

T I T L E X I X M O N T H L Y R E P O R T O F E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE

FEDERAL ONLY

REFUGEE TXXI

AGED

	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
INPATIENT	1	2	14,743.80	0	0	0.00	573	2092	523,235.53
OUTPATIENT	23	233	3,988.32	0	0	0.00	4051	70241	611,650.70
CHILD PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
CHILD DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
ADULT PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
ADULT DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
SKILLED NURSING FACILITY	0	0	0.00	0	0	0.00	165	1814	236,849.97
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	4343	130608	10028,166.31
INTER CARE MENTAL RETARDA	0	0	0.00	0	0	0.00	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	3	90	14,288.17
HOME HEALTH	0	0	0.00	0	0	0.00	2258	47146	1831,055.32
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	42	67	7,700.49	0	0	0.00	6719	42619	440,055.66
CLINIC SERVICES	1	2	233.57	0	0	0.00	506	267	42,493.45
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	19	155	3,137.65	0	0	0.00	500	268	3,051.93
HABILITATION SERVICES	0	0	0.00	0	0	0.00	29	1132	60,831.48
REMEDIAL SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	9	10-	519.33
AMBULANCE SERVICES	0	0	0.00	0	0	0.00	313	389	30,938.38
LOCAL EDUCATION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00

T I T L E X I X M O N T H L Y R E P O R T O F E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	FEDERAL ONLY			REFUGEE TXXI			AGED		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
EARLY ACCESS SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PRESCRIBED DRUGS	28	62	1,268.00	0	0	0.00	3386	6762	103,353.35
DRUG CAPITATION	0	0	0.00	0	0	0.00	0	0	0.00
INDIAN HEALTH SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
FAMILY PLANNING SERVICES	0	0	0.00	0	0	0.00	1	2	21.38
IOWA PLAN PROGRAM	85	101	2,374.08	0	0	0.00	3	3	244.82
MANAGED SUBSTANCE ABUSE	0	0	0.00	0	0	0.00	0	0	0.00
MENTAL HEALTH ACCESS PLAN	0	0	0.00	0	0	0.00	0	0	0.00
EPSDT SCREENING	1	1	35.35	0	0	0.00	0	0	0.00
HMO SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PATIENT MANAGEMENT	63	63	126.00	0	0	0.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEDICAL SUPPLIES	1	1	35.80	0	0	0.00	2615	200700	314,872.25
OTHER PRACTITIONER	1	2	118.93	0	0	0.00	273	1585	20,120.44
FAMILY CENTERED PROGRAM	0	0	0.00	0	0	0.00	0	0	0.00
FAMILY PRESERVATION	0	0	0.00	0	0	0.00	0	0	0.00
TREATMENT FOSTER FAMILY CARE	0	0	0.00	0	0	0.00	0	0	0.00
GROUP TREATMENT THERAPY	0	0	0.00	0	0	0.00	0	0	0.00
DENTAL	18	24	2,957.77	0	0	0.00	501	640	105,049.91
OPTOMETRIST	5	10	542.46	0	0	0.00	805	1203	29,293.93
CHIROPRACTIC	0	0	0.00	0	0	0.00	406	1231	7,992.86

T I T L E X I X M O N T H L Y R E P O R T O F E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	FEDERAL ONLY			REFUGEE TXXI			AGED		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
PODIATRIC	0	0	0.00	0	0	0.00	769	1363	12,406.45
PHYSICAL DISABILITIES SVCS	0	0	0.00	0	0	0.00	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	0	0	0.00	1	68	3,061.99
PSYCHIATRIC	0	0	0.00	0	0	0.00	205	378	10,771.97
RESIDENTIAL CARE FACILITY	0	0	0.00	0	0	0.00	349	11515	77,678.61
MR WAIVER SERVICE	0	0	0.00	0	0	0.00	87	6810	254,080.57
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	0	0	0.00	0	0	0.00
AIDS WAIVER SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
ELDERLY WAIVER SERVICES	0	0	0.00	0	0	0.00	3074	137874	2000,257.23
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	0	0	0.00	1	5	65.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	0	0	0.00	0	0	0.00	101	141	32,679.92
UNASSIGNED	0	0	0.00	0	0	0.00	1	0	0.00
* A L L C A T E G O R I E S *	119	723	37,262.22	0	0	0.00	14082	666936	16795,086.91

T I T L E X I X M O N T H L Y R E P O R T O F E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE

	BLIND			DISABLED			ADC - ADULT		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
INPATIENT	0	0	0.00	1953	11358	8622,205.04	762	2634	2941,714.08
OUTPATIENT	0	0	0.00	16495	336695	5576,778.09	9099	110810	4319,954.52
CHILD PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
CHILD DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
ADULT PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
ADULT DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
SKILLED NURSING FACILITY	0	0	0.00	173	4515	1838,572.31	2	32	20,883.14
INTERMEDIATE CARE FACILITY	0	0	0.00	529	15465	1501,432.24	1	13	1,387.23
INTER CARE MENTAL RETARDA	0	0	0.00	17	680	222,576.29	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	0	0	0.00
HOME HEALTH	0	0	0.00	3599	101614	3266,900.94	50	645	32,382.17
LEAD INSPECTION AGENCY	0	0	0.00	1	1	377.35	0	0	0.00
PHYSICIAN	0	0	0.00	25544	140234	4372,913.13	15950	33908	3243,587.28
CLINIC SERVICES	0	0	0.00	3327	5633	757,742.66	2784	4350	504,819.58
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	0	0	0.00	2330	7987	105,794.95	2577	6215	134,635.94
HABILITATION SERVICES	0	0	0.00	1740	58933	2495,430.36	12	167	6,635.81
REMEDIAL SERVICES	0	0	0.00	327	15221	212,092.26	69	3167	38,287.26
REHAB SUPPORT SERVICES	0	0	0.00	567	3953	206,999.36	8	0	733.38
AMBULANCE SERVICES	0	0	0.00	1040	1329	179,910.01	284	304	46,785.15
LOCAL EDUCATION AGENCY	0	0	0.00	270	58519	357,247.30	2	590	1,774.58

T I T L E X I X M O N T H L Y R E P O R T O F E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	BLIND			DISABLED			ADC - ADULT		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
EARLY ACCESS SERVICES	0	0	0.00	66	423	9,937.81	0	0	0.00
PRESCRIBED DRUGS	0	0	0.00	24453	117745	8913,641.11	20796	63885	3256,132.73
DRUG CAPITATION	0	0	0.00	0	0	0.00	0	0	0.00
INDIAN HEALTH SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
FAMILY PLANNING SERVICES	0	0	0.00	141	172	10,396.86	7169	8668	658,525.57
IOWA PLAN PROGRAM	0	0	0.00	46219	47583	3264,972.22	34895	39474	1064,862.30
MANAGED SUBSTANCE ABUSE	0	0	0.00	0	0	0.00	0	0	0.00
MENTAL HEALTH ACCESS PLAN	0	0	0.00	0	0	0.00	0	0	0.00
EPSDT SCREENING	0	0	0.00	351	511	19,895.15	225	264	9,611.39
HMO SERVICES	0	0	0.00	0	0	0.00	881	919	219,338.55
PATIENT MANAGEMENT	0	0	0.00	0	0	0.00	20704	20704	41,408.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	661	1643	191,988.93	251	656	22,600.94
MEDICAL SUPPLIES	0	0	0.00	8465	762607	1811,757.71	971	37033	232,095.97
OTHER PRACTITIONER	0	0	0.00	2299	13964	376,350.36	1401	2444	173,049.59
FAMILY CENTERED PROGRAM	0	0	0.00	0	0	0.00	0	0	0.00
FAMILY PRESERVATION	0	0	0.00	0	0	0.00	0	0	0.00
TREATMENT FOSTER FAMILY CARE	0	0	0.00	0	0	0.00	0	0	0.00
GROUP TREATMENT THERAPY	0	0	0.00	0	0	0.00	0	0	0.00
DENTAL	0	0	0.00	4382	5830	826,518.85	3312	4682	745,575.69
OPTOMETRIST	0	0	0.00	2965	3906	200,780.48	2022	2477	176,443.66
CHIROPRACTIC	0	0	0.00	2216	6431	98,498.03	1835	4754	166,143.73

T I T L E X I X M O N T H L Y R E P O R T O F E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	BLIND			DISABLED			ADC - ADULT		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
PODIATRIC	0	0	0.00	1192	2311	69,736.96	210	306	39,105.77
PHYSICAL DISABILITIES SVCS	0	0	0.00	425	19201	257,214.97	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	264	19276	435,972.72	0	0	0.00
PSYCHIATRIC	0	0	0.00	2858	6383	187,242.79	17	45	3,293.48
RESIDENTIAL CARE FACILITY	0	0	0.00	1463	49345	381,993.40	0	0	0.00
MR WAIVER SERVICE	0	0	0.00	1001	71851	2858,896.02	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	37	1324	31,104.49	5	186	5,109.98
AIDS WAIVER SERVICES	0	0	0.00	15	1407	14,939.79	0	0	0.00
ELDERLY WAIVER SERVICES	0	0	0.00	39	2218	30,442.49	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	1836	96835	1508,299.83	0	0	0.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	0	0	0.00	1204	1710	392,173.04	8	12	3,736.45
UNASSIGNED	0	0	0.00	7	0	0.00	8	0	0.00
* A L L C A T E G O R I E S *	0	0	0.00	50924	1994813	51609,726.30	48088	349344	18110,613.92

T I T L E X I X M O N T H L Y R E P O R T O F E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	ADC - CHILD			CMAP			OTHER		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
INPATIENT	381	2406	2272,663.80	446	7522	2212,139.72	2055	11062	11028,496.05
OUTPATIENT	7494	42468	1679,827.02	2026	17782	536,510.78	12146	99190	3025,811.47
CHILD PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
CHILD DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
ADULT PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
ADULT DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
SKILLED NURSING FACILITY	0	0	0.00	0	0	0.00	5	90	35,543.97
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	3	32	3,982.29
INTER CARE MENTAL RETARDA	0	0	0.00	0	0	0.00	1	0	1421,458.00-
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	0	0	0.00
HOME HEALTH	361	1717	62,213.04	69	219	11,882.88	602	2756	1061,938.48
LEAD INSPECTION AGENCY	4	4	1,509.40	0	0	0.00	2	2	754.70
PHYSICIAN	18875	34013	2338,137.82	3980	7605	616,074.69	28110	53841	4999,385.39
CLINIC SERVICES	3899	5159	635,753.31	960	1387	157,498.82	6834	10083	1284,689.21
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	1248	2761	38,422.81	373	1064	19,050.24	2554	6948	121,367.15
HABILITATION SERVICES	0	0	0.00	10	369	10,333.96	1	8	275.84
REMEDIAL SERVICES	785	24599	394,357.11	341	13692	184,712.54	624	22723	336,119.83
REHAB SUPPORT SERVICES	1	0	0.81-	3	0	741.25-	1	0	94,342.54-
AMBULANCE SERVICES	131	132	19,980.99	68	74	13,111.44	225	235	42,153.24
LOCAL EDUCATION AGENCY	84	7866	38,016.93	26	2287	11,056.33	74	19488	98,122.62

T I T L E X I X M O N T H L Y R E P O R T O F E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE

CATEGORY OF SERVICE	ADC - CHILD			CMAP			OTHER		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
EARLY ACCESS SERVICES	76	426	11,442.81	20	84	2,383.57	84	356	8,356.18
PRESCRIBED DRUGS	18981	35876	1916,417.74	4575	11750	696,531.65	25847	48676	2335,805.83
DRUG CAPITATION	0	0	0.00	0	0	0.00	0	0	0.00
INDIAN HEALTH SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
FAMILY PLANNING SERVICES	1130	1374	103,237.53	206	239	19,462.64	353	420	34,807.80
IOWA PLAN PROGRAM	57535	63195	604,072.62	11164	12699	237,942.96	75241	85070	988,681.94
MANAGED SUBSTANCE ABUSE	0	0	0.00	0	0	0.00	0	0	0.00
MENTAL HEALTH ACCESS PLAN	0	0	0.00	0	0	0.00	0	0	0.00
EPSDT SCREENING	5038	5884	414,487.21	1175	1365	102,097.63	7578	8727	830,369.55
HMO SERVICES	1530	1615	190,716.52	305	310	41,797.27	1570	1643	256,683.40
PATIENT MANAGEMENT	36469	36467	72,934.00	6567	6567	13,134.00	50591	50585	101,170.00
HEALTH INS PREMIUM PAYMENT	343	963	24,002.84	37	97	3,568.86	2420	7867	189,429.89
MEDICAL SUPPLIES	711	11057	119,966.79	147	7333	27,284.16	909	21607	145,032.90
OTHER PRACTITIONER	1929	3905	159,192.05	432	800	43,688.48	2729	5714	279,215.61
FAMILY CENTERED PROGRAM	0	0	0.00	0	0	0.00	0	0	0.00
FAMILY PRESERVATION	0	0	0.00	0	0	0.00	0	0	0.00
TREATMENT FOSTER FAMILY CARE	0	0	0.00	0	0	0.00	0	0	0.00
GROUP TREATMENT THERAPY	0	0	0.00	0	0	0.00	0	0	0.00
DENTAL	5336	6595	897,514.22	1153	1557	258,319.15	7467	9236	1187,749.13
OPTOMETRIST	1817	2172	138,907.84	495	596	41,041.27	2660	3080	196,583.39
CHIROPRACTIC	933	1847	60,042.64	230	594	20,192.52	1592	3582	110,648.25

T I T L E X I X M O N T H L Y R E P O R T O F E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE

ADC - CHILD

CMAP

OTHER

RECIPS UNITS OF
SERVED SERVICEAMOUNT
PAIDRECIPS UNITS OF
SERVED SERVICEAMOUNT
PAIDRECIPS UNITS OF
SERVED SERVICEAMOUNT
PAID

PODIATRIC	55	64	6,066.71	27	37	4,982.89	100	122	13,360.56
PHYSICAL DISABILITIES SVCS	0	0	0.00	0	0	0.00	1	1	4,427.62
BRAIN INJ WAIVER SERVICES	0	0	0.00	0	0	0.00	2	6	785.56
PSYCHIATRIC	5	8	559.19	13	32	2,371.99	28	174	8,572.28
RESIDENTIAL CARE FACILITY	0	0	0.00	1	341	3,294.49	0	0	0.00
MR WAIVER SERVICE	0	0	0.00	2	54	1,805.90	4	19	384.33
CHILDRENS MENTAL HEALTH SVC	27	1191	29,192.65	47	2810	53,050.73	53	2160	48,931.37
AIDS WAIVER SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
ELDERLY WAIVER SERVICES	0	0	0.00	0	0	0.00	7	34	3,561.67-
ILL & HANDICAPPED WAIVER SVCS	1	5	64.35	0	0	0.00	1	24	360.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	40	59	20,268.70	58	70	28,791.03	68	79	31,030.79
UNASSIGNED	3	0	0.00	2	0	0.00	10	0	318,245.35
* A L L C A T E G O R I E S *	66003	293828	12249,967.83	12729	99336	5373,371.34	85839	475640	27609,909.76

T I T L E X I X M O N T H L Y R E P O R T O F E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE

CATEGORY OF SERVICE	FOSTER - PRESUB - SUB ADOPTS			INTERMEDIATE CARE FACILITY			MEDICALLY NEEDY NO SPEND DN		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
INPATIENT	54	465	235,272.04	799	3287	887,871.69	54	275	239,240.24
OUTPATIENT	1053	8717	243,890.05	5412	106821	892,511.12	566	11010	268,483.76
CHILD PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
CHILD DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
ADULT PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
ADULT DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
SKILLED NURSING FACILITY	0	0	0.00	374	4355	43,081.84	4	52	1,163.32
INTERMEDIATE CARE FACILITY	0	0	0.00	7723	229282	21463,233.38	1	9	793.53
INTER CARE MENTAL RETARDA	10	286	102,813.32	3	0	114.94	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	18	524	98,020.35	0	0	0.00
HOME HEALTH	108	4279	119,061.86	3850	92317	3534,585.11	66	970	25,109.20
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	2511	4051	253,488.27	8039	53871	551,309.16	875	2492	179,199.32
CLINIC SERVICES	566	783	97,068.00	602	442	60,709.11	141	200	24,397.33
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	228	613	9,358.97	653	491	6,324.89	94	231	4,299.73
HABILITATION SERVICES	6	215	18,368.96	9	135	5,394.80	34	1464	79,933.01
REMEDIAL SERVICES	1806	292230	2576,980.79	1	28	557.76	3	220	3,042.60
REHAB SUPPORT SERVICES	1	0	11.10	5	42	2,123.62	4	23-	1,417.03-
AMBULANCE SERVICES	32	33	5,031.84	545	702	59,931.69	15	16	2,877.91
LOCAL EDUCATION AGENCY	53	14039	79,639.18	13	3617	26,214.14	0	0	0.00

T I T L E X I X M O N T H L Y R E P O R T O F E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	FOSTER - PRESUB - SUB ADOPTS			INTERMEDIATE CARE FACILITY			MEDICALLY NEEDY NO SPEND DN		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
EARLY ACCESS SERVICES	25	88	2,831.56	3	9	450.00	0	0	0.00
PRESCRIBED DRUGS	5128	14589	1299,965.13	10789	26223	482,127.63	977	3907	215,168.11
DRUG CAPITATION	0	0	0.00	0	0	0.00	0	0	0.00
INDIAN HEALTH SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
FAMILY PLANNING SERVICES	27	33	2,682.33	2	3	86.64	53	63	4,830.61
IOWA PLAN PROGRAM	9707	10229	961,530.33	1960	2000	123,056.04	1363	1516	49,241.46
MANAGED SUBSTANCE ABUSE	0	0	0.00	0	0	0.00	0	0	0.00
MENTAL HEALTH ACCESS PLAN	0	0	0.00	0	0	0.00	0	0	0.00
EPSDT SCREENING	297	344	19,277.63	10	11	497.80	17	18	560.48
HMO SERVICES	1	1	64.73	0	0	0.00	0	0	0.00
PATIENT MANAGEMENT	83	83	166.00	0	0	0.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	169	412	17,436.45	35	83	11,848.37	6	10	964.06
MEDICAL SUPPLIES	205	20908	64,171.96	4563	434719	706,447.58	131	10092	16,213.63
OTHER PRACTITIONER	418	1960	61,586.57	461	2961	67,957.47	79	257	12,005.39
FAMILY CENTERED PROGRAM	0	0	0.00	0	0	0.00	0	0	0.00
FAMILY PRESERVATION	0	0	0.00	0	0	0.00	0	0	0.00
TREATMENT FOSTER FAMILY CARE	0	0	0.00	0	0	0.00	0	0	0.00
GROUP TREATMENT THERAPY	0	0	0.00	0	0	0.00	0	0	0.00
DENTAL	1194	1456	184,560.52	984	1270	197,054.34	174	276	45,749.88
OPTOMETRIST	579	673	43,053.82	992	1431	35,594.14	128	158	9,122.52
CHIROPRACTIC	174	303	9,665.42	274	733	5,199.01	96	233	6,947.67

T I T L E X I X M O N T H L Y R E P O R T O F E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE

	FOSTER - PRESUB - SUB ADOPTS			INTERMEDIATE CARE FACILITY			MEDICALLY NEEDY NO SPEND DN		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID

PODIATRIC	24	31	5,006.21	1402	2281	21,532.53	30	37	3,192.91
PHYSICAL DISABILITIES SVCS	0	0	0.00	165	7023	74,515.94	0	0	0.00
BRAIN INJ WAIVER SERVICES	29	1387	36,685.55	362	19786	549,084.08	0	0	0.00
PSYCHIATRIC	8	29	2,053.04	356	718	22,099.01	50	96	2,463.35
RESIDENTIAL CARE FACILITY	1	0	692.00-	8	182	2,750.66	0	0	0.00
MR WAIVER SERVICE	180	8672	204,060.87	10	156	5,287.88	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	1	144	1,560.00	0	0	0.00	0	0	0.00
AIDS WAIVER SERVICES	1	25	437.50	32	3790	33,914.75	0	0	0.00
ELDERLY WAIVER SERVICES	0	0	0.00	6324	307228	3772,539.94	1	1	70.00
ILL & HANDICAPPED WAIVER SVCS	33	2142	35,777.36	7	118	1,516.96	0	0	0.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	167	207	45,331.36	105	131	31,359.12	3	3	824.61
UNASSIGNED	1	0	0.00	2	0	4.75	0	0	0.00
* A L L C A T E G O R I E S *	9993	389427	6738,196.72	15429	1306770	33776,908.24	1728	33583	1194,477.60

T I T L E X I X M O N T H L Y R E P O R T O F E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	MEDICALLY NEEDY WI SPEND DN			OTHER TXXI			OTHER BREAST CERVICAL CANCER		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
INPATIENT	176	766	713,829.87	70	453	257,874.27	8	15	21,864.73
OUTPATIENT	469	8502	284,533.18	1196	7863	278,462.30	111	2413	113,885.89
CHILD PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
CHILD DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
ADULT PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
ADULT DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
SKILLED NURSING FACILITY	2	15	0.00	0	0	0.00	0	0	0.00
INTERMEDIATE CARE FACILITY	1	20	2,132.00	0	0	0.00	0	0	0.00
INTER CARE MENTAL RETARDA	0	0	0.00	0	0	0.00	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	0	0	0.00
HOME HEALTH	19	1078	36,068.77	51	170	6,030.06	5	118	8,710.29
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	803	4139	257,696.66	3096	5090	354,167.50	145	647	212,133.42
CLINIC SERVICES	79	139	17,055.73	688	880	101,940.68	20	32	5,436.08
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	46	123	2,509.60	138	368	5,438.64	23	106	1,354.76
HABILITATION SERVICES	6	364	17,064.81	0	0	0.00	0	0	0.00
REMEDIAL SERVICES	1	14	0.00	139	8114	99,108.79	0	0	0.00
REHAB SUPPORT SERVICES	7	72	2,647.26	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	40	43	6,157.62	19	20	3,158.30	0	0	0.00
LOCAL EDUCATION AGENCY	0	0	0.00	22	6668	25,284.73	0	0	0.00

T I T L E X I X M O N T H L Y R E P O R T O F E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	MEDICALLY NEEDY WI SPEND DN			OTHER TXXI			OTHER BREAST CERVICAL CANCER		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
EARLY ACCESS SERVICES	0	0	0.00	2	5	215.00	0	0	0.00
PRESCRIBED DRUGS	263	1159	71,154.80	3627	6981	496,564.32	166	784	45,170.43
DRUG CAPITATION	0	0	0.00	0	0	0.00	0	0	0.00
INDIAN HEALTH SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
FAMILY PLANNING SERVICES	10	11	434.79	73	98	7,367.32	0	0	0.00
IOWA PLAN PROGRAM	0	0	0.00	11427	12567	128,485.21	197	203	20,503.37
MANAGED SUBSTANCE ABUSE	0	0	0.00	0	0	0.00	0	0	0.00
MENTAL HEALTH ACCESS PLAN	0	0	0.00	0	0	0.00	0	0	0.00
EPSDT SCREENING	3	3	781.48	656	704	42,589.00	0	0	0.00
HMO SERVICES	0	0	0.00	238	245	31,256.57	0	0	0.00
PATIENT MANAGEMENT	0	0	0.00	8032	8032	16,064.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	47	137	6,459.68	0	0	0.00
MEDICAL SUPPLIES	78	2147	16,739.88	115	4514	19,856.19	22	435	7,761.00
OTHER PRACTITIONER	49	131	6,581.09	318	670	27,978.68	8	17	1,134.17
FAMILY CENTERED PROGRAM	0	0	0.00	0	0	0.00	0	0	0.00
FAMILY PRESERVATION	0	0	0.00	0	0	0.00	0	0	0.00
TREATMENT FOSTER FAMILY CARE	0	0	0.00	0	0	0.00	0	0	0.00
GROUP TREATMENT THERAPY	0	0	0.00	0	0	0.00	0	0	0.00
DENTAL	53	79	18,681.27	1574	1919	283,375.15	18	20	2,321.50
OPTOMETRIST	36	49	3,020.33	550	640	40,604.60	10	14	1,033.76
CHIROPRACTIC	18	41	1,099.03	285	592	18,791.09	8	17	536.77

T I T L E X I X M O N T H L Y R E P O R T O F E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE

MEDICALLY NEEDY WI SPEND DN

OTHER TXXI

OTHER BREAST CERVICAL CANCER

	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
PODIATRIC	8	16	815.69	27	37	3,607.11	3	5	300.22
PHYSICAL DISABILITIES SVCS	0	0	0.00	0	0	0.00	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PSYCHIATRIC	46	130	7,056.01	0	0	0.00	1	1	23.90
RESIDENTIAL CARE FACILITY	0	0	0.00	0	0	0.00	0	0	0.00
MR WAIVER SERVICE	0	0	0.00	1	20	432.44	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	3	151	2,574.20	0	0	0.00
AIDS WAIVER SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
ELDERLY WAIVER SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	0	0	0.00	0	0	0.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	4	14	4,027.99	7	12	3,488.87	0	0	0.00
UNASSIGNED	3	0	0.00	0	0	0.00	0	0	0.00
* A L L C A T E G O R I E S *	914	19055	1470,087.86	11175	66950	2261,174.70	201	4827	442,170.29

T I T L E X I X M O N T H L Y R E P O R T O F E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE

OTHER ICARE ADULT 19-64

OTHER ICARE ADULT OB

OTHER ICARE CHRN DSH

RECIPS UNITS OF
SERVED SERVICEAMOUNT
PAIDRECIPS UNITS OF
SERVED SERVICEAMOUNT
PAIDRECIPS UNITS OF
SERVED SERVICEAMOUNT
PAID

INPATIENT	0	0	0.00	4	5	3,950.04	0	0	0.00
OUTPATIENT	2	0	248.95	1	12	193.15	0	0	0.00
CHILD PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
CHILD DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
ADULT PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
ADULT DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
SKILLED NURSING FACILITY	0	0	0.00	0	0	0.00	0	0	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	0	0	0.00
INTER CARE MENTAL RETARDA	0	0	0.00	0	0	0.00	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	0	0	0.00
HOME HEALTH	0	0	0.00	0	0	0.00	0	0	0.00
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	0	0	0.00	0	0	0.00	0	0	0.00
CLINIC SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	0	0	0.00	0	0	0.00	0	0	0.00
HABILITATION SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
REMEDIAL SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
LOCAL EDUCATION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00

T I T L E X I X M O N T H L Y R E P O R T O F E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	OTHER ICARE ADULT 19-64			OTHER ICARE ADULT OB			OTHER ICARE CHRN DSH		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
EARLY ACCESS SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PRESCRIBED DRUGS	1	0	154.07	0	0	0.00	0	0	0.00
DRUG CAPITATION	0	0	0.00	0	0	0.00	0	0	0.00
INDIAN HEALTH SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
FAMILY PLANNING SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
IOWA PLAN PROGRAM	0	0	0.00	0	0	0.00	0	0	0.00
MANAGED SUBSTANCE ABUSE	0	0	0.00	0	0	0.00	0	0	0.00
MENTAL HEALTH ACCESS PLAN	0	0	0.00	0	0	0.00	0	0	0.00
EPSDT SCREENING	0	0	0.00	0	0	0.00	0	0	0.00
HMO SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PATIENT MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	1	1	31.84	0	0	0.00	0	0	0.00
MEDICAL SUPPLIES	0	0	0.00	0	0	0.00	0	0	0.00
OTHER PRACTITIONER	0	0	0.00	0	0	0.00	0	0	0.00
FAMILY CENTERED PROGRAM	0	0	0.00	0	0	0.00	0	0	0.00
FAMILY PRESERVATION	0	0	0.00	0	0	0.00	0	0	0.00
TREATMENT FOSTER FAMILY CARE	0	0	0.00	0	0	0.00	0	0	0.00
GROUP TREATMENT THERAPY	0	0	0.00	0	0	0.00	0	0	0.00
DENTAL	0	0	0.00	0	0	0.00	0	0	0.00
OPTOMETRIST	0	0	0.00	0	0	0.00	0	0	0.00
CHIROPRACTIC	0	0	0.00	0	0	0.00	0	0	0.00

T I T L E X I X M O N T H L Y R E P O R T O F E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE

OTHER ICARE ADULT 19-64

OTHER ICARE ADULT OB

OTHER ICARE CHRN DSH

RECIPS UNITS OF
SERVED SERVICEAMOUNT
PAIDRECIPS UNITS OF
SERVED SERVICEAMOUNT
PAIDRECIPS UNITS OF
SERVED SERVICEAMOUNT
PAID

PODIATRIC	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICAL DISABILITIES SVCS	0	0	0.00	0	0	0.00	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PSYCHIATRIC	0	0	0.00	0	0	0.00	0	0	0.00
RESIDENTIAL CARE FACILITY	0	0	0.00	0	0	0.00	0	0	0.00
MR WAIVER SERVICE	0	0	0.00	0	0	0.00	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	0	0	0.00	0	0	0.00
AIDS WAIVER SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
ELDERLY WAIVER SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	0	0	0.00	0	0	0.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
UNASSIGNED	0	0	0.00	0	0	0.00	0	0	0.00
* A L L C A T E G O R I E S *	1	1	434.86	5	17	4,143.19	0	0	0.00

T I T L E X I X M O N T H L Y R E P O R T O F E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	OTHER ICARE PHIC MHI 300%			OTHER ICARE MHI 300%			STATE ONLY		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
INPATIENT	9	217	34,034.91	3	8	2,976.00	4	9	13,282.57
OUTPATIENT	32	334	9,556.04	13	165	3,590.06	51	547	11,467.43
CHILD PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
CHILD DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
ADULT PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
ADULT DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
SKILLED NURSING FACILITY	0	0	0.00	0	0	0.00	0	0	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	0	0	0.00
INTER CARE MENTAL RETARDA	0	0	0.00	0	0	0.00	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	0	0	0.00
HOME HEALTH	2	41	466.21	2	26	1,848.10	1	6	566.48
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	60	101	4,673.97	14	73	907.96	82	196	12,990.54
CLINIC SERVICES	15	29	3,532.96	0	0	0.00	8	12	967.42
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	6	24	162.65	2	0	0.00	8	23	511.83
HABILITATION SERVICES	0	0	0.00	1	22	1,190.86	8	115	4,988.57
REMEDIAL SERVICES	38	1580	24,311.43	0	0	0.00	9	296	5,797.79
REHAB SUPPORT SERVICES	0	0	0.00	3	1	72.23	0	0	0.00
AMBULANCE SERVICES	0	0	0.00	2	2	362.05	2	2	238.25
LOCAL EDUCATION AGENCY	6	1266	5,527.14	0	0	0.00	0	0	0.00

T I T L E X I X M O N T H L Y R E P O R T O F E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	OTHER ICARE PHIC MHI 300%			OTHER ICARE MHI 300%			STATE ONLY		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
EARLY ACCESS SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PRESCRIBED DRUGS	208	867	80,595.52	6	11	106.83	89	243	13,998.17
DRUG CAPITATION	0	0	0.00	0	0	0.00	0	0	0.00
INDIAN HEALTH SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
FAMILY PLANNING SERVICES	0	0	0.00	0	0	0.00	12	12	922.21
IOWA PLAN PROGRAM	218	233	21,371.22	10	10	691.25	196	231	31,474.69
MANAGED SUBSTANCE ABUSE	0	0	0.00	0	0	0.00	0	0	0.00
MENTAL HEALTH ACCESS PLAN	0	0	0.00	0	0	0.00	0	0	0.00
EPSDT SCREENING	20	32	1,185.59	0	0	0.00	8	8	274.23
HMO SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PATIENT MANAGEMENT	8	8	16.00	0	0	0.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	20	48	5,099.55	0	0	0.00	0	0	0.00
MEDICAL SUPPLIES	14	2247	2,104.54	2	1	248.68	2	3	226.38
OTHER PRACTITIONER	13	82	2,696.80	1	2	12.12	6	10	478.66
FAMILY CENTERED PROGRAM	0	0	0.00	0	0	0.00	0	0	0.00
FAMILY PRESERVATION	0	0	0.00	0	0	0.00	0	0	0.00
TREATMENT FOSTER FAMILY CARE	0	0	0.00	0	0	0.00	0	0	0.00
GROUP TREATMENT THERAPY	0	0	0.00	0	0	0.00	0	0	0.00
DENTAL	23	27	2,335.06	3	3	164.67	10	11	1,781.82
OPTOMETRIST	11	12	558.22	0	0	0.00	9	11	653.42
CHIROPRACTIC	3	4	135.68	1	1	8.37	5	16	690.25

T I T L E X I X M O N T H L Y R E P O R T O F E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE

	OTHER ICARE PHIC MHI 300%			OTHER ICARE MHI 300%			STATE ONLY		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
PODIATRIC	1	2	119.00	2	2	28.62	0	0	0.00
PHYSICAL DISABILITIES SVCS	0	0	0.00	0	0	0.00	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PSYCHIATRIC	0	0	0.00	0	0	0.00	0	0	0.00
RESIDENTIAL CARE FACILITY	0	0	0.00	5	144	356.10	0	0	0.00
MR WAIVER SERVICE	0	0	0.00	0	0	0.00	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	175	8163	194,414.32	0	0	0.00	0	0	0.00
AIDS WAIVER SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
ELDERLY WAIVER SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	1	42	726.60	0	0	0.00	0	0	0.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	194	207	93,815.58	1	1	222.87	0	0	0.00
UNASSIGNED	0	0	0.00	0	0	0.00	0	0	0.00
* A L L C A T E G O R I E S *	180	15566	487,438.99	12	472	12,786.77	178	1751	101,310.71

T I T L E X I X M O N T H L Y R E P O R T O F E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE

CATEGORY OF SERVICE	STATE ONLY			FED CNTY - FED CNTY STATE			FEDERAL MEDICAID ONLY AGED		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
INPATIENT	24	236	151,778.42	161	731	465,182.75	0	0	0.00
OUTPATIENT	353	4523	154,738.94	2692	41878	491,245.15	0	0	0.00
CHILD PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
CHILD DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
ADULT PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
ADULT DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
SKILLED NURSING FACILITY	0	0	0.00	4	38	12,823.80	0	0	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	4	100	9,736.36	0	0	0.00
INTER CARE MENTAL RETARDA	0	0	0.00	2139	65211	23793,792.08	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	0	0	0.00
HOME HEALTH	18	213	10,895.10	1089	55984	1619,157.55	0	0	0.00
LEAD INSPECTION AGENCY	0	0	0.00	1	1	377.35	0	0	0.00
PHYSICIAN	586	1609	127,371.28	4766	19195	400,787.75	0	0	0.00
CLINIC SERVICES	168	254	33,167.87	350	498	58,730.96	0	0	0.00
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	63	168	2,838.90	318	685	7,412.17	0	0	0.00
HABILITATION SERVICES	4	55	2,147.48	3	58	2,600.26	0	0	0.00
REMEDIAL SERVICES	72	12233	101,058.50	53	1553	27,433.54	0	0	0.00
REHAB SUPPORT SERVICES	2	42	1,895.63	20	133	7,332.00	0	0	0.00
AMBULANCE SERVICES	10	11	1,869.39	110	142	16,053.69	0	0	0.00
LOCAL EDUCATION AGENCY	0	0	0.00	281	77122	434,402.29	0	0	0.00

T I T L E X I X M O N T H L Y R E P O R T O F E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	STATE ONLY			FED CNTY - FED CNTY STATE			FEDERAL MEDICAID ONLY AGED		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
EARLY ACCESS SERVICES	0	0	0.00	22	226	4,591.90	0	0	0.00
PRESCRIBED DRUGS	929	4413	267,402.10	6004	22109	1639,557.76	0	0	0.00
DRUG CAPITATION	0	0	0.00	0	0	0.00	0	0	0.00
INDIAN HEALTH SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
FAMILY PLANNING SERVICES	13	16	1,200.39	9	16	1,029.20	0	0	0.00
IOWA PLAN PROGRAM	1452	1534	146,349.86	10270	10362	637,727.39	0	0	0.00
MANAGED SUBSTANCE ABUSE	0	0	0.00	0	0	0.00	0	0	0.00
MENTAL HEALTH ACCESS PLAN	0	0	0.00	0	0	0.00	0	0	0.00
EPSDT SCREENING	16	19	864.71	91	136	4,900.15	0	0	0.00
HMO SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PATIENT MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	3	7	572.86	547	1340	162,784.24	0	0	0.00
MEDICAL SUPPLIES	124	5595	22,753.34	2106	359568	603,150.27	0	0	0.00
OTHER PRACTITIONER	47	180	7,416.69	822	11537	316,233.77	0	0	0.00
FAMILY CENTERED PROGRAM	0	0	0.00	0	0	0.00	0	0	0.00
FAMILY PRESERVATION	0	0	0.00	0	0	0.00	0	0	0.00
TREATMENT FOSTER FAMILY CARE	0	0	0.00	0	0	0.00	0	0	0.00
GROUP TREATMENT THERAPY	0	0	0.00	0	0	0.00	0	0	0.00
DENTAL	113	142	18,112.20	1459	1712	165,181.07	0	0	0.00
OPTOMETRIST	84	100	7,350.36	699	859	36,294.22	0	0	0.00
CHIROPRACTIC	55	128	4,435.91	295	696	11,395.02	0	0	0.00

T I T L E X I X M O N T H L Y R E P O R T O F E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE

STATE ONLY

FED CNTY - FED CNTY STATE

FEDERAL MEDICAID ONLY AGED

	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
PODIATRIC	20	24	3,347.24	555	835	14,936.39	0	0	0.00
PHYSICAL DISABILITIES SVCS	0	0	0.00	0	0	0.00	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	224	12897	333,503.80	0	0	0.00
PSYCHIATRIC	4	4	109.81	562	927	26,772.23	0	0	0.00
RESIDENTIAL CARE FACILITY	0	0	0.00	29	923	7,264.09	0	0	0.00
MR WAIVER SERVICE	5	206	5,322.19	8030	598686	21692,842.90	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	3	64	1,158.63	0	0	0.00	0	0	0.00
AIDS WAIVER SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
ELDERLY WAIVER SERVICES	6	119	1,762.54	1	25	253.12	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	1	36	440.64	167	9287	165,296.47	0	0	0.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	7	7	2,356.00	6747	8829	1989,406.90	0	0	0.00
UNASSIGNED	0	0	0.00	2	0	0.00	0	0	0.00
* A L L C A T E G O R I E S *	1523	31938	1078,716.98	11014	1304299	55160,188.59	0	0	0.00

T I T L E X I X M O N T H L Y R E P O R T O F E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	FEDERAL MEDICAID ONLY BLIND			TOTAL					
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
INPATIENT	0	0	0.00	7489	43543	30642,355.55			
OUTPATIENT	0	0	0.00	62639	870204	18507,326.92			
CHILD PART HOSP	0	0	0.00	0	0	0.00			
CHILD DAY TREATMENT	0	0	0.00	0	0	0.00			
ADULT PART HOSP	0	0	0.00	0	0	0.00			
ADULT DAY TREATMENT	0	0	0.00	0	0	0.00			
SKILLED NURSING FACILITY	0	0	0.00	721	10911	2188,918.35			
INTERMEDIATE CARE FACILITY	0	0	0.00	12550	375529	33010,863.34			
INTER CARE MENTAL RETARDA	0	0	0.00	2165	66177	22697,838.63			
NURSING FAC FOR MENTAL ILL	0	0	0.00	21	614	112,308.52			
HOME HEALTH	0	0	0.00	12048	309299	11628,871.56			
LEAD INSPECTION AGENCY	0	0	0.00	8	8	3,018.80			
PHYSICIAN	0	0	0.00	117753	403751	18372,580.29			
CLINIC SERVICES	0	0	0.00	20696	30150	3786,236.74			
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00			
LAB AND RADIOLOGICAL	0	0	0.00	11096	28230	465,672.81			
HABILITATION SERVICES	0	0	0.00	1855	63037	2705,196.20			
REMEDIAL SERVICES	0	0	0.00	4117	395670	4003,860.20			
REHAB SUPPORT SERVICES	0	0	0.00	614	4210	125,832.28			
AMBULANCE SERVICES	0	0	0.00	2819	3434	428,559.95			
LOCAL EDUCATION AGENCY	0	0	0.00	815	191462	1077,285.24			

T I T L E X I X M O N T H L Y R E P O R T O F E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	FEDERAL MEDICAID ONLY BLIND			TOTAL					
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
EARLY ACCESS SERVICES	0	0	0.00	276	1617	40,208.83			
PRESCRIBED DRUGS	0	0	0.00	124152	366042	21835,115.28			
DRUG CAPITATION	0	0	0.00	0	0	0.00			
INDIAN HEALTH SERVICES	0	0	0.00	0	0	0.00			
FAMILY PLANNING SERVICES	0	0	0.00	9156	11127	845,005.27			
IOWA PLAN PROGRAM	0	0	0.00	261216	287010	8283,581.76			
MANAGED SUBSTANCE ABUSE	0	0	0.00	0	0	0.00			
MENTAL HEALTH ACCESS PLAN	0	0	0.00	0	0	0.00			
EPSDT SCREENING	0	0	0.00	15416	18027	1447,427.35			
HMO SERVICES	0	0	0.00	4518	4733	739,857.04			
PATIENT MANAGEMENT	0	0	0.00	122517	122509	245,018.00			
HEALTH INS PREMIUM PAYMENT	0	0	0.00	4540	13264	636,788.51			
MEDICAL SUPPLIES	0	0	0.00	20728	1880567	4110,719.03			
OTHER PRACTITIONER	0	0	0.00	11185	46221	1555,816.87			
FAMILY CENTERED PROGRAM	0	0	0.00	0	0	0.00			
FAMILY PRESERVATION	0	0	0.00	0	0	0.00			
TREATMENT FOSTER FAMILY CARE	0	0	0.00	0	0	0.00			
GROUP TREATMENT THERAPY	0	0	0.00	0	0	0.00			
DENTAL	0	0	0.00	27636	35479	4943,002.20			
OPTOMETRIST	0	0	0.00	13841	17391	960,878.42			
CHIROPRACTIC	0	0	0.00	8320	21203	522,422.25			

T I T L E X I X M O N T H L Y R E P O R T O F E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE

FEDERAL MEDICAID ONLY BLIND

TOTAL

	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
PODIATRIC	0	0	0.00	4400	7473	198,545.26			
PHYSICAL DISABILITIES SVCS	0	0	0.00	582	26225	336,158.53			
BRAIN INJ WAIVER SERVICES	0	0	0.00	865	53420	1359,093.70			
PSYCHIATRIC	0	0	0.00	4113	8925	273,389.05			
RESIDENTIAL CARE FACILITY	0	0	0.00	1838	62450	472,645.35			
MR WAIVER SERVICE	0	0	0.00	9261	686474	25023,113.10			
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	345	16193	367,096.37			
AIDS WAIVER SERVICES	0	0	0.00	46	5222	49,292.04			
ELDERLY WAIVER SERVICES	0	0	0.00	9152	447499	5801,763.65			
SICK & HANDICAPPED WAIVER SVCS	0	0	0.00	2040	108494	1712,547.21			
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00			
MEP SERVICES	0	0	0.00	8669	11482	2679,513.23			
UNASSIGNED	0	0	0.00	39	0	318,250.10			
* A L L C A T E G O R I E S *	0	0	0.00	330137	7055276	234513,973.78	0	0	0.00

* * * E N D O F R E P O R T * * *