

Minnesota Health Care Programs - Abortion Provider Report
Fee-For-Service Data Only
Final - CY 2014 (All Quarters)

PROVIDER	MONTH of SERVICE	MAJOR PROGRAM	ABORTION RECIPIENT COUNT	REIMBURSEMENT AMOUNT	TOTAL REIMBURSEMENT AMOUNT
ABBOTT NORTHWESTERN HOSPITAL	Apr	Medicaid	1	\$1,494.02	\$1,494.02
ABBOTT NORTHWESTERN HOSPITAL					\$1,494.02
HANSON MILDRED S	Jan	Medicaid	23	\$7,784.39	\$7,784.39
HANSON MILDRED S	Feb	Medicaid	27	\$9,568.54	\$9,568.54
HANSON MILDRED S	Mar	Medicaid	27	\$10,036.06	\$10,036.06
HANSON MILDRED S	Apr	Medicaid	24	\$8,754.67	\$8,754.67
HANSON MILDRED S	May	Medicaid	19	\$7,013.12	\$7,013.12
HANSON MILDRED S	Jun	Medicaid	19	\$7,018.20	\$7,018.20
HANSON MILDRED S	Jul	Medicaid	36	\$13,855.50	\$13,855.50
HANSON MILDRED S	Aug	Medicaid	31	\$11,504.45	\$11,504.45
HANSON MILDRED S	Sep	Medicaid	35	\$13,112.59	\$13,112.59
HANSON MILDRED S	Oct	Medicaid	32	\$11,274.06	\$11,274.06
HANSON MILDRED S	Nov	Medicaid	26	\$9,647.12	\$9,647.12
HANSON MILDRED S	Dec	Medicaid	37	\$14,324.42	\$14,324.42
HANSON MILDRED S Total					\$123,893.12
MAYO CLINIC*	Jan	Medicaid	1	\$305.99	\$305.99
MAYO CLINIC* Total					\$305.99
PARK NICOLLET CLINIC ST LOUIS PK	Jul	Medicaid	1	\$262.89	\$262.89
PARK NICOLLET CLINIC ST LOUIS PK	Aug	Medicaid	1	\$236.82	\$236.82
PARK NICOLLET CLINIC ST LOUIS PK Total					\$499.71
PLANNED PARENTHOOD: HIGHLAND CLINIC	Jan	Medicaid	142	\$33,040.92	\$33,040.92
PLANNED PARENTHOOD: HIGHLAND CLINIC	Feb	Medicaid	118	\$27,292.33	\$27,292.33
PLANNED PARENTHOOD: HIGHLAND CLINIC	Mar	Medicaid	144	\$32,813.64	\$32,813.64
PLANNED PARENTHOOD: HIGHLAND CLINIC	Apr	Medicaid	125	\$29,791.67	\$29,791.67

PROVIDER	MONTH of SERVICE	MAJOR PROGRAM	ABORTION RECIPIENT COUNT	REIMBURSEMENT AMOUNT	TOTAL REIMBURSEMENT AMOUNT
PLANNED PARENTHOOD: HIGHLAND CLINIC	May	Medicaid	149	\$32,978.63	\$32,978.63
PLANNED PARENTHOOD: HIGHLAND CLINIC	Jun	Medicaid	165	\$35,838.66	\$35,838.66
PLANNED PARENTHOOD: HIGHLAND CLINIC	Jul	Medicaid	163	\$35,576.59	\$35,576.59
PLANNED PARENTHOOD: HIGHLAND CLINIC	Aug	Medicaid	143	\$32,675.37	\$32,675.37
PLANNED PARENTHOOD: HIGHLAND CLINIC	Sep	Medicaid	148	\$34,808.66	\$34,808.66
PLANNED PARENTHOOD: HIGHLAND CLINIC	Oct	Medicaid	195	\$46,126.86	\$46,126.86
PLANNED PARENTHOOD: HIGHLAND CLINIC	Nov	Medicaid	134	\$29,797.51	\$29,797.51
PLANNED PARENTHOOD: HIGHLAND CLINIC	Dec	Medicaid	175	\$39,971.80	\$39,971.80
PLANNED PARENTHOOD: HIGHLAND CLINIC Total					\$410,712.64
RED RIVER WOMENS CLINIC	Jan	Medicaid	10	\$1,814.92	\$1,814.92
RED RIVER WOMENS CLINIC	Feb	Medicaid	13	\$1,979.61	\$1,979.61
RED RIVER WOMENS CLINIC	Mar	Medicaid	9	\$1,456.54	\$1,456.54
RED RIVER WOMENS CLINIC	Apr	Medicaid	6	\$1,041.35	\$1,041.35
RED RIVER WOMENS CLINIC	May	Medicaid	12	\$1,701.43	\$1,701.43
RED RIVER WOMENS CLINIC	Jun	Medicaid	11	\$2,024.73	\$2,024.73
RED RIVER WOMENS CLINIC	Jul	Medicaid	7	\$1,003.04	\$1,003.04
RED RIVER WOMENS CLINIC	Aug	Medicaid	13	\$1,598.75	\$1,598.75
RED RIVER WOMENS CLINIC	Sep	Medicaid	6	\$1,081.14	\$1,081.14
RED RIVER WOMENS CLINIC	Oct	Medicaid	11	\$1,997.29	\$1,997.29
RED RIVER WOMENS CLINIC	Nov	Medicaid	12	\$2,107.56	\$2,107.56
RED RIVER WOMENS CLINIC	Dec	Medicaid	18	\$3,253.96	\$3,253.96
RED RIVER WOMENS CLINIC Total					\$21,060.32
ROBBINSDALE CLINIC	Jan	Medicaid	37	\$9,418.98	\$9,418.98
ROBBINSDALE CLINIC	Feb	Medicaid	33	\$8,583.19	\$8,583.19
ROBBINSDALE CLINIC	Mar	Medicaid	39	\$9,754.01	\$9,754.01
ROBBINSDALE CLINIC	Apr	Medicaid	41	\$10,791.79	\$10,791.79
ROBBINSDALE CLINIC	May	Medicaid	27	\$6,926.43	\$6,926.43
ROBBINSDALE CLINIC	Jun	Medicaid	32	\$8,011.44	\$8,011.44
ROBBINSDALE CLINIC	Jul	Medicaid	40	\$9,701.90	\$9,701.90
ROBBINSDALE CLINIC	Aug	Medicaid	44	\$11,505.14	\$11,505.14

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ROBBINSDALE CLINIC	Sep	Medicaid	34	\$8,990.02	
ROBBINSDALE CLINIC	Oct	Medicaid	32	\$8,651.65	
ROBBINSDALE CLINIC	Nov	Medicaid	36	\$9,640.36	
ROBBINSDALE CLINIC	Dec	Medicaid	34	\$9,406.78	
ROBBINSDALE CLINIC Total					\$111,381.69
UMMC FAIRVIEW	Apr	Medicaid	1	\$1,247.57	
UMMC FAIRVIEW	May	Medicaid	1	\$1,333.50	
UMMC FAIRVIEW	Jun	Medicaid	1	\$1,247.57	
UMMC FAIRVIEW Total					\$3,828.64
UNIVERSITY OF MINNESOTA PHYSICIANS*	Apr	Medicaid	1	\$236.82	
UNIVERSITY OF MINNESOTA PHYSICIANS*	Oct	Medicaid	1	\$288.15	
UNIVERSITY OF MINNESOTA PHYSICIANS* TOTAL					\$524.97
WHOLE WOMANS HLTH OF THE TWIN CITIE	Jan	Medicaid	114	\$25,928.20	
WHOLE WOMANS HLTH OF THE TWIN CITIE	Feb	Medicaid	92	\$22,053.01	
WHOLE WOMANS HLTH OF THE TWIN CITIE	Mar	Medicaid	79	\$19,235.31	
WHOLE WOMANS HLTH OF THE TWIN CITIE	Apr	Medicaid	86	\$19,515.18	
WHOLE WOMANS HLTH OF THE TWIN CITIE	May	Medicaid	102	\$24,219.86	
WHOLE WOMANS HLTH OF THE TWIN CITIE	Jun	Medicaid	85	\$20,254.20	
WHOLE WOMANS HLTH OF THE TWIN CITIE	Jul	Medicaid	85	\$20,244.05	
WHOLE WOMANS HLTH OF THE TWIN CITIE	Aug	Medicaid	86	\$18,396.84	
WHOLE WOMANS HLTH OF THE TWIN CITIE	Sep	Medicaid	93	\$22,966.25	
WHOLE WOMANS HLTH OF THE TWIN CITIE	Oct	Medicaid	75	\$17,224.39	
WHOLE WOMANS HLTH OF THE TWIN CITIE	Nov	Medicaid	81	\$18,605.88	
WHOLE WOMANS HLTH OF THE TWIN CITIE	Dec	Medicaid	103	\$24,343.96	
WHOLE WOMANS HLTH OF THE TWIN CITIE Total					\$252,987.13
WOMENS HEALTH CENTER OF DULUTH PA	Jan	Medicaid	13	\$1,607.29	
WOMENS HEALTH CENTER OF DULUTH PA	Feb	Medicaid	15	\$2,084.23	
WOMENS HEALTH CENTER OF DULUTH PA	Mar	Medicaid	15	\$2,355.91	

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WOMENS HEALTH CENTER OF DULUTH PA	Apr	Medicaid	13	\$2,059.65	\$2,059.65
WOMENS HEALTH CENTER OF DULUTH PA	May	Medicaid	17	\$2,414.49	\$2,414.49
WOMENS HEALTH CENTER OF DULUTH PA	Jun	Medicaid	20	\$3,054.24	\$3,054.24
WOMENS HEALTH CENTER OF DULUTH PA	Jul	Medicaid	13	\$2,077.69	\$2,077.69
WOMENS HEALTH CENTER OF DULUTH PA	Aug	Medicaid	14	\$2,030.58	\$2,030.58
WOMENS HEALTH CENTER OF DULUTH PA	Sep	Medicaid	20	\$3,280.72	\$3,280.72
WOMENS HEALTH CENTER OF DULUTH PA	Oct	Medicaid	8	\$1,413.95	\$1,413.95
WOMENS HEALTH CENTER OF DULUTH PA	Nov	Medicaid	9	\$1,935.81	\$1,935.81
WOMENS HEALTH CENTER OF DULUTH PA	Dec	Medicaid	16	\$2,184.32	\$2,184.32
WOMENS HEALTH CENTER OF DULUTH PA Total					\$26,498.88

SubTotal 3,957 \$953,187.11

Treatment of incomplete induced abortions \$11,840.26
Grand Total \$965,027.37

Includes codes: 59840-59841, 59850-59852, 59855-59857, 59866, S0190-S0191, S0199, S2260, S2265-S2267. The total # of abortion procedures paid may be duplicated across providers. The report is based on the date the service was provided.