

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 12/31/08)

| CATEGORY OF SERVICE | RECIPIENTS SERVED | NUMBER OF CLAIMS | UNITS OF SERVICE | TOTAL PAYMENT | * * * * * A V E R A G E S * * * * * | | | |
|------------------------------|-------------------|------------------|------------------|-----------------|-------------------------------------|-----------------------------|----------------------------|---------------------------|
| | | | | | COST PER UNIT OF SERVICE | COST PER ELIGIBLE RECIPIENT | UNITS PER RECIPIENT SERVED | COST PER RECIPIENT SERVED |
| INPATIENT | 6,297 | 6,434 | 38,795 | \$30,480,978.36 | \$785.69 | \$77.54 | 6.2 | \$4,840.56 |
| OUTPATIENT | 57,872 | 85,053 | 1,069,775 | \$16,977,792.58 | \$15.87 | \$43.19 | 18.5 | \$293.37 |
| 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 | 720 | 830 | 12,591 | \$2,018,154.70 | \$160.29 | \$5.13 | 17.5 | \$2,802.99 |
| INTERMEDIATE CARE FACILITY | 12,374 | 12,852 | 363,664 | \$35,843,613.81 | \$98.56 | \$91.18 | 29.4 | \$2,896.69 |
| INTER CARE MENTAL RETARDA | 2,128 | 2,135 | 61,881 | \$22,774,692.50 | \$368.04 | \$57.93 | 29.1 | \$10,702.39 |
| NURSING FAC FOR MENTAL ILL | 18 | 21 | 615 | \$118,956.46 | \$193.43 | \$0.59 | 34.2 | \$6,608.69 |
| HOME HEALTH | 13,526 | 19,153 | 343,165 | \$10,903,167.87 | \$31.77 | \$27.74 | 25.4 | \$806.09 |
| LEAD INSPECTION AGENCY | 0 | 0 | 0 | \$0.00 | \$0.00 | \$0.00 | .0 | \$0.00 |
| PHYSICIAN | 121,741 | 268,042 | 370,544 | \$18,476,250.95 | \$49.86 | \$47.00 | 3.0 | \$151.77 |
| CLINIC SERVICES | 20,622 | 29,416 | 28,454 | \$3,398,664.19 | \$119.44 | \$8.65 | 1.4 | \$164.81 |
| MCP CASE MANAGEMENT | 0 | 0 | 0 | \$0.00 | \$0.00 | \$0.00 | .0 | \$0.00 |
| LAB AND RADIOLOGICAL | 16,282 | 22,704 | 33,950 | \$640,129.69 | \$18.86 | \$1.63 | 2.1 | \$39.32 |
| HABILITATION SERVICES | 2,641 | 4,912 | 76,133 | \$4,102,056.88 | \$53.88 | \$10.43 | 28.8 | \$1,553.22 |
| REMEDIAL SERVICES | 8,345 | 9,465 | 313,837 | \$5,920,260.48 | \$18.86 | \$15.06 | 37.6 | \$709.44 |
| REHAB SUPPORT SERVICES | 9 | 3 | 155 | \$4,739.27 | \$30.58 | \$0.01 | 17.2 | \$526.59 |
| AMBULANCE SERVICES | 2,720 | 3,211 | 3,163 | \$377,728.83 | \$119.42 | \$0.96 | 1.2 | \$138.87 |
| LOCAL EDUCATION AGENCY | 1,170 | 1,996 | 287,591 | \$2,828,723.88 | \$9.84 | \$7.20 | 245.8 | \$2,417.71 |
| EARLY ACCESS SERVICES | 512 | 1,463 | 2,438 | \$57,726.83 | \$23.68 | \$0.15 | 4.8 | \$112.75 |
| PRESCRIBED DRUGS | 125,627 | 396,332 | 358,806 | \$22,010,332.99 | \$61.34 | \$56.57 | 2.9 | \$175.20 |
| 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 | 9,340 | 11,104 | 11,172 | \$1,041,856.35 | \$93.26 | \$2.65 | 1.2 | \$111.55 |
| IOWA PLAN PROGRAM | 286,547 | 308,305 | 308,303 | \$9,331,132.09 | \$30.27 | \$23.74 | 1.1 | \$32.56 |
| MANAGED SUBSTANCE ABUSE | 0 | 0 | 0 | \$0.00 | \$0.00 | \$0.00 | .0 | \$0.00 |
| MENTAL HEALTH ACCESS PLAN | 0 | 0 | 0 | \$0.00 | \$0.00 | \$0.00 | .0 | \$0.00 |
| EPSDT SCREENING | 14,457 | 16,439 | 16,432 | \$1,318,065.61 | \$80.21 | \$6.17 | 1.1 | \$91.17 |
| HMO SERVICES | 4,611 | 4,777 | 4,777 | \$709,291.96 | \$148.48 | \$537.75 | 1.0 | \$153.83 |
| PACE SERVICES | 0 | 16 | 16 | \$46,619.00 | \$2,913.69 | \$0.12 | .0 | \$0.00 |
| PATIENT MANAGEMENT | 138,270 | 138,270 | 138,270 | \$276,540.00 | \$2.00 | \$32.55 | 1.0 | \$2.00 |
| HEALTH INS PREMIUM PAYMENT | 4,122 | 12,509 | 12,509 | \$625,625.52 | \$50.01 | \$1.59 | 3.0 | \$151.78 |
| MEDICAL SUPPLIES | 23,555 | 42,159 | 1,761,299 | \$4,246,708.30 | \$2.41 | \$10.91 | 74.8 | \$180.29 |
| OTHER PRACTITIONER | 14,333 | 27,269 | 68,893 | \$1,954,609.82 | \$28.37 | \$4.97 | 4.8 | \$136.37 |
| FAMILY CENTERED PROGRAM | 0 | 0 | 0 | \$0.00 | \$0.00 | \$0.00 | .0 | \$0.00 |
| FAMILY PRESERVATION | 0 | 0 | 0 | \$0.00 | \$0.00 | \$0.00 | .0 | \$0.00 |
| TREATMENT FOSTER FAMILY CARE | 0 | 0 | 0 | \$0.00 | \$0.00 | \$0.00 | .0 | \$0.00 |
| GROUP TREATMENT THERAPY | 0 | 0 | 0 | \$0.00 | \$0.00 | \$0.00 | .0 | \$0.00 |
| DENTAL | 24,489 | 30,402 | 30,784 | \$4,554,150.91 | \$147.94 | \$11.71 | 1.3 | \$185.97 |
| OPTOMETRIST | 11,867 | 14,141 | 14,994 | \$838,443.04 | \$55.92 | \$2.13 | 1.3 | \$70.65 |
| CHIROPRACTIC | 8,654 | 16,258 | 20,533 | \$515,398.38 | \$25.10 | \$1.32 | 2.4 | \$59.56 |
| PODIATRIC | 4,266 | 5,264 | 6,732 | \$214,723.78 | \$31.90 | \$0.55 | 1.6 | \$50.33 |
| PHYSICAL DISABILITIES SVCS | 651 | 965 | 26,900 | \$347,483.69 | \$12.92 | \$0.88 | 41.3 | \$533.77 |
| BRAIN INJ WAIVER SERVICES | 1,032 | 2,467 | 54,878 | \$1,669,416.24 | \$30.42 | \$4.25 | 53.2 | \$1,617.65 |
| PSYCHIATRIC | 3,347 | 4,944 | 5,805 | \$197,468.54 | \$34.02 | \$0.50 | 1.7 | \$59.00 |
| RESIDENTIAL CARE FACILITY | 1,703 | 1,820 | 51,043 | \$379,900.97 | \$7.44 | \$0.97 | 30.0 | \$223.08 |
| MR WAIVER SERVICE | 9,698 | 18,524 | 604,554 | \$25,105,380.32 | \$41.53 | \$2,458.42 | 62.3 | \$2,588.72 |

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| CHILDRENS MENTAL HEALTH SVC | 541 | 765 | 22,006 | \$482,254.93 | \$21.91 | \$690.91 | 40.7 | \$891.41 |
| AIDS WAIVER SERVICES | 43 | 78 | 3,715 | \$40,505.55 | \$10.90 | \$900.12 | 86.4 | \$941.99 |
| ELDERLY WAIVER SERVICES | 9,743 | 31,256 | 465,398 | \$6,281,092.39 | \$13.50 | \$636.32 | 47.8 | \$644.68 |
| ILL & HANDICAPPED WAIVER SVCS | 1,963 | 3,313 | 100,859 | \$1,683,976.39 | \$16.70 | \$659.61 | 51.4 | \$857.86 |
| COUNTY OFFICE REIMBURSEMENT | 0 | 0 | 0 | \$0.00 | \$0.00 | \$0.00 | .0 | \$0.00 |
| MEP SERVICES | 10,602 | 11,504 | 12,183 | \$3,072,145.69 | \$252.17 | \$7.81 | 1.1 | \$289.77 |
| UNASSIGNED | 33 | 0 | 0 | \$455,506.78- | \$0.00 | \$1.16- | .0 | \$13,803.24- |
| * A L L C A T E G O R I E S * | 351,645 | 1,566,571 | 7,107,612 | \$241,401,774.42 | \$33.96 | \$614.08 | 20.2 | \$686.49 |

*** END OF REPORT ***