

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 12/31/19)

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	871	879	5,201	\$12,237,196.33	\$2,352.85	\$19.70	6.0	\$14,049.59
OUTPATIENT	7,636	8,281	947,411	\$2,500,667.62	\$2.64	\$4.03	124.1	\$327.48
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	71	85	1,279	\$179,922.30	\$140.67	\$0.29	18.0	\$2,534.12
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	355	371	10,318	\$3,180,229.40	\$308.22	\$5.12	29.1	\$8,958.39
INTER CARE MENTAL RETARDA	39	52	1,365	\$609,215.23	\$446.31	\$0.98	35.0	\$15,620.90
NURSING FAC FOR MENTAL ILL	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
HOME HEALTH	837	1,090	454,138	\$1,739,387.81	\$3.83	\$2.80	542.6	\$2,078.12
LEAD INSPECTION AGENCY	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
PHYSICIAN	8,153	18,315	53,505	\$9,062,278.84	\$169.37	\$14.59	6.6	\$1,111.53
CLINIC SERVICES	1,805	2,392	2,216	\$3,681,264.05	\$1,661.22	\$5.93	1.2	\$2,039.48
MEP CASE MANAGEMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
EHR INCENTIVE PAYMENTS	1	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
LAB AND RADIOLOGICAL	959	1,347	3,138	\$37,499.49	\$11.95	\$0.06	3.3	\$39.10
HABILITATION SERVICES	32	118	484	\$64,169.48	\$132.58	\$0.10	15.1	\$2,005.30
BEHAVIORAL HLTH INTERVENTN SVC	102	391	2,970	\$71,140.47	\$23.95	\$0.11	29.1	\$697.46
REHAB SUPPORT SERVICES	6	15	81	\$5,498.03	\$67.88	\$0.01	13.5	\$916.34
AMBULANCE SERVICES	318	360	356	\$29,364.23	\$82.48	\$0.05	1.1	\$92.34
LOCAL EDUCATION AGENCY	2,482	62,521	583,432	\$9,327,283.14	\$15.99	\$15.01	235.1	\$3,757.97
INFANT TODDLER	138	425	937	\$11,422.09	\$12.19	\$0.02	6.8	\$82.77
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	4,183	16,889	13,606	\$1,135,714.15	\$83.47	\$20.94	3.3	\$271.51
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	10,744	9,530	6,871	\$17,559.37	\$2.56	\$0.03	.6	\$1.63
INDIAN HEALTH SERVICES	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
FAMILY PLANNING SERVICES	324	377	388	\$25,653.54	\$66.12	\$0.04	1.2	\$79.18
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	4,113	4,326	4,323	\$305,741.67	\$70.72	\$20.79	1.1	\$74.34
HMO SERVICES	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
PACE SERVICES	575	575	575	\$2,182,389.55	\$3,795.46	\$3.51	1.0	\$3,795.46
PATIENT MANAGEMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
HEALTH INS PREMIUM PAYMENT	2,200	5,472	5,472	\$537,415.35	\$98.21	\$0.87	2.5	\$244.28
MEDICAL SUPPLIES	1,596	2,543	135,131	\$67,809.07	\$0.50	\$1.25	84.7	\$42.49
HEALTH HOME PROVIDER	197	239	239	\$31,996.81	\$133.88	\$0.05	1.2	\$162.42
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	573,398	608,120	606,471	\$439,073,538.28	\$723.98	\$706.81	1.1	\$765.74

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OTHER PRACTITIONER	4,269	22,593	39,726	\$2,457,267.73	\$61.86	\$3.96	9.3	\$575.61
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	22,834	26,251	26,296	\$4,005,624.84	\$152.33	\$73.87	1.2	\$175.42
ACCOUNTABLE CARE ORGANIZATIONS	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
OPTOMETRIST	342	376	441	\$21,181.62	\$48.03	\$0.03	1.3	\$61.93
CHIROPRACTIC	384	766	900	\$13,978.14	\$15.53	\$0.26	2.3	\$36.40
IOWA-PLAN-HAB	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
PODIATRIC	185	223	316	\$5,733.55	\$18.14	\$0.01	1.7	\$30.99
DELTA DENTAL	315,231	330,583	329,089	\$5,824,362.44	\$17.70	\$9.38	1.0	\$18.48
PHYSICAL DISABILITIES SVCS	4	11	1,712	\$6,352.00	\$3.71	\$0.01	428.0	\$1,588.00
BRAIN INJ WAIVER SERVICES	155	307	12,500	\$332,429.95	\$26.59	\$0.54	80.6	\$2,144.71
PSYCHIATRIC	859	1,484	1,866	\$101,842.56	\$54.58	\$0.16	2.2	\$118.56
RESIDENTIAL CARE FACILITY	463	494	12,337	\$91,523.91	\$7.42	\$0.15	26.6	\$197.68
ID WAIVER SERVICE	677	1,195	59,575	\$1,917,488.20	\$32.19	\$160.07	88.0	\$2,832.33
CHILDRENS MENTAL HEALTH SVC	48	97	14,416	\$58,188.57	\$4.04	\$69.77	300.3	\$1,212.26
AIDS WAIVER SERVICES	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
ELDERLY WAIVER SERVICES	19	47	1,336	\$17,075.57	\$12.78	\$2.10	70.3	\$898.71
ILL & HANDICAPPED WAIVER SVCS	282	343	23,813	\$470,903.47	\$19.78	\$201.84	84.4	\$1,669.87
COUNTY OFFICE REIMBURSEMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
MEP SERVICES	711	1,043	7,228	\$466,928.80	\$64.60	\$0.75	10.2	\$656.72
UNASSIGNED	1	0	0	\$349,130.48-	\$0.00	\$0.56-	.0	\$349,130.48-
* A L L C A T E G O R I E S *	595,789	1,130,526	3,371,458	\$501,556,107.17	\$148.77	\$807.39	5.7	\$841.84

\*\*\* END OF REPORT \*\*\*