

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 03/31/21)

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	840	767	4,668	\$17,437,280.11	\$3,735.49	\$24.43	5.6	\$20,758.67
OUTPATIENT	5,335	7,868	1,130,994	\$1,912,842.57	\$1.69	\$2.68	212.0	\$358.55
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	47	60	1,062	\$262,041.78	\$246.74	\$0.37	22.6	\$5,575.36
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	274	278	7,551	\$2,413,899.34	\$319.68	\$3.38	27.6	\$8,809.85
INTER CARE MENTAL RETARDA	36	37	1,020	\$521,853.32	\$511.62	\$0.73	28.3	\$14,495.93
NURSING FAC FOR MENTAL ILL	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
HOME HEALTH	694	965	343,669	\$1,663,413.33	\$4.84	\$2.33	495.2	\$2,396.85
LEAD INSPECTION AGENCY	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
PHYSICIAN	7,128	16,612	50,775	\$4,563,903.40	\$89.88	\$6.40	7.1	\$640.28
CLINIC SERVICES	1,490	2,029	2,038	\$4,532,538.86	\$2,224.01	\$6.35	1.4	\$3,041.97
MEP CASE MANAGEMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
EHR INCENTIVE PAYMENTS	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
LAB AND RADIOLOGICAL	905	1,348	3,495	\$45,596.04	\$13.05	\$0.06	3.9	\$50.38
HABILITATION SERVICES	38	126	1,380	\$215,350.25	\$156.05	\$0.30	36.3	\$5,667.11
BEHAVIORAL HLTH INTERVENTN SVC	101	215	1,537	\$20,211.16	\$13.15	\$0.03	15.2	\$200.11
REHAB SUPPORT SERVICES	3	9	28	\$1,473.88	\$52.64	\$0.00	9.3	\$491.29
AMBULANCE SERVICES	318	392	393	\$163,027.77	\$414.83	\$0.23	1.2	\$512.67
LOCAL EDUCATION AGENCY	1,869	34,754	149,677	\$4,801,376.28	\$32.08	\$6.73	80.1	\$2,568.95
INFANT TODDLER	374	964	1,665	\$25,590.37	\$15.37	\$0.04	4.5	\$68.42
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	3,942	17,430	13,913	\$1,229,704.63	\$88.39	\$30.08	3.5	\$311.95
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	10,578	10,990	10,039	\$24,122.49	\$2.40	\$0.03	.9	\$2.28
INDIAN HEALTH SERVICES	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
FAMILY PLANNING SERVICES	209	268	267	\$12,635.78	\$47.33	\$0.02	1.3	\$60.46
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	1,605	1,612	1,598	\$174,864.71	\$109.43	\$18.30	1.0	\$108.95
HMO SERVICES	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
PACE SERVICES	592	597	593	\$2,189,694.85	\$3,692.57	\$3.07	1.0	\$3,698.81
PATIENT MANAGEMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
HEALTH INS PREMIUM PAYMENT	2,138	5,350	5,350	\$532,492.58	\$99.53	\$0.75	2.5	\$249.06
MEDICAL SUPPLIES	1,805	3,043	141,058	\$218,750.16	\$1.55	\$5.35	78.1	\$121.19
HEALTH HOME PROVIDER	177	229	229	\$31,082.76	\$135.73	\$0.04	1.3	\$175.61
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	672,817	687,414	685,629	\$499,318,461.86	\$728.26	\$699.70	1.0	\$742.13

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OTHER PRACTITIONER	6,010	31,060	69,822	\$4,589,556.85	\$65.73	\$6.43	11.6	\$763.65
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	27,412	31,178	31,221	\$4,848,554.57	\$155.30	\$118.61	1.1	\$176.88
ACCOUNTABLE CARE ORGANIZATIONS	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
OPTOMETRIST	328	342	400	\$22,379.59	\$55.95	\$0.03	1.2	\$68.23
CHIROPRACTIC	331	651	744	\$15,686.61	\$21.08	\$0.38	2.2	\$47.39
IOWA-PLAN-HAB	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
PODIATRIC	199	283	438	\$9,674.26	\$22.09	\$0.01	2.2	\$48.61
DELTA DENTAL	385,867	394,907	394,071	\$7,013,752.42	\$17.80	\$9.83	1.0	\$18.18
PHYSICAL DISABILITIES SVCS	9	22	4,068	\$14,662.68	\$3.60	\$0.02	452.0	\$1,629.19
BRAIN INJ WAIVER SERVICES	149	303	10,221	\$371,019.70	\$36.30	\$0.52	68.6	\$2,490.07
PSYCHIATRIC	672	1,126	1,285	\$70,601.13	\$54.94	\$0.10	1.9	\$105.06
RESIDENTIAL CARE FACILITY	401	440	11,155	\$70,843.43	\$6.35	\$0.10	27.8	\$176.67
ID WAIVER SERVICE	619	960	45,177	\$2,049,557.80	\$45.37	\$170.95	73.0	\$3,311.08
CHILDRENS MENTAL HEALTH SVC	40	55	8,308	\$33,734.19	\$4.06	\$34.92	207.7	\$843.35
AIDS WAIVER SERVICES	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
ELDERLY WAIVER SERVICES	21	87	1,840	\$32,191.43	\$17.50	\$3.98	87.6	\$1,532.93
ILL & HANDICAPPED WAIVER SVCS	287	375	20,987	\$489,508.36	\$23.32	\$213.57	73.1	\$1,705.60
COUNTY OFFICE REIMBURSEMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
MEP SERVICES	686	883	5,889	\$380,429.40	\$64.60	\$0.53	8.6	\$554.56
UNASSIGNED	1	0	0	\$526,532.87	\$0.00	\$0.74	.0	\$526,532.87
* A L L C A T E G O R I E S *	693,338	1,256,029	3,164,254	\$562,850,893.57	\$177.88	\$788.73	4.6	\$811.80

*** END OF REPORT ***