

TITLE XIX MONTHLY REPORT OF EXPENDITURES

(BY CATEGORY OF SERVICE BY PROGRAM)

<u>CATEGORY OF SERVICE</u>	<u>RECIPS</u>	<u>UNITS OF</u>	<u>AMOUNT</u>	<u>RECIPS</u>	<u>UNITS OF</u>	<u>AMOUNT</u>	<u>RECIPS</u>	<u>UNITS OF</u>	<u>AMOUNT</u>
	<u>SERVED</u>	<u>SERVICE</u>	<u>PAID</u>	<u>SERVED</u>	<u>SERVICE</u>	<u>PAID</u>	<u>SERVED</u>	<u>SERVICE</u>	<u>PAID</u>
		FEDERAL ONLY			REFUGEE TXXI			AGED	
INPATIENT	1	4	\$3,241.87	0	0	\$0.00	364	1,306	\$452,097.21
OUTPATIENT	22	169	\$3,034.12	0	0	\$0.00	2,100	21,933	\$330,907.51
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	32	531	\$22,667.22
INTERMEDIATE CARE FACILITY	0	0	\$0.00	0	0	\$0.00	3,199	92,524	\$6,200,037.27
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	90	\$20,044.75
HOME HEALTH	0	0	\$0.00	0	0	\$0.00	1,220	18,261	\$912,450.45
LEAD INSPECTION AGENCY	0	0	\$0.00	0	0	\$0.00	0	0	\$0.00
PHYSICIAN	18	30	\$2,637.88	0	0	\$0.00	4,507	20,581	\$365,676.24
CLINIC SERVICES	0	0	\$0.00	0	0	\$0.00	527	228	\$48,829.66
MEP CASE MANAGEMENT	0	0	\$0.00	0	0	\$0.00	0	0	\$0.00
LAB AND RADIOLOGICAL	0	0	\$0.00	0	0	\$0.00	67	213	\$2,965.82
REHAB SUPPORT SERVICES	0	0	\$0.00	0	0	\$0.00	42	866	\$44,494.49
AMBULANCE SERVICES	0	0	\$0.00	0	0	\$0.00	181	197	\$18,573.78
LOCAL EDUCATION AGENCY	0	0	\$0.00	0	0	\$0.00	0	0	\$0.00
EARLY ACCESS SERVICES	0	0	\$0.00	0	0	\$0.00	0	0	\$0.00
PRESCRIBED DRUGS	22	42	\$1,865.84	0	0	\$0.00	6,365	34,840	\$1,530,725.10
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	2	2	\$99.16	0	0	\$0.00	1	1	\$50.94
IOWA PLAN PROGRAM	57	73	\$2,303.74	0	0	\$0.00	16	14	-\$76.94
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	2	2	\$133.29	0	0	\$0.00	0	0	\$0.00
HMO SERVICES	0	0	\$0.00	0	0	\$0.00	0	0	\$0.00
PATIENT MANAGEMENT	53	53	\$106.00	0	0	\$0.00	0	0	\$0.00
HEALTH INS PREMIUM PAYMENT	1	3	\$171.16	0	0	\$0.00	2	3	\$385.60
MEDICAL SUPPLIES	0	0	\$0.00	0	0	\$0.00	1,838	118,207	\$224,694.31
OTHER PRACTITIONER	0	0	\$0.00	0	0	\$0.00	257	1,020	\$13,218.52
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	1	32	\$2,629.31	0	0	\$0.00	0	0	\$0.00
DENTAL	9	12	\$1,113.63	0	0	\$0.00	340	404	\$54,768.52
OPTOMETRIST	2	2	\$46.34	0	0	\$0.00	414	589	\$20,864.51
CHIROPRACTIC	0	0	\$0.00	0	0	\$0.00	280	658	\$9,298.77

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<u>CATEGORY OF SERVICE</u>	<u>RECIPS SERVED</u>	<u>UNITS OF SERVICE</u>	<u>AMOUNT PAID</u>	<u>RECIPS SERVED</u>	<u>UNITS OF SERVICE</u>	<u>AMOUNT PAID</u>	<u>RECIPS SERVED</u>	<u>UNITS OF SERVICE</u>	<u>AMOUNT PAID</u>
		<u>FEDERAL ONLY</u>			<u>REFUGEE TXXI</u>			<u>AGED</u>	
PODIATRIC	0	0	\$0.00	0	0	\$0.00	496	741	\$15,030.92
PHYSICAL DISABILITIES SVCS	0	0	\$0.00	0	0	\$0.00	2	3	\$179.95
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	111	161	\$5,987.09
RESIDENTIAL CARE FACILITY	0	0	\$0.00	0	0	\$0.00	430	12,014	\$69,468.28
MR WAIVER SERVICE	0	0	\$0.00	0	0	\$0.00	59	3,172	\$146,253.42
MR OBRA WAIVER SERVICES	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	1,574	70,382	\$772,663.42
ILL & HANDICAPPED WAIVER SVCS	0	0	\$0.00	0	0	\$0.00	2	74	\$862.87
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	99	120	\$26,455.95
UNASSIGNED	0	0	\$0.00	0	0	\$0.00	0	0	\$0.00
ALL CATEGORIES*	78	424	\$17,382.34	0	0	\$0.00	10,960	399,133	\$11,309,575.63

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<u>CATEGORY OF SERVICE</u>	<u>RECIPS</u>	<u>UNITS OF</u>	<u>AMOUNT</u>	<u>RECIPS</u>	<u>UNITS OF</u>	<u>AMOUNT</u>	<u>RECIPS</u>	<u>UNITS OF</u>	<u>AMOUNT</u>
	<u>SERVED</u>	<u>SERVICE</u>	<u>PAID</u>	<u>SERVED</u>	<u>SERVICE</u>	<u>PAID</u>	<u>SERVED</u>	<u>SERVICE</u>	<u>PAID</u>
	<u>FEDERAL ONLY</u>			<u>REFUGEE TXXI</u>			<u>AGED</u>		
		<u>BLIND</u>			<u>DISABLED</u>			<u>ADC - ADULT</u>	
INPATIENT	0	0	\$0.00	1,428	9,045	\$6,731,270.30	623	1,836	\$1,974,562.05
OUTPATIENT	0	0	\$0.00	11,539	133,556	\$3,525,961.78	7,172	53,376	\$2,331,977.33
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	118	3,432	\$1,323,765.45	0	0	\$0.00
INTERMEDIATE CARE FACILITY	0	0	\$0.00	474	13,749	\$1,131,707.99	0	0	\$0.00
INTER CARE MENTAL RETARDA	0	0	\$0.00	18	496	\$145,673.30	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	2,535	54,650	\$2,222,732.87	54	323	\$27,231.17
LEAD INSPECTION AGENCY	0	0	\$0.00	0	0	\$0.00	0	0	\$0.00
PHYSICIAN	1	3	\$54.62	21,808	87,150	\$3,343,152.89	14,405	27,644	\$2,258,109.26
CLINIC SERVICES	0	0	\$0.00	2,750	2,946	\$423,690.89	1,988	2,930	\$308,457.26
MEP CASE MANAGEMENT	0	0	\$0.00	0	0	\$0.00	0	0	\$0.00
LAB AND RADIOLOGICAL	0	0	\$0.00	1,149	4,319	\$56,323.04	1,513	3,822	\$82,393.44
REHAB SUPPORT SERVICES	0	0	\$0.00	2,212	51,094	\$2,547,149.48	16	207	\$8,134.11
AMBULANCE SERVICES	1	1	\$137.62	864	1,015	\$125,032.38	269	283	\$38,608.90
LOCAL EDUCATION AGENCY	0	0	\$0.00	415	103,933	\$917,786.63	9	2,478	\$19,433.45
EARLY ACCESS SERVICES	0	0	\$0.00	97	928	\$16,850.58	0	0	\$0.00
PRESCRIBED DRUGS	1	9	\$489.80	33,353	180,958	\$13,467,754.96	17,048	45,477	\$2,186,731.43
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	927	966	\$44,770.16	3,617	3,750	\$173,332.99
IOWA PLAN PROGRAM	1	1	\$77.59	42,486	43,843	\$3,098,161.14	37,225	41,721	\$1,044,185.76
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	315	385	\$12,996.32	161	194	\$7,539.10
HMO SERVICES	0	0	\$0.00	0	0	\$0.00	1,145	1,181	\$284,911.79
PATIENT MANAGEMENT	0	0	\$0.00	1	1	\$2.00	24,135	24,135	\$48,270.00
HEALTH INS PREMIUM PAYMENT	0	0	\$0.00	695	1,793	\$197,078.00	519	1,409	\$42,085.26
MEDICAL SUPPLIES	1	102	\$76.26	6,517	539,213	\$1,379,093.96	705	18,956	\$158,465.40
OTHER PRACTITIONER	0	0	\$0.00	2,112	12,174	\$304,779.60	834	1,685	\$99,142.60
FAMILY CENTERED PROGRAM	0	0	\$0.00	212	3,984	\$108,242.94	47	1,202	\$28,027.92
FAMILY PRESERVATION	0	0	\$0.00	0	0	\$0.00	0	0	\$0.00
TREATMENT FOSTER FAMILY CARE	0	0	\$0.00	1	17	\$713.15	0	0	\$0.00
GROUP TREATMENT THERAPY	0	0	\$0.00	9	271	\$14,705.31	7	154	\$9,894.54
DENTAL	0	0	\$0.00	3,547	4,460	\$580,665.82	3,270	4,424	\$670,392.60
OPTOMETRIST	0	0	\$0.00	2,164	2,746	\$137,311.18	1,626	2,012	\$123,273.39

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		<u>FEDERAL ONLY</u>			<u>REFUGEE TXXI</u>			<u>AGED</u>	
CHIROPRACTIC	0	0	\$0.00	1,826	4,579	\$92,630.32	1,562	4,010	\$129,846.80
PODIATRIC	0	0	\$0.00	922	1,385	\$56,350.67	185	250	\$23,819.32
PHYSICAL DISABILITIES SVCS	0	0	\$0.00	288	10,937	\$146,705.17	0	0	\$0.00
BRAIN INJ WAIVER SERVICES	0	0	\$0.00	137	9,631	\$209,935.18	0	0	\$0.00
PSYCHIATRIC	0	0	\$0.00	2,130	4,242	\$171,192.31	7	10	\$1,178.71
RESIDENTIAL CARE FACILITY	0	0	\$0.00	1,648	45,837	\$277,823.01	0	0	\$0.00
MR WAIVER SERVICE	0	0	\$0.00	950	51,755	\$2,130,595.96	0	0	\$0.00
MR OBRA WAIVER SERVICES	0	0	\$0.00	0	0	\$0.00	0	0	\$0.00
AIDS WAIVER SERVICES	0	0	\$0.00	6	386	\$3,944.55	0	0	\$0.00
ELDERLY WAIVER SERVICES	0	0	\$0.00	82	3,378	\$38,301.34	0	0	\$0.00
ILL & HANDICAPPED WAIVER SVCS	0	0	\$0.00	1,441	61,728	\$1,007,648.90	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	1,557	1,929	\$415,433.59	6	11	\$2,871.25
UNASSIGNED	0	0	\$0.00	3	0	\$0.00	0	0	\$0.00
ALL CATEGORIES *	2	116	\$835.89	47,169	1,452,911	\$46,407,933.12	42,070	243,480	\$12,082,875.83

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	<u>SERVED</u>	<u>SERVICE</u>	<u>PAID</u>	<u>SERVED</u>	<u>SERVICE</u>	<u>PAID</u>	<u>SERVED</u>	<u>SERVICE</u>	<u>PAID</u>
	<u>FEDERAL ONLY</u>			<u>REFUGEE TXXI</u>			<u>AGED</u>		
	<u>ADC - CHILD</u>			<u>CMAP</u>			<u>OTHER</u>		
INPATIENT	388	1,847	\$1,623,859.08	418	9,625	\$2,321,617.73	1,432	6,359	\$7,470,627.25
OUTPATIENT	6,832	36,402	\$1,320,687.70	1,424	10,303	\$331,233.58	9,155	60,217	\$3,029,882.48
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	5	75	\$6,488.17
INTERMEDIATE CARE FACILITY	0	0	\$0.00	0	0	\$0.00	8	166	-\$74,453.09
INTER CARE MENTAL RETARDA	0	0	\$0.00	1	24	\$7,150.80	2	0	-\$745,962.03
NURSING FAC FOR MENTAL ILL	0	0	\$0.00	0	0	\$0.00	0	0	\$0.00
HOME HEALTH	421	1,200	\$38,647.31	43	265	\$9,840.40	481	2,149	-\$569,058.58
LEAD INSPECTION AGENCY	8	8	\$3,145.52	1	1	\$355.69	2	2	\$711.38
PHYSICIAN	19,996	34,017	\$2,068,268.08	3,070	5,581	\$429,142.91	23,911	43,856	\$3,341,818.62
CLINIC SERVICES	3,250	4,250	\$504,310.91	627	907	\$100,673.66	4,628	7,120	\$458,896.80
MEP CASE MANAGEMENT	0	0	\$0.00	0	0	\$0.00	0	0	\$0.00
LAB AND RADIOLOGICAL	1,516	2,461	\$36,665.78	318	697	\$13,040.76	2,400	5,175	\$87,046.84
REHAB SUPPORT SERVICES	1	0	-\$51.62	13	607	\$20,766.37	5	94	\$4,691.01
AMBULANCE SERVICES	163	160	\$23,034.40	66	68	\$8,956.49	243	262	\$39,054.69
LOCAL EDUCATION AGENCY	136	18,707	\$134,468.23	26	2,628	\$17,989.80	99	20,789	\$129,690.09
EARLY ACCESS SERVICES	91	568	\$11,938.16	16	123	\$2,608.88	92	728	\$14,455.91
PRESCRIBED DRUGS	20,197	37,062	\$1,906,871.31	3,506	8,000	\$488,884.91	22,768	40,821	\$1,922,179.41
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	574	587	\$27,261.88	413	443	\$19,612.61	1,161	1,174	\$55,296.97
IOWA PLAN PROGRAM	62,183	67,685	\$743,590.23	9,198	10,446	\$220,589.22	67,256	76,212	\$933,856.71
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	1	0	-\$60.00
EPSDT SCREENING	4,490	5,385	\$330,326.13	786	886	\$54,459.30	5,661	6,424	\$475,713.94
HMO SERVICES	1,985	2,060	\$252,375.91	277	279	\$35,217.39	1,714	1,785	\$298,105.95
PATIENT MANAGEMENT	42,042	42,042	\$84,084.00	5,498	5,498	\$10,996.00	45,908	45,908	\$91,816.00
HEALTH INS PREMIUM PAYMENT	836	2,328	\$57,213.94	39	85	\$3,805.61	3,083	9,722	\$250,205.66
MEDICAL SUPPLIES	695	10,467	\$84,514.95	130	3,020	\$18,054.94	763	10,919	\$114,477.02
OTHER PRACTITIONER	2,046	7,134	\$173,062.40	277	740	\$24,908.37	2,358	7,590	\$233,980.60
FAMILY CENTERED PROGRAM	871	13,115	\$414,867.75	325	4,413	\$147,851.41	540	9,150	\$269,759.93
FAMILY PRESERVATION	1	1	\$2,359.41	0	0	\$0.00	0	0	\$0.00
TREATMENT FOSTER FAMILY CARE	1	20	\$740.52	10	110	\$4,644.79	3	36	\$1,542.30
GROUP TREATMENT THERAPY	10	155	\$8,747.14	24	654	\$36,368.68	14	321	\$18,449.55
DENTAL	4,681	5,452	\$653,172.96	770	939	\$141,723.57	5,491	6,540	\$744,916.90
OPTOMETRIST	1,466	1,675	\$93,085.07	319	389	\$22,281.72	1,758	2,048	\$112,165.99

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	<u>FEDERAL ONLY</u>			<u>REFUGEE TXXI</u>			<u>AGED</u>		
CHIROPRACTIC	904	1,787	\$55,775.18	190	441	\$15,013.25	1,096	2,304	\$65,818.70
PODIATRIC	62	69	\$6,573.68	11	11	\$1,088.02	84	97	\$8,993.87
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	1	\$192.77
PSYCHIATRIC	4	22	\$642.30	8	25	\$1,470.67	16	42	\$1,716.01
RESIDENTIAL CARE FACILITY	0	0	\$0.00	3	0	\$15,888.44	1	0	\$3,256.30
MR WAIVER SERVICE	0	0	\$0.00	1	32	\$514.08	7	86	-\$93,608.38
MR OBRA WAIVER SERVICES	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	4	153	\$668.91
ILL & HANDICAPPED WAIVER SVCS	0	0	\$0.00	0	0	\$0.00	2	38	\$478.48
COUNTY OFFICE REIMBURSEMENT	0	0	\$0.00	0	0	\$0.00	0	0	\$0.00
MEP SERVICES	2	2	\$430.00	3	3	\$660.94	6	8	\$1,904.73
UNASSIGNED	0	0	\$0.00	0	0	\$0.00	2	0	\$91,703.24
ALL CATEGORIES *	68,481	296,668	\$10,660,668.31	10,164	67,243	\$4,527,410.99	74,875	368,371	\$18,797,421.10

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(BY CATEGORY OF SERVICE BY PROGRAM)

<u>CATEGORY OF SERVICE</u>	<u>RECIPS</u>	<u>UNITS OF</u>	<u>AMOUNT</u>	<u>RECIPS</u>	<u>UNITS OF</u>	<u>AMOUNT</u>	<u>RECIPS</u>	<u>UNITS OF</u>	<u>AMOUNT</u>
	<u>SERVED</u>	<u>SERVICE</u>	<u>PAID</u>	<u>SERVED</u>	<u>SERVICE</u>	<u>PAID</u>	<u>SERVED</u>	<u>SERVICE</u>	<u>PAID</u>
	FEDERAL ONLY			REFUGEE TXXI			AGED		
	FOSTER - PRESUB - SUB ADOPTS			INTERMEDIATE CARE FACILITY			MEDICALLY NEEDY NO SPEND DN		
INPATIENT	71	755	\$328,884.69	630	2,475	\$743,713.15	55	225	\$199,806.43
OUTPATIENT	933	6,455	\$182,436.26	3,263	39,068	\$503,302.04	456	5,940	\$197,457.88
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	149	1,552	\$23,468.04	2	5	\$324.60
INTERMEDIATE CARE FACILITY	0	0	\$0.00	10,136	286,496	\$23,574,403.95	4	108	\$9,617.60
INTER CARE MENTAL RETARDA	4	113	\$36,859.69	1	90	\$24,790.00	0	0	\$0.00
NURSING FAC FOR MENTAL ILL	0	0	\$0.00	29	850	\$194,368.66	0	0	\$0.00
HOME HEALTH	60	1,808	\$47,863.21	2,830	41,282	\$2,148,044.59	80	778	\$32,290.38
LEAD INSPECTION AGENCY	0	0	\$0.00	0	0	\$0.00	0	0	\$0.00
PHYSICIAN	2,551	4,118	\$234,510.33	6,828	29,756	\$532,934.34	900	3,012	\$148,827.24
CLINIC SERVICES	362	485	\$51,178.31	831	293	\$68,229.03	135	164	\$18,528.70
MEP CASE MANAGEMENT	0	0	\$0.00	0	0	\$0.00	0	0	\$0.00
LAB AND RADIOLOGICAL	286	678	\$8,604.61	104	425	\$4,189.55	66	180	\$2,857.85
REHAB SUPPORT SERVICES	1	17	\$827.73	12	152	\$4,386.74	31	1,371	\$83,804.14
AMBULANCE SERVICES	34	31	\$5,449.39	484	670	\$54,037.28	28	29	\$3,085.00
LOCAL EDUCATION AGENCY	105	24,001	\$188,839.79	5	408	\$3,985.48	0	0	\$0.00
EARLY ACCESS SERVICES	31	234	\$4,633.08	1	5	\$102.60	0	0	\$0.00
PRESCRIBED DRUGS	4,743	11,896	\$995,110.99	18,264	141,227	\$6,234,156.35	1,498	7,274	\$400,632.72
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	226	232	\$9,936.69	25	25	\$1,425.93	119	123	\$5,504.50
IOWA PLAN PROGRAM	9,380	9,758	\$822,077.04	1,746	1,811	\$98,961.30	1,563	1,822	\$53,817.30
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	254	273	\$13,637.69	2	2	\$87.42	20	21	\$660.89
HMO SERVICES	0	0	\$0.00	0	0	\$0.00	0	0	\$0.00
PATIENT MANAGEMENT	104	104	\$208.00	0	0	\$0.00	0	0	\$0.00
HEALTH INS PREMIUM PAYMENT	128	320	\$14,843.10	31	59	\$15,265.59	10	26	\$2,213.51
MEDICAL SUPPLIES	179	14,384	\$34,575.66	3,842	289,090	\$488,209.58	152	9,700	\$22,721.79
OTHER PRACTITIONER	495	2,689	\$73,637.16	410	1,580	\$29,361.96	59	142	\$5,912.08
FAMILY CENTERED PROGRAM	806	12,403	\$369,280.75	0	0	\$0.00	0	0	\$0.00
FAMILY PRESERVATION	3	3	\$5,266.25	0	0	\$0.00	0	0	\$0.00
TREATMENT FOSTER FAMILY CARE	619	6,243	\$264,939.82	0	0	\$0.00	0	0	\$0.00
GROUP TREATMENT THERAPY	1,030	40,482	\$2,525,133.32	0	0	\$0.00	0	0	\$0.00
DENTAL	991	1,171	\$149,469.15	701	847	\$125,464.00	212	278	\$37,976.63
OPTOMETRIST	374	416	\$22,801.41	613	830	\$27,880.79	116	143	\$7,756.03

TITLE XIX MONTHLY REPORT OF EXPENDITURES

(BY CATEGORY OF SERVICE BY PROGRAM)

<u>CATEGORY OF SERVICE</u>	<u>RECIPS SERVED</u>	<u>UNITS OF SERVICE</u>	<u>AMOUNT PAID</u>	<u>RECIPS SERVED</u>	<u>UNITS OF SERVICE</u>	<u>AMOUNT PAID</u>	<u>RECIPS SERVED</u>	<u>UNITS OF SERVICE</u>	<u>AMOUNT PAID</u>
	<u>FEDERAL ONLY</u>			<u>REFUGEE TXXI</u>			<u>AGED</u>		
CHIROPRACTIC	125	213	\$6,182.22	208	518	\$5,665.20	105	239	\$6,972.17
PODIATRIC	32	41	\$3,388.92	1,104	1,528	\$35,115.29	47	66	\$2,296.07
PHYSICAL DISABILITIES SVCS	0	0	\$0.00	101	3,680	\$46,730.43	0	0	\$0.00
BRAIN INJ WAIVER SERVICES	17	1,351	\$27,395.12	216	15,055	\$313,016.96	0	0	\$0.00
PSYCHIATRIC	8	12	\$785.90	207	315	\$12,403.96	27	52	\$1,613.55
RESIDENTIAL CARE FACILITY	0	0	\$0.00	2	36	\$143.47	0	0	\$0.00
MR WAIVER SERVICE	141	6,317	\$168,825.07	10	189	\$8,715.12	1	11	\$77.00
MR OBRA WAIVER SERVICES	0	0	\$0.00	0	0	\$0.00	0	0	\$0.00
AIDS WAIVER SERVICES	0	0	\$0.00	28	2,637	\$25,284.66	0	0	\$0.00
ELDERLY WAIVER SERVICES	0	0	\$0.00	5,040	223,709	\$2,149,435.64	2	31	\$326.90
ILL & HANDICAPPED WAIVER SVCS	23	1,238	\$20,523.75	15	756	\$9,272.60	0	0	\$0.00
COUNTY OFFICE REIMBURSEMENT	0	0	\$0.00	0	0	\$0.00	0	0	\$0.00
MEP SERVICES	139	195	\$42,082.94	75	86	\$18,883.30	9	9	\$2,000.04
UNASSIGNED	0	0	\$0.00	0	0	\$0.00	0	0	\$0.00
ALL CATEGORIES *	9,638	148,436	\$6,660,188.04	16,970	1,087,502	\$37,525,435.00	2,271	31,749	\$1,247,081.00

TITLE XIX MONTHLY REPORT OF EXPENDITURES

(BY CATEGORY OF SERVICE BY PROGRAM)

<u>CATEGORY OF SERVICE</u>	<u>RECIPS</u>	<u>UNITS OF</u>	<u>AMOUNT</u>	<u>RECIPS</u>	<u>UNITS OF</u>	<u>AMOUNT</u>	<u>RECIPS</u>	<u>UNITS OF</u>	<u>AMOUNT</u>
	<u>SERVED</u>	<u>SERVICE</u>	<u>PAID</u>	<u>SERVED</u>	<u>SERVICE</u>	<u>PAID</u>	<u>SERVED</u>	<u>SERVICE</u>	<u>PAID</u>
	FEDERAL ONLY			REFUGEE TXXI			AGED		
	MEDICALLY NEEDY WI SPEND DN			OTHER TXXI			OTHER BREAST CERVICAL CANCER		
INPATIENT	236	982	\$987,037.01	42	379	\$252,716.44	5	4	\$9,142.52
OUTPATIENT	799	11,318	\$437,864.97	850	5,058	\$206,042.21	85	1,185	\$2,151.15
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	3	\$1,198.59	0	0	\$0.00	0	0	\$0.00
INTERMEDIATE CARE FACILITY	5	35	-\$42,952.91	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	135	2,016	\$111,133.50	17	53	\$2,954.32	2	12	\$845.90
LEAD INSPECTION AGENCY	0	0	\$0.00	0	0	\$0.00	0	0	\$0.00
PHYSICIAN	1,436	6,927	\$324,902.72	2,559	3,828	\$218,539.69	128	492	\$127,501.58
CLINIC SERVICES	134	114	\$15,948.67	506	670	\$71,977.74	14	23	\$2,599.28
MEP CASE MANAGEMENT	0	0	\$0.00	0	0	\$0.00	0	0	\$0.00
LAB AND RADIOLOGICAL	36	114	\$1,954.08	117	318	\$5,275.96	26	78	\$1,391.95
REHAB SUPPORT SERVICES	47	1,126	\$70,252.28	1	0	-\$186.12	0	0	\$0.00
AMBULANCE SERVICES	98	110	\$14,351.90	26	26	\$3,703.17	0	0	\$0.00
LOCAL EDUCATION AGENCY	0	0	\$0.00	22	3,923	\$33,472.73	0	0	\$0.00
EARLY ACCESS SERVICES	0	0	\$0.00	1	6	\$143.84	0	0	\$0.00
PRESCRIBED DRUGS	1,324	6,504	\$571,783.59	3,032	5,471	\$322,853.69	143	480	\$30,213.78
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	18	11	\$640.04	210	225	\$11,005.73	3	3	\$102.89
IOWA PLAN PROGRAM	0	0	\$0.00	10,286	11,136	\$130,929.80	176	177	\$13,733.43
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	1	1	\$535.40	369	396	\$17,814.15	0	0	\$0.00
HMO SERVICES	0	0	\$0.00	213	216	\$23,111.91	0	0	\$0.00
PATIENT MANAGEMENT	0	0	\$0.00	7,553	7,553	\$15,106.00	0	0	\$0.00
HEALTH INS PREMIUM PAYMENT	0	0	\$0.00	59	138	\$5,314.67	0	0	\$0.00
MEDICAL SUPPLIES	305	12,568	\$61,044.84	74	2,295	\$11,832.36	15	379	\$3,039.00
OTHER PRACTITIONER	77	222	\$11,239.45	315	1,475	\$33,189.85	6	8	\$1,123.92
FAMILY CENTERED PROGRAM	0	0	\$0.00	115	1,875	\$55,734.93	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	2	14	\$623.16	0	0	\$0.00
GROUP TREATMENT THERAPY	0	0	\$0.00	6	254	\$16,555.75	0	0	\$0.00
DENTAL	151	225	\$47,035.33	1,281	1,484	\$184,512.04	12	19	\$3,298.38
OPTOMETRIST	83	111	\$4,785.72	420	487	\$26,925.05	5	5	\$301.23

TITLE XIX MONTHLY REPORT OF EXPENDITURES

(BY CATEGORY OF SERVICE BY PROGRAM)

<u>CATEGORY OF SERVICE</u>	<u>RECIPS SERVED</u>	<u>UNITS OF SERVICE</u>	<u>AMOUNT PAID</u>	<u>RECIPS SERVED</u>	<u>UNITS OF SERVICE</u>	<u>AMOUNT PAID</u>	<u>RECIPS SERVED</u>	<u>UNITS OF SERVICE</u>	<u>AMOUNT PAID</u>
		<u>FEDERAL ONLY</u>			<u>REFUGEE TXXI</u>			<u>AGED</u>	
CHIROPRACTIC	56	152	\$2,705.93	216	387	\$11,999.07	12	45	\$1,436.90
PODIATRIC	41	82	\$1,847.39	20	19	\$2,122.25	2	3	\$98.30
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	108	267	\$12,999.92	3	10	\$676.92	0	0	\$0.00
RESIDENTIAL CARE FACILITY	1	47	\$356.17	0	0	\$0.00	0	0	\$0.00
MR WAIVER SERVICE	0	0	\$0.00	2	35	\$503.28	0	0	\$0.00
MR OBRA WAIVER SERVICES	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	4	38	\$552.26	0	0	\$0.00	0	0	\$0.00
ILL & HANDICAPPED WAIVER SVCS	1	12	\$221.88	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	58	94	\$20,358.49	0	0	\$0.00	0	0	\$0.00
UNASSIGNED	0	0	\$0.00	0	0	\$0.00	0	0	\$0.00
ALL CATEGORIES *	2,167	43,079	\$2,657,797.22	10,088	47,731	\$1,665,450.59	171	2,913	\$196,980.21

TITLE XIX MONTHLY REPORT OF EXPENDITURES

(BY CATEGORY OF SERVICE BY PROGRAM)

<u>CATEGORY OF SERVICE</u>	<u>RECIPS</u>	<u>UNITS OF</u>	<u>AMOUNT</u>	<u>RECIPS</u>	<u>UNITS OF</u>	<u>AMOUNT</u>	<u>RECIPS</u>	<u>UNITS OF</u>	<u>AMOUNT</u>
	<u>SERVED</u>	<u>SERVICE</u>	<u>PAID</u>	<u>SERVED</u>	<u>SERVICE</u>	<u>PAID</u>	<u>SERVED</u>	<u>SERVICE</u>	<u>PAID</u>
	<u>FEDERAL ONLY</u>			<u>REFUGEE TXXI</u>			<u>AGED</u>		
	<u>STATE ONLY</u>			<u>FED CNTY - FED CNTY STATE</u>			<u>FEDERAL MEDICAID ONLY AGED</u>		
INPATIENT	15	176	\$147,648.02	108	433	\$254,941.49	0	0	\$0.00
OUTPATIENT	243	1,756	\$89,350.04	1,696	15,177	\$296,202.96	1	8	\$100.00
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	3	39	\$17,588.86	2	52	\$23,619.56	0	0	\$0.00
INTERMEDIATE CARE FACILITY	0	0	\$0.00	9	175	\$15,936.55	0	0	\$0.00
INTER CARE MENTAL RETARDA	0	0	\$0.00	1,913	54,737	\$15,834,424.23	0	0	\$0.00
NURSING FAC FOR MENTAL ILL	0	0	\$0.00	0	0	\$0.00	0	0	\$0.00
HOME HEALTH	11	74	\$4,710.80	747	22,594	\$832,603.15	0	0	\$0.00
LEAD INSPECTION AGENCY	0	0	\$0.00	0	0	\$0.00	0	0	\$0.00
PHYSICIAN	453	1,308	\$92,613.64	3,823	10,742	\$310,216.87	0	0	\$0.00
CLINIC SERVICES	74	109	\$12,701.24	357	294	\$36,143.59	0	0	\$0.00
MEP CASE MANAGEMENT	0	0	\$0.00	0	0	\$0.00	0	0	\$0.00
LAB AND RADIOLOGICAL	31	92	\$1,497.17	167	537	\$6,375.60	0	0	\$0.00
REHAB SUPPORT SERVICES	3	53	\$7,526.38	33	438	\$24,315.04	0	0	\$0.00
AMBULANCE SERVICES	14	17	\$2,359.59	70	76	\$7,797.09	0	0	\$0.00
LOCAL EDUCATION AGENCY	4	1,883	\$3,435.75	347	105,130	\$827,805.66	0	0	\$0.00
EARLY ACCESS SERVICES	0	0	\$0.00	20	199	\$3,256.06	0	0	\$0.00
PRESCRIBED DRUGS	690	2,821	\$169,971.17	7,129	32,279	\$2,472,799.79	1	4	\$123.11
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	21	23	\$1,118.51	448	470	\$21,434.82	0	0	\$0.00
IOWA PLAN PROGRAM	1,098	1,141	\$95,706.70	8,860	8,919	\$656,202.60	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	10	10	\$1,362.29	64	92	\$2,638.52	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	2	8	\$408.86	437	1,091	\$117,106.32	0	0	\$0.00
MEDICAL SUPPLIES	91	5,331	\$15,216.14	1,438	222,486	\$363,061.09	0	0	\$0.00
OTHER PRACTITIONER	37	106	\$5,839.01	991	9,023	\$205,462.10	0	0	\$0.00
FAMILY CENTERED PROGRAM	8	74	\$2,810.54	11	106	\$4,111.82	0	0	\$0.00
FAMILY PRESERVATION	0	0	\$0.00	0	0	\$0.00	0	0	\$0.00
TREATMENT FOSTER FAMILY CARE	4	35	\$1,527.93	0	0	\$0.00	0	0	\$0.00
GROUP TREATMENT THERAPY	6	240	\$15,352.98	0	0	\$0.00	0	0	\$0.00
DENTAL	81	100	\$11,092.61	1,145	1,287	\$101,965.39	0	0	\$0.00
OPTOMETRIST	59	76	\$5,063.80	501	565	\$25,908.01	0	0	\$0.00

TITLE XIX MONTHLY REPORT OF EXPENDITURES

(BY CATEGORY OF SERVICE BY PROGRAM)

<u>CATEGORY OF SERVICE</u>	<u>RECIPS SERVED</u>	<u>UNITS OF SERVICE</u>	<u>AMOUNT PAID</u>	<u>RECIPS SERVED</u>	<u>UNITS OF SERVICE</u>	<u>AMOUNT PAID</u>	<u>RECIPS SERVED</u>	<u>UNITS OF SERVICE</u>	<u>AMOUNT PAID</u>
		<u>FEDERAL ONLY</u>			<u>REFUGEE TXXI</u>			<u>AGED</u>	
CHIROPRACTIC	40	90	\$2,942.30	227	496	\$11,082.18	0	0	\$0.00
PODIATRIC	16	21	\$1,519.62	403	520	\$16,142.47	0	0	\$0.00
PHYSICAL DISABILITIES SVCS	0	0	\$0.00	2	153	\$1,918.02	0	0	\$0.00
BRAIN INJ WAIVER SERVICES	0	0	\$0.00	127	7,856	\$181,878.10	0	0	\$0.00
PSYCHIATRIC	1	4	\$298.25	321	474	\$22,957.13	0	0	\$0.00
RESIDENTIAL CARE FACILITY	1	28	\$41.96	38	1,009	\$6,651.90	0	0	\$0.00
MR WAIVER SERVICE	1	25	\$4,170.75	6,808	395,122	\$14,754,661.16	0	0	\$0.00
MR OBRA WAIVER SERVICES	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	1	60	\$540.00	7	214	\$1,330.49	0	0	\$0.00
ILL & HANDICAPPED WAIVER SVCS	1	13	\$491.53	145	6,523	\$100,763.43	0	0	\$0.00
COUNTY OFFICE REIMBURSEMENT	0	0	\$0.00	0	0	\$0.00	0	0	\$0.00
MEP SERVICES	2	4	\$813.18	6,403	8,246	\$1,813,793.74	0	0	\$0.00
UNASSIGNED	0	0	\$0.00	0	0	\$0.00	0	0	\$0.00
ALL CATEGORIES *	1,151	15,717	\$715,719.62	9,391	907,515	\$39,355,506.93	2	12	\$223.11

TITLE XIX MONTHLY REPORT OF EXPENDITURES

(BY CATEGORY OF SERVICE BY PROGRAM)

<u>CATEGORY OF SERVICE</u>	<u>RECIPS</u>	<u>UNITS OF</u>	<u>AMOUNT</u>	<u>RECIPS</u>	<u>UNITS OF</u>	<u>AMOUNT</u>	<u>RECIPS</u>	<u>UNITS OF</u>	<u>AMOUNT</u>
	<u>SERVED</u>	<u>SERVICE</u>	<u>PAID</u>	<u>SERVED</u>	<u>SERVICE</u>	<u>PAID</u>	<u>SERVED</u>	<u>SERVICE</u>	<u>PAID</u>
	<u>FEDERAL ONLY</u>			<u>REFUGEE TXXI</u>			<u>AGED</u>		
	<u>FEDERAL MEDICAID ONLY BLIND</u>			<u>TOTAL</u>					
INPATIENT	0	0	\$0.00	5,788	35,451	\$23,501,165.24			
OUTPATIENT	0	0	\$0.00	46,173	401,921	\$12,788,592.01			
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	307	5,689	\$1,419,120.49			
INTERMEDIATE CARE FACILITY	0	0	\$0.00	13,737	393,253	\$30,814,297.36			
INTER CARE MENTAL RETARDA	0	0	\$0.00	1,933	55,460	\$15,302,935.99			
NURSING FAC FOR MENTAL ILL	0	0	\$0.00	32	940	\$214,413.41			
HOME HEALTH	0	0	\$0.00	8,572	145,465	\$5,822,289.47			
LEAD INSPECTION AGENCY	0	0	\$0.00	11	11	\$4,212.59			
PHYSICIAN	0	0	\$0.00	104,557	279,045	\$13,798,906.91			
CLINIC SERVICES	0	0	\$0.00	16,068	20,533	\$2,122,165.74			
MEP CASE MANAGEMENT	0	0	\$0.00	0	0	\$0.00			
LAB AND RADIOLOGICAL	0	0	\$0.00	7,770	19,109	\$310,582.45			
REHAB SUPPORT SERVICES	0	0	\$0.00	2,401	56,025	\$2,816,110.03			
AMBULANCE SERVICES	0	0	\$0.00	2,531	2,945	\$344,181.68			
LOCAL EDUCATION AGENCY	0	0	\$0.00	1,160	283,880	\$2,276,907.61			
EARLY ACCESS SERVICES	0	0	\$0.00	346	2,791	\$53,989.11			
PRESCRIBED DRUGS	0	0	\$0.00	137,878	555,165	\$32,703,147.95			
DRUG CAPITATION	0	0	\$0.00	0	0	\$0.00			
INDIAN HEALTH SERVICES	0	0	\$0.00	0	0	\$0.00			
FAMILY PLANNING SERVICES	0	0	\$0.00	7,745	8,035	\$371,593.82			
IOWA PLAN PROGRAM	0	0	\$0.00	250,904	274,759	\$7,914,115.62			
MANAGED SUBSTANCE ABUSE	0	0	\$0.00	0	0	\$0.00			
MENTAL HEALTH ACCESS PLAN	0	0	\$0.00	1	0	-\$60.00			
EPSDT SCREENING	0	0	\$0.00	12,076	14,071	\$917,904.44			
HMO SERVICES	0	0	\$0.00	5,326	5,521	\$893,722.95			
PATIENT MANAGEMENT	0	0	\$0.00	125,294	125,294	\$250,588.00			
HEALTH INS PREMIUM PAYMENT	0	0	\$0.00	5,842	16,985	\$706,097.28			
MEDICAL SUPPLIES	0	0	\$0.00	16,421	1,257,117	\$2,979,077.30			
OTHER PRACTITIONER	0	0	\$0.00	10,209	45,588	\$1,214,857.62			
FAMILY CENTERED PROGRAM	0	0	\$0.00	2,865	46,322	\$1,400,687.99			
FAMILY PRESERVATION	0	0	\$0.00	4	4	\$7,625.66			
TREATMENT FOSTER FAMILY CARE	0	0	\$0.00	639	6,475	\$274,731.67			
GROUP TREATMENT THERAPY	0	0	\$0.00	1,094	42,563	\$2,647,836.58			
DENTAL	0	0	\$0.00	22,614	27,642	\$3,507,567.53			
OPTOMETRIST	0	0	\$0.00	9,909	12,094	\$630,450.24			

TITLE XIX MONTHLY REPORT OF EXPENDITURES

(BY CATEGORY OF SERVICE BY PROGRAM)

<u>CATEGORY OF SERVICE</u>	<u>RECIPS SERVED</u>	<u>UNITS OF SERVICE</u>	<u>AMOUNT PAID</u>	<u>RECIPS SERVED</u>	<u>UNITS OF SERVICE</u>	<u>AMOUNT PAID</u>	<u>RECIPS SERVED</u>	<u>UNITS OF SERVICE</u>	<u>AMOUNT PAID</u>
		<u>FEDERAL ONLY</u>			<u>REFUGEE TXXI</u>			<u>AGED</u>	
CHIROPRACTIC	0	0	\$0.00	6,810	15,919	\$417,368.99			
PODIATRIC	0	0	\$0.00	3,417	4,833	\$174,386.79			
PHYSICAL DISABILITIES SVCS	0	0	\$0.00	390	14,773	\$195,533.57			
BRAIN INJ WAIVER SERVICES	0	0	\$0.00	490	33,894	\$732,418.13			
PSYCHIATRIC	0	0	\$0.00	2,929	5,636	\$233,922.72			
RESIDENTIAL CARE FACILITY	0	0	\$0.00	2,117	58,971	\$373,629.53			
MR WAIVER SERVICE	0	0	\$0.00	7,934	456,744	\$17,120,707.46			
MR OBRA WAIVER SERVICES	0	0	\$0.00	0	0	\$0.00			
AIDS WAIVER SERVICES	0	0	\$0.00	34	3,023	\$29,229.21			
ELDERLY WAIVER SERVICES	0	0	\$0.00	6,623	297,965	\$2,963,818.96			
ILL & HANDICAPPED WAIVER SVCS	0	0	\$0.00	1,621	70,382	\$1,140,263.44			
COUNTY OFFICE REIMBURSEMENT	0	0	\$0.00	0	0	\$0.00			
MEP SERVICES	0	0	\$0.00	8,297	10,707	\$2,345,688.15			
UNASSIGNED	0	0	\$0.00	5	0	\$91,703.24			
ALL CATEGORIES *	0	0	\$0.00	305,648	5,113,000	\$193,828,484.93	0	0	\$0.00