

TITLE XIX REPORT OF EXPENDITURES  
(BY CATEGORY OF SERVICE)  
(FISCAL YTD TOTALS AS OF 12/31/21)

CATEGORY OF SERVICE	RECIPIENTS SERVED	NUMBER OF CLAIMS	UNITS OF SERVICE	TOTAL PAYMENT
INPATIENT	2,746	3,235	18,356	\$51,852,091.12
OUTPATIENT	14,741	38,368	5,333,191	\$8,582,418.07
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	127	267	4,192	\$1,452,843.94
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	380	1,456	42,123	\$17,179,966.99
INTER CARE MENTAL RETARDA	40	223	6,551	\$3,009,799.21
NURSING FAC FOR MENTAL ILL	1	3	0	\$0.00
HOME HEALTH	1,608	5,265	1,307,453	\$8,379,321.19
LEAD INSPECTION AGENCY	0	0	0	\$0.00
PHYSICIAN	16,669	76,764	230,327	\$4,466,824.96
CLINIC SERVICES	4,559	9,859	9,901	\$26,582,460.25
MEP CASE MANAGEMENT	0	0	0	\$0.00
EHR INCENTIVE PAYMENTS	1	0	0	\$427,834.00
LAB AND RADIOLOGICAL	2,848	5,724	15,042	\$183,458.30
HABILITATION SERVICES	51	405	3,946	\$620,556.22
BEHAVIORAL HLTH INTERVENTN SVC	147	1,334	10,095	\$265,051.97
REHAB SUPPORT SERVICES	4	16	349	\$22,271.25
AMBULANCE SERVICES	1,265	1,901	1,858	\$784,838.08
LOCAL EDUCATION AGENCY	2,881	102,954	456,761	\$15,318,908.00
INFANT TODDLER	563	2,065	4,437	\$64,357.55
IHAWP WELLNESS EXAM BONUS	0	0	0	\$0.00
ACO VIS PAYMENTS	0	0	0	\$0.00
PRESCRIBED DRUGS	6,967	79,715	63,671	\$6,226,802.33
IOWA-PLAN-PMIC	0	0	0	\$0.00
DRUG CAPITATION	0	0	0	\$0.00
NEMT SERVICES	14,978	67,659	60,709	\$147,421.88
INDIAN HEALTH SERVICES	0	0	0	\$0.00
FAMILY PLANNING SERVICES	495	1,018	1,172	\$66,771.18
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	1,814	2,088	2,075	\$492,248.95
HMO SERVICES	0	0	0	\$0.00
PACE SERVICES	651	3,640	3,626	\$14,524,142.45
PATIENT MANAGEMENT	0	0	0	\$0.00
HEALTH INS PREMIUM PAYMENT	2,307	27,728	27,728	\$2,872,423.86
MEDICAL SUPPLIES	4,580	14,741	850,238	\$934,334.71
HEALTH HOME PROVIDER	255	1,055	1,055	\$149,932.60
TCM PAYMENTS TO IOWAPLAN	0	0	0	\$0.00
IHAWP QHP	0	0	0	\$0.00
MCO	740,222	4,292,023	4,282,248	\$2,926,383,453.82
OTHER PRACTITIONER	11,296	89,622	308,017	\$13,015,998.96

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 12/31/21)

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	0	0	0	\$0.00
DENTAL	13,297	14,501	14,558	\$2,579,923.74
ACCOUNTABLE CARE ORGANIZATIONS	0	0	0	\$0.00
OPTOMETRIST	1,412	1,729	2,024	\$85,269.31
CHIROPRACTIC	784	3,437	3,899	\$62,214.38
IOWA-PLAN-HAB	0	0	0	\$0.00
PODIATRIC	636	1,412	2,016	\$51,668.16
DELTA DENTAL	772,367	4,325,945	4,316,277	\$52,941,656.35
PHYSICAL DISABILITIES SVCS	8	81	16,503	\$56,817.19
BRAIN INJ WAIVER SERVICES	155	1,843	63,890	\$2,383,471.70
PSYCHIATRIC	1,642	5,069	5,895	\$326,112.20
RESIDENTIAL CARE FACILITY	519	2,634	72,588	\$588,432.09
ID WAIVER SERVICE	682	5,992	310,625	\$9,729,660.18
CHILDRENS MENTAL HEALTH SVC	51	255	36,996	\$165,138.67
AIDS WAIVER SERVICES	0	0	0	\$0.00
ELDERLY WAIVER SERVICES	21	265	6,407	\$118,613.04
ILL & HANDICAPPED WAIVER SVCS	345	2,131	141,547	\$3,235,958.56
COUNTY OFFICE REIMBURSEMENT	0	0	0	\$0.00
MEP SERVICES	690	4,281	33,458	\$2,161,386.80
UNASSIGNED	1	0	0	\$7,070,590.99
* A L L C A T E G O R I E S *	790,043	9,198,703	18,071,804	\$3,185,563,445.20
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