785	\$2,310,788.07	\$27.25	\$3.71	5.4	\$148.54
CLINIC SERVICES	3,990	5,717	5,695	\$3,534,655.71	\$620.66	\$5.67	1.4	\$885.88
MEP CASE MANAGEMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
EHR INCENTIVE PAYMENTS	1	0	0	\$1,450,970.73	\$0.00	\$2.33	.0	\$0.00
LAB AND RADIOLOGICAL	2,179	3,310	7,987	\$144,192.78	\$18.05	\$0.23	3.7	\$66.17
HABILITATION SERVICES	41	145	1,029	\$75,527.26	\$73.40	\$0.12	25.1	\$1,842.13
BEHAVIORAL HLTH INTERVENTN SVC	172	668	8,361	\$175,502.22	\$20.99	\$0.28	48.6	\$1,020.36
REHAB SUPPORT SERVICES	12	39	286	\$14,606.02	\$51.07	\$0.02	23.8	\$1,217.17
AMBULANCE SERVICES	706	771	742	\$54,235.52	\$73.09	\$0.09	1.1	\$76.82
LOCAL EDUCATION AGENCY	3,270	68,365	736,824	\$10,747,820.12	\$14.59	\$17.24	225.3	\$3,286.80
INFANT TODDLER	353	734	1,457	\$19,426.63	\$13.33	\$0.03	4.1	\$55.03
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	8,104	30,767	25,035	\$1,621,921.90	\$64.79	\$16.55	3.1	\$200.14
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	14,560	15,642	15,631	\$37,670.71	\$2.41	\$0.06	1.1	\$2.59
INDIAN HEALTH SERVICES	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
FAMILY PLANNING SERVICES	235	266	268	\$20,198.49	\$75.37	\$0.03	1.1	\$85.95
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	5,529	5,653	5,592	\$738,150.48	\$132.00	\$22.70	1.0	\$133.51
HMO SERVICES	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
PACE SERVICES	540	540	540	\$1,847,848.36	\$3,421.94	\$2.96	1.0	\$3,421.94
PATIENT MANAGEMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
HEALTH INS PREMIUM PAYMENT	2,464	5,840	5,840	\$561,029.36	\$96.07	\$0.90	2.4	\$227.69
MEDICAL SUPPLIES	2,065	3,601	171,909	\$308,736.52	\$1.80	\$3.15	83.2	\$149.51
HEALTH HOME PROVIDER	278	372	372	\$52,035.02	\$139.88	\$0.08	1.3	\$187.18
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	632,714	581,045	578,059	\$485,714,629.46	\$840.25	\$779.22	.9	\$767.67

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OTHER PRACTITIONER	7,319	31,945	62,078	\$3,290,462.57	\$53.01	\$5.28	8.5	\$449.58
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	28,424	33,037	33,146	\$4,761,943.63	\$143.67	\$48.58	1.2	\$167.53
ACCOUNTABLE CARE ORGANIZATIONS	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
OPTOMETRIST	809	911	1,026	\$60,410.16	\$58.88	\$0.10	1.3	\$74.67
CHIROPRACTIC	574	1,177	1,401	\$32,214.93	\$22.99	\$0.33	2.4	\$56.12
IOWA-PLAN-HAB	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
PODIATRIC	285	422	723	\$18,297.17	\$25.31	\$0.03	2.5	\$64.20
DELTA DENTAL	311,874	315,329	315,182	\$5,253,686.97	\$16.67	\$8.43	1.0	\$16.85
PHYSICAL DISABILITIES SVCS	7	13	2,020	\$7,235.21	\$3.58	\$0.01	288.6	\$1,033.60
BRAIN INJ WAIVER SERVICES	157	380	19,705	\$327,607.45	\$16.63	\$0.53	125.5	\$2,086.67
PSYCHIATRIC	1,444	2,630	3,355	\$218,125.87	\$65.02	\$0.35	2.3	\$151.06
RESIDENTIAL CARE FACILITY	500	610	16,054	\$137,980.62	\$8.59	\$0.22	32.1	\$275.96
ID WAIVER SERVICE	760	1,447	80,416	\$1,952,665.80	\$24.28	\$158.28	105.8	\$2,569.30
CHILDRENS MENTAL HEALTH SVC	44	79	13,246	\$51,439.81	\$3.88	\$49.08	301.0	\$1,169.09
AIDS WAIVER SERVICES	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
ELDERLY WAIVER SERVICES	27	76	2,313	\$41,154.31	\$17.79	\$5.05	85.7	\$1,524.23
ILL & HANDICAPPED WAIVER SVCS	333	419	31,609	\$469,811.06	\$14.86	\$196.74	94.9	\$1,410.84
COUNTY OFFICE REIMBURSEMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
MEP SERVICES	752	954	6,326	\$408,660.00	\$64.60	\$0.66	8.4	\$543.43
UNASSIGNED	1	0	0	\$589,380.86	\$0.00	\$0.95	.0	\$589,380.86
* A L L C A T E G O R I E S *	658,539	1,170,953	3,462,171	\$559,430,512.95	\$161.58	\$897.49	5.3	\$849.50

*** END OF REPORT ***