

TITLE XIX REPORT OF EXPENDITURES
(BY CATEGORY OF SERVICE)
(FISCAL YTD TOTALS AS OF 01/31/21)

CATEGORY OF SERVICE	RECIPIENTS SERVED	NUMBER OF CLAIMS	UNITS OF SERVICE	TOTAL PAYMENT
INPATIENT	3,593	4,060	21,902	\$83,094,449.55
OUTPATIENT	16,914	43,480	13,457,992	\$11,650,305.02
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	133	259	4,175	\$1,036,320.12
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	385	2,064	60,645	\$20,232,110.22
INTER CARE MENTAL RETARDA	45	279	8,032	\$3,813,659.11
NURSING FAC FOR MENTAL ILL	0	0	0	\$0.00
HOME HEALTH	2,043	5,644	2,443,663	\$9,039,316.25
LEAD INSPECTION AGENCY	0	0	0	\$0.00
PHYSICIAN	17,787	88,460	266,129	\$5,671,147.55
CLINIC SERVICES	5,014	10,777	9,887	\$15,327,183.71
MEP CASE MANAGEMENT	0	0	0	\$0.00
EHR INCENTIVE PAYMENTS	1	0	0	\$110,500.00
LAB AND RADIOLOGICAL	3,522	6,827	16,937	\$237,479.70
HABILITATION SERVICES	56	783	4,319	\$569,908.15
BEHAVIORAL HLTH INTERVENTN SVC	166	1,829	11,173	\$273,937.80
REHAB SUPPORT SERVICES	5	77	414	\$23,113.62
AMBULANCE SERVICES	1,408	1,937	1,866	\$365,980.70
LOCAL EDUCATION AGENCY	3,424	105,079	776,858	\$16,478,758.64
INFANT TODDLER	596	2,300	4,293	\$62,817.13
IHAWP WELLNESS EXAM BONUS	0	0	0	\$0.00
ACO VIS PAYMENTS	0	0	0	\$0.00
PRESCRIBED DRUGS	7,687	94,943	76,131	\$6,325,375.54
IOWA-PLAN-PMIC	0	0	0	\$0.00
DRUG CAPITATION	0	0	0	\$0.00
NEMT SERVICES	13,718	71,738	71,668	\$176,709.97
INDIAN HEALTH SERVICES	1	0	0	\$6.17-
FAMILY PLANNING SERVICES	725	1,521	1,518	\$91,870.57
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	5,069	5,220	5,162	\$665,551.47
HMO SERVICES	0	0	0	\$0.00
PACE SERVICES	694	4,333	4,294	\$16,226,780.97
PATIENT MANAGEMENT	0	0	0	\$0.00
HEALTH INS PREMIUM PAYMENT	2,297	32,628	32,627	\$3,431,465.06
MEDICAL SUPPLIES	3,490	14,594	685,916	\$915,766.62
HEALTH HOME PROVIDER	271	1,199	1,196	\$195,178.89
TCM PAYMENTS TO IOWAPLAN	0	0	0	\$0.00
IHAWP QHP	2	0	0	\$101.17-
MCO	685,102	4,586,365	4,572,342	\$3,235,705,079.12
OTHER PRACTITIONER	11,472	110,226	242,034	\$13,322,879.22

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 01/31/21)

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	1	0	0	\$82.63-
DENTAL	107,855	152,748	153,085	\$24,493,993.15
ACCOUNTABLE CARE ORGANIZATIONS	0	0	0	\$0.00
OPTOMETRIST	1,700	2,201	2,561	\$118,172.83
CHIROPRACTIC	840	3,873	4,636	\$66,093.85
IOWA-PLAN-HAB	0	0	0	\$0.00
PODIATRIC	591	1,384	2,284	\$47,105.99
DELTA DENTAL	390,736	2,604,874	2,601,412	\$45,946,344.74
PHYSICAL DISABILITIES SVCS	8	91	16,324	\$61,183.24
BRAIN INJ WAIVER SERVICES	167	2,184	85,108	\$2,781,525.83
PSYCHIATRIC	1,816	5,882	7,154	\$380,181.83
RESIDENTIAL CARE FACILITY	587	3,498	96,869	\$802,915.27
ID WAIVER SERVICE	726	6,550	333,537	\$12,287,944.37
CHILDRENS MENTAL HEALTH SVC	60	353	67,745	\$274,644.32
AIDS WAIVER SERVICES	0	0	0	\$0.00
ELDERLY WAIVER SERVICES	26	425	10,016	\$137,083.08
ILL & HANDICAPPED WAIVER SVCS	358	2,438	167,345	\$3,508,091.31
COUNTY OFFICE REIMBURSEMENT	0	0	0	\$0.00
MEP SERVICES	740	6,139	42,540	\$2,748,080.60
UNASSIGNED	1	0	0	\$47,682,725.77
* A L L C A T E G O R I E S *	713,283	7,989,262	26,371,789	\$3,586,379,540.91
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