

TITLE XIX REPORT OF EXPENDITURES
(BY CATEGORY OF SERVICE)
(FISCAL YTD TOTALS AS OF 02/28/21)

CATEGORY OF SERVICE	RECIPIENTS SERVED	NUMBER OF CLAIMS	UNITS OF SERVICE	TOTAL PAYMENT
INPATIENT	3,985	4,552	24,418	\$96,191,858.90
OUTPATIENT	17,779	49,056	14,231,085	\$12,916,474.14
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	149	301	4,815	\$1,211,665.85
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	401	2,349	69,010	\$22,930,834.23
INTER CARE MENTAL RETARDA	45	314	9,095	\$4,274,553.93
NURSING FAC FOR MENTAL ILL	0	0	0	\$0.00
HOME HEALTH	2,134	6,408	3,083,163	\$10,395,739.70
LEAD INSPECTION AGENCY	0	0	0	\$0.00
PHYSICIAN	19,154	101,052	304,681	\$6,510,400.02
CLINIC SERVICES	5,490	12,252	11,209	\$16,767,138.80
MEP CASE MANAGEMENT	1	0	0	\$0.00
EHR INCENTIVE PAYMENTS	1	0	0	\$110,500.00
LAB AND RADIOLOGICAL	3,824	7,650	18,963	\$263,835.43
HABILITATION SERVICES	56	861	4,973	\$649,631.15
BEHAVIORAL HLTH INTERVENTN SVC	184	2,074	12,787	\$306,030.42
REHAB SUPPORT SERVICES	5	98	475	\$26,519.25
AMBULANCE SERVICES	1,564	2,216	2,141	\$429,626.61
LOCAL EDUCATION AGENCY	3,636	138,077	916,834	\$20,393,410.78
INFANT TODDLER	661	2,783	5,193	\$72,233.00
IHAWP WELLNESS EXAM BONUS	0	0	0	\$0.00
ACO VIS PAYMENTS	0	0	0	\$0.00
PRESCRIBED DRUGS	8,141	108,680	87,266	\$7,247,933.10
IOWA-PLAN-PMIC	0	0	0	\$0.00
DRUG CAPITATION	0	0	0	\$0.00
NEMT SERVICES	14,727	82,694	79,994	\$196,572.05
INDIAN HEALTH SERVICES	1	0	0	\$6.17-
FAMILY PLANNING SERVICES	804	1,780	1,777	\$115,293.84
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	5,814	6,207	6,140	\$759,956.21
HMO SERVICES	0	0	0	\$0.00
PACE SERVICES	700	4,917	4,878	\$18,378,022.91
PATIENT MANAGEMENT	0	0	0	\$0.00
HEALTH INS PREMIUM PAYMENT	2,343	36,945	36,941	\$3,874,706.57
MEDICAL SUPPLIES	3,744	16,616	798,097	\$1,081,136.54
HEALTH HOME PROVIDER	293	1,433	1,430	\$230,649.37
TCM PAYMENTS TO IOWAPLAN	0	0	0	\$0.00
IHAWP QHP	2	0	0	\$101.17-
MCO	694,619	5,267,695	5,252,298	\$3,694,323,087.58
OTHER PRACTITIONER	12,402	127,649	283,576	\$16,120,711.84

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 02/28/21)

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	114,429	174,066	174,453	\$27,877,521.02
ACCOUNTABLE CARE ORGANIZATIONS	0	0	0	\$0.00
OPTOMETRIST	1,936	2,520	2,917	\$144,792.31
CHIROPRACTIC	907	4,493	5,345	\$84,707.04
IOWA-PLAN-HAB	0	0	0	\$0.00
PODIATRIC	647	1,578	2,603	\$55,447.50
DELTA DENTAL	397,377	2,995,622	2,990,825	\$52,880,545.91
PHYSICAL DISABILITIES SVCS	9	104	18,736	\$71,169.08
BRAIN INJ WAIVER SERVICES	167	2,467	96,158	\$3,134,298.80
PSYCHIATRIC	1,983	6,856	8,310	\$451,357.99
RESIDENTIAL CARE FACILITY	602	3,966	109,721	\$912,243.59
ID WAIVER SERVICE	733	7,427	376,368	\$14,253,278.35
CHILDRENS MENTAL HEALTH SVC	60	431	80,179	\$324,503.63
AIDS WAIVER SERVICES	0	0	0	\$0.00
ELDERLY WAIVER SERVICES	30	493	11,848	\$164,083.42
ILL & HANDICAPPED WAIVER SVCS	360	2,795	193,495	\$3,998,455.74
COUNTY OFFICE REIMBURSEMENT	0	0	0	\$0.00
MEP SERVICES	746	6,973	48,027	\$3,102,540.80
UNASSIGNED	1	0	0	\$48,161,648.23
* A L L C A T E G O R I E S *	723,529	9,194,450	29,370,224	\$4,091,394,925.66
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