

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 06/30/21)

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	547	536	2,968	\$19,607,172.63	\$6,606.19	\$26.93	5.4	\$35,844.92
OUTPATIENT	4,103	5,910	910,667	\$1,322,937.94	\$1.45	\$1.82	222.0	\$322.43
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	36	43	795	\$279,295.39	\$351.31	\$0.38	22.1	\$7,758.21
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	254	257	7,550	\$2,707,056.35	\$358.55	\$3.72	29.7	\$10,657.70
INTER CARE MENTAL RETARDA	36	38	1,116	\$543,579.38	\$487.08	\$0.75	31.0	\$15,099.43
NURSING FAC FOR MENTAL ILL	1	1	8	\$0.00	\$0.00	\$0.00	8.0	\$0.00
HOME HEALTH	570	762	143,773	\$1,295,520.59	\$9.01	\$1.78	252.2	\$2,272.84
LEAD INSPECTION AGENCY	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
PHYSICIAN	5,793	12,364	35,537	\$892,817.06	\$25.12	\$1.23	6.1	\$154.12
CLINIC SERVICES	1,211	1,595	1,556	\$2,338,830.99	\$1,503.10	\$3.21	1.3	\$1,931.32
MEP CASE MANAGEMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
EHR INCENTIVE PAYMENTS	1	0	0	\$544,000.00	\$0.00	\$0.75	.0	\$544,000.00
LAB AND RADIOLOGICAL	625	893	2,251	\$28,784.33	\$12.79	\$0.04	3.6	\$46.05
HABILITATION SERVICES	32	85	853	\$139,977.61	\$164.10	\$0.19	26.7	\$4,374.30
BEHAVIORAL HLTH INTERVENTN SVC	51	125	1,063	\$26,879.86	\$25.29	\$0.04	20.8	\$527.06
REHAB SUPPORT SERVICES	4	3	63	\$3,517.29	\$55.83	\$0.00	15.8	\$879.32
AMBULANCE SERVICES	194	203	194	\$13,518.03	\$69.68	\$0.02	1.0	\$69.68
LOCAL EDUCATION AGENCY	2,504	76,507	266,838	\$9,510,518.57	\$35.64	\$13.06	106.6	\$3,798.13
INFANT TODDLER	399	1,010	2,076	\$25,257.20	\$12.17	\$0.03	5.2	\$63.30
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	3,439	13,200	10,578	\$954,355.72	\$90.22	\$23.12	3.1	\$277.51
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	11,632	11,332	9,924	\$25,304.33	\$2.55	\$0.03	.9	\$2.18
INDIAN HEALTH SERVICES	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
FAMILY PLANNING SERVICES	131	141	142	\$6,999.73	\$49.29	\$0.01	1.1	\$53.43
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	2,205	2,306	2,301	\$159,688.44	\$69.40	\$16.94	1.0	\$72.42
HMO SERVICES	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
PACE SERVICES	599	599	596	\$2,186,880.12	\$3,669.26	\$3.00	1.0	\$3,650.89
PATIENT MANAGEMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
HEALTH INS PREMIUM PAYMENT	2,125	5,329	5,329	\$540,238.87	\$101.38	\$0.74	2.5	\$254.23
MEDICAL SUPPLIES	1,617	2,295	96,509	\$104,056.18	\$1.08	\$2.52	59.7	\$64.35
HEALTH HOME PROVIDER	166	175	175	\$23,474.76	\$134.14	\$0.03	1.1	\$141.41
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	686,739	698,819	696,790	\$596,647,919.88	\$856.28	\$819.41	1.0	\$868.81

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OTHER PRACTITIONER	6,483	56,332	124,966	\$9,651,355.56	\$77.23	\$13.25	19.3	\$1,488.72
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	20,191	19,808	19,829	\$3,238,993.39	\$163.35	\$78.45	1.0	\$160.42
ACCOUNTABLE CARE ORGANIZATIONS	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
OPTOMETRIST	242	259	300	\$14,270.91	\$47.57	\$0.02	1.2	\$58.97
CHIROPRACTIC	296	507	595	\$10,053.30	\$16.90	\$0.24	2.0	\$33.96
IOWA-PLAN-HAB	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
PODIATRIC	166	218	322	\$7,840.73	\$24.35	\$0.01	1.9	\$47.23
DELTA DENTAL	400,053	404,014	402,827	\$5,742,782.66	\$14.26	\$7.89	1.0	\$14.36
PHYSICAL DISABILITIES SVCS	7	13	2,839	\$9,720.99	\$3.42	\$0.01	405.6	\$1,388.71
BRAIN INJ WAIVER SERVICES	149	297	13,225	\$384,718.09	\$29.09	\$0.53	88.8	\$2,582.00
PSYCHIATRIC	536	764	891	\$48,451.27	\$54.38	\$0.07	1.7	\$90.39
RESIDENTIAL CARE FACILITY	364	391	10,047	\$87,299.59	\$8.69	\$0.12	27.6	\$239.83
ID WAIVER SERVICE	625	943	45,699	\$2,088,767.83	\$45.71	\$175.10	73.1	\$3,342.03
CHILDRENS MENTAL HEALTH SVC	28	32	5,084	\$23,867.44	\$4.69	\$24.94	181.6	\$852.41
AIDS WAIVER SERVICES	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
ELDERLY WAIVER SERVICES	19	57	1,498	\$26,332.39	\$17.58	\$3.27	78.8	\$1,385.92
ILL & HANDICAPPED WAIVER SVCS	294	348	18,347	\$478,613.02	\$26.09	\$206.74	62.4	\$1,627.94
COUNTY OFFICE REIMBURSEMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
MEP SERVICES	683	860	5,752	\$371,579.20	\$64.60	\$0.51	8.4	\$544.04
UNASSIGNED	1	0	0	\$139,006.11-	\$0.00	\$0.19-	.0	\$139,006.11-
* A L L C A T E G O R I E S *	709,731	1,319,371	2,851,873	\$661,974,221.51	\$232.12	\$909.13	4.0	\$932.71

*** END OF REPORT ***