

Title XIX Monthly Report of Expenditures 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	1	2,621.73	0	0	0	307	1128	265,670.29
OUTPATIENT	32	329	4,552.05	0	0	0	1892	19524	316,729.17
CHILD PART HOSP	0	0	0	0	0	0	0	0	0
CHILD DAY TREATMENT	0	0	0	0	0	0	0	0	0
ADULT PART HOSP	0	0	0	0	0	0	0	0	0
ADULT DAY TREATMENT	0	0	0	0	0	0	0	0	0
SKILLED NURSING FACILITY	0	0	0	0	0	0	112	425	189,102.01
INTERMEDIATE CARE FACILITY	0	0	0	0	0	0	3035	96946	6,790,825.63
INTER CARE MENTAL RETARDA	0	0	0	0	0	0	0	0	0
NURSING FAC FOR MENTAL ILL	0	0	0	0	0	0	1	31	4,911.43
HOME HEALTH	0	0	0	0	0	0	1336	20368	996,586.13
LEAD INSPECTION AGENCY	0	0	0	0	0	0	0	0	0
PHYSICIAN	49	87	9,008.48	0	0	0	3726	13316	230,242.09
CLINIC SERVICES	2	2	193.34	0	0	0	565	214	50,933.81
MEP CASE MANAGEMENT	0	0	0	0	0	0	0	0	0
LAB AND RADIOLOGICAL	2	8	249.55	0	0	0	64	190	2,006.82
REHAB SUPPORT SERVICES	0	0	0	0	0	0	42	1276	59,562.30
AMBULANCE SERVICES	0	0	0	0	0	0	91	94	7,644.02
LOCAL EDUCATION AGENCY	0	0	0	0	0	0	0	0	0
EARLY ACCESS SERVICES	0	0	0	0	0	0	0	0	0
PRESCRIBED DRUGS	26	106	10,441.68	0	0	0	8348	50562	2,185,382.82

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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
DRUG CAPITATION	0	0	0	0	0	0	0	0	0
INDIAN HEALTH SERVICES	0	0	0	0	0	0	0	0	0
FAMILY PLANNING SERVICES	4	5	219.14	0	0	0	1	0	0
IOWA PLAN PROGRAM	52	55	1,792.16	0	0	0	4	3	128.22
MANAGED SUBSTANCE ABUSE	0	0	0	0	0	0	0	0	0
MENTAL HEALTH ACCESS PLAN	0	0	0	0	0	0	0	0	0
EPSDT SCREENING	0	0	0	0	0	0	4	4	60.02
HMO SERVICES	0	0	0	0	0	0	0	0	0
PATIENT MANAGEMENT	50	50	100	0	0	0	0	0	0
HEALTH INS PREMIUM PAYMENT	1	2	72.12	0	0	0	1	2	258.5
MEDICAL SUPPLIES	1	14	251.8	0	0	0	2112	145563	211,948.81
OTHER PRACTITIONER	1	1	35.74	0	0	0	172	501	10,776.40
FAMILY CENTERED PROGRAM	0	0	0	0	0	0	0	0	0
FAMILY PRESERVATION	0	0	0	0	0	0	0	0	0
TREATMENT FOSTER FAMILY CARE	0	0	0	0	0	0	0	0	0
GROUP TREATMENT THERAPY	0	0	0	0	0	0	0	0	0
DENTAL	17	21	2,186.73	0	0	0	434	541	76,422.55
OPTOMETRIST	4	5	235.32	0	0	0	482	670	20,053.51
CHIROPRACTIC	0	0	0	0	0	0	235	454	3,545.69
PODIATRIC	0	0	0	0	0	0	346	495	7,094.16
PHYSICAL DISABILITIES SVCS	0	0	0	0	0	0	0	0	0

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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
BRAIN INJ WAIVER SERVICES	0	0	0	0	0	0	1	20	143.8
PSYCHIATRIC	0	0	0	0	0	0	71	110	3,288.38
RESIDENTIAL CARE FACILITY	0	0	0	0	0	0	461	14784	109,911.29
MR WAIVER SERVICE	0	0	0	0	0	0	78	3982	197,080.82
MR OBRA WAIVER SERVICES	0	0	0	0	0	0	0	0	0
AIDS WAIVER SERVICES	0	0	0	0	0	0	0	0	0
ELDERLY WAIVER SERVICES	0	0	0	0	0	0	1615	70679	843,382.11
ILL & HANDICAPPED WAIVER SVCS	0	0	0	0	0	0	3	206	1,883.35
COUNTY OFFICE REIMBURSEMENT	0	0	0	0	0	0	0	0	0
MEP SERVICES	0	0	0	0	0	0	133	199	42,353.09
UNASSIGNED	0	0	0	0	0	0	0	0	0
* ALL CATEGORIES *	87	686	31,959.84	0	0	0	11568	442287	12,627,927.22

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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	1252	7621	7,223,490.47	626	2189	2,338,642.74
OUTPATIENT	0	0	0	11284	133142	4,165,431.26	8050	64068	3,073,163.66
CHILD PART HOSP	0	0	0	0	0	0	0	0	0
CHILD DAY TREATMENT	0	0	0	0	0	0	0	0	0
ADULT PART HOSP	0	0	0	0	0	0	0	0	0
ADULT DAY TREATMENT	0	0	0	1	111	1,329.34	0	0	0
SKILLED NURSING FACILITY	0	0	0	128	3592	1,275,122.46	0	0	0
INTERMEDIATE CARE FACILITY	0	0	0	460	13753	1,251,025.76	0	0	0
INTER CARE MENTAL RETARDA	0	0	0	18	499	158,148.36	0	0	0
NURSING FAC FOR MENTAL ILL	0	0	0	0	0	0	0	0	0
HOME HEALTH	0	0	0	2904	59005	2,429,850.38	59	591	31,409.45
LEAD INSPECTION AGENCY	0	0	0	0	0	0	0	0	0
PHYSICIAN	0	0	0	19337	67663	3,265,522.55	15368	31061	2,555,870.14
CLINIC SERVICES	0	0	0	2926	3294	483,805.15	2299	3496	381,599.88
MEP CASE MANAGEMENT	0	0	0	15	0	22,453.53	1	0	160.51
LAB AND RADIOLOGICAL	0	0	0	1374	5032	65,497.21	2395	6906	131,532.73
REHAB SUPPORT SERVICES	0	0	0	2410	59029	2,987,218.18	16	221	11,252.22
AMBULANCE SERVICES	0	0	0	320	343	36,015.92	82	75	11,407.94
LOCAL EDUCATION AGENCY	0	0	0	494	181860	1,340,833.56	10	4650	27,509.44
EARLY ACCESS SERVICES	0	0	0	78	636	10,230.19	0	0	0
PRESCRIBED DRUGS	1	9	514.72	33667	214751	16,478,827.11	17814	50572	2,549,869.70

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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
DRUG CAPITATION	0	0	0	0	0	0	0	0	0
INDIAN HEALTH SERVICES	0	0	0	0	0	0	0	0	0
FAMILY PLANNING SERVICES	0	0	0	1033	1184	51,616.56	3945	4457	208,918.95
IOWA PLAN PROGRAM	1	1	77.59	43174	44517	3,130,909.51	36675	40652	1,019,383.55
MANAGED SUBSTANCE ABUSE	0	0	0	0	0	0	0	0	0
MENTAL HEALTH ACCESS PLAN	0	0	0	0	0	0	0	0	0
EPSDT SCREENING	0	0	0	364	419	16,225.73	182	209	6,302.59
HMO SERVICES	0	0	0	0	0	0	1053	1099	266,418.73
PATIENT MANAGEMENT	0	0	0	1	1	2	24300	24300	48,600.00
HEALTH INS PREMIUM PAYMENT	0	0	0	695	1727	192,816.83	502	1319	40,848.53
MEDICAL SUPPLIES	1	2	69.26	7265	706042	1,506,934.06	798	25221	132,484.44
OTHER PRACTITIONER	0	0	0	1934	13478	326,130.27	1060	2067	126,246.31
FAMILY CENTERED PROGRAM	0	0	0	167	3138	84,819.65	38	991	24,252.04
FAMILY PRESERVATION	0	0	0	0	0	0	0	0	0
TREATMENT FOSTER FAMILY CARE	0	0	0	1	14	555.1	0	0	0
GROUP TREATMENT THERAPY	0	0	0	6	204	10,385.96	4	110	7,227.37
DENTAL	0	0	0	3514	4459	654,009.81	3120	4233	680,511.28
OPTOMETRIST	0	0	0	2269	2847	139,894.54	1680	2150	131,165.04
CHIROPRACTIC	0	0	0	1560	3552	76,044.68	1684	4177	141,332.45
PODIATRIC	0	0	0	875	1290	59,108.89	234	320	35,142.53
PHYSICAL DISABILITIES SVCS	0	0	0	288	10510	132,242.10	0	0	0

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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
BRAIN INJ WAIVER SERVICES	0	0	0	129	10218	214,641.35	0	0	0
PSYCHIATRIC	0	0	0	1336	2583	80,486.90	19	38	3,554.83
RESIDENTIAL CARE FACILITY	0	0	0	1797	62944	483,150.16	0	0	0
MR WAIVER SERVICE	0	0	0	1056	65360	2,498,287.86	0	0	0
MR OBRA WAIVER SERVICES	0	0	0	0	0	0	0	0	0
AIDS WAIVER SERVICES	0	0	0	5	312	3,220.51	0	0	0
ELDERLY WAIVER SERVICES	0	0	0	62	1635	27,168.37	0	0	0
ILL & HANDICAPPED WAIVER SVCS	0	0	0	1420	69113	1,094,275.42	0	0	0
COUNTY OFFICE REIMBURSEMENT	0	0	0	0	0	0	0	0	0
MEP SERVICES	0	0	0	1670	2527	521,626.34	8	8	1,857.00
UNASSIGNED	0	0	0	1	0	0	1	0	0
* ALL C A T E G O R I E S *	1	12	661.57	46672	1758405	52,499,354.03	42387	275180	13,986,664.05

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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	344	1772	1,540,792.28	426	10840	2,036,208.77	1594	7699	7,517,106.07
OUTPATIENT	6568	32742	1,445,014.63	1562	11305	435,020.96	9495	64779	2,201,362.53
CHILD PART HOSP	0	0	0	0	0	0	0	0	0
CHILD DAY TREATMENT	0	0	0	0	0	0	0	0	0
ADULT PART HOSP	0	0	0	0	0	0	0	0	0
ADULT DAY TREATMENT	0	0	0	0	0	0	0	0	0
SKILLED NURSING FACILITY	0	0	0	0	0	0	5	304	75,053.77
INTERMEDIATE CARE FACILITY	0	0	0	0	0	0	5	217	88,610.73-
INTER CARE MENTAL RETARDA	0	0	0	0	0	0	2	55	669,990.14-
NURSING FAC FOR MENTAL ILL	0	0	0	0	0	0	0	0	0
HOME HEALTH	368	1323	58,279.13	54	171	8,981.47	472	2637	139,621.97-
LEAD INSPECTION AGENCY	4	5	1,711.38	1	1	355.69	1	0	356.53-
PHYSICIAN	18949	32712	2,041,041.42	3380	6219	457,531.64	24742	46514	3,513,614.23
CLINIC SERVICES	3048	3934	483,795.40	628	914	104,664.58	4720	7115	861,525.16
MEP CASE MANAGEMENT	0	0	0	0	0	0	1	0	2,491.29
LAB AND RADIOLOGICAL	1288	3042	39,909.62	386	1099	19,101.99	2446	6884	93,980.21
REHAB SUPPORT SERVICES	0	0	0	18	459	22,541.09	9	137	2,150.86
AMBULANCE SERVICES	44	43	6,825.68	14	13	1,919.71	64	61	5,698.70
LOCAL EDUCATION AGENCY	189	32412	209,939.90	25	2740	15,600.45	119	37069	256,209.34
EARLY ACCESS SERVICES	63	422	7,820.02	13	69	1,414.60	88	440	5,363.53-
PRESCRIBED DRUGS	16562	29703	1,504,410.44	3560	8933	564,944.80	19789	35724	1,491,756.74

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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
DRUG CAPITATION	0	0	0	0	0	0	0	0	0
INDIAN HEALTH SERVICES	0	0	0	0	0	0	0	0	0
FAMILY PLANNING SERVICES	625	719	33,049.55	536	626	27,606.40	1348	1499	73,721.77
IOWA PLAN PROGRAM	60942	66028	723,710.66	9896	11025	229,855.43	68196	76321	934,300.42
MANAGED SUBSTANCE ABUSE	0	0	0	0	0	0	0	0	0
MENTAL HEALTH ACCESS PLAN	0	0	0	0	0	0	0	0	0
EPSDT SCREENING	5353	6159	376,257.13	918	1059	68,785.52	6855	7899	567,161.87
HMO SERVICES	1862	1946	231,991.12	282	288	37,436.32	1692	1764	260,525.41
PATIENT MANAGEMENT	42115	42114	84,328.68	6022	6022	12,044.00	47074	47071	90,116.10
HEALTH INS PREMIUM PAYMENT	782	2139	54,665.81	43	101	4,395.83	2994	9296	227,864.29
MEDICAL SUPPLIES	914	11136	111,111.44	143	2626	20,594.24	955	17976	51,562.39-
OTHER PRACTITIONER	1963	7012	172,623.83	312	801	31,137.28	2421	8037	229,391.36
FAMILY CENTERED PROGRAM	627	10029	289,212.79	296	3577	125,332.42	408	6417	192,485.09
FAMILY PRESERVATION	0	0	0	0	0	0	0	0	0
TREATMENT FOSTER FAMILY CARE	3	35	1,500.37	4	23	1,006.15	1	4	155.32
GROUP TREATMENT THERAPY	4	102	6,439.58	24	664	44,437.45	12	249	14,421.46
DENTAL	4214	4934	562,693.64	851	1056	149,557.95	5141	5999	696,074.33
OPTOMETRIST	1541	1806	98,827.92	392	474	27,669.99	1772	2081	108,024.38
CHIROPRACTIC	914	1844	57,445.83	190	502	16,411.17	1190	2627	72,846.34
PODIATRIC	78	95	12,275.73	27	33	4,623.04	88	127	3,202.00
PHYSICAL DISABILITIES SVCS	0	0	0	0	0	0	1	0	831.84-

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	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
BRAIN INJ WAIVER SERVICES	0	0	0	0	0	0	1	0	824.66-
PSYCHIATRIC	7	10	671.43	10	25	1,288.59	22	39	1,263.91
RESIDENTIAL CARE FACILITY	0	0	0	4	115	2,194.84	2	30-	2,535.00-
MR WAIVER SERVICE	2	5	103.15	3	7	422.78	3	23	30,930.61-
MR OBRA WAIVER SERVICES	0	0	0	0	0	0	0	0	0
AIDS WAIVER SERVICES	0	0	0	0	0	0	0	0	0
ELDERLY WAIVER SERVICES	0	0	0	0	0	0	2	3	69,911.47-
ILL & HANDICAPPED WAIVER SVCS	1	6	72	0	0	0	2	39	3,330.96-
COUNTY OFFICE REIMBURSEMENT	0	0	0	0	0	0	0	0	0
MEP SERVICES	0	0	0	11	25	4,550.01	7	10	43,123.62-
UNASSIGNED	0	0	0	0	0	0	1	0	783,596.48-
* ALL C A T E G O R I E S *	68225	294229	10,156,520.56	10870	71812	4,477,635.16	76282	397086	17,601,913.02

Title XIX Monthly Report of Expenditures by Category of Service by Program

CATEGORY OF SERVICE	FOSTER -PRE-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	65	523	191,711.58	521	1674	696,467.96	53	232	338,398.00
OUTPATIENT	912	6242	211,933.70	2843	33139	419,380.80	502	4994	268,624.42
CHILD PART HOSP	0	0	0	0	0	0	0	0	0
CHILD DAY TREATMENT	0	0	0	0	0	0	0	0	0
ADULT PART HOSP	0	0	0	0	0	0	0	0	0
ADULT DAY TREATMENT	0	0	0	0	0	0	0	0	0
SKILLED NURSING FACILITY	0	0	0	457	1237	49,588.15	3	7	35.99
INTERMEDIATE CARE FACILITY	0	0	0	10045	301658	25,355,640.47	4	31	1,157.79
INTER CARE MENTAL RETARDA	2	30	9,490.40	0	0	0	0	0	0
NURSING FAC FOR MENTAL ILL	0	0	0	19	522	87,026.31	0	0	0
HOME HEALTH	72	2149	58,657.98	3215	49833	2,552,743.87	85	831	37,304.08
LEAD INSPECTION AGENCY	0	0	0	0	0	0	0	0	0
PHYSICIAN	2577	4144	230,844.01	5257	21179	273,800.36	904	2419	145,028.87
CLINIC SERVICES	397	522	54,360.59	763	359	75,881.30	139	177	22,327.17
MEP CASE MANAGEMENT	3	0	5,195.60	2	0	1,632.98	1	0	160.51
LAB AND RADIOLOGICAL	249	720	8,902.91	119	485	4,437.55	87	198	3,748.98
REHAB SUPPORT SERVICES	2	15	1,196.40	15	453	24,184.45	43	1141	74,848.39
AMBULANCE SERVICES	7	5	173.2	223	244	18,437.20	5	5	713.4
LOCAL EDUCATION AGENCY	106	38469	248,177.36	8	6459	56,965.20	0	0	0
EARLY ACCESS SERVICES	17	172	2,780.89	0	0	0	1	38	546.06
PRESCRIBED DRUGS	4723	13811	1,227,515.82	18863	174718	7,617,758.92	1573	8527	489,789.79

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CATEGORY OF SERVICE	FOSTER -PRE-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
DRUG CAPITATION	0	0	0	0	0	0	0	0	0
INDIAN HEALTH SERVICES	0	0	0	0	0	0	0	0	0
FAMILY PLANNING SERVICES	243	303	13,636.51	33	35	2,150.87	112	126	5,950.52
IOWA PLAN PROGRAM	9644	10069	838,267.27	1743	1790	97,854.65	1591	1792	53,087.72
MANAGED SUBSTANCE ABUSE	0	0	0	0	0	0	0	0	0
MENTAL HEALTH ACCESS PLAN	0	0	0	0	0	0	0	0	0
EPSDT SCREENING	308	330	17,171.70	19	21	385.71	20	21	569.21
HMO SERVICES	0	0	0	0	0	0	0	0	0
PATIENT MANAGEMENT	123	123	246	0	0	0	0	0	0
HEALTH INS PREMIUM PAYMENT	138	352	14,658.30	27	50	13,978.16	6	11	1,530.03
MEDICAL SUPPLIES	229	16761	47,434.85	4185	365657	579,015.35	173	12063	25,291.68
OTHER PRACTITIONER	523	3410	97,605.87	367	1074	25,469.34	62	195	7,302.38
FAMILY CENTERED PROGRAM	658	9306	288,325.03	0	0	0	0	0	0
FAMILY PRESERVATION	1	1	2,160.63	0	0	0	0	0	0
TREATMENT FOSTER FAMILY CARE	525	5360	225,759.27	0	0	0	0	0	0
GROUP TREATMENT THERAPY	881	32781	2,075,194.56	0	0	0	0	0	0
DENTAL	937	1124	129,776.08	774	922	132,035.11	175	228	28,745.73
OPTOMETRIST	455	524	29,351.58	718	1012	27,609.86	128	164	8,041.80
CHIROPRACTIC	129	270	7,170.79	154	159	1,762.46	115	229	7,001.03
PODIATRIC	26	38	2,742.49	708	1015	14,480.78	38	56	2,487.42
PHYSICAL DISABILITIES SVCS	0	0	0	105	3561	43,385.33	0	0	0

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CATEGORY OF SERVICE	FOSTER -PRE-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
BRAIN INJ WAIVER SERVICES	19	1148	21,638.18	225	12303	340,825.42	0	0	0
PSYCHIATRIC	16	33	2,443.81	108	138	4,075.70	27	72	2,311.04
RESIDENTIAL CARE FACILITY	2	41	527.87	9	154	1,754.79	0	0	0
MR WAIVER SERVICE	140	6755	184,211.72	9	111	11,563.34	0	0	0
MR OBRA WAIVER SERVICES	0	0	0	0	0	0	0	0	0
AIDS WAIVER SERVICES	0	0	0	25	2299	21,395.80	0	0	0
ELDERLY WAIVER SERVICES	1	24-	106.80-	5260	224708	2,440,717.23	1	21	263.95
ILL & HANDICAPPED WAIVER SVCS	23	1415	23,244.69	30	1410	17,067.47	0	0	0
COUNTY OFFICE REIMBURSEMENT	0	0	0	0	0	0	0	0	0
MEP SERVICES	145	198	41,630.80	77	92	19,781.18	8	12	2,816.14
UNASSIGNED	0	0	0	2	0	0	0	0	0
* ALL C A T E G O R I E S *	9847	157120	6,314,031.64	17126	1208471	41,029,254.07	2330	33590	1,528,082.10

Title XIX Monthly Report of Expenditures 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	227	913	892,505.02	57	433	186,523.82	0	0	0
OUTPATIENT	758	8770	410,900.07	841	4961	259,206.12	97	1558	108,034.61
CHILD PART HOSP	0	0	0	0	0	0	0	0	0
CHILD DAY TREATMENT	0	0	0	0	0	0	0	0	0
ADULT PART HOSP	0	0	0	0	0	0	0	0	0
ADULT DAY TREATMENT	0	0	0	0	0	0	0	0	0
SKILLED NURSING FACILITY	3	37	0	0	0	0	0	0	0
INTERMEDIATE CARE FACILITY	3	0	1,411.33	0	0	0	0	0	0
INTER CARE MENTAL RETARDA	0	0	0	0	0	0	0	0	0
NURSING FAC FOR MENTAL ILL	0	0	0	0	0	0	0	0	0
HOME HEALTH	145	1826	121,193.92	20	53	1,935.84	2	16	1,067.19
LEAD INSPECTION AGENCY	0	0	0	0	0	0	0	0	0
PHYSICIAN	1341	7327	300,908.28	2530	4026	262,310.55	143	650	104,797.48
CLINIC SERVICES	140	108	14,747.32	469	595	65,455.47	18	27	3,525.35
MEP CASE MANAGEMENT	0	0	0	0	0	0	0	0	0
LAB AND RADIOLOGICAL	44	164	2,527.25	145	504	5,930.71	23	87	1,145.52
REHAB SUPPORT SERVICES	48	1158	75,025.01	0	0	0	0	0	0
AMBULANCE SERVICES	21	19	3,356.78	3	2	92.21	0	0	0
LOCAL EDUCATION AGENCY	0	0	0	36	4425	36,746.91	0	0	0
EARLY ACCESS SERVICES	0	0	0	1	13	240.48	0	0	0
PRESCRIBED DRUGS	1388	8076	629,441.22	2795	5167	333,563.80	156	626	38,380.23

Title XIX Monthly Report of Expenditures 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
DRUG CAPITATION	0	0	0	0	0	0	0	0	0
INDIAN HEALTH SERVICES	0	0	0	0	0	0	0	0	0
FAMILY PLANNING SERVICES	22	26	1,141.69	249	287	13,637.01	2	3	118.69
IOWA PLAN PROGRAM	0	0	0	10510	11287	133,672.69	184	185	14,354.15
MANAGED SUBSTANCE ABUSE	0	0	0	0	0	0	0	0	0
MENTAL HEALTH ACCESS PLAN	0	0	0	0	0	0	0	0	0
EPSDT SCREENING	3	3	1,385.71	486	534	27,574.62	0	0	0
HMO SERVICES	0	0	0	229	232	22,244.55	0	0	0
PATIENT MANAGEMENT	0	0	0	7783	7783	15,566.00	0	0	0
HEALTH INS PREMIUM PAYMENT	0	0	0	56	138	4,460.21	0	0	0
MEDICAL SUPPLIES	311	16719	39,763.80	89	1680	14,567.16	19	405	2,030.34
OTHER PRACTITIONER	66	207	11,192.13	298	1265	31,807.75	14	30	1,682.41
FAMILY CENTERED PROGRAM	0	0	0	83	1384	37,440.12	0	0	0
FAMILY PRESERVATION	0	0	0	0	0	0	0	0	0
TREATMENT FOSTER FAMILY CARE	0	0	0	2	9	396.56	0	0	0
GROUP TREATMENT THERAPY	0	0	0	6	233	15,868.76	0	0	0
DENTAL	142	203	31,910.97	1140	1339	187,275.21	23	29	4,640.98
OPTOMETRIST	103	133	5,475.13	403	467	26,215.64	6	7	383.79
CHIROPRACTIC	42	76	1,502.47	212	402	11,868.46	13	29	972.74
PODIATRIC	26	42	1,487.50	27	34	3,949.21	4	5	560.87
PHYSICAL DISABILITIES SVCS	0	0	0	0	0	0	0	0	0

Title XIX Monthly Report of Expenditures by Category of Service by Program

CATEGORY OF SERVICE	MEDICALLY NEEDY W/ 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
BRAIN INJ WAIVER SERVICES	0	0	0	0	0	0	0	0	0
PSYCHIATRIC	85	159	6,847.13	2	2	330.06	1	1	359.04
RESIDENTIAL CARE FACILITY	0	0	0	0	0	0	0	0	0
MR WAIVER SERVICE	1	18	3,006.54	2	56	1,175.28	0	0	0
MR OBRA WAIVER SERVICES	0	0	0	0	0	0	0	0	0
AIDS WAIVER SERVICES	0	0	0	0	0	0	0	0	0
ELDERLY WAIVER SERVICES	3	18	351.49	0	0	0	0	0	0
ILL & HANDICAPPED WAIVER SVCS	0	0	0	0	0	0	0	0	0
COUNTY OFFICE REIMBURSEMENT	0	0	0	0	0	0	0	0	0
MEP SERVICES	44	66	14,911.08	1	1	195.86	0	0	0
UNASSIGNED	0	0	0	0	0	0	0	0	0
* ALL CATEGORIES *	2156	46068	2,570,991.84	10094	47312	1,700,251.06	180	3658	282,053.39

Title XIX Monthly Report of Expenditures 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
INPATIENT	19	122	85,090.25	110	457	248,275.80	0	0	0
OUTPATIENT	253	2244	132,080.25	1753	18976	356,693.39	0	0	0
CHILD PART HOSP	0	0	0	0	0	0	0	0	0
CHILD DAY TREATMENT	0	0	0	0	0	0	0	0	0
ADULT PART HOSP	0	0	0	0	0	0	0	0	0
ADULT DAY TREATMENT	0	0	0	0	0	0	0	0	0
SKILLED NURSING FACILITY	1	90	41,850.00	5	36	11,897.22	0	0	0
INTERMEDIATE CARE FACILITY	0	0	0	6	42	4,122.89	0	0	0
INTER CARE MENTAL RETARDA	0	0	0	1909	69572	22,304,246.06	0	0	0
NURSING FAC FOR MENTAL ILL	0	0	0	0	0	0	0	0	0
HOME HEALTH	13	102	9,288.06	824	25161	997,034.22	0	0	0
LEAD INSPECTION AGENCY	0	0	0	0	0	0	0	0	0
PHYSICIAN	494	1112	88,403.87	3357	9420	261,975.83	0	0	0
CLINIC SERVICES	68	89	10,914.48	351	281	33,502.19	0	0	0
MEP CASE MANAGEMENT	0	0	0	23	0	39,485.89	0	0	0
LAB AND RADIOLOGICAL	56	156	2,156.44	181	565	6,769.33	0	0	0
REHAB SUPPORT SERVICES	5	95	6,527.85	32	665	30,787.02	0	0	0
AMBULANCE SERVICES	2	2	294.64	34	31	2,890.99	0	0	0
LOCAL EDUCATION AGENCY	1	174	1,736.52	444	190974	1,496,029.19	0	0	0
EARLY ACCESS SERVICES	0	0	0	22	174	2,659.90	0	0	0
PRESCRIBED DRUGS	772	3429	203,004.19	7341	39076	3,163,860.87	2	5	93.97

Title XIX Monthly Report of Expenditures 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
DRUG CAPITATION	0	0	0	0	0	0	0	0	0
INDIAN HEALTH SERVICES	0	0	0	1	0	970	0	0	0
FAMILY PLANNING SERVICES	20	22	1,111.70	536	637	30,734.01	0	0	0
IOWA PLAN PROGRAM	1150	1213	102,040.91	8975	9040	664,616.33	0	0	0
MANAGED SUBSTANCE ABUSE	0	0	0	0	0	0	0	0	0
MENTAL HEALTH ACCESS PLAN	0	0	0	0	0	0	0	0	0
EPSDT SCREENING	10	11	372.53	96	106	2,696.68	0	0	0
HMO SERVICES	0	0	0	0	0	0	0	0	0
PATIENT MANAGEMENT	0	0	0	0	0	0	0	0	0
HEALTH INS PREMIUM PAYMENT	3	7	532.47	446	1098	128,904.91	0	0	0
MEDICAL SUPPLIES	97	6097	16,118.97	1640	257234	392,427.48	0	0	0
OTHER PRACTITIONER	36	77	3,634.34	943	12169	282,758.85	0	0	0
FAMILY CENTERED PROGRAM	4	49	1,890.28	10	78	2,889.66	0	0	0
FAMILY PRESERVATION	0	0	0	0	0	0	0	0	0
TREATMENT FOSTER FAMILY CARE	3	24	1,038.42	1	5	205.81	0	0	0
GROUP TREATMENT THERAPY	7	240	14,548.44	0	0	0	0	0	0
DENTAL	86	112	21,665.52	1219	1366	117,591.41	0	0	0
OPTOMETRIST	56	69	4,794.42	453	501	23,018.38	0	0	0
CHIROPRACTIC	42	100	3,248.33	180	381	6,858.38	0	0	0
PODIATRIC	20	23	1,624.41	411	509	15,902.64	0	0	0
PHYSICAL DISABILITIES SVCS	0	0	0	4	302	4,001.59	0	0	0

Title XIX Monthly Report of Expenditures 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
BRAIN INJ WAIVER SERVICES	0	0	0	121	8191	173,423.08	0	0	0
PSYCHIATRIC	1	1	35.85	189	310	9,893.02	0	0	0
RESIDENTIAL CARE FACILITY	1	31	117.17	45	1610	11,233.29	0	0	0
MR WAIVER SERVICE	1	26	5,126.55	6820	458201	16,061,756.56	0	0	0
MR OBRA WAIVER SERVICES	0	0	0	0	0	0	0	0	0
AIDS WAIVER SERVICES	0	0	0	0	0	0	0	0	0
ELDERLY WAIVER SERVICES	1	63	647.85	10	325	8,412.73	0	0	0
ILL & HANDICAPPED WAIVER SVCS	1	7	264.67	146	7801	126,426.10	0	0	0
COUNTY OFFICE REIMBURSEMENT	0	0	0	0	0	0	0	0	0
MEP SERVICES	1	1	215	6876	9854	2,022,599.63	0	0	0
UNASSIGNED	0	0	0	1	0	0	0	0	0
* ALL C A T E G O R I E S *	1200	15788	760,374.38	9536	1125148	49,047,551.33	1	5	93.97

Title XIX Monthly Report of Expenditures by Category of Service by Program

CATEGORY OF SERVICE	FEDERAL MEDICAID ONLY BLIND			RECIPS SERVED	TOTAL UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID						
INPATIENT	0	0	0	5562	35604	23,563,504.78			
OUTPATIENT	0	0	0	46434	406773	13,808,127.62			
CHILD PART HOSP	0	0	0	0	0	0			
CHILD DAY TREATMENT	0	0	0	0	0	0			
ADULT PART HOSP	0	0	0	0	0	0			
ADULT DAY TREATMENT	0	0	0	1	111	1,329.34			
SKILLED NURSING FACILITY	0	0	0	708	5728	1,642,649.60			
INTERMEDIATE CARE FACILITY	0	0	0	13458	412647	33,315,573.14			
INTER CARE MENTAL RETARDA	0	0	0	1925	70156	21,801,894.68			
NURSING FAC FOR MENTAL ILL	0	0	0	20	553	91,937.74			
HOME HEALTH	0	0	0	9485	164066	7,164,709.75			
LEAD INSPECTION AGENCY	0	0	0	6	6	1,710.54			
PHYSICIAN	0	0	0	100242	247849	13,740,899.80			
CLINIC SERVICES	0	0	0	16406	21127	2,647,231.19			
MEP CASE MANAGEMENT	0	0	0	46	0	71,580.31			
LAB AND RADIOLOGICAL	0	0	0	8796	26040	387,896.82			
REHAB SUPPORT SERVICES	0	0	0	2624	64649	3,295,293.77			
AMBULANCE SERVICES	0	0	0	906	937	95,470.39			
LOCAL EDUCATION AGENCY	0	0	0	1410	499232	3,689,747.87			
EARLY ACCESS SERVICES	0	0	0	281	1964	20,328.61			
PRESCRIBED DRUGS	0	0	0	133925	643795	38,489,556.82			

Title XIX Monthly Report of Expenditures by Category of Service by Program

CATEGORY OF SERVICE	FEDERAL MEDICAID ONLY BLIND			RECIPS SERVED	TOTAL				
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID		UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
DRUG CAPITATION	0	0	0	0	0	0			
INDIAN HEALTH SERVICES	0	0	0	1	0	970			
FAMILY PLANNING SERVICES	0	0	0	8656	9929	463,613.37			
IOWA PLAN PROGRAM	0	0	0	252068	273978	7,944,051.26			
MANAGED SUBSTANCE ABUSE	0	0	0	0	0	0			
MENTAL HEALTH ACCESS PLAN	0	0	0	0	0	0			
EPSDT SCREENING	0	0	0	14553	16775	1,084,949.02			
HMO SERVICES	0	0	0	5114	5329	818,616.13			
PATIENT MANAGEMENT	0	0	0	127465	127464	251,002.78			
HEALTH INS PREMIUM PAYMENT	0	0	0	5694	16242	684,985.99			
MEDICAL SUPPLIES	0	0	0	18535	1585196	3,048,481.29			
OTHER PRACTITIONER	0	0	0	10096	50324	1,357,794.26			
FAMILY CENTERED PROGRAM	0	0	0	2241	34969	1,046,647.08			
FAMILY PRESERVATION	0	0	0	1	1	2,160.63			
TREATMENT FOSTER FAMILY CARE	0	0	0	538	5474	230,617.00			
GROUP TREATMENT THERAPY	0	0	0	940	34583	2,188,523.58			
DENTAL	0	0	0	21727	26566	3,475,097.30			
OPTOMETRIST	0	0	0	10447	12910	650,761.30			
CHIROPRACTIC	0	0	0	6610	14802	408,010.82			
PODIATRIC	0	0	0	2896	4082	164,681.67			
PHYSICAL DISABILITIES SVCS	0	0	0	393	14373	178,797.18			

Title XIX Monthly Report of Expenditures by Category of Service by Program

CATEGORY OF SERVICE	FEDERAL MEDICAID ONLY BLIND			RECIPS SERVED	TOTAL UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID						
BRAIN INJ WAIVER SERVICES	0	0	0	490	31880	749,847.17			
PSYCHIATRIC	0	0	0	1882	3521	116,849.69			
RESIDENTIAL CARE FACILITY	0	0	0	2294	79649	606,354.41			
MR WAIVER SERVICE	0	0	0	8051	534544	18,931,803.99			
MR OBRA WAIVER SERVICES	0	0	0	0	0	0			
AIDS WAIVER SERVICES	0	0	0	30	2611	24,616.31			
ELDERLY WAIVER SERVICES	0	0	0	6838	297428	3,250,925.46			
ILL & HANDICAPPED WAIVER SVCS	0	0	0	1617	79997	1,259,902.74			
COUNTY OFFICE REIMBURSEMENT	0	0	0	0	0	0			
MEP SERVICES	0	0	0	8897	12993	2,629,412.51			
UNASSIGNED	0	0	0	6	0	783,596.48-			
* ALL C A T E G O R I E S *	0	0	0	308562	5876857	214,615,319.23	0	0	0
		**	* END OF REPORT			*			