

TITLE XIX REPORT OF EXPENDITURES
(BY CATEGORY OF SERVICE)
(FISCAL YTD TOTALS AS OF 06/30/21)

CATEGORY OF SERVICE	RECIPIENTS SERVED	NUMBER OF CLAIMS	UNITS OF SERVICE	TOTAL PAYMENT
INPATIENT	5,674	6,940	38,224	\$156,630,936.37
OUTPATIENT	21,603	76,700	18,583,115	\$19,575,355.11
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	218	476	7,778	\$2,120,513.36
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	483	3,443	100,035	\$34,196,905.16
INTER CARE MENTAL RETARDA	47	455	13,122	\$6,227,549.95
NURSING FAC FOR MENTAL ILL	1	1	8	\$0.00
HOME HEALTH	2,475	10,269	4,238,823	\$17,201,147.80
LEAD INSPECTION AGENCY	0	0	0	\$0.00
PHYSICIAN	24,597	159,385	469,242	\$13,981,647.02
CLINIC SERVICES	7,658	19,215	17,828	\$33,068,963.68
MEP CASE MANAGEMENT	1	0	0	\$0.00
EHR INCENTIVE PAYMENTS	1	0	0	\$705,500.00
LAB AND RADIOLOGICAL	5,209	11,973	30,301	\$413,029.77
HABILITATION SERVICES	66	1,214	8,547	\$1,191,299.07
BEHAVIORAL HLTH INTERVENTN SVC	233	2,926	18,740	\$436,857.10
REHAB SUPPORT SERVICES	7	116	672	\$37,417.23
AMBULANCE SERVICES	2,188	3,497	3,409	\$891,242.40
LOCAL EDUCATION AGENCY	4,360	343,613	1,690,522	\$47,477,930.25
INFANT TODDLER	1,000	5,439	10,118	\$141,738.71
IHAWP WELLNESS EXAM BONUS	0	0	0	\$0.00
ACO VIS PAYMENTS	0	0	0	\$0.00
PRESCRIBED DRUGS	9,914	169,225	135,961	\$11,622,853.87
IOWA-PLAN-PMIC	0	0	0	\$0.00
DRUG CAPITATION	0	0	0	\$0.00
NEMT SERVICES	18,796	127,207	111,930	\$274,046.76
INDIAN HEALTH SERVICES	1	0	0	\$6.17-
FAMILY PLANNING SERVICES	1,016	2,667	2,665	\$165,281.92
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	11,135	13,849	13,751	\$1,372,858.12
HMO SERVICES	0	0	0	\$0.00
PACE SERVICES	740	7,302	7,254	\$27,137,602.54
PATIENT MANAGEMENT	0	0	0	\$0.00
HEALTH INS PREMIUM PAYMENT	2,453	56,437	56,433	\$5,913,834.56
MEDICAL SUPPLIES	5,382	28,707	1,326,833	\$1,822,254.15
HEALTH HOME PROVIDER	331	2,280	2,276	\$356,107.86
TCM PAYMENTS TO IOWAPLAN	0	0	0	\$0.00
IHAWP QHP	2	0	0	\$101.17-
MCO	730,635	8,043,658	8,020,448	\$5,727,706,459.75
OTHER PRACTITIONER	16,780	279,500	610,048	\$40,367,753.85

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 06/30/21)

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	141,592	281,106	281,656	\$44,758,964.13
ACCOUNTABLE CARE ORGANIZATIONS	0	0	0	\$0.00
OPTOMETRIST	2,781	3,825	4,439	\$228,123.77
CHIROPRACTIC	1,148	6,975	8,235	\$137,963.37
IOWA-PLAN-HAB	0	0	0	\$0.00
PODIATRIC	891	2,479	3,897	\$89,944.35
DELTA DENTAL	430,340	4,596,345	4,577,853	\$77,156,437.29
PHYSICAL DISABILITIES SVCS	10	170	31,543	\$116,299.98
BRAIN INJ WAIVER SERVICES	170	3,666	137,418	\$4,691,997.05
PSYCHIATRIC	2,582	10,796	12,927	\$726,116.46
RESIDENTIAL CARE FACILITY	688	5,745	156,817	\$1,291,869.82
ID WAIVER SERVICE	761	11,139	563,417	\$22,597,165.08
CHILDRENS MENTAL HEALTH SVC	66	608	105,582	\$436,024.32
AIDS WAIVER SERVICES	0	0	0	\$0.00
ELDERLY WAIVER SERVICES	32	759	18,450	\$270,136.43
ILL & HANDICAPPED WAIVER SVCS	369	4,202	273,061	\$6,019,730.85
COUNTY OFFICE REIMBURSEMENT	0	0	0	\$0.00
MEP SERVICES	761	10,460	72,143	\$4,660,434.40
UNASSIGNED	1	0	0	\$48,184,606.12
* A L L C A T E G O R I E S *	770,731	14,314,769	41,765,521	\$6,362,402,709.81
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