

TITLE XIX REPORT OF EXPENDITURES
(BY CATEGORY OF SERVICE)
(FISCAL YTD TOTALS AS OF 05/31/20)

CATEGORY OF SERVICE	RECIPIENTS SERVED	NUMBER OF CLAIMS	UNITS OF SERVICE	TOTAL PAYMENT
INPATIENT	7,870	9,286	50,234	\$144,553,633.54
OUTPATIENT	29,786	85,740	12,052,096	\$22,078,913.63
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	361	669	9,906	\$2,508,720.25
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	1,685	5,345	149,837	\$40,129,959.98
INTER CARE MENTAL RETARDA	60	481	13,700	\$6,242,216.71
NURSING FAC FOR MENTAL ILL	3	3	92	\$10,025.32-
HOME HEALTH	2,825	10,438	3,518,365	\$14,984,119.60
LEAD INSPECTION AGENCY	0	0	0	\$0.00
PHYSICIAN	38,095	195,212	538,709	\$17,382,095.36
CLINIC SERVICES	12,967	28,069	26,543	\$38,541,101.49
MEP CASE MANAGEMENT	0	0	0	\$0.00
EHR INCENTIVE PAYMENTS	1	0	0	\$1,169,783.00
LAB AND RADIOLOGICAL	7,143	16,129	37,065	\$674,529.63
HABILITATION SERVICES	87	1,587	9,936	\$1,013,942.23
BEHAVIORAL HLTH INTERVENTN SVC	356	3,118	23,270	\$254,889.00
REHAB SUPPORT SERVICES	10	148	799	\$579,881.35-
AMBULANCE SERVICES	2,899	4,267	4,139	\$347,029.17
LOCAL EDUCATION AGENCY	5,640	403,835	3,265,236	\$57,151,340.14
INFANT TODDLER	1,191	6,317	14,810	\$193,673.52
IHAWP WELLNESS EXAM BONUS	1	0	0	\$263.96-
ACO VIS PAYMENTS	0	0	0	\$0.00
PRESCRIBED DRUGS	15,347	179,627	145,175	\$11,005,833.23
IOWA-PLAN-PMIC	0	0	0	\$0.00
DRUG CAPITATION	0	0	0	\$0.00
NEMT SERVICES	36,850	106,368	96,972	\$247,089.86
INDIAN HEALTH SERVICES	0	0	0	\$0.00
FAMILY PLANNING SERVICES	1,391	3,035	3,062	\$208,751.60
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	28,010	33,780	33,649	\$2,431,550.10
HMO SERVICES	0	0	0	\$0.00
PACE SERVICES	687	6,350	6,324	\$23,941,228.99
PATIENT MANAGEMENT	0	0	0	\$0.00
HEALTH INS PREMIUM PAYMENT	2,760	54,144	54,144	\$5,541,750.62
MEDICAL SUPPLIES	5,305	26,247	1,325,398	\$1,817,839.76
HEALTH HOME PROVIDER	447	2,511	2,506	\$369,024.72
TCM PAYMENTS TO IOWAPLAN	0	0	0	\$0.00
IHAWP QHP	0	0	0	\$0.00
MCO	751,756	7,018,247	6,999,137	\$4,999,036,191.67
OTHER PRACTITIONER	20,151	191,708	359,089	\$19,913,418.50

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 05/31/20)

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	136,948	239,066	239,464	\$36,060,767.87
ACCOUNTABLE CARE ORGANIZATIONS	0	0	0	\$0.00
OPTOMETRIST	2,991	3,968	4,628	\$237,062.99
CHIROPRACTIC	1,490	7,593	9,069	\$149,268.16
IOWA-PLAN-HAB	0	0	0	\$0.00
PODIATRIC	1,094	2,566	3,692	\$103,643.08
DELTA DENTAL	395,228	3,672,836	3,665,146	\$71,368,860.44
PHYSICAL DISABILITIES SVCS	12	126	19,608	\$67,619.56
BRAIN INJ WAIVER SERVICES	173	3,601	163,797	\$3,427,804.63
PSYCHIATRIC	4,353	13,622	16,820	\$959,952.54
RESIDENTIAL CARE FACILITY	779	6,017	165,359	\$1,343,520.00
ID WAIVER SERVICE	845	13,434	833,365	\$22,042,431.59
CHILDRENS MENTAL HEALTH SVC	68	708	125,188	\$495,865.60
AIDS WAIVER SERVICES	1	1	120	\$612.00
ELDERLY WAIVER SERVICES	53	608	17,318	\$215,431.14
ILL & HANDICAPPED WAIVER SVCS	399	4,091	277,095	\$5,067,276.18
COUNTY OFFICE REIMBURSEMENT	0	0	0	\$0.00
MEP SERVICES	809	9,561	65,447	\$4,227,437.52
UNASSIGNED	2	0	0	\$1,177,370.42
* A L L C A T E G O R I E S *	782,782	12,370,459	34,346,309	\$5,558,093,051.09
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