IOWA DEPARTMENT OF HUMAN SERVICES MEDICAID MANAGEMENT INFORMATION SYSTEM

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T I TLE XIX REPORT OF EXPENDITURES (BY CATEGORY OF SERVICE) MONTHLY TOTALS AS OF 06/30/05)

					* * * * *	AVERAGES		* * * *
					COST PER	COST PER	UNITS PER	COST PER
CATEGORY OF SERVICE	RECIPIENTS	NUMBER OF	UNITS OF	TOTAL	UNIT OF	ELIGIBLE	RECIPIENT	RECIPIENT
	SERVED	CLAIMS	SERVICE	PAYMENT	SERVICE	RECIPIENT	SERVED	SERVED
INPATIENT	5,562	5,584	35,604	\$23,563,504.78	\$661.82	\$77.98	6.4	\$4,236.52
OUTPATIENT	46,434	63,192	406,773	\$13,808,127.62	\$33.95	\$45.69	8.8	\$297.37
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	1	0	111	\$1,329.34	\$11.98	\$0.01	111	\$1,329.34
SKILLED NURSING FACILITY	708	892	5,728	\$1,642,649.60	\$286.78	\$5.44	8.1	\$2,320.13
INTERMEDIATE CARE FACILITY	13,458	14,131	412,647	\$33,315,573.14	\$80.74	\$110.25	30.7	\$2,475.52
INTER CARE MENTAL RETARDA	1,925	2,337	70,156	\$21,801,894.68	\$310.76	\$72.15	36.4	\$11,325.66
NURSING FAC FOR MENTAL ILL	20	19	553	\$91,937.74	\$166.25	\$0.68	27.7	\$4,596.89
HOME HEALTH	9,485	12,751	164,066	\$7,164,709.75	\$43.67	\$23.71	17.3	\$755.37
LEAD INSPECTION AGENCY	6	6	6	\$1,710.54	\$285.09	\$0.01	1	\$285.09
PHYSICIAN	100,242	200,143	247,849	\$13,740,899.80	\$55.44	\$45.47	2.5	\$137.08
CLINIC SERVICES	16,406	23,301	21,127	\$2,647,231.19	\$125.30	\$8.76	1.3	\$161.36
MEP CASE MANAGEMENT	46	0	0	\$71,580.31	\$0.00	\$0.24	0	\$1,556.09
LAB AND RADIOLOGICAL	8,796	11,736	26,040	\$387,896.82	\$14.90	\$1.28	3	\$44.10
REHAB SUPPORT SERVICES	2,624	3,741	64,649	\$3,295,293.77	\$50.97	\$10.90	24.6	\$1,255.83
AMBULANCE SERVICES	906	967	937	\$95,470.39	\$101.89	\$0.32	1	\$105.38
LOCAL EDUCATION AGENCY	1,410	3,690	499,232	\$3,689,747.87	\$7.39	\$12.21	354.1	\$2,616.84
EARLY ACCESS SERVICES	281	315	1,964	\$20,328.61	\$10.35	\$0.07	7	\$72.34
PRESCRIBED DRUGS	133,925	691,078	643,795	\$38,489,556.82	\$59.79	\$129.28	4.8	\$287.40
DRUG CAPITATION	0	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00
INDIAN HEALTH SERVICES	1	0	0	\$970.00	\$0.00	\$0.00	0	\$970.00
FAMILY PLANNING SERVICES	8,656	10,757	9,929	\$463,613.37	\$46.69	\$1.53	1.1	\$53.56
IOWA PLAN PROGRAM	252,068	273,978	273,978	\$7,944,051.26	\$29.00	\$26.29	1.1	\$31.52
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	14,553	16,787	16,775	\$1,084,949.02	\$64.68	\$6.14	1.2	\$74.55
HMO SERVICES	5,114	5,338	5,329	\$818,616.13	\$153.62	\$631.16	1	\$160.07
PATIENT MANAGEMENT	127,465	127,464	127,464	\$251,002.78	\$1.97	\$34.44	1	\$1.97
HEALTH INS PREMIUM PAYMENT	5,694	16,242	16,242	\$684,985.99	\$42.17	\$2.27	2.9	\$120.30
MEDICAL SUPPLIES	18,535	34,805	1,585,196	\$3,048,481.29	\$1.92	\$10.24	85.5	\$164.47
OTHER PRACTITIONER	10,096	13,528	50,324	\$1,357,794.26	\$26.98	\$4.49	5	\$134.49
FAMILY CENTERED PROGRAM	2,241	4,265	34,969	\$1,046,647.08	\$29.93	\$5.80	15.6	\$467.04
FAMILY PRESERVATION	1	1	1	\$2,160.63	\$2,160.63	\$0.01	1	\$2,160.63
TREATMENT FOSTER FAMILY CARE	538	1,100	5,474	\$230,617.00	\$42.13	\$1.28	10.2	\$428.66
GROUP TREATMENT THERAPY	940	1,964	34,583	\$2,188,523.58	\$63.28	\$12.13	36.8	\$2,328.22
DENTAL	21,727	26,167	26,566	\$3,475,097.30	\$130.81	\$11.67	1.2	\$159.94
OPTOMETRIST	10,447	12,154	12,910	\$650,761.30	\$50.41	\$2.15	1.2	\$62.29
CHIROPRACTIC	6,610	11,570	14,802	\$408,010.82	\$27.56	\$1.37	2.2	\$61.73
PODIATRIC	2,896	3,474	4,082	\$164,681.67	\$40.34	\$0.54	1.4	\$56.87
PHYSICIAL DISABILITIES SVCS	393	609	14,373	\$178,797.18	\$12.44	\$0.59	36.6	\$454.95
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CATEGORY OF SERVICE	RECIPIENTS	NUMBER OF	UNITS OF	TOTAL	UNIT OF	ELIGIBLE	RECIPIENT	RECIPIENT
	SERVED	CLAIMS	SERVICE	PAYMENT	SERVICE	RECIPIENT	SERVED	SERVED
BRAIN INJ WAIVER SERVICES	490	1,137	31,880	\$749,847.17	\$23.52	\$2.48	65.1	\$1,530.30
PSYCHIATRIC	1,882	2,643	3,521	\$116,849.69	\$33.19	\$0.39	1.9	\$62.09
RESIDENTIAL CARE FACILITY	2,294	2,763	79,649	\$606,354.41	\$7.61	\$2.01	34.7	\$264.32
MR WAIVER SERVICE	8,051	14,244	534,544	\$18,931,803.99	\$35.42	\$2,238.86	66.4	\$2,351.48
MR OBRA WAIVER SERVICES	0	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00
AIDS WAIVER SERVICES	30	44	2,611	\$24,616.31	\$9.43	\$600.40	87	\$820.54
ELDERLY WAIVER SERVICES	6,838	16,187	297,428	\$3,250,925.46	\$10.93	\$441.76	43.5	\$475.42
ILL & HANDICAPPED WAIVER SVC	S 1,617	2,652	79,997	\$1,259,902.74	\$15.75	\$639.54	49.5	\$779.16
COUNTY OFFICE REIMBURSEMENT	0	0	0	\$0.00	\$0.00	\$0.00	0	\$0.00
MEP SERVICES	8,897	11,994	12,993	\$2,629,412.51	\$202.37	\$8.70	1.5	\$295.54
UNASSIGNED	6	0	0	\$783,596.48-	\$0.00	\$2.59-	0	\$130,599.41-
* ALL CATEGORIES	* 308,562	1,645,750	5,876,857	\$214,615,319.23	\$36.52	\$710.22	19	\$695.53
			*** END OF	REPORT ***				

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