

T I T L E   X I X   M O N T H L Y   R E P O R T   O F   E X P E N D I T U R E S

(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	0	667.42-	0	0	0.00	374	1649	431,903.84
OUTPATIENT	32	359	10,339.94	0	0	0.00	3662	83923	462,783.28
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	154	2230	4,300.68
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	4586	134340	11843,785.61
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	4	182	34,329.41
HOME HEALTH	0	0	0.00	0	0	0.00	2593	56469	2023,891.50
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	56	114	11,562.42	0	0	0.00	6256	33707	354,730.18
CLINIC SERVICES	15	23	3,451.61	0	0	0.00	496	566	25,373.41
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	19	120	2,132.57	0	0	0.00	805	197	2,251.25
HABILITATION SERVICES	0	0	0.00	0	0	0.00	51	1738	99,249.03
REMEDIAL SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	0	0	0.00	0	0	0.00	296	334	29,066.55
LOCAL EDUCATION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00

T I T L E   X I X   M O N T H L Y   R E P O R T   O F   E X P E N D I T U R E S

(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
EARLY ACCESS SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PRESCRIBED DRUGS	33	72	4,215.64	0	0	0.00	3448	6532	73,265.87
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	0	0	0.00	0	0	0.00
IOWA PLAN PROGRAM	100	117	3,118.14	0	0	0.00	2	2	169.72
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	0	0	0.00	0	0	0.00
HMO SERVICES	2	2	488.17	0	0	0.00	0	0	0.00
PACE SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PATIENT MANAGEMENT	56	56	112.00	0	0	0.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEDICAL SUPPLIES	1	1	48.07	0	0	0.00	3058	191344	342,583.81
OTHER PRACTITIONER	1	1	73.89	0	0	0.00	366	1188	24,725.97
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	0	0	0.00	0	0	0.00	0	0	0.00
DENTAL	13	16	3,259.31	0	0	0.00	479	596	104,448.52
OPTOMETRIST	6	8	569.80	0	0	0.00	764	1144	26,960.89

T I T L E   X I X   M O N T H L Y   R E P O R T   O F   E X P E N D I T U R E S

(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
CHIROPRACTIC	0	0	0.00	0	0	0.00	414	1079	6,824.25
PODIATRIC	0	0	0.00	0	0	0.00	714	1104	10,423.93
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	48	4,760.82
PSYCHIATRIC	0	0	0.00	0	0	0.00	152	242	7,422.32
RESIDENTIAL CARE FACILITY	0	0	0.00	0	0	0.00	320	9711	64,079.08
MR WAIVER SERVICE	0	0	0.00	0	0	0.00	83	3516	207,008.34
CHILDRENS MENTAL HEALTH SVC	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	3594	162236	2390,545.69
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	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	0	0	0.00	0	0	0.00	98	123	31,533.75
UNASSIGNED	0	0	0.00	0	0	0.00	0	0	0.00
* A L L C A T E G O R I E S *	133	889	38,704.14	0	0	0.00	14448	694200	18606,417.70

## T I T L E    X I X    M O N T H L Y    R E P O R T    O F    E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

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	0.00	1571	9164	7929,837.25	653	2117	2597,203.54
OUTPATIENT	0	0	0.00	14527	349958	4838,295.21	8815	149897	3371,368.40
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	193	4760	1930,940.65	0	0	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	591	17124	1882,919.90	0	0	0.00
INTER CARE MENTAL RETARDA	0	0	0.00	12	269	85,969.12	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	3937	125446	3447,876.20	67	734	33,845.05
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	0	0	0.00	24779	123787	4489,743.74	16284	33878	3274,343.42
CLINIC SERVICES	0	0	0.00	3215	4473	602,841.39	2871	4034	538,635.66
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	0	0	0.00	3110	6071	92,648.94	3176	8378	210,171.85
HABILITATION SERVICES	0	0	0.00	2443	70636	3799,811.30	27	318	17,275.66
REMEDIAL SERVICES	0	0	0.00	731	17501	506,996.09	232	4837	95,652.79
REHAB SUPPORT SERVICES	0	0	0.00	8	155	1,526.22	0	0	0.00
AMBULANCE SERVICES	0	0	0.00	940	1111	134,378.44	298	326	45,803.36
LOCAL EDUCATION AGENCY	0	0	0.00	361	86440	877,758.91	5	1347	14,556.35

T I T L E    X I X    M O N T H L Y    R E P O R T    O F    E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

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
EARLY ACCESS SERVICES	0	0	0.00	129	856	16,123.50	0	0	0.00
PRESCRIBED DRUGS	0	0	0.00	24893	116278	9138,990.23	20982	62607	3230,566.00
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	140	154	11,298.44	7172	8456	790,329.27
IOWA PLAN PROGRAM	0	0	0.00	48281	49547	3651,029.20	36936	40566	1266,357.62
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	335	448	19,355.89	178	212	7,546.60
HMO SERVICES	0	0	0.00	0	0	0.00	835	865	236,107.78
PACE SERVICES	0	0	0.00	5	5	18,716.00	0	0	0.00
PATIENT MANAGEMENT	0	0	0.00	3	3	6.00	22679	22679	45,358.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	633	1722	176,507.99	209	575	18,546.92
MEDICAL SUPPLIES	0	0	0.00	9293	690188	1842,936.27	1231	34023	239,828.81
OTHER PRACTITIONER	0	0	0.00	2822	20137	450,336.80	1794	4700	250,617.23
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	0	0	0.00	0	0	0.00	0	0	0.00
DENTAL	0	0	0.00	3963	5132	823,196.75	3116	4251	680,237.48
OPTOMETRIST	0	0	0.00	2446	3266	164,375.96	1627	2024	150,518.89

T I T L E    X I X    M O N T H L Y    R E P O R T    O F    E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

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
CHIROPRACTIC	0	0	0.00	2333	5744	89,888.30	1848	4641	164,391.06
PODIATRIC	0	0	0.00	1206	2260	82,261.47	253	347	37,613.32
PHYSICAL DISABILITIES SVCS	0	0	0.00	471	18933	251,815.84	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	312	17447	545,333.44	0	0	0.00
PSYCHIATRIC	0	0	0.00	2291	4119	126,816.51	29	46	3,605.23
RESIDENTIAL CARE FACILITY	0	0	0.00	1365	40766	309,511.61	0	0	0.00
MR WAIVER SERVICE	0	0	0.00	1010	64348	2778,460.08	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	33	1270	26,498.58	3	179	3,113.38
AIDS WAIVER SERVICES	0	0	0.00	13	1038	12,239.87	0	0	0.00
ELDERLY WAIVER SERVICES	0	0	0.00	32	1584	25,755.67	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	1780	90106	1482,302.53	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	1289	1504	391,865.34	3	3	1,478.10
UNASSIGNED	0	0	0.00	9	0	0.00	3	0	0.00
* A L L C A T E G O R I E S *	0	0	0.00	52941	1953750	53057,165.63	50132	392040	17325,071.77

## T I T L E   X I X   M O N T H L Y   R E P O R T   O F   E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

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	363	2391	2567,735.91	408	7540	2250,538.02	1891	9713	10612,065.63
OUTPATIENT	7057	72015	1735,601.15	2034	29870	604,733.84	11458	158402	3547,419.64
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	44	10,765.88
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	2	54	3,642.66
INTER CARE MENTAL RETARDA	0	0	0.00	0	0	0.00	1	0	1390,490.00-
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	0	0	0.00
HOME HEALTH	563	2643	66,362.25	134	392	18,937.50	895	4543	267,234.55
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	20607	36479	2383,584.93	4493	8789	690,034.61	31190	59842	5045,675.71
CLINIC SERVICES	3748	4955	639,415.52	971	1324	170,067.27	7071	10138	1091,870.50
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	2357	4235	65,556.82	564	1598	31,281.44	3983	10071	183,721.55
HABILITATION SERVICES	1	22	983.84	22	288	17,782.48	2	11	1,043.10
REMEDIAL SERVICES	2276	42660	1291,283.06	757	15630	384,845.67	1888	36390	1028,193.29
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	2	0	6,265.49-
AMBULANCE SERVICES	156	160	22,630.37	83	92	13,993.75	212	218	36,437.95
LOCAL EDUCATION AGENCY	95	15857	125,393.84	28	5896	38,950.20	111	17708	141,682.92

T I T L E   X I X   M O N T H L Y   R E P O R T   O F   E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

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
EARLY ACCESS SERVICES	119	382	11,637.10	28	102	2,793.91	153	560	15,369.93
PRESCRIBED DRUGS	18665	33309	1961,525.78	4757	11849	722,288.68	26725	48142	2397,873.87
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	1194	1538	136,751.60	204	249	16,945.88	428	508	60,275.37
IOWA PLAN PROGRAM	62781	67275	669,181.98	13136	14455	284,172.21	87114	95607	1161,366.89
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	4642	5318	367,231.88	1078	1246	81,969.78	7226	8019	771,772.56
HMO SERVICES	1476	1526	159,853.36	315	317	39,189.13	1748	1809	247,127.78
PACE SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PATIENT MANAGEMENT	40550	40550	81,100.00	7673	7673	15,346.00	58318	58318	116,636.00
HEALTH INS PREMIUM PAYMENT	308	915	23,019.04	58	180	6,239.37	2063	6801	166,126.40
MEDICAL SUPPLIES	945	16656	150,347.99	202	9071	35,992.18	1199	26012	186,025.56
OTHER PRACTITIONER	2489	8825	236,588.25	510	1085	53,711.02	3569	9056	396,663.64
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	0	0	0.00	0	0	0.00	0	0	0.00
DENTAL	4579	5621	767,621.53	1043	1305	217,145.62	6634	8046	1151,315.77
OPTOMETRIST	1582	1861	123,596.83	434	535	36,024.29	2365	2768	181,392.51



T I T L E   X I X   M O N T H L Y   R E P O R T   O F   E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

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
CHIROPRACTIC	987	1914	62,177.61	248	571	20,011.51	1611	3440	105,841.87
PODIATRIC	67	90	8,832.45	26	30	3,049.18	101	122	9,864.38
PHYSICAL DISABILITIES SVCS	0	0	0.00	0	0	0.00	1	0	86.40-
BRAIN INJ WAIVER SERVICES	0	0	0.00	0	0	0.00	1	0	654.83-
PSYCHIATRIC	15	16	1,934.43	19	51	4,102.29	37	64	6,442.29
RESIDENTIAL CARE FACILITY	0	0	0.00	1	25	127.75	0	0	0.00
MR WAIVER SERVICE	1	2	67.38	0	0	0.00	4	83	243.55
CHILDRENS MENTAL HEALTH SVC	43	1943	40,228.60	93	4275	83,824.88	56	2486	56,311.26
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	8	65	1,921.32
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	0	0	0.00	3	35	1,206.29
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	44	45	20,993.85	93	98	45,016.81	59	60	173,171.50-
UNASSIGNED	2	0	0.00	1	0	0.00	6	0	455,240.06-
* A L L C A T E G O R I E S *	70984	369203	13721,237.35	14442	124536	5889,115.27	94859	579135	26977,622.34

T I T L E    X I X    M O N T H L Y    R E P O R T    O F    E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	FOSTER - PRESUB - SUB ADOPTS			INTERMEDIATE CARE FACILITY			MEDICALLY NEEDY NO SPEND DN		
	RECIPES SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPES SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPES SERVED	UNITS OF SERVICE	AMOUNT PAID
INPATIENT	56	626	285,447.69	524	2709	900,029.36	63	442	647,997.29
OUTPATIENT	861	11416	192,668.43	4876	114205	624,805.93	442	11042	179,696.42
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	355	5194	48,373.04	2	39	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	7231	212009	22099,119.72	2	25	3,053.61
INTER CARE MENTAL RETARDA	9	211	85,062.22	1	0	144.00-	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	13	403	78,113.45	1	30	6,513.60
HOME HEALTH	116	4293	111,437.37	3890	89181	3266,388.18	55	1217	22,597.04
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	2643	4218	243,479.73	6989	40767	480,518.91	845	2750	178,919.81
CLINIC SERVICES	521	710	77,156.73	439	406	32,580.05	124	155	21,428.57
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	309	869	13,751.47	1039	391	4,421.52	164	275	6,833.71
HABILITATION SERVICES	11	410	16,603.72	30	588	32,343.61	30	1011	68,323.24
REMEDIAL SERVICES	2489	180174	2193,097.09	4	31	5,782.70	10	117	1,782.73
REHAB SUPPORT SERVICES	0	0	0.00	1	0	0.00	0	0	0.00
AMBULANCE SERVICES	22	22	2,739.15	464	617	53,995.82	33	32	4,296.64
LOCAL EDUCATION AGENCY	79	21432	197,457.47	16	3254	30,540.32	0	0	0.00

## T I T L E   X I X   M O N T H L Y   R E P O R T   O F   E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	FOSTER - PRESUB - 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
EARLY ACCESS SERVICES	51	201	5,649.56	3	19	260.84	0	0	0.00
PRESCRIBED DRUGS	5180	14022	1135,276.11	10492	25121	462,666.55	1041	3532	162,760.38
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	37	44	5,697.92	1	1	93.06	37	44	4,305.25
IOWA PLAN PROGRAM	9902	10211	969,765.92	2175	2229	150,221.25	1336	1452	52,567.92
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	316	363	18,096.30	2	11	383.22	19	19	647.12
HMO SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PACE SERVICES	0	0	0.00	11	11	27,903.00	0	0	0.00
PATIENT MANAGEMENT	76	76	152.00	0	0	0.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	158	455	17,753.42	37	91	12,433.63	3	13	171.48
MEDICAL SUPPLIES	233	26565	90,719.67	4743	386767	638,917.39	233	16028	43,182.83
OTHER PRACTITIONER	597	4073	70,206.78	581	2540	62,408.74	102	415	14,395.79
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	0	0	0.00	0	0	0.00	0	0	0.00
DENTAL	951	1157	167,013.29	790	1016	158,250.75	137	189	31,788.24
OPTOMETRIST	441	509	31,179.79	824	1205	30,898.55	94	117	7,273.23

T I T L E   X I X   M O N T H L Y   R E P O R T   O F   E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE

FOSTER - PRESUB - 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

CHIROPRACTIC	180	385	12,059.59	309	966	5,567.05	100	274	9,255.50
PODIATRIC	32	36	3,738.02	1154	1776	19,355.57	39	50	1,942.58
PHYSICAL DISABILITIES SVCS	0	0	0.00	186	7967	95,754.25	0	0	0.00
BRAIN INJ WAIVER SERVICES	36	811	31,120.09	441	22809	702,019.28	0	0	0.00
PSYCHIATRIC	18	46	3,755.15	304	480	13,705.73	31	41	1,475.11
RESIDENTIAL CARE FACILITY	1	28	406.92	6	172	1,693.01	0	0	0.00
MR WAIVER SERVICE	190	6984	200,607.13	10	494	27,911.49	1	103	4,987.26
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	0	0	0.00	0	0	0.00
AIDS WAIVER SERVICES	0	0	0.00	32	2677	28,265.68	0	0	0.00
ELDERLY WAIVER SERVICES	0	0	0.00	6407	301207	3858,699.13	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	28	2078	37,883.75	6	324	7,754.01	0	0	0.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	207	236	60,037.76	143	169	45,683.94	1	2	475.02
UNASSIGNED	4	0	103.82-	3	0	0.00	0	0	0.00
* A L L C A T E G O R I E S *	10166	292661	6279,916.42	15000	1227807	34007,714.73	1779	39414	1476,670.37

## T I T L E   X I X   M O N T H L Y   R E P O R T   O F   E X P E N D I T U R E S

(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	163	799	1280,522.63	73	559	261,130.35	6	10	21,064.16
OUTPATIENT	474	13060	328,407.34	1057	13391	312,210.53	116	2885	85,938.98
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	5	94	2,535.70	0	0	0.00	0	0	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	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	26	458	35,170.18	90	190	4,980.68	5	92	9,830.45
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	810	3135	247,415.51	3248	5384	352,205.67	175	637	168,279.67
CLINIC SERVICES	61	76	10,400.71	719	893	105,794.90	18	22	3,485.91
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	39	136	2,499.09	204	536	8,923.22	31	85	1,743.34
HABILITATION SERVICES	9	613	26,668.50	1	3	57.99	0	0	0.00
REMEDIAL SERVICES	2	32	442.16	388	6386	189,607.45	0	0	0.00
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	49	49	8,170.66	31	31	5,156.25	2	3	643.48
LOCAL EDUCATION AGENCY	0	0	0.00	27	7309	54,952.26	0	0	0.00

T I T L E   X I X   M O N T H L Y   R E P O R T   O F   E X P E N D I T U R E S

(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
EARLY ACCESS SERVICES	0	0	0.00	5	20	542.44	0	0	0.00
PRESCRIBED DRUGS	289	1379	63,217.45	3594	6493	467,826.56	203	852	53,619.21
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	6	6	405.40	84	100	11,228.56	2	2	147.06
IOWA PLAN PROGRAM	0	0	0.00	12508	13363	143,283.80	240	243	25,625.59
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	597	629	44,832.16	0	0	0.00
HMO SERVICES	0	0	0.00	245	248	25,603.12	0	0	0.00
PACE SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PATIENT MANAGEMENT	0	0	0.00	8904	8904	17,808.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	23	53	1,534.40	0	0	0.00
MEDICAL SUPPLIES	70	2455	19,185.04	122	4817	22,006.24	29	565	6,342.35
OTHER PRACTITIONER	79	183	11,366.45	401	1427	45,656.44	22	60	3,156.02
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	0	0	0.00	0	0	0.00	0	0	0.00
DENTAL	58	97	15,256.65	1300	1554	241,333.93	13	18	1,929.31
OPTOMETRIST	29	34	2,431.17	505	591	38,375.45	8	8	616.19

T I T L E   X I X   M O N T H L Y   R E P O R T   O F   E X P E N D I T U R E S

(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

CHIROPRACTIC	17	48	1,237.74	282	568	19,438.37	13	23	792.24
PODIATRIC	11	21	3,153.30	40	55	7,474.74	5	5	468.57
PHYSICAL DISABILITIES SVCS	0	0	0.00	0	0	0.00	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	2	78	2,454.89	0	0	0.00
PSYCHIATRIC	35	81	5,315.47	5	6	651.93	1	1	24.63
RESIDENTIAL CARE FACILITY	0	0	0.00	0	0	0.00	0	0	0.00
MR WAIVER SERVICE	0	0	0.00	3	138	4,517.58	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	3	140	1,887.83	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	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	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	1	1	279.48	6	6	2,207.72	0	0	0.00
UNASSIGNED	3	0	162.90-	2	0	0.00	0	0	0.00
* A L L C A T E G O R I E S *	893	22757	2063,917.73	12025	73872	2393,683.46	236	5511	383,707.16

T I T L E   X I X   M O N T H L Y   R E P O R T   O F   E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	OTHER ICARE ADULT 19-64			OTHER ICARE ADULT OB			OTHER ICARE CHRN DSH		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
INPATIENT	2	0	5,592.40	0	0	0.00	0	0	0.00
OUTPATIENT	2	0	757.77	3	5	363.96	0	0	0.00
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	0	0	0.00	0	0	0.00	0	0	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	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	0	0	0.00	0	0	0.00	0	0	0.00
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	7	2	1,847.88	4	4	246.09	0	0	0.00
CLINIC SERVICES	0	0	0.00	0	0	0.00	1	0	18.32
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	0	0	0.00
HABILITATION SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
REMEDIAL SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
LOCAL EDUCATION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00



T I T L E   X I X   M O N T H L Y   R E P O R T   O F   E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	OTHER ICARE ADULT 19-64			OTHER ICARE ADULT OB			OTHER ICARE CHRN DSH		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
EARLY ACCESS SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PRESCRIBED DRUGS	107	118	10,908.81	0	0	0.00	0	0	0.00
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	0	0	0.00	0	0	0.00
IOWA PLAN PROGRAM	0	0	0.00	0	0	0.00	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	0	0	0.00	0	0	0.00	0	0	0.00
HMO SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PACE 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	0	0	0.00	0	0	0.00	0	0	0.00
MEDICAL SUPPLIES	0	0	0.00	0	0	0.00	0	0	0.00
OTHER PRACTITIONER	0	0	0.00	0	0	0.00	0	0	0.00
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	0	0	0.00	0	0	0.00	0	0	0.00
DENTAL	0	0	0.00	0	0	0.00	0	0	0.00
OPTOMETRIST	0	0	0.00	0	0	0.00	0	0	0.00

T I T L E   X I X   M O N T H L Y   R E P O R T   O F   E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	OTHER ICARE ADULT 19-64			OTHER ICARE ADULT OB			OTHER ICARE CHRN DSH		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
CHIROPRACTIC	0	0	0.00	0	0	0.00	0	0	0.00
PODIATRIC	0	0	0.00	0	0	0.00	0	0	0.00
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	0	0	0.00	0	0	0.00	0	0	0.00
RESIDENTIAL CARE FACILITY	0	0	0.00	0	0	0.00	0	0	0.00
MR WAIVER SERVICE	0	0	0.00	0	0	0.00	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	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	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	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	0	0	0.00	0	0	0.00	0	0	0.00
UNASSIGNED	0	0	0.00	0	0	0.00	0	0	0.00
* A L L C A T E G O R I E S *	109	120	19,106.86	6	9	610.05	1	0	18.32

T I T L E   X I X   M O N T H L Y   R E P O R T   O F   E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	OTHER ICARE PMIC MHI 300%			OTHER ICARE MHI 300%			STATE ONLY		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
INPATIENT	5	60	8,335.98	0	0	0.00	4	9	12,527.05
OUTPATIENT	43	604	6,651.34	13	229	2,072.59	78	663	24,579.73
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	0	0	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	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	2	2	10.40	4	41	105.92	0	0	0.00
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	126	191	9,009.74	35	32	855.14	126	269	21,052.50
CLINIC SERVICES	16	17	1,751.86	2	0	75.21	17	21	2,213.77
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	8	41	652.58	1	1	4.62	17	73	1,763.19
HABILITATION SERVICES	0	0	0.00	0	0	0.00	2	49	3,679.62
REMEDIAL SERVICES	167	4892	123,191.14	0	0	0.00	22	350	8,967.25
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	1	1	0.00	0	0	0.00	6	6	742.56
LOCAL EDUCATION AGENCY	12	3545	19,571.82	0	0	0.00	0	0	0.00

T I T L E   X I X   M O N T H L Y   R E P O R T   O F   E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	OTHER ICARE PMIC MHI 300%			OTHER ICARE MHI 300%			STATE ONLY		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
EARLY ACCESS SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PRESCRIBED DRUGS	358	1351	119,726.84	11	18	147.64	153	418	25,214.06
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	3	136.06	0	0	0.00	20	20	1,406.41
IOWA PLAN PROGRAM	393	417	41,791.63	25	26	1,636.92	371	385	52,611.78
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	20	21	902.47	0	0	0.00	11	11	370.97
HMO SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PACE SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PATIENT MANAGEMENT	11	11	22.00	0	0	0.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	46	127	11,782.09	0	0	0.00	0	0	0.00
MEDICAL SUPPLIES	13	958	1,244.38	1	4	341.72	4	17	1,656.53
OTHER PRACTITIONER	35	866	10,122.76	0	0	0.00	10	11	1,722.09
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	0	0	0.00	0	0	0.00	0	0	0.00
DENTAL	29	31	2,526.24	1	1	161.94	23	30	4,147.25
OPTOMETRIST	25	29	1,569.21	2	2	108.69	19	24	1,650.28

T I T L E   X I X   M O N T H L Y   R E P O R T   O F   E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	OTHER ICARE PMIC MHI 300%			OTHER ICARE MHI 300%			STATE ONLY		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
CHIROPRACTIC	7	14	420.22	0	0	0.00	12	38	1,527.25
PODIATRIC	2	2	76.68	2	5	75.55	0	0	0.00
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	1	1	256.48	2	4	103.03	0	0	0.00
RESIDENTIAL CARE FACILITY	0	0	0.00	1	3	0.00	0	0	0.00
MR WAIVER SERVICE	0	0	0.00	1	574	4,834.48	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	308	11585	267,797.66	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	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	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	336	343	164,475.77	0	0	0.00	1	1	207.14
UNASSIGNED	0	0	0.00	0	0	0.00	0	0	0.00
* A L L C A T E G O R I E S *	316	25112	792,025.35	17	940	10,523.45	337	2395	166,039.43

T I T L E   X I X   M O N T H L Y   R E P O R T   O F   E X P E N D I T U R E S

(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	26	260	221,747.08	145	747	447,967.60	0	0	0.00
OUTPATIENT	348	6744	181,517.61	2490	51107	467,580.49	0	0	0.00
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	0	0	0.00	13	230	21,238.75	0	0	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	5	112	11,092.31	0	0	0.00
INTER CARE MENTAL RETARDA	0	0	0.00	2109	61401	23994,295.16	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	0	0	0.00
HOME HEALTH	27	355	17,541.67	1235	57109	1576,958.93	0	0	0.00
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	631	1601	135,182.18	4731	14958	387,563.11	0	0	0.00
CLINIC SERVICES	138	175	24,927.23	373	466	47,175.57	0	0	0.00
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	64	213	3,336.34	476	660	8,436.19	0	0	0.00
HABILITATION SERVICES	4	77	1,946.96	18	369	16,287.83	0	0	0.00
REMEDIAL SERVICES	54	1842	21,805.66	143	2995	68,613.40	0	0	0.00
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	14	16	1,972.68	125	145	17,701.17	0	0	0.00
LOCAL EDUCATION AGENCY	2	2129	11,355.60	438	122674	1316,504.19	0	0	0.00

T I T L E   X I X   M O N T H L Y   R E P O R T   O F   E X P E N D I T U R E S

(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
EARLY ACCESS SERVICES	2	9	100.60	40	289	5,248.95	0	0	0.00
PRESCRIBED DRUGS	983	4337	244,749.55	6263	22376	1735,493.76	0	0	0.00
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	4	6	430.11	39	41	2,405.96	0	0	0.00
IOWA PLAN PROGRAM	1613	1687	145,742.53	10643	10721	712,488.99	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	7	7	190.14	89	128	4,766.52	0	0	0.00
HMO SERVICES	10	10	922.62	0	0	0.00	0	0	0.00
PACE 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	3	10	813.26	581	1567	190,697.52	0	0	0.00
MEDICAL SUPPLIES	139	7600	26,642.82	2475	348228	598,706.64	0	0	0.00
OTHER PRACTITIONER	70	139	8,637.14	1026	14187	314,220.81	0	0	0.00
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	0	0	0.00	0	0	0.00	0	0	0.00
DENTAL	120	170	31,214.23	1339	1554	153,304.10	0	0	0.00
OPTOMETRIST	75	93	7,156.81	639	776	33,744.50	0	0	0.00

T I T L E   X I X   M O N T H L Y   R E P O R T   O F   E X P E N D I T U R E S

(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
CHIROPRACTIC	68	175	6,180.94	307	653	9,784.88	0	0	0.00
PODIATRIC	33	46	6,982.82	589	783	19,411.22	0	0	0.00
PHYSICAL DISABILITIES SVCS	0	0	0.00	0	0	0.00	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	269	13685	384,382.55	0	0	0.00
PSYCHIATRIC	2	3	126.39	415	604	21,731.55	0	0	0.00
RESIDENTIAL CARE FACILITY	0	0	0.00	14	338	4,082.60	0	0	0.00
MR WAIVER SERVICE	4	230	5,926.40	8430	528082	21870,816.63	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	3	128	2,592.74	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	285	3,904.30	1	21	266.28	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	1	9	119.18	147	8307	154,710.63	0	0	0.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	6	6	2,058.16	8336	9586	2479,004.35	0	0	0.00
UNASSIGNED	0	0	0.00	0	0	0.00	0	0	0.00
* A L L C A T E G O R I E S *	1382	28362	1115,823.75	11449	1274899	57076,683.14	0	0	0.00



T I T L E   X I X   M O N T H L Y   R E P O R T   O F   E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	FEDERAL MEDICAID ONLY BLIND			TOTAL			RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID			
INPATIENT	0	0	0.00	6297	38795	30480,978.36			
OUTPATIENT	0	0	0.00	57872	1069775	16977,792.58			
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	720	12591	2018,154.70			
INTERMEDIATE CARE FACILITY	0	0	0.00	12374	363664	35843,613.81			
INTER CARE MENTAL RETARDA	0	0	0.00	2128	61881	22774,692.50			
NURSING FAC FOR MENTAL ILL	0	0	0.00	18	615	118,956.46			
HOME HEALTH	0	0	0.00	13526	343165	10903,167.87			
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00			
PHYSICIAN	0	0	0.00	121741	370544	18476,250.95			
CLINIC SERVICES	0	0	0.00	20622	28454	3398,664.19			
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00			
LAB AND RADIOLOGICAL	0	0	0.00	16282	33950	640,129.69			
HABILITATION SERVICES	0	0	0.00	2641	76133	4102,056.88			
REMEDIAL SERVICES	0	0	0.00	8345	313837	5920,260.48			
REHAB SUPPORT SERVICES	0	0	0.00	9	155	4,739.27-			
AMBULANCE SERVICES	0	0	0.00	2720	3163	377,728.83			
LOCAL EDUCATION AGENCY	0	0	0.00	1170	287591	2828,723.88			

T I T L E   X I X   M O N T H L Y   R E P O R T   O F   E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	FEDERAL MEDICAID ONLY BLIND			TOTAL			RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID			
EARLY ACCESS SERVICES	0	0	0.00	512	2438	57,726.83			
PRESCRIBED DRUGS	0	0	0.00	125627	358806	22010,332.99			
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	9340	11172	1041,856.35			
IOWA PLAN PROGRAM	0	0	0.00	286547	308303	9331,132.09			
MANAGED SUBSTANCE ABUSE	0	0	0.00	0	0	0.00			
MENTAL HEALTH ACCESS PLAN	0	0	0.00	0	0	0.00			
EPSDT SCREENING	0	0	0.00	14457	16432	1318,065.61			
HMO SERVICES	0	0	0.00	4611	4777	709,291.96			
PACE SERVICES	0	0	0.00	16	16	46,619.00			
PATIENT MANAGEMENT	0	0	0.00	138270	138270	276,540.00			
HEALTH INS PREMIUM PAYMENT	0	0	0.00	4122	12509	625,625.52			
MEDICAL SUPPLIES	0	0	0.00	23555	1761299	4246,708.30			
OTHER PRACTITIONER	0	0	0.00	14333	68893	1954,609.82			
FAMILY CENTERED PROGRAM	0	0	0.00	0	0	0.00			
FAMILY PRESERVATION	0	0	0.00	0	0	0.00			
TREATMENT FOSTER FAMILY CARE	0	0	0.00	0	0	0.00			
GROUP TREATMENT THERAPY	0	0	0.00	0	0	0.00			
DENTAL	0	0	0.00	24489	30784	4554,150.91			
OPTOMETRIST	0	0	0.00	11867	14994	838,443.04			

T I T L E   X I X   M O N T H L Y   R E P O R T   O F   E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE

FEDERAL MEDICAID ONLY BLIND

TOTAL

RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
---------------	------------------	-------------	---------------	------------------	-------------	---------------	------------------	-------------

CHIROPRACTIC	0	0	0.00	8654	20533	515,398.38			
PODIATRIC	0	0	0.00	4266	6732	214,723.78			
PHYSICAL DISABILITIES SVCS	0	0	0.00	651	26900	347,483.69			
BRAIN INJ WAIVER SERVICES	0	0	0.00	1032	54878	1669,416.24			
PSYCHIATRIC	0	0	0.00	3347	5805	197,468.54			
RESIDENTIAL CARE FACILITY	0	0	0.00	1703	51043	379,900.97			
MR WAIVER SERVICE	0	0	0.00	9698	604554	25105,380.32			
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	541	22006	482,254.93			
AIDS WAIVER SERVICES	0	0	0.00	43	3715	40,505.55			
ELDERLY WAIVER SERVICES	0	0	0.00	9743	465398	6281,092.39			
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	1963	100859	1683,976.39			
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00			
MEP SERVICES	0	0	0.00	10602	12183	3072,145.69			
UNASSIGNED	0	0	0.00	33	0	455,506.78-			
* A L L C A T E G O R I E S *	0	0	0.00	351655	7107612	241401,774.42	0	0	0.00

\* \* \*   E N D   O F   R E P O R T   \* \* \*