

TITLE XIX REPORT OF EXPENDITURES
(BY CATEGORY OF SERVICE)
(FISCAL YTD TOTALS AS OF 04/30/20)

CATEGORY OF SERVICE	RECIPIENTS SERVED	NUMBER OF CLAIMS	UNITS OF SERVICE	TOTAL PAYMENT
INPATIENT	7,478	8,723	47,698	\$134,109,807.20
OUTPATIENT	29,085	81,135	10,264,698	\$21,017,927.51
CHILD PART HOSP	0	0	0	\$0.00
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	347	636	9,360	\$2,342,426.95
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	1,659	5,033	140,864	\$36,999,754.09
INTER CARE MENTAL RETARDA	57	444	12,595	\$5,739,882.16
NURSING FAC FOR MENTAL ILL	3	3	92	\$10,025.32-
HOME HEALTH	2,745	9,758	3,358,103	\$13,954,078.50
LEAD INSPECTION AGENCY	0	0	0	\$0.00
PHYSICIAN	37,187	185,489	510,710	\$16,793,172.33
CLINIC SERVICES	12,544	26,460	25,014	\$35,318,822.72
MEP CASE MANAGEMENT	0	0	0	\$0.00
EHR INCENTIVE PAYMENTS	1	0	0	\$1,169,783.00
LAB AND RADIOLOGICAL	6,882	15,350	35,186	\$649,794.40
HABILITATION SERVICES	84	1,452	9,264	\$933,802.44
BEHAVIORAL HLTH INTERVENTN SVC	353	2,877	21,925	\$214,944.50
REHAB SUPPORT SERVICES	10	101	689	\$586,022.65-
AMBULANCE SERVICES	2,763	3,989	3,871	\$331,910.92
LOCAL EDUCATION AGENCY	5,582	391,400	3,137,918	\$54,768,267.61
INFANT TODDLER	1,183	6,247	14,670	\$191,807.97
IHAWP WELLNESS EXAM BONUS	1	0	0	\$263.96-
ACO VIS PAYMENTS	0	0	0	\$0.00
PRESCRIBED DRUGS	15,007	167,069	135,006	\$10,235,778.21
IOWA-PLAN-PMIC	0	0	0	\$0.00
DRUG CAPITATION	0	0	0	\$0.00
NEMT SERVICES	36,487	97,194	90,103	\$229,527.68
INDIAN HEALTH SERVICES	0	0	0	\$0.00
FAMILY PLANNING SERVICES	1,330	2,842	2,868	\$196,806.71
IOWA CARE MED HOME CAPITATION	0	0	0	\$0.00
IOWA PLAN PROGRAM	0	0	0	\$0.00
MANAGED SUBSTANCE ABUSE	1	0	0	\$328.30-
MENTAL HEALTH ACCESS PLAN	0	0	0	\$0.00
EPSDT SCREENING	27,051	32,521	32,425	\$2,355,535.28
HMO SERVICES	0	0	0	\$0.00
PACE SERVICES	681	5,753	5,728	\$21,683,458.62
PATIENT MANAGEMENT	0	0	0	\$0.00
HEALTH INS PREMIUM PAYMENT	2,732	49,942	49,942	\$5,070,685.58
MEDICAL SUPPLIES	5,170	24,178	1,209,949	\$1,684,542.20
HEALTH HOME PROVIDER	442	2,346	2,341	\$343,138.43
TCM PAYMENTS TO IOWAPLAN	0	0	0	\$0.00
IHAWP QHP	0	0	0	\$0.00
MCO	740,965	6,380,929	6,362,994	\$4,549,450,098.99
OTHER PRACTITIONER	19,184	149,780	298,095	\$16,329,003.67

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 04/30/20)

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	136,058	235,354	235,744	\$35,490,875.22
ACCOUNTABLE CARE ORGANIZATIONS	0	0	0	\$0.00
OPTOMETRIST	2,920	3,853	4,502	\$223,905.90
CHIROPRACTIC	1,439	7,160	8,553	\$140,494.60
IOWA-PLAN-HAB	0	0	0	\$0.00
PODIATRIC	1,062	2,428	3,496	\$98,749.13
DELTA DENTAL	386,742	3,313,805	3,306,975	\$65,033,274.30
PHYSICAL DISABILITIES SVCS	10	116	18,436	\$62,845.34
BRAIN INJ WAIVER SERVICES	170	3,323	153,941	\$3,054,314.55
PSYCHIATRIC	4,233	12,889	16,038	\$912,682.11
RESIDENTIAL CARE FACILITY	767	5,568	153,034	\$1,247,527.71
ID WAIVER SERVICE	840	12,725	802,062	\$20,069,480.72
CHILDRENS MENTAL HEALTH SVC	66	651	114,931	\$457,619.83
AIDS WAIVER SERVICES	1	1	120	\$612.00
ELDERLY WAIVER SERVICES	52	550	15,894	\$194,088.26
ILL & HANDICAPPED WAIVER SVCS	397	3,816	262,278	\$4,604,633.64
COUNTY OFFICE REIMBURSEMENT	0	0	0	\$0.00
MEP SERVICES	809	8,726	59,922	\$3,870,522.52
UNASSIGNED	2	0	0	\$964,296.76
* A L L C A T E G O R I E S *	771,878	11,262,616	30,938,034	\$5,067,944,040.03
		*** END OF REPORT ***		