

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 04/30/21)

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	472	432	2,342	\$11,089,921.93	\$4,735.24	\$15.44	5.0	\$23,495.60
OUTPATIENT	4,099	6,061	1,112,009	\$1,476,953.29	\$1.33	\$2.06	271.3	\$360.32
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	28	28	491	\$191,833.35	\$390.70	\$0.27	17.5	\$6,851.19
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	312	278	8,145	\$3,364,484.35	\$413.07	\$4.68	26.1	\$10,783.60
INTER CARE MENTAL RETARDA	33	32	959	\$428,806.31	\$447.14	\$0.60	29.1	\$12,994.13
NURSING FAC FOR MENTAL ILL	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
HOME HEALTH	642	870	310,227	\$1,796,167.01	\$5.79	\$2.50	483.2	\$2,797.77
LEAD INSPECTION AGENCY	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
PHYSICIAN	6,036	13,073	36,240	\$948,729.85	\$26.18	\$1.32	6.0	\$157.18
CLINIC SERVICES	1,200	1,479	1,350	\$4,592,493.74	\$3,401.85	\$6.39	1.1	\$3,827.08
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	669	955	2,525	\$37,408.24	\$14.82	\$0.05	3.8	\$55.92
HABILITATION SERVICES	33	71	717	\$97,667.77	\$136.22	\$0.14	21.7	\$2,959.63
BEHAVIORAL HLTH INTERVENTN SVC	74	265	1,718	\$42,349.04	\$24.65	\$0.06	23.2	\$572.28
REHAB SUPPORT SERVICES	1	1	1	\$44.66	\$44.66	\$0.00	1.0	\$44.66
AMBULANCE SERVICES	256	309	306	\$115,886.15	\$378.71	\$0.16	1.2	\$452.68
LOCAL EDUCATION AGENCY	1,647	32,314	121,677	\$4,380,234.37	\$36.00	\$6.10	73.9	\$2,659.52
INFANT TODDLER	250	391	676	\$10,672.72	\$15.79	\$0.01	2.7	\$42.69
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	3,557	13,415	10,825	\$919,009.95	\$84.90	\$23.85	3.0	\$258.37
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	10,542	11,083	11,080	\$26,702.80	\$2.41	\$0.04	1.1	\$2.53
INDIAN HEALTH SERVICES	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
FAMILY PLANNING SERVICES	184	205	207	\$15,453.99	\$74.66	\$0.02	1.1	\$83.99
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	1,099	1,129	1,119	\$101,520.21	\$90.72	\$12.23	1.0	\$92.38
HMO SERVICES	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
PACE SERVICES	592	591	590	\$2,174,327.96	\$3,685.30	\$3.03	1.0	\$3,672.85
PATIENT MANAGEMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
HEALTH INS PREMIUM PAYMENT	2,147	4,787	4,787	\$520,363.86	\$108.70	\$0.72	2.2	\$242.37
MEDICAL SUPPLIES	1,627	2,418	101,405	\$187,644.91	\$1.85	\$4.87	62.3	\$115.33
HEALTH HOME PROVIDER	124	169	169	\$31,246.91	\$184.89	\$0.04	1.4	\$251.99
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	678,054	693,486	691,647	\$467,489,448.86	\$675.91	\$650.79	1.0	\$689.46

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OTHER PRACTITIONER	4,406	23,609	51,203	\$3,649,211.18	\$71.27	\$5.08	11.6	\$828.24
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	23,374	26,202	26,240	\$4,036,783.57	\$153.84	\$104.76	1.1	\$172.70
ACCOUNTABLE CARE ORGANIZATIONS	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
OPTOMETRIST	297	333	388	\$23,494.73	\$60.55	\$0.03	1.3	\$79.11
CHIROPRACTIC	306	564	688	\$12,968.62	\$18.85	\$0.34	2.2	\$42.38
IOWA-PLAN-HAB	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
PODIATRIC	142	198	259	\$10,425.05	\$40.25	\$0.01	1.8	\$73.42
DELTA DENTAL	390,326	399,354	398,698	\$5,599,429.71	\$14.04	\$7.79	1.0	\$14.35
PHYSICAL DISABILITIES SVCS	9	16	2,565	\$8,975.83	\$3.50	\$0.01	285.0	\$997.31
BRAIN INJ WAIVER SERVICES	146	279	6,659	\$373,737.18	\$56.13	\$0.52	45.6	\$2,559.84
PSYCHIATRIC	571	939	1,124	\$62,771.34	\$55.85	\$0.09	2.0	\$109.93
RESIDENTIAL CARE FACILITY	383	407	11,674	\$106,819.71	\$9.15	\$0.15	30.5	\$278.90
ID WAIVER SERVICE	570	840	38,680	\$2,169,476.74	\$56.09	\$181.26	67.9	\$3,806.10
CHILDRENS MENTAL HEALTH SVC	33	41	4,530	\$21,197.55	\$4.68	\$21.97	137.3	\$642.35
AIDS WAIVER SERVICES	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
ELDERLY WAIVER SERVICES	20	59	1,636	\$23,995.30	\$14.67	\$2.98	81.8	\$1,199.77
ILL & HANDICAPPED WAIVER SVCS	266	317	18,606	\$484,227.89	\$26.03	\$210.26	69.9	\$1,820.41
COUNTY OFFICE REIMBURSEMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
MEP SERVICES	658	824	5,936	\$383,465.60	\$64.60	\$0.53	9.0	\$582.77
UNASSIGNED	1	0	0	\$377,419.62	\$0.00	\$0.53	.0	\$377,419.62
* A L L C A T E G O R I E S *	697,658	1,237,824	2,990,098	\$517,383,771.85	\$173.03	\$720.25	4.3	\$741.60

*** END OF REPORT ***