

TITLE XIX REPORT OF EXPENDITURES
(BY CATEGORY OF SERVICE)
(FISCAL YTD TOTALS AS OF 01/31/22)

CATEGORY OF SERVICE	RECIPIENTS SERVED	NUMBER OF CLAIMS	UNITS OF SERVICE	TOTAL PAYMENT
INPATIENT	3,274	3,911	21,889	\$59,627,243.21
OUTPATIENT	16,001	45,687	6,579,259	\$10,400,488.19
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	141	305	4,807	\$1,619,175.24
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	390	1,703	49,366	\$19,749,290.04
INTER CARE MENTAL RETARDA	40	251	7,355	\$3,386,104.88
NURSING FAC FOR MENTAL ILL	1	3	0	\$0.00
HOME HEALTH	1,760	6,265	1,762,399	\$9,688,608.83
LEAD INSPECTION AGENCY	0	0	0	\$0.00
PHYSICIAN	18,272	92,269	271,936	\$5,606,676.07
CLINIC SERVICES	5,101	11,660	11,743	\$29,010,554.59
MEP CASE MANAGEMENT	0	0	0	\$0.00
EHR INCENTIVE PAYMENTS	1	0	0	\$427,834.00
LAB AND RADIOLOGICAL	3,171	6,588	17,410	\$217,017.10
HABILITATION SERVICES	55	475	4,733	\$718,332.77
BEHAVIORAL HLTH INTERVENTN SVC	155	1,490	11,186	\$283,717.07
REHAB SUPPORT SERVICES	4	19	418	\$26,123.52
AMBULANCE SERVICES	1,462	2,275	2,226	\$936,114.65
LOCAL EDUCATION AGENCY	3,219	142,206	650,265	\$21,780,089.50
INFANT TODDLER	667	2,809	6,056	\$89,101.39
IHAWP WELLNESS EXAM BONUS	0	0	0	\$0.00
ACO VIS PAYMENTS	0	0	0	\$0.00
PRESCRIBED DRUGS	7,528	95,277	78,255	\$7,389,852.92
IOWA-PLAN-PMIC	0	0	0	\$0.00
DRUG CAPITATION	0	0	0	\$0.00
NEMT SERVICES	15,596	78,972	70,675	\$171,388.46
INDIAN HEALTH SERVICES	0	0	0	\$0.00
FAMILY PLANNING SERVICES	532	1,111	1,265	\$76,495.59
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	1,901	2,489	2,476	\$599,285.87
HMO SERVICES	0	0	0	\$0.00
PACE SERVICES	659	4,254	4,237	\$16,978,742.97
PATIENT MANAGEMENT	0	0	0	\$0.00
HEALTH INS PREMIUM PAYMENT	2,331	32,048	32,048	\$3,331,028.19
MEDICAL SUPPLIES	5,310	17,783	947,045	\$1,131,523.94
HEALTH HOME PROVIDER	258	1,152	1,152	\$165,984.62
TCM PAYMENTS TO IOWAPLAN	0	0	0	\$0.00
IHAWP QHP	0	0	0	\$0.00
MCO	749,559	5,026,425	5,015,145	\$3,409,090,001.85
OTHER PRACTITIONER	12,834	117,936	396,518	\$17,964,276.10

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 01/31/22)

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	13,579	14,830	14,885	\$2,632,092.35
ACCOUNTABLE CARE ORGANIZATIONS	0	0	0	\$0.00
OPTOMETRIST	1,605	2,013	2,348	\$101,013.97
CHIROPRACTIC	850	4,051	4,620	\$74,064.25
IOWA-PLAN-HAB	0	0	0	\$0.00
PODIATRIC	684	1,610	2,263	\$56,931.94
DELTA DENTAL	781,500	5,067,945	5,057,360	\$63,840,916.07
PHYSICAL DISABILITIES SVCS	8	91	18,083	\$62,164.95
BRAIN INJ WAIVER SERVICES	155	2,080	72,156	\$2,722,401.96
PSYCHIATRIC	1,799	5,951	6,949	\$385,303.42
RESIDENTIAL CARE FACILITY	533	2,987	82,086	\$670,709.99
ID WAIVER SERVICE	693	6,949	355,843	\$11,897,268.12
CHILDRENS MENTAL HEALTH SVC	51	282	40,705	\$183,011.16
AIDS WAIVER SERVICES	0	0	0	\$0.00
ELDERLY WAIVER SERVICES	21	299	7,228	\$124,408.01
ILL & HANDICAPPED WAIVER SVCS	346	2,481	161,622	\$3,778,981.04
COUNTY OFFICE REIMBURSEMENT	0	0	0	\$0.00
MEP SERVICES	696	4,919	38,108	\$2,461,776.80
UNASSIGNED	1	0	0	\$5,879,337.79
* A L L C A T E G O R I E S *	799,984	10,811,851	21,814,120	\$3,715,335,433.38
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