

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 09/30/21)

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	532	540	3,179	\$15,681,139.54	\$4,932.73	\$21.15	6.0	\$29,475.83
OUTPATIENT	4,075	5,905	777,249	\$1,167,556.63	\$1.50	\$1.57	190.7	\$286.52
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	30	31	546	\$196,647.46	\$360.16	\$0.27	18.2	\$6,554.92
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	232	241	7,182	\$2,645,246.20	\$368.32	\$3.57	31.0	\$11,401.92
INTER CARE MENTAL RETARDA	29	30	878	\$375,325.90	\$427.48	\$0.51	30.3	\$12,942.27
NURSING FAC FOR MENTAL ILL	1	1	31	\$4,417.95	\$142.51	\$0.01	31.0	\$4,417.95
HOME HEALTH	590	800	208,876	\$1,508,120.91	\$7.22	\$2.03	354.0	\$2,556.14
LEAD INSPECTION AGENCY	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
PHYSICIAN	5,817	11,045	31,441	\$588,294.59	\$18.71	\$0.79	5.4	\$101.13
CLINIC SERVICES	1,141	1,507	1,339	\$4,032,877.96	\$3,011.86	\$5.44	1.2	\$3,534.51
MEP CASE MANAGEMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
EHR INCENTIVE PAYMENTS	1	0	0	\$34,000.00	\$0.00	\$0.05	.0	\$34,000.00
LAB AND RADIOLOGICAL	603	842	2,003	\$27,072.49	\$13.52	\$0.04	3.3	\$44.90
HABILITATION SERVICES	33	68	764	\$106,806.46	\$139.80	\$0.14	23.2	\$3,236.56
BEHAVIORAL HLTH INTERVENTN SVC	55	146	1,459	\$32,171.23	\$22.05	\$0.04	26.5	\$584.93
REHAB SUPPORT SERVICES	1	0	0	\$2,786.58	\$0.00	\$0.00	.0	\$2,786.58
AMBULANCE SERVICES	199	241	235	\$10,179.61	\$43.32	\$0.01	1.2	\$51.15
LOCAL EDUCATION AGENCY	563	7,104	23,782	\$884,661.42	\$37.20	\$1.19	42.2	\$1,571.33
INFANT TODDLER	199	368	716	\$11,195.00	\$15.64	\$0.02	3.6	\$56.26
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	3,441	12,567	10,005	\$994,678.82	\$99.42	\$22.74	2.9	\$289.07
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	11,007	11,480	10,146	\$24,381.66	\$2.40	\$0.03	.9	\$2.22
INDIAN HEALTH SERVICES	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
FAMILY PLANNING SERVICES	123	147	147	\$9,399.65	\$63.94	\$0.01	1.2	\$76.42
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	149	166	165	\$45,409.87	\$275.21	\$4.06	1.1	\$304.76
HMO SERVICES	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
PACE SERVICES	606	606	606	\$2,438,964.63	\$4,024.69	\$3.29	1.0	\$4,024.69
PATIENT MANAGEMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
HEALTH INS PREMIUM PAYMENT	2,111	4,668	4,668	\$496,318.09	\$106.32	\$0.67	2.2	\$235.11
MEDICAL SUPPLIES	1,240	1,872	268,220	\$152,699.18	\$0.57	\$3.49	216.3	\$123.14
HEALTH HOME PROVIDER	109	131	131	\$23,987.99	\$183.11	\$0.03	1.2	\$220.07
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	699,173	714,914	712,876	\$479,619,948.34	\$672.80	\$646.85	1.0	\$685.98

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OTHER PRACTITIONER	2,465	6,818	21,785	\$908,245.73	\$41.69	\$1.22	8.8	\$368.46
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	857	982	982	\$146,944.30	\$149.64	\$3.36	1.1	\$171.46
ACCOUNTABLE CARE ORGANIZATIONS	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
OPTOMETRIST	272	271	302	\$14,050.89	\$46.53	\$0.02	1.1	\$51.66
CHIROPRACTIC	285	556	671	\$11,312.35	\$16.86	\$0.26	2.4	\$39.69
IOWA-PLAN-HAB	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
PODIATRIC	148	182	229	\$6,519.78	\$28.47	\$0.01	1.5	\$44.05
DELTA DENTAL	727,778	720,536	719,021	\$9,248,914.39	\$12.86	\$12.47	1.0	\$12.71
PHYSICAL DISABILITIES SVCS	7	13	2,859	\$9,597.27	\$3.36	\$0.01	408.4	\$1,371.04
BRAIN INJ WAIVER SERVICES	150	346	12,308	\$436,558.47	\$35.47	\$0.59	82.1	\$2,910.39
PSYCHIATRIC	525	786	906	\$55,896.50	\$61.70	\$0.08	1.7	\$106.47
RESIDENTIAL CARE FACILITY	385	435	12,318	\$103,621.54	\$8.41	\$0.14	32.0	\$269.15
ID WAIVER SERVICE	596	1,055	52,949	\$1,584,417.12	\$29.92	\$132.76	88.8	\$2,658.42
CHILDRENS MENTAL HEALTH SVC	34	41	8,490	\$36,123.99	\$4.25	\$41.14	249.7	\$1,062.47
AIDS WAIVER SERVICES	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
ELDERLY WAIVER SERVICES	17	39	925	\$36,681.90	\$39.66	\$4.59	54.4	\$2,157.76
ILL & HANDICAPPED WAIVER SVCS	293	353	21,183	\$503,228.56	\$23.76	\$220.52	72.3	\$1,717.50
COUNTY OFFICE REIMBURSEMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
MEP SERVICES	651	782	6,267	\$404,848.20	\$64.60	\$0.55	9.6	\$621.89
UNASSIGNED	1	0	0	\$228,225.36-	\$0.00	\$0.31-	.0	\$228,225.36-
* A L L C A T E G O R I E S *	738,496	1,508,615	2,927,839	\$524,393,023.79	\$179.11	\$707.23	4.0	\$710.08

\*\*\* END OF REPORT \*\*\*