

TITLE XIX REPORT OF EXPENDITURES
(BY CATEGORY OF SERVICE)
(MONTHLY TOTALS AS OF 11/30/05)

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	6,885	6,960	40,258	\$24,096,947.65	\$598.56	\$75.49	5.8	\$3,499.92
OUTPATIENT	55,009	80,813	519,986	\$16,783,070.26	\$32.28	\$52.58	9.5	\$305.10
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	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
SKILLED NURSING FACILITY	486	642	5,905	\$1,508,818.92	\$255.52	\$4.73	12.2	\$3,104.56
INTERMEDIATE CARE FACILITY	13,452	14,235	417,160	\$30,992,238.52	\$74.29	\$97.09	31.0	\$2,303.91
INTER CARE MENTAL RETARDA	2,195	1,561	46,953	\$12,553,320.38	\$267.36	\$39.33	21.4	\$5,719.05
NURSING PAC FOR MENTAL ILL	20	21	625	\$111,589.86	\$178.50	\$0.73	31.3	\$5,577.99
HOME HEALTH	10,306	15,703	235,603	\$10,403,855.61	\$44.16	\$32.59	22.9	\$1,009.50
LEAD INSPECTION AGENCY	16	18	19	\$6,892.33	\$362.75	\$0.02	1.2	\$430.77
PHYSICIAN	121,371	277,472	378,612	\$16,875,747.85	\$44.57	\$52.87	3.1	\$139.04
CLINIC SERVICES	19,584	29,376	29,014	\$3,219,294.40	\$110.96	\$10.09	1.5	\$164.38
MEP CASE MANAGEMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
LAB AND RADIOLOGICAL	7,892	10,394	22,569	\$341,422.33	\$15.13	\$1.07	2.9	\$43.26
REHAB SUPPORT SERVICES	2,559	4,048	68,736	\$3,598,358.35	\$52.35	\$11.27	26.9	\$1,406.16
AMBULANCE SERVICES	2,833	3,331	3,285	\$391,947.41	\$119.31	\$1.23	1.2	\$138.35
LOCAL EDUCATION AGENCY	996	2,595	256,582	\$2,325,770.10	\$9.06	\$7.29	257.6	\$2,335.11
EARLY ACCESS SERVICES	238	643	982	\$24,037.83	\$24.48	\$0.08	4.1	\$101.00
PRESCRIBED DRUGS	145,468	712,325	659,045	\$39,472,585.75	\$59.89	\$125.38	4.5	\$271.35
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	1,675	1,999	2,003	\$104,326.99	\$52.09	\$0.33	1.2	\$62.28
IOWA PLAN PROGRAM	256,101	281,116	281,116	\$8,097,668.14	\$28.81	\$25.37	1.1	\$31.62
MANAGED SUBSTANCE ABUSE	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
MENTAL HEALTH ACCESS PLAN	1	0	0	\$60.00-	\$0.00	\$0.00	.0	\$60.00
EPSDT SCREENING	14,579	16,779	16,774	\$1,166,690.69	\$69.55	\$6.55	1.2	\$80.03
HMO SERVICES	5,059	5,256	5,254	\$812,603.69	\$154.66	\$617.01	1.0	\$160.63
PATIENT MANAGEMENT	124,187	124,187	124,187	\$248,374.00	\$2.00	\$30.03	1.0	\$2.00
HEALTH INS PREMIUM PAYMENT	5,374	13,324	13,324	\$547,945.60	\$41.12	\$1.72	2.5	\$101.96
MEDICAL SUPPLIES	18,765	35,179	1,563,500	\$3,557,370.04	\$2.28	\$11.30	83.3	\$189.57
OTHER PRACTITIONER	13,068	47,773	77,893	\$1,905,925.29	\$24.40	\$5.96	6.0	\$145.46
FAMILY CENTERED PROGRAM	2,177	4,031	34,293	\$1,010,289.37	\$29.61	\$5.59	15.8	\$466.37
FAMILY PRESERVATION	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
TREATMENT FOSTER FAMILY CARE	500	989	4,568	\$197,373.23	\$43.21	\$1.09	9.1	\$394.75
GROUP TREATMENT THERAPY	983	2,057	36,616	\$2,334,237.14	\$63.75	\$12.85	37.2	\$2,374.61
DENTAL	31,057	39,633	40,500	\$5,337,926.92	\$131.80	\$16.96	1.3	\$171.88
OPTOMETRIST	14,063	16,652	18,139	\$842,136.49	\$46.43	\$2.64	1.3	\$59.88
CHIROPRACTIC	8,330	17,260	22,229	\$521,865.50	\$23.48	\$1.66	2.7	\$62.65
PODIATRIC	4,900	6,469	8,229	\$230,547.87	\$28.02	\$0.72	1.7	\$47.05
PHYSICAL DISABILITIES SVCS	379	607	15,163	\$189,069.81	\$12.47	\$0.59	40.0	\$498.86
BRAIN INJ WAIVER SERVICES	519	1,200	36,584	\$853,996.86	\$23.34	\$2.68	70.5	\$1,645.47
PSYCHIATRY	3,731	6,508	8,030	\$521,494.48	\$31.32	\$0.79	2.2	\$67.41
RESIDENTIAL CARE FACILITY	2,120	2,391	70,354	\$254,742.28	\$7.46	\$1.64	33.2	\$247.52
MR WAIVER SERVICE	8,367	15,150	594,739	\$20,708,387.01	\$34.82	\$2,387.68	71.1	\$2,475.01
CHILDRENS MENTAL HEALTH SVC	1	1	1	\$90.00	\$90.00	\$0.00	1.0	\$90.00
AIDS WAIVER SERVICES	34	64	3,492	\$31,618.21	\$9.05	\$790.46	102.7	\$929.95
ELDERLY WAIVER SERVICES	7,116	17,197	330,522	\$3,648,604.68	\$11.04	\$473.66	46.4	\$512.79

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
(BY CATEGORY OF SERVICE)
(MONTHLY TOTALS AS OF 11/30/05)

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ILL & HANDICAPPED WAIVER SVCS	1,625	2,898	90,182	\$1,549,309.35	\$17.18	\$764.34	55.5	\$953.42
COUNTY OFFICE REIMBURSEMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
MEP SERVICES	8,186	9,098	10,008	\$2,290,638.78	\$228.88	\$7.18	1.2	\$279.82
UNASSIGNED	17	0	0	\$3,612,593.25	\$0.00	\$11.32	.0	\$212,505.49
* A L L C A T E G O R I E S *	316,826	1,827,955	6,093,034	\$223,281,631.28	\$36.65	\$699.48	19.2	\$704.75

*** END OF REPORT ***