

## 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  
SERVEDUNITS OF  
SERVICEAMOUNT  
PAIDRECIPS  
SERVEDUNITS OF  
SERVICEAMOUNT  
PAIDRECIPS  
SERVEDUNITS OF  
SERVICEAMOUNT  
PAID

INPATIENT	1	1	209.61	0	0	0.00	416	1511	412,711.86
OUTPATIENT	23	415	13,565.70	0	0	0.00	3480	58198	466,836.59
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	155	2245	57,566.52
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	4286	122519	10130,698.83
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	64	10,546.20
HOME HEALTH	0	0	0.00	0	0	0.00	2066	44143	1463,418.59
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	50	82	11,237.87	0	0	0.00	6139	34884	389,682.72
CLINIC SERVICES	1	1	150.07	0	0	0.00	401	178	28,123.84
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	7	43	794.69	0	0	0.00	509	199	2,562.49
HABILITATION SERVICES	0	0	0.00	0	0	0.00	43	1181	70,418.58
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	6	18	2,927.46
AMBULANCE SERVICES	0	0	0.00	0	0	0.00	276	330	28,815.07
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	26	52	2,291.94	0	0	0.00	2621	4409	59,728.70
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	1	15.00
IOWA PLAN PROGRAM	151	64	2,007.89	0	0	0.00	6	3	287.18
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	57	57	114.00	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	4.85	0	0	0.00	2366	167022	255,534.28
OTHER PRACTITIONER	0	0	0.00	0	0	0.00	287	1336	15,140.36
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	8	9	512.26	0	0	0.00	453	547	85,506.27
OPTOMETRIST	0	0	0.00	0	0	0.00	682	1016	28,826.97
CHIROPRACTIC	0	0	0.00	0	0	0.00	382	1077	8,881.45

## 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	658	1049	14,818.10
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	74	9,935.62
PSYCHIATRIC	0	0	0.00	0	0	0.00	163	283	8,454.23
RESIDENTIAL CARE FACILITY	0	0	0.00	0	0	0.00	334	10175	71,153.21
MR WAIVER SERVICE	0	0	0.00	0	0	0.00	80	5106	229,557.76
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	3112	130479	1836,582.73
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	0	0	0.00	1	53	655.08
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	114	99	24,470.95
UNASSIGNED	0	0	0.00	0	0	0.00	3	0	0.00
* A L L C A T E G O R I E S *	174	725	30,888.88	0	0	0.00	13736	588199	15713,856.64

## 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	1547	8906	6453,283.59	612	2113	2502,930.67
OUTPATIENT	0	0	0.00	14327	260357	4539,773.23	7780	86900	2854,980.64
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	176	4523	2285,014.07	0	0	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	534	15470	1600,995.27	1	93	12,703.95
INTER CARE MENTAL RETARDA	0	0	0.00	15	493	158,707.67	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	3260	90331	2662,954.54	52	992	25,061.73
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	1	0	58.97-
PHYSICIAN	0	0	0.00	23576	108240	3768,709.96	14606	28867	2726,358.61
CLINIC SERVICES	0	0	0.00	2772	3992	536,550.09	2502	3846	507,938.38
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	0	0	0.00	2469	6107	94,248.56	2639	7043	154,474.03
HABILITATION SERVICES	0	0	0.00	2270	66850	3214,170.23	24	491	18,180.47
REMEDIAL SERVICES	0	0	0.00	531	19145	290,108.43	141	3840	58,586.36
REHAB SUPPORT SERVICES	0	0	0.00	205	179-	8,295.25	1	0	123.95-
AMBULANCE SERVICES	0	0	0.00	868	1027	119,859.71	285	363	41,117.20
LOCAL EDUCATION AGENCY	0	0	0.00	642	232243	1363,818.84	17	4587	36,730.03

## 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	68	386	6,867.56	1	2	65.00
PRESCRIBED DRUGS	0	0	0.00	23194	97019	7195,522.99	19315	53325	2692,797.78
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	119	140	9,853.49	5435	6301	547,862.39
IOWA PLAN PROGRAM	0	0	0.00	53101	48647	3812,239.35	49431	41025	1459,445.86
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	272	307	12,824.15	156	162	5,564.58
HMO SERVICES	0	0	0.00	0	0	0.00	912	960	261,017.76
PATIENT MANAGEMENT	0	0	0.00	1	1	2.00	22776	22709	45,414.37
HEALTH INS PREMIUM PAYMENT	0	0	0.00	659	1475	167,511.31	212	464	17,858.90
MEDICAL SUPPLIES	0	0	0.00	7343	571639	1557,779.56	869	16568	175,960.93
OTHER PRACTITIONER	0	0	0.00	2572	17158	334,800.71	1424	2914	190,250.26
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	3835	4870	716,099.32	3076	4124	682,971.60
OPTOMETRIST	0	0	0.00	2515	3307	170,997.31	1502	1789	128,754.07
CHIROPRACTIC	0	0	0.00	2115	5469	87,806.42	1707	3881	136,530.96

## 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	1185	2263	72,256.65	195	253	28,902.37
PHYSICAL DISABILITIES SVCS	0	0	0.00	416	16747	205,985.64	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	316	16554	486,627.14	0	0	0.00
PSYCHIATRIC	0	0	0.00	2420	4379	138,029.19	23	43	3,099.00
RESIDENTIAL CARE FACILITY	0	0	0.00	1414	43331	327,001.90	0	0	0.00
MR WAIVER SERVICE	0	0	0.00	1005	64432	2750,543.97	1	69	1,228.20
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	34	1265	30,450.12	4	193	3,727.55
AIDS WAIVER SERVICES	0	0	0.00	12	873	10,726.67	0	0	0.00
ELDERLY WAIVER SERVICES	0	0	0.00	29	1568	26,451.16	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	1792	92477	1433,043.77	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	1436	1512	386,054.15	7	6	2,592.30
UNASSIGNED	0	0	0.00	18	0	0.00	9	0	0.00
* A L L C A T E G O R I E S *	0	0	0.00	55123	1813324	47035,963.97	56495	293923	15322,923.03

## 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
INPATIENT	325	1653	1568,804.88	365	7702	1822,373.35	1565	8389	9417,422.38
OUTPATIENT	6451	38238	1513,231.62	1744	15618	443,362.48	10495	87317	2570,601.82
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	1	0	63,169.31-	0	0	0.00	5	52	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	2	31	17,662.08-
INTER CARE MENTAL RETARDA	0	0	0.00	0	0	0.00	1	0	2866,664.00-
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	0	0	0.00
HOME HEALTH	312	1997	55,526.85	52	212	9,036.58	485	2764	38,748.81-
LEAD INSPECTION AGENCY	1	1	377.35	1	2	700.00	2	3	1,104.70
PHYSICIAN	17834	31400	2112,196.11	3635	6563	514,876.11	26688	49870	4333,695.92
CLINIC SERVICES	3096	4385	588,548.60	802	1165	149,046.16	5685	8350	993,780.00
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	1282	2946	43,883.63	404	1269	23,218.14	2943	8541	162,588.69
HABILITATION SERVICES	0	0	0.00	19	557	30,288.90	4	66	4,250.35
REMEDIAL SERVICES	1480	42300	734,151.10	516	14526	243,320.02	1192	33285	594,842.05
REHAB SUPPORT SERVICES	1	0	0.08	0	0	0.00	1	0	1,636.48-
AMBULANCE SERVICES	179	173	26,756.39	66	67	24,372.21	237	229	41,695.04
LOCAL EDUCATION AGENCY	200	30450	167,785.73	63	11552	64,441.11	204	36158	205,879.20

## 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	77	316	7,828.10	22	77	2,228.60	77	357	6,761.65
PRESCRIBED DRUGS	16188	28090	1559,719.21	4067	9398	592,863.13	22613	39641	2001,462.03
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	906	1056	86,774.83	143	180	18,491.06	284	319	33,805.04
IOWA PLAN PROGRAM	79860	65967	695,220.02	17401	13240	296,081.56	113548	88595	1178,974.33
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	4032	4441	299,944.25	896	972	68,061.15	6042	6610	565,590.80
HMO SERVICES	1557	1647	182,372.56	290	293	33,998.15	1554	1616	220,486.85
PATIENT MANAGEMENT	39138	39094	78,182.00	7197	7184	14,368.00	52439	52374	104,724.00
HEALTH INS PREMIUM PAYMENT	298	748	21,413.61	47	121	4,492.82	2165	5879	146,539.87
MEDICAL SUPPLIES	953	14126	138,243.57	154	6938	29,050.44	1103	13536	158,513.22
OTHER PRACTITIONER	2083	6870	199,722.86	460	1355	61,634.49	2919	9106	313,146.39
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	4209	4929	647,512.38	875	1068	177,781.72	5729	6887	905,870.83
OPTOMETRIST	1326	1515	99,513.83	407	500	33,618.37	1858	2117	138,820.99
CHIROPRACTIC	832	1540	50,249.41	230	489	16,385.44	1457	3039	93,191.66



## 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
PODIATRIC	75	93	11,626.80	28	48	4,752.16	79	105	12,324.90
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	0	34.71
PSYCHIATRIC	7	9	477.01	13	30	2,821.24	21	32	1,826.89
RESIDENTIAL CARE FACILITY	0	0	0.00	0	0	0.00	0	0	0.00
MR WAIVER SERVICE	0	0	0.00	1	12	137.40	7	157	62,661.20
CHILDRENS MENTAL HEALTH SVC	36	1877	37,550.89	69	3113	68,131.79	61	2076	50,820.62
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	10	176	1,608.88
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	0	0	0.00	1	3	36.72
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	42	48	19,523.52	77	71	32,613.03	69	59	113,654.77
UNASSIGNED	4	0	0.00	2	0	0.00	14	0	1735,111.83
* A L L C A T E G O R I E S *	81930	325909	10883,967.88	15647	104322	4782,545.61	98918	467739	22894,415.60

## 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

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	46	522	169,672.74	565	2124	658,317.63	35	232	194,239.18
OUTPATIENT	696	8077	220,942.41	4677	91340	589,581.47	390	6521	169,042.29
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	1	30	9,380.30	391	5655	17,072.35	2	30	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	7240	207052	20844,930.04	1	21	1,936.65
INTER CARE MENTAL RETARDA	8	191	86,914.10	3	90	29,064.23	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	15	444	85,222.75	0	0	0.00
HOME HEALTH	66	4419	111,094.35	3499	81871	2831,569.89	47	585	20,595.16
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	2255	3548	227,558.45	7294	43303	519,506.09	717	1976	129,479.93
CLINIC SERVICES	484	670	80,871.76	431	335	34,858.89	108	282	24,032.78
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	278	1036	14,397.66	633	311	3,435.90	120	268	5,614.89
HABILITATION SERVICES	6	110	6,841.70	27	584	30,847.02	38	1402	81,206.07
REMEDIAL SERVICES	2172	160200	1732,435.15	2	60	1,201.71	4	82	1,183.16
REHAB SUPPORT SERVICES	0	0	0.00	3	0	544.64	4	0	1,305.14
AMBULANCE SERVICES	31	31	22,821.74	461	573	51,198.91	14	13	1,253.45
LOCAL EDUCATION AGENCY	116	26138	161,347.35	25	9738	56,327.90	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	18	54	1,346.87	5	43	505.72	0	0	0.00
PRESCRIBED DRUGS	4694	12407	1188,036.22	10060	21860	390,395.01	860	2854	139,090.01
DRUG CAPITATION	0	0	0.00	1	0	19.56-	0	0	0.00
INDIAN HEALTH SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
FAMILY PLANNING SERVICES	36	38	3,790.11	0	0	0.00	26	25	1,712.12
IOWA PLAN PROGRAM	12010	10597	1099,079.46	2755	1506	110,114.23	2144	1435	58,564.34
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	221	240	13,484.33	6	7	148.38	12	12	463.34
HMO SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PATIENT MANAGEMENT	96	96	192.00	1	1-	2.00-	0	0	0.00
HEALTH INS PREMIUM PAYMENT	157	381	14,214.84	33	69	10,014.40	4	9	783.97
MEDICAL SUPPLIES	191	17669	65,986.08	4078	347537	484,726.80	96	5321	14,174.75
OTHER PRACTITIONER	485	3308	63,782.01	467	1833	46,516.23	71	181	8,322.15
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	969	1174	153,961.30	868	1065	159,920.98	141	182	27,097.50
OPTOMETRIST	420	471	30,757.74	871	1306	35,072.95	89	112	6,496.42
CHIROPRACTIC	149	285	8,243.65	281	683	5,469.98	71	189	5,345.66

## 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	27	37	3,430.37	1216	1794	25,719.26	30	35	1,129.20
PHYSICAL DISABILITIES SVCS	0	0	0.00	181	7872	97,231.42	0	0	0.00
BRAIN INJ WAIVER SERVICES	39	1669	59,862.94	440	18104	634,380.93	0	0	0.00
PSYCHIATRIC	13	32	1,773.32	266	537	15,406.13	37	63	2,023.35
RESIDENTIAL CARE FACILITY	0	0	0.00	14	324	2,087.38	0	0	0.00
MR WAIVER SERVICE	188	6187	175,699.30	7	209	20,109.96	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	33	2741	30,574.70	0	0	0.00
ELDERLY WAIVER SERVICES	0	0	0.00	6069	273766	3263,674.86	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	32	2095	34,173.84	6	181	1,768.68	0	0	0.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	221	253	60,222.46	142	145	35,466.34	7	1	150.43
UNASSIGNED	4	0	0.00	4	0	118.95-	0	0	0.00
* A L L C A T E G O R I E S *	10526	261965	5822,314.55	15250	1125061	31121,753.97	1828	21831	895,241.94

## 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 UNITS OF  
SERVED SERVICEAMOUNT  
PAIDRECIPS UNITS OF  
SERVED SERVICEAMOUNT  
PAIDRECIPS UNITS OF  
SERVED SERVICEAMOUNT  
PAID

INPATIENT	132	635	1004,229.61	47	259	105,664.20	7	21	50,608.65
OUTPATIENT	384	7745	236,784.14	1017	7461	270,115.23	89	2919	140,117.75
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	29	705	34,646.28	36	108	4,599.42	5	27	2,543.76
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	705	3787	259,978.01	2825	4410	283,474.79	150	550	152,388.44
CLINIC SERVICES	57	90	9,516.98	633	825	100,997.80	11	16	3,263.42
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	39	88	1,740.52	177	499	7,290.20	29	106	1,579.49
HABILITATION SERVICES	6	135	4,644.91	0	0	0.00	0	0	0.00
REMEDIAL SERVICES	1	22	198.44	248	7558	129,949.86	0	0	0.00
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	46	55	8,822.07	25	26	3,919.76	2	2	256.39
LOCAL EDUCATION AGENCY	1	4	43.04	51	5951	35,261.19	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	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	8	154.72	0	0	0.00
PRESCRIBED DRUGS	266	1200	61,709.07	3097	5457	384,886.83	177	621	36,044.70
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	7	11	448.11	52	60	6,362.00	1	1	130.08
IOWA PLAN PROGRAM	0	0	0.00	18671	12762	145,126.32	245	204	23,344.92
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	530	561	27,883.68	0	0	0.00
HMO SERVICES	0	0	0.00	244	250	22,084.81	0	0	0.00
PATIENT MANAGEMENT	0	0	0.00	8441	8439	16,878.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	23	63	3,394.38	0	0	0.00
MEDICAL SUPPLIES	64	4484	18,924.60	123	2798	23,025.55	21	529	7,108.91
OTHER PRACTITIONER	54	117	8,435.99	333	1042	30,348.63	6	18	561.82
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	51	76	16,825.00	1153	1359	211,867.05	22	26	3,607.61
OPTOMETRIST	30	37	2,029.07	413	469	32,131.93	10	10	839.49
CHIROPRACTIC	20	52	1,517.24	269	460	15,062.76	14	29	861.36

## 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	14	26	1,375.58	26	30	3,773.25	7	9	564.27
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	40	122	6,557.77	1	1	126.98	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	1	30	511.87	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	4	180	4,091.28	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	2	0	6.20-	10	5	1,825.11	0	0	0.00
UNASSIGNED	0	0	0.00	1	0	0.00	0	0	0.00
* A L L C A T E G O R I E S *	718	19391	1678,420.23	11063	61071	1870,807.60	232	5088	423,821.06

## 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	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
INPATIENT	3	0	11,518.81	0	0	0.00	0	0	0.00
OUTPATIENT	0	0	0.00	1	1	193.59	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	1	0	114.20-	5	9	2,551.83	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	2	4	84.61	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	1	2	202.25	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	13	13	1,366.97	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	1	1	669.52	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	0	0	0.00	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	1	1	57.42
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 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	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
SILL & 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 *	13	15	12,973.83	8	15	3,499.55	1	1	57.42

## 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 PMIC 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	196	31,938.79	2	5-	0.00	4	6	9,041.87
OUTPATIENT	42	377	7,445.51	6	43	1,753.07	46	410	11,192.05
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	84	122	6,081.16	8	14	294.65	77	151	10,666.21
CLINIC SERVICES	17	26	2,815.71	0	0	0.00	11	16	2,093.37
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	7	37	221.72	0	0	0.00	13	44	871.06
HABILITATION SERVICES	0	0	0.00	0	0	0.00	9	161	7,318.02
REMEDIAL SERVICES	88	3867	64,123.34	0	0	0.00	10	144	3,082.20
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	3	3	392.46
LOCAL EDUCATION AGENCY	15	4823	25,015.13	0	0	0.00	1	1	10.76

## 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	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	254	923	87,096.03	9	21	532.91	89	224	15,225.63
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	9	11	1,019.96
IOWA PLAN PROGRAM	354	317	31,539.50	30	26	1,929.86	330	245	37,062.77
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	12	13	317.87	0	0	0.00	9	9	324.33
HMO SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PATIENT MANAGEMENT	1	1	2.00	0	0	0.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	39	79	8,312.68	0	0	0.00	0	0	0.00
MEDICAL SUPPLIES	9	824	950.18	0	0	0.00	2	32	393.60
OTHER PRACTITIONER	32	358	5,298.77	0	0	0.00	8	9	529.54
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	20	29	3,179.21	0	0	0.00	20	25	3,395.35
OPTOMETRIST	16	19	1,030.08	0	0	0.00	4	4	345.34
CHIROPRACTIC	8	19	662.85	1	1	6.30	3	6	363.28

## 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	2	3	264.91	0	0	0.00	1	1	98.41
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	2	3	69.71	0	0	0.00
RESIDENTIAL CARE FACILITY	0	0	0.00	3	78	608.00	0	0	0.00
MR WAIVER SERVICE	0	0	0.00	2	64	5,358.36	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	248	9600	219,532.15	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
SICK & 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	274	276	129,078.15	1	1	193.48	1	0	2.74
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 *	236	21909	624,905.74	12	246	10,746.34	230	1502	103,423.47

## 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	21	157	161,034.00	161	720	342,869.76	0	0	0.00
OUTPATIENT	275	2934	138,161.81	2465	34264	527,778.82	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	1	4	4,320.00	6	130	15,409.80	0	0	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	8	238	24,915.25	0	0	0.00
INTER CARE MENTAL RETARDA	0	0	0.00	2129	56023	20974,409.45	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	1	8	1,714.48	0	0	0.00
HOME HEALTH	16	197	16,144.04	985	46745	1269,666.63	0	0	0.00
LEAD INSPECTION AGENCY	0	0	0.00	1	1	350.00	0	0	0.00
PHYSICIAN	501	1433	100,687.54	4429	13022	406,999.98	0	0	0.00
CLINIC SERVICES	97	147	20,671.73	349	452	56,256.05	0	0	0.00
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	76	257	4,620.09	430	758	9,091.06	0	0	0.00
HABILITATION SERVICES	5	203	4,886.51	12	285	9,300.04	0	0	0.00
REMEDIAL SERVICES	35	1140	14,296.25	113	2351	44,936.25	0	0	0.00
REHAB SUPPORT SERVICES	1	0	0.30	1	0	355.10-	0	0	0.00
AMBULANCE SERVICES	18	19	2,508.92	123	144	17,758.22	0	0	0.00
LOCAL EDUCATION AGENCY	3	314	1,490.70	618	256600	1516,884.81	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

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	38	231	3,926.60	0	0	0.00
PRESCRIBED DRUGS	846	3756	207,833.93	5821	18563	1444,805.36	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	5	5	239.09	29	30	1,578.13	0	0	0.00
IOWA PLAN PROGRAM	1791	1409	154,726.15	11044	10495	746,292.12	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	4	4	127.50	70	76	4,381.87	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	2	4	535.00	565	1301	149,731.87	0	0	0.00
MEDICAL SUPPLIES	101	5382	22,127.43	1834	253204	464,527.59	0	0	0.00
OTHER PRACTITIONER	51	140	8,402.63	1029	13498	267,968.92	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	80	104	15,599.48	1293	1512	146,571.48	0	0	0.00
OPTOMETRIST	78	89	6,669.62	560	681	29,736.23	0	0	0.00
CHIROPRACTIC	59	146	4,909.52	282	634	9,995.43	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	15	21	1,339.56	593	797	20,167.97	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	278	13401	379,706.62	0	0	0.00
PSYCHIATRIC	4	8	373.60	473	765	25,265.40	0	0	0.00
RESIDENTIAL CARE FACILITY	0	0	0.00	27	965	6,639.54	0	0	0.00
MR WAIVER SERVICE	3	106	2,711.33	8166	545900	21540,017.70	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	2	106	1,784.38	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	3	232	2,801.90	0	0	0.00	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	2	49	1,137.73	160	8198	161,650.46	0	0	0.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	7	7	2,443.73	7923	9776	2411,520.00	0	0	0.00
UNASSIGNED	0	0	0.00	6	0	0.00	0	0	0.00
* A L L C A T E G O R I E S *	1462	18373	902,584.47	11016	1291768	53032,468.79	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	5837	35142	24916,871.58			
OUTPATIENT	0	0	0.00	54198	709135	14715,460.22			
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	735	12669	2325,593.73			
INTERMEDIATE CARE FACILITY	0	0	0.00	12006	345424	32598,517.91			
INTER CARE MENTAL RETARDA	0	0	0.00	2151	56797	18382,431.45			
NURSING FAC FOR MENTAL ILL	0	0	0.00	19	516	97,483.43			
HOME HEALTH	0	0	0.00	10820	275096	8468,109.01			
LEAD INSPECTION AGENCY	0	0	0.00	6	7	2,473.08			
PHYSICIAN	0	0	0.00	109500	332231	15956,310.18			
CLINIC SERVICES	0	0	0.00	17244	24776	3139,515.63			
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00			
LAB AND RADIOLOGICAL	0	0	0.00	11974	29556	530,717.43			
HABILITATION SERVICES	0	0	0.00	2457	72025	3482,352.80			
REMEDIAL SERVICES	0	0	0.00	6334	288520	3912,414.32			
REHAB SUPPORT SERVICES	0	0	0.00	219	161-	9,868.06			
AMBULANCE SERVICES	0	0	0.00	2628	3057	391,749.79			
LOCAL EDUCATION AGENCY	0	0	0.00	1902	618559	3635,035.79			

## 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	299	1474	29,684.82			
PRESCRIBED DRUGS	0	0	0.00	113086	299833	18061,408.45			
DRUG CAPITATION	0	0	0.00	1	0	19.56-			
INDIAN HEALTH SERVICES	0	0	0.00	0	0	0.00			
FAMILY PLANNING SERVICES	0	0	0.00	7032	8178	712,081.41			
IOWA PLAN PROGRAM	0	0	0.00	331754	296537	9852,035.86			
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	12214	13415	999,785.75			
HMO SERVICES	0	0	0.00	4552	4766	719,960.13			
PATIENT MANAGEMENT	0	0	0.00	130145	129954	259,874.37			
HEALTH INS PREMIUM PAYMENT	0	0	0.00	4204	10593	544,803.65			
MEDICAL SUPPLIES	0	0	0.00	18980	1427610	3417,032.34			
OTHER PRACTITIONER	0	0	0.00	12180	59243	1554,861.76			
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	22705	27986	3958,279.34			
OPTOMETRIST	0	0	0.00	10760	13443	745,697.83			
CHIROPRACTIC	0	0	0.00	7816	17999	445,483.37			

## 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	4132	6564	202,543.76			
PHYSICAL DISABILITIES SVCS	0	0	0.00	592	24619	303,217.06			
BRAIN INJ WAIVER SERVICES	0	0	0.00	1050	49802	1570,478.54			
PSYCHIATRIC	0	0	0.00	3477	6307	206,303.82			
RESIDENTIAL CARE FACILITY	0	0	0.00	1783	54873	407,490.03			
MR WAIVER SERVICE	0	0	0.00	9413	622272	24663,214.65			
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	457	18410	416,088.78			
AIDS WAIVER SERVICES	0	0	0.00	44	3614	41,301.37			
ELDERLY WAIVER SERVICES	0	0	0.00	9010	406221	5131,119.53			
SICK & HANDICAPPED WAIVER SVCS	0	0	0.00	1987	103056	1632,466.28			
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00			
MEP SERVICES	0	0	0.00	10054	12259	2992,489.94			
UNASSIGNED	0	0	0.00	65	0	1734,992.88			
* A L L C A T E G O R I E S *	0	0	0.00	374618	6422377	213167,580.57	0	0	0.00
				* * *	E N D   O F   R E P O R T	* * *			