

TITLE XIX REPORT OF EXPENDITURES
(BY CATEGORY OF SERVICE)
(FISCAL YTD TOTALS AS OF 04/30/19)

CATEGORY OF SERVICE	RECIPIENTS SERVED	NUMBER OF CLAIMS	UNITS OF SERVICE	TOTAL PAYMENT
INPATIENT	12,157	14,588	87,786	\$179,707,111.61
OUTPATIENT	64,874	129,269	12,094,497	\$35,184,890.68
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	589	1,164	17,109	\$3,543,443.08
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	3,233	9,013	249,427	\$51,611,700.47
INTER CARE MENTAL RETARDA	62	416	11,621	\$4,953,406.61
NURSING FAC FOR MENTAL ILL	11	23	638	\$124,738.66
HOME HEALTH	4,021	12,481	3,319,787	\$20,122,770.74
LEAD INSPECTION AGENCY	1	0	0	\$97.20-
PHYSICIAN	68,353	305,735	654,817	\$29,581,615.94
CLINIC SERVICES	22,477	45,579	46,025	\$33,271,375.54
MEP CASE MANAGEMENT	0	0	0	\$0.00
EHR INCENTIVE PAYMENTS	1	0	0	\$2,206,900.22
LAB AND RADIOLOGICAL	11,302	23,195	54,419	\$971,906.95
HABILITATION SERVICES	293	2,923	16,582	\$1,348,553.21
BEHAVIORAL HLTH INTERVENTN SVC	499	5,928	75,079	\$1,507,328.18
REHAB SUPPORT SERVICES	15	58	495	\$25,396.47
AMBULANCE SERVICES	4,863	7,302	7,197	\$854,950.74
LOCAL EDUCATION AGENCY	5,540	419,378	4,297,783	\$64,613,567.80
INFANT TODDLER	1,039	5,398	13,527	\$157,346.88
IHAWP WELLNESS EXAM BONUS	0	0	0	\$0.00
ACO VIS PAYMENTS	0	0	0	\$0.00
PRESCRIBED DRUGS	39,566	270,819	216,532	\$13,171,670.93
IOWA-PLAN-PMIC	0	0	0	\$0.00
DRUG CAPITATION	0	0	0	\$0.00
NEMT SERVICES	82,178	158,782	154,607	\$384,693.28
INDIAN HEALTH SERVICES	0	0	0	\$0.00
FAMILY PLANNING SERVICES	1,507	3,211	3,213	\$217,126.80
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	29,819	37,140	36,881	\$4,370,661.47
HMO SERVICES	0	0	0	\$0.00
PACE SERVICES	624	5,094	5,085	\$17,387,833.97
PATIENT MANAGEMENT	1	0	0	\$68.36-
HEALTH INS PREMIUM PAYMENT	3,042	57,832	57,832	\$5,436,643.82
MEDICAL SUPPLIES	8,828	34,275	1,454,375	\$2,724,994.32
HEALTH HOME PROVIDER	795	3,726	3,693	\$499,522.36
TCM PAYMENTS TO IOWAPLAN	0	0	0	\$0.00
IHAWP QHP	0	0	0	\$0.00
MCO	821,607	5,753,712	5,734,412	\$4,144,991,183.64
OTHER PRACTITIONER	29,669	198,402	416,599	\$21,959,840.38

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 04/30/19)

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	146,553	270,472	271,103	\$39,290,987.01
ACCOUNTABLE CARE ORGANIZATIONS	0	0	0	\$0.00
OPTOMETRIST	5,969	7,697	8,561	\$496,148.24
CHIROPRACTIC	2,503	9,580	11,714	\$206,297.14
IOWA-PLAN-HAB	0	0	0	\$0.00
PODIATRIC	1,613	3,304	5,075	\$158,566.05
DELTA DENTAL	376,034	3,116,645	3,109,583	\$51,855,439.21
PHYSICAL DISABILITIES SVCS	14	128	23,928	\$80,274.10
BRAIN INJ WAIVER SERVICES	240	3,460	166,683	\$3,011,435.29
PSYCHIATRIC	7,355	22,226	28,019	\$1,823,005.55
RESIDENTIAL CARE FACILITY	808	6,017	166,319	\$1,301,641.95
ID WAIVER SERVICE	1,108	13,971	849,749	\$15,628,976.32
CHILDRENS MENTAL HEALTH SVC	72	737	129,450	\$505,564.82
AIDS WAIVER SERVICES	1	0	0	\$0.00
ELDERLY WAIVER SERVICES	553	1,596	44,583	\$718,824.33
ILL & HANDICAPPED WAIVER SVCS	460	4,098	306,510	\$4,988,620.28
COUNTY OFFICE REIMBURSEMENT	0	0	0	\$0.00
MEP SERVICES	1,326	11,233	68,827	\$4,622,568.54
UNASSIGNED	3	0	0	\$6,324.58
* A L L C A T E G O R I E S *	856,069	10,976,607	34,220,122	\$4,765,625,664.53
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