

TITLE XIX REPORT OF EXPENDITURES
(BY CATEGORY OF SERVICE)
(MONTHLY TOTALS AS OF 10/31/06)

CATEGORY OF SERVICE	RECIPIENTS SERVED	NUMBER OF CLAIMS	UNITS OF SERVICE	TOTAL PAYMENT	***** AVERAGES *****			
					COST PER UNIT OF SERVICE	COST PER ELIGIBLE RECIPIENT	UNITS PER RECIPIENT SERVED	COST PER RECIPIENT SERVED
INPATIENT	7,076	6,997	39,013	\$25,514,711.91	\$654.01	\$73.92	5.5	\$3,605.81
OUTPATIENT	60,198	84,840	783,301	\$15,929,779.01	\$20.34	\$46.15	13.0	\$264.62
CHILD PART HOSP	1	0	0	\$60.22-	\$0.00	\$0.00	.0	\$60.22-
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	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
SKILLED NURSING FACILITY	1,036	769	10,028	\$1,834,090.91	\$182.90	\$5.31	9.7	\$1,770.36
INTERMEDIATE CARE FACILITY	14,469	14,362	406,067	\$40,366,438.02	\$99.41	\$116.95	28.1	\$2,789.86
INTER CARE MENTAL RETARDA	2,178	2,241	65,308	\$21,973,562.40	\$336.46	\$63.66	30.0	\$10,088.87
NURSING PAC FOR MENTAL ILL	21	23	693	\$124,643.56	\$179.86	\$0.71	33.0	\$5,935.41
HOME HEALTH	10,666	14,676	240,643	\$9,455,537.99	\$39.29	\$27.40	22.6	\$886.51
LEAD INSPECTION AGENCY	16	17	17	\$6,551.09	\$385.36	\$0.02	1.1	\$409.44
PHYSICIAN	126,544	294,695	437,699	\$19,279,459.61	\$44.05	\$55.86	3.5	\$152.35
CLINIC SERVICES	19,934	28,818	24,364	\$3,351,246.31	\$137.55	\$9.71	1.2	\$168.12
MEP CASE MANAGEMENT	7	0	0	\$1,858.57	\$0.00	\$0.01	.0	\$265.51
LAB AND RADIOLOGICAL	11,575	16,450	26,639	\$455,704.01	\$17.11	\$1.32	2.3	\$39.37
REHAB SUPPORT SERVICES	2,588	3,788	62,231	\$3,271,083.27	\$52.56	\$9.48	24.0	\$1,263.94
AMBULANCE SERVICES	3,795	4,497	4,421	\$465,312.78	\$105.25	\$1.35	1.2	\$122.61
LOCAL EDUCATION AGENCY	736	1,846	136,119	\$640,299.55	\$4.70	\$1.86	184.9	\$869.97
EARLY ACCESS SERVICES	265	867	1,573	\$31,150.99	\$19.80	\$0.09	5.9	\$117.55
PRESCRIBED DRUGS	122,753	409,554	366,442	\$23,004,137.80	\$62.78	\$67.44	3.0	\$187.40
DRUG CAPITATION	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
INDIAN HEALTH SERVICES	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
FAMILY PLANNING SERVICES	8,131	9,786	9,864	\$683,879.98	\$69.33	\$1.98	1.2	\$84.11
IOWA PLAN PROGRAM	254,102	278,498	278,498	\$8,012,710.71	\$28.77	\$23.22	1.1	\$31.53
MANAGED SUBSTANCE ABUSE	1	0	0	\$2.75-	\$0.00	\$0.00	.0	\$2.75-
MENTAL HEALTH ACCESS PLAN	1	0	0	\$374.37-	\$0.00	\$0.00	.0	\$374.37-
EPSDT SCREENING	16,125	19,130	19,093	\$1,328,534.56	\$69.58	\$7.11	1.2	\$82.39
HMO SERVICES	4,638	4,865	4,865	\$748,989.45	\$159.95	\$534.23	1.0	\$161.49
PATIENT MANAGEMENT	122,803	122,803	122,803	\$245,606.00	\$2.00	\$3.20	1.0	\$2.00
HEALTH INS PREMIUM PAYMENT	5,273	14,985	14,985	\$653,142.78	\$43.59	\$1.89	2.8	\$123.87
MEDICAL SUPPLIES	20,131	36,759	1,769,941	\$4,066,957.14	\$2.30	\$11.92	87.9	\$202.02
OTHER PRACTITIONER	11,531	25,082	134,829	\$1,374,229.68	\$10.19	\$3.98	11.7	\$119.18
FAMILY FRACTIIONER PROGRAM	1,662	3,107	26,691	\$802,528.68	\$30.07	\$4.23	16.1	\$482.87
FAMILY PRESERVATION	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
TREATMENT FOSTER FAMILY CARE	445	900	4,090	\$184,209.58	\$45.04	\$0.97	9.2	\$413.95
GROUP TREATMENT THERAPY	920	1,975	35,605	\$2,276,808.45	\$63.95	\$11.99	38.7	\$2,474.79
DENTAL	26,269	33,218	33,891	\$4,736,095.43	\$139.74	\$13.89	1.3	\$180.29
OPTOMETRIST	13,219	15,633	16,536	\$869,426.08	\$52.58	\$2.52	1.3	\$65.77
CHIROPRACTIC	8,932	17,883	22,724	\$537,842.62	\$23.67	\$1.58	2.5	\$60.22
PODIATRIC	6,143	7,454	9,408	\$239,646.23	\$25.47	\$0.69	1.5	\$39.01
PHYSICAL DISABILITIES SVCS	548	810	21,168	\$289,839.96	\$13.69	\$0.84	38.6	\$528.91
BRAIN INJ WAIVER SERVICES	701	1,786	45,948	\$1,176,491.61	\$25.60	\$3.41	65.5	\$1,678.30
PSYCHIATRIC	3,628	6,315	7,844	\$230,462.64	\$29.38	\$0.67	2.2	\$63.52
RESIDENTIAL CARE FACILITY	1,963	2,611	73,609	\$550,553.34	\$7.53	\$1.60	37.2	\$280.47
MR WAIVER SERVICE	8,799	17,056	619,416	\$21,728,498.04	\$35.08	\$2,370.04	73.4	\$2,469.43
CHILDRENS MENTAL HEALTH SVC	213	331	7,154	\$186,163.39	\$26.02	\$724.37	30.6	\$874.01
AIDS WAIVER SERVICES	40	68	3,884	\$38,142.41	\$9.82	\$794.63	97.1	\$953.56
ELDERLY WAIVER SERVICES	7,864	20,062	374,200	\$4,176,475.39	\$11.16	\$499.34	47.6	\$531.00

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
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(MONTHLY TOTALS AS OF 10/31/06)

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ILL & HANDICAPPED WAIVER SVCS	2,059	3,553	107,290	\$1,690,048.03	\$15.75	\$696.07	52.1	\$820.81
COUNTY OFFICE REIMBURSEMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
MEP SERVICES	9,359	11,666	12,116	\$2,990,738.87	\$246.84	\$8.67	1.3	\$319.56
UNASSIGNED	24	0	0	\$26,301.92	\$0.00	\$0.08	.0	\$1,095.91
* A L L C A T E G O R I E S *	323,511	1,540,716	6,380,470	\$225,549,453.46	\$35.35	\$653.49	19.7	\$697.19
			*** END OF REPORT ***					