

TITLE XIX REPORT OF EXPENDITURES
(BY CATEGORY OF SERVICE)
(FISCAL YTD TOTALS AS OF 07/31/05)

CATEGORY OF SERVICE	RECIPIENTS SERVED	NUMBER OF CLAIMS	UNITS OF SERVICE	TOTAL PAYMENT
INPATIENT	3,559	3,625	23,313	\$15,969,003.99
OUTPATIENT	33,566	44,905	252,832	\$9,295,176.77
CHILD PART HOSP	0	0	0	\$0.00
CHILD DAY TREATMENT	0	0	0	\$0.00
ADULT PART HOSP	0	0	0	\$0.00
ADULT DAY TREATMENT	1	3	149	\$1,784.08
SKILLED NURSING FACILITY	200	213	3,913	\$733,157.33
INTERMEDIATE CARE FACILITY	12,110	12,591	367,678	\$29,870,969.52
INTER CARE MENTAL RETARDA	1,496	1,497	43,855	\$10,806,834.53
NURSING PAC FOR MENTAL ILL	18	18	540	\$96,905.81
HOME HEALTH	3,279	3,634	37,436	\$1,440,213.69
LEAD INSPECTION AGENCY	1	1	1	\$355.69
PHYSICIAN	66,517	129,938	179,834	\$7,292,948.55
CLINIC SERVICES	5,809	6,992	7,203	\$843,776.10
MEP CASE MANAGEMENT	0	0	0	\$0.00
LAB AND RADIOLOGICAL	3,698	4,658	9,897	\$154,099.02
REHAB SUPPORT SERVICES	1,481	1,644	32,441	\$1,494,459.82
AMBULANCE SERVICES	860	1,060	1,031	\$84,427.93
LOCAL EDUCATION AGENCY	344	929	117,939	\$929,731.25
EARLY ACCESS SERVICES	2,102	17,360	25,640	\$304,866.65
PRESCRIBED DRUGS	117,519	515,401	480,535	\$30,124,535.97
DRUG CAPITATION	0	0	0	\$0.00
INDIAN HEALTH SERVICES	0	0	0	\$0.00
FAMILY PLANNING SERVICES	632	693	696	\$34,712.16
IOWA PLAN PROGRAM	253,601	276,671	276,671	\$8,004,879.67
MANAGED SUBSTANCE ABUSE	0	0	0	\$0.00
MENTAL HEALTH ACCESS PLAN	0	0	0	\$0.00
EPSDT SCREENING	3,840	4,121	4,122	\$511,177.07
HMO SERVICES	4,999	5,194	5,194	\$764,008.56
PATIENT MANAGEMENT	125,147	125,147	125,147	\$250,294.00
HEALTH INS PREMIUM PAYMENT	5,560	13,685	13,685	\$623,420.28
MEDICAL SUPPLIES	8,230	11,944	466,175	\$903,764.03
OTHER PRACTITIONER	3,636	9,801	16,880	\$501,458.42
FAMILY CENTERED PROGRAM	2,593	5,608	48,996	\$1,448,462.55
FAMILY PRESERVATION	2	2	2	\$5,035.68
TREATMENT FOSTER FAMILY CARE	615	1,337	6,748	\$285,457.33
GROUP TREATMENT THERAPY	1,070	2,342	42,070	\$2,567,378.57
DENTAL	7,886	8,756	8,845	\$1,079,589.55
OPTOMETRIST	4,725	5,231	5,622	\$259,738.71
CHIROPRACTIC	3,525	5,542	6,968	\$142,135.04
PODIATRIC	2,588	2,949	3,734	\$97,193.69
PHYSICAL DISABILITIES SVCS	287	363	12,519	\$147,735.73
BRAIN INJ WAIVER SERVICES	399	654	20,367	\$525,520.90
PSYCHIATRIC	2,782	4,125	4,881	\$145,841.44
RESIDENTIAL CARE FACILITY	1,714	1,728	49,956	\$365,162.06
MR WAIVER SERVICE	6,540	9,843	361,368	\$14,015,338.47
MR OBRA WAIVER SERVICES	0	0	0	\$0.00
AIDS WAIVER SERVICES	30	35	2,572	\$24,712.72
ELDERLY WAIVER SERVICES	5,179	7,969	199,054	\$2,203,116.33
ILL & HANDICAPPED WAIVER SVCS	1,171	1,580	53,969	\$815,910.93

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)
(FISCAL YTD TOTALS AS OF 07/31/05)

CATEGORY OF SERVICE	RECIPIENTS SERVED	NUMBER OF CLAIMS	UNITS OF SERVICE	TOTAL PAYMENT
COUNTY OFFICE REIMBURSEMENT	0	0	0	\$0.00
MEP SERVICES	5,409	5,616	5,718	\$1,216,315.18
UNASSIGNED	2	0	0	\$628,064.58
* A L L C A T E G O R I E S *	300,102	1,255,405	3,326,196	\$147,009,670.34
		*** END OF REPORT ***		