

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 11/30/21)

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	578	604	3,462	\$7,563,669.58	\$2,184.77	\$10.06	6.0	\$13,085.93
OUTPATIENT	4,679	7,730	1,087,533	\$1,650,090.83	\$1.52	\$2.20	232.4	\$352.66
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	49	65	957	\$191,581.15	\$200.19	\$0.25	19.5	\$3,909.82
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	224	242	7,034	\$2,481,801.75	\$352.83	\$3.30	31.4	\$11,079.47
INTER CARE MENTAL RETARDA	34	36	1,082	\$461,884.11	\$426.88	\$0.61	31.8	\$13,584.83
NURSING FAC FOR MENTAL ILL	1	0	92-	\$12,907.70-	\$140.30	\$0.03-	92.0-	\$12,907.70-
HOME HEALTH	754	1,132	237,272	\$1,428,984.84	\$6.02	\$1.90	314.7	\$1,895.21
LEAD INSPECTION AGENCY	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
PHYSICIAN	6,135	14,506	45,880	\$700,064.94	\$15.26	\$0.93	7.5	\$114.11
CLINIC SERVICES	1,244	1,772	1,838	\$10,119,582.39	\$5,505.76	\$13.46	1.5	\$8,134.71
MEP CASE MANAGEMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
EHR INCENTIVE PAYMENTS	1	0	0	\$331,500.00	\$0.00	\$0.44	.0	\$331,500.00
LAB AND RADIOLOGICAL	735	1,041	2,727	\$32,467.15	\$11.91	\$0.04	3.7	\$44.17
HABILITATION SERVICES	34	100	739	\$117,262.22	\$158.68	\$0.16	21.7	\$3,448.89
BEHAVIORAL HLTH INTERVENTN SVC	69	207	1,590	\$37,513.22	\$23.59	\$0.05	23.0	\$543.67
REHAB SUPPORT SERVICES	4	3	63	\$3,517.29	\$55.83	\$0.00	15.8	\$879.32
AMBULANCE SERVICES	275	329	309	\$77,007.40	\$249.21	\$0.10	1.1	\$280.03
LOCAL EDUCATION AGENCY	1,474	23,922	116,592	\$4,362,859.40	\$37.42	\$5.81	79.1	\$2,959.88
INFANT TODDLER	279	512	1,326	\$20,103.97	\$15.16	\$0.03	4.8	\$72.06
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	3,589	14,401	11,581	\$1,130,202.89	\$97.59	\$24.96	3.2	\$314.91
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	10,835	11,248	10,396	\$25,013.80	\$2.41	\$0.03	1.0	\$2.31
INDIAN HEALTH SERVICES	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
FAMILY PLANNING SERVICES	160	194	347	\$16,086.65	\$46.36	\$0.02	2.2	\$100.54
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	83	78	77	\$104,418.08	\$1,356.08	\$9.56	.9	\$1,258.05
HMO SERVICES	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
PACE SERVICES	608	607	607	\$2,423,135.07	\$3,991.99	\$3.22	1.0	\$3,985.42
PATIENT MANAGEMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
HEALTH INS PREMIUM PAYMENT	2,095	4,195	4,195	\$426,079.07	\$101.57	\$0.57	2.0	\$203.38
MEDICAL SUPPLIES	2,216	3,483	111,852	\$190,025.66	\$1.70	\$4.20	50.5	\$85.75
HEALTH HOME PROVIDER	140	174	174	\$21,172.57	\$121.68	\$0.03	1.2	\$151.23
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	707,451	723,518	722,229	\$480,694,169.72	\$665.57	\$639.60	1.0	\$679.47

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OTHER PRACTITIONER	5,032	22,580	114,705	\$4,223,639.07	\$36.82	\$5.62	22.8	\$839.36
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	598	490	489	\$82,190.74	\$168.08	\$1.82	.8	\$137.44
ACCOUNTABLE CARE ORGANIZATIONS	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
OPTOMETRIST	334	373	472	\$17,550.47	\$37.18	\$0.02	1.4	\$52.55
CHIROPRACTIC	333	760	850	\$13,146.97	\$15.47	\$0.29	2.6	\$39.48
IOWA-PLAN-HAB	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
PODIATRIC	205	287	469	\$10,347.53	\$22.06	\$0.01	2.3	\$50.48
DELTA DENTAL	738,553	730,856	729,883	\$9,363,328.18	\$12.83	\$12.46	1.0	\$12.68
PHYSICAL DISABILITIES SVCS	7	11	2,813	\$9,093.95	\$3.23	\$0.01	401.9	\$1,299.14
BRAIN INJ WAIVER SERVICES	150	311	12,268	\$411,563.91	\$33.55	\$0.55	81.8	\$2,743.76
PSYCHIATRIC	564	907	1,057	\$57,562.08	\$54.46	\$0.08	1.9	\$102.06
RESIDENTIAL CARE FACILITY	384	448	12,717	\$110,567.28	\$8.69	\$0.15	33.1	\$287.94
ID WAIVER SERVICE	581	1,050	49,232	\$714,911.94	\$14.52	\$60.15	84.7	\$1,230.49
CHILDRENS MENTAL HEALTH SVC	34	40	5,239	\$24,649.01	\$4.70	\$27.88	154.1	\$724.97
AIDS WAIVER SERVICES	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
ELDERLY WAIVER SERVICES	17	42	925	\$11,643.97	\$12.59	\$1.44	54.4	\$684.94
ILL & HANDICAPPED WAIVER SVCS	287	336	20,673	\$560,311.20	\$27.10	\$247.49	72.0	\$1,952.30
COUNTY OFFICE REIMBURSEMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
MEP SERVICES	624	666	5,235	\$338,181.00	\$64.60	\$0.45	8.4	\$541.96
UNASSIGNED	1	0	0	\$1,030,865.96-	\$0.00	\$1.37-	.0	\$0.00
* A L L C A T E G O R I E S *	750,079	1,569,256	3,326,797	\$529,515,107.39	\$159.17	\$704.56	4.4	\$705.95

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