

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	6	5	6,135.81	0	0	0.00	779	3180	786,787.39
OUTPATIENT	52	628	11,125.11	0	0	0.00	5347	121264	787,172.81
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	323	5306	187,989.30
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	4584	128961	10807,907.41
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	5	109	22,880.86
HOME HEALTH	0	0	0.00	0	0	0.00	2909	63330	2022,246.77
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	78	171	16,363.91	0	0	0.00	7799	45826	625,297.78
CLINIC SERVICES	24	43	6,387.07	0	0	0.00	586	420	40,982.68
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	8	46	828.29	0	0	0.00	1080	217	3,593.48
HABILITATION SERVICES	0	0	0.00	0	0	0.00	52	1361	89,241.15
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	1	1	119.52	0	0	0.00	469	545	50,871.56
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	54	145	5,494.90	0	0	0.00	3542	6663	83,714.86
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	118	138	3,668.16	0	0	0.00	6	6	536.21
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	1	1	4,350.00
PATIENT MANAGEMENT	64	64	128.00	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	24.00	0	0	0.00	3135	233401	376,731.83
OTHER PRACTITIONER	3	4	199.10	0	0	0.00	421	1641	29,295.13
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	24	30	4,760.65	0	0	0.00	518	643	112,237.37
OPTOMETRIST	4	5	276.43	0	0	0.00	808	1285	40,211.73

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	471	1095	12,338.42
PODIATRIC	0	0	0.00	0	0	0.00	968	1453	25,758.47
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	28	1,753.72
PSYCHIATRIC	0	0	0.00	0	0	0.00	215	436	15,287.54
RESIDENTIAL CARE FACILITY	0	0	0.00	0	0	0.00	317	10571	61,719.83
MR WAIVER SERVICE	0	0	0.00	0	0	0.00	78	6872	228,895.58
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	3653	160719	2426,388.05
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	100	123	32,247.86
UNASSIGNED	0	0	0.00	0	0	0.00	2	0	0.00
* A L L C A T E G O R I E S *	159	1281	55,510.95	0	0	0.00	15192	795456	18876,437.79

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	3486	13459	12705,664.63	2450	2734	5391,554.85
OUTPATIENT	1	2	213.53	18385	491945	6601,210.05	10669	201152	4802,911.29
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	225	5128	2205,341.55	1	6	3,179.28
INTERMEDIATE CARE FACILITY	0	0	0.00	607	17597	1834,442.83	1	28	3,578.96
INTER CARE MENTAL RETARDA	0	0	0.00	7	168	53,620.37	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	4406	115769	3164,703.86	78	994	58,790.24
LEAD INSPECTION AGENCY	0	0	0.00	1	1	381.12	0	0	0.00
PHYSICIAN	1	2	45.43	27578	147326	5590,449.18	18561	39478	3651,649.01
CLINIC SERVICES	0	0	0.00	3843	5199	713,552.81	3542	5292	719,081.83
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	0	0	0.00	3849	7721	130,432.59	4095	11838	322,201.43
HABILITATION SERVICES	0	0	0.00	2600	71584	3932,640.78	31	470	23,379.30
REMEDIAL SERVICES	0	0	0.00	782	22812	422,530.28	276	5300	92,474.87
REHAB SUPPORT SERVICES	0	0	0.00	29	72	20,354.34	2	0	167.61
AMBULANCE SERVICES	0	0	0.00	1196	1470	182,376.82	364	362	51,389.98
LOCAL EDUCATION AGENCY	0	0	0.00	550	137369	1307,088.97	9	133-	3,332.12-

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	145	898	19,691.34	1	1	50.00
PRESCRIBED DRUGS	0	0	0.00	26182	127978	9927,780.98	23019	71064	3487,114.85
DRUG CAPITATION	0	0	0.00	0	0	0.00	0	0	0.00
INDIAN HEALTH SERVICES	0	0	0.00	1	1	253.00	2	2	506.00
FAMILY PLANNING SERVICES	0	0	0.00	139	164	16,524.89	6762	8081	708,922.44
IOWA PLAN PROGRAM	1	1	58.29	49354	50578	3727,836.28	38186	42273	1318,759.83
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	192	263	15,991.25	110	118	5,237.59
HMO SERVICES	0	0	0.00	0	0	0.00	5	5	1,487.72
PACE SERVICES	0	0	0.00	11	11	38,748.00	0	0	0.00
PATIENT MANAGEMENT	0	0	0.00	2	2	4.00	23863	23872	47,744.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	654	1662	171,806.38	208	560	17,416.47
MEDICAL SUPPLIES	0	0	0.00	10173	836585	2304,919.24	1254	30078	255,033.45
OTHER PRACTITIONER	0	0	0.00	2930	28958	509,994.89	1760	3500	234,406.76
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	4673	6230	1057,154.82	3818	5416	989,278.03
OPTOMETRIST	0	0	0.00	2855	4379	211,509.92	2031	2518	182,980.25

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	2639	6995	125,737.15	2166	5395	191,420.56
PODIATRIC	0	0	0.00	1487	2717	100,474.10	291	386	46,775.56
PHYSICAL DISABILITIES SVCS	0	0	0.00	515	20772	267,073.36	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	323	20076	550,981.34	0	0	0.00
PSYCHIATRIC	0	0	0.00	2710	5153	195,579.68	42	18	3,183.77
RESIDENTIAL CARE FACILITY	0	0	0.00	1359	42324	269,233.42	1	45	1,239.70
MR WAIVER SERVICE	0	0	0.00	1020	76389	2806,775.55	3	3	1,091.77
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	37	1456	36,635.27	4	310	4,524.62
AIDS WAIVER SERVICES	0	0	0.00	16	1326	37,181.39	0	0	0.00
ELDERLY WAIVER SERVICES	0	0	0.00	28	732	14,719.91	0	0	0.00
SICK & HANDICAPPED WAIVER SVCS	0	0	0.00	1992	100226	1694,204.22	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	1222	1406	364,374.50	6	8	3,741.76
UNASSIGNED	0	0	0.00	10	0	0.00	7	0	0.00
* A L L C A T E G O R I E S *	1	5	317.25	54070	2374901	63329,975.06	52023	461174	22617,941.66

## 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	1422	2419	2622,083.15	777	6198	2063,224.10	6360	11593	15513,636.68
OUTPATIENT	10027	111212	2317,074.26	2698	40700	749,881.99	15289	225956	7024,059.42
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	1	53	23,320.00	8	127	12,513.58-
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	7	109	12,861.81
INTER CARE MENTAL RETARDA	0	0	0.00	0	0	0.00	1	0	1380,981.00-
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	0	0	0.00
HOME HEALTH	629	2355	84,366.37	102	328	15,701.13	1053	5152	76,101.76
LEAD INSPECTION AGENCY	3	3	1,143.36	0	0	0.00	7	8	2,982.95
PHYSICIAN	25285	45324	2803,624.35	5454	10062	706,222.82	38295	78085	14785,446.53
CLINIC SERVICES	4532	6239	820,943.70	1156	1735	226,750.84	8143	12332	2037,540.13
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	2365	4814	82,532.29	627	1627	36,429.32	4091	10801	202,784.23
HABILITATION SERVICES	0	0	0.00	24	624	41,208.29	4	62	4,647.86
REMEDIAL SERVICES	2161	54760	1113,996.61	821	19342	369,970.55	1962	50030	844,365.76
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	2	0	401,130.99-
AMBULANCE SERVICES	203	199	27,285.26	82	92	15,087.96	282	292	37,983.32
LOCAL EDUCATION AGENCY	161	27878	187,260.74	46	8584	72,160.89	174	33319	242,645.24

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	133	445	13,031.49	30	113	3,107.48	175	835	22,008.50
PRESCRIBED DRUGS	23255	42863	2516,370.77	5729	13717	787,985.27	33936	62661	3303,459.69
DRUG CAPITATION	0	0	0.00	0	0	0.00	0	0	0.00
INDIAN HEALTH SERVICES	2	2	506.00	2	2	506.00	13	16	4,048.00
FAMILY PLANNING SERVICES	1176	1407	123,723.26	241	282	25,206.43	548	639	56,994.47
IOWA PLAN PROGRAM	64699	69568	695,567.28	13877	15302	307,631.32	90703	101135	1240,804.81
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	3760	3537	575,504.86	811	771	123,158.44	6763	5611	1249,969.14
HMO SERVICES	7	7	5,927.90	4	2	1,527.97	19	19	14,716.17
PACE SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PATIENT MANAGEMENT	42977	42982	85,964.00	8566	8569	17,138.00	63112	63116	126,232.00
HEALTH INS PREMIUM PAYMENT	295	846	19,452.38	48	127	5,346.80	2038	6418	152,272.77
MEDICAL SUPPLIES	1330	16034	185,602.80	269	6695	25,758.07	1682	31036	241,253.35
OTHER PRACTITIONER	2879	9287	261,489.99	661	4376	86,284.47	4324	12433	460,463.38
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	5695	6658	941,399.38	1516	1837	284,378.87	8658	10295	1371,294.41
OPTOMETRIST	1969	2280	147,407.33	560	653	45,957.52	2928	3277	214,937.46



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	1109	2286	71,530.89	279	613	20,320.22	2026	4200	128,209.67
PODIATRIC	84	98	12,179.87	37	42	4,248.61	132	146	13,822.68
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	2	1	274.18
PSYCHIATRIC	10	21	1,676.52	12	29	2,019.64	47	124	7,348.14
RESIDENTIAL CARE FACILITY	0	0	0.00	2	87	1,306.55	0	0	0.00
MR WAIVER SERVICE	1	1	12.99	3	66	2,174.69	4	115	66,424.02-
CHILDRENS MENTAL HEALTH SVC	40	1958	37,769.66	103	5714	98,623.70	60	2738	52,292.94
AIDS WAIVER SERVICES	0	0	0.00	0	0	0.00	1	0	431.76
ELDERLY WAIVER SERVICES	0	0	0.00	0	0	0.00	8	145	37,434.48-
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	1	1	15.00	4	65	43,107.84-
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	44	53	23,548.07	102	112	51,074.48	62	72	31,454.07
UNASSIGNED	4	0	0.00	9	0	0.00	8	0	210,151.43-
* A L L C A T E G O R I E S *	73681	455536	15778,975.53	15549	148455	6213,727.42	101023	732963	47325,599.94

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
INPATIENT	150	672	447,513.13	985	4402	1592,298.72	130	449	762,426.09
OUTPATIENT	1092	16600	235,334.74	6316	164338	938,256.71	558	12135	216,098.16
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	28	9,582.96	507	8444	50,748.63	5	87	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	7140	197080	19956,557.44	1	5	650.30
INTER CARE MENTAL RETARDA	9	254	89,586.46	0	0	0.00	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	17	404	85,326.56	1	28	6,079.36
HOME HEALTH	85	5112	86,888.54	4409	100199	3618,477.56	83	1048	23,485.27
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	3017	4796	263,071.53	8861	57956	774,484.68	996	3149	197,471.22
CLINIC SERVICES	616	898	103,592.34	539	519	52,226.33	158	227	35,217.51
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	336	858	13,934.82	1354	441	5,345.92	191	354	8,391.16
HABILITATION SERVICES	12	190	12,672.37	36	499	30,071.70	32	944	60,125.17
REMEDIAL SERVICES	2850	171242	2163,498.98	5	72	1,136.11	12	185	3,132.86
REHAB SUPPORT SERVICES	0	0	0.00	1	0	1,029.60	0	0	0.00
AMBULANCE SERVICES	29	27	2,797.46	619	771	73,030.60	23	21	2,520.10
LOCAL EDUCATION AGENCY	128	32576	237,180.09	20	3666	48,054.85	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	47	115	3,305.38	5	60	1,090.76	0	0	0.00
PRESCRIBED DRUGS	5682	15462	1305,010.29	10858	27186	456,835.88	1119	4040	176,928.26
DRUG CAPITATION	0	0	0.00	0	0	0.00	0	0	0.00
INDIAN HEALTH SERVICES	1	1	253.00	0	0	0.00	2	3	759.00
FAMILY PLANNING SERVICES	45	47	4,874.71	1	1	61.30	41	49	5,265.84
IOWA PLAN PROGRAM	9939	10256	1059,592.27	2210	2232	150,300.57	1430	1607	57,095.26
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	193	208	22,117.80	3	3	173.08	7	5	603.68-
HMO SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PACE SERVICES	0	0	0.00	18	18	50,655.00	0	0	0.00
PATIENT MANAGEMENT	97	97	194.00	1	0	10.73-	0	0	0.00
HEALTH INS PREMIUM PAYMENT	163	397	15,854.85	36	81	11,240.95	1	2	31.48
MEDICAL SUPPLIES	297	33796	119,176.87	5024	456844	732,553.19	237	16670	33,231.92
OTHER PRACTITIONER	599	3045	74,904.45	620	2097	52,374.59	99	252	11,828.28
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	1249	1469	179,359.92	951	1219	180,939.02	220	288	42,309.03
OPTOMETRIST	548	601	36,995.04	892	1302	43,067.97	131	172	9,628.71

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	204	353	10,232.63	338	832	9,295.97	118	286	9,291.87
PODIATRIC	32	29	2,673.46	1627	2446	46,695.14	53	70	3,111.37
PHYSICAL DISABILITIES SVCS	0	0	0.00	190	7699	111,622.33	0	0	0.00
BRAIN INJ WAIVER SERVICES	38	1728	43,155.79	448	25355	753,448.59	0	0	0.00
PSYCHIATRIC	23	34	2,808.85	304	536	20,857.46	46	69	2,847.21
RESIDENTIAL CARE FACILITY	1	16	450.24	8	104	931.19	0	0	0.00
MR WAIVER SERVICE	204	7093	221,728.25	5	94	3,341.64	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	31	2788	27,029.52	0	0	0.00
ELDERLY WAIVER SERVICES	0	0	0.00	6460	294985	3912,209.62	1	56	1,181.00
ILL & HANDICAPPED WAIVER SVCS	37	2971	59,721.02	7	106	1,722.71	0	0	0.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	214	241	61,419.59	143	164	43,029.33	2	4	995.32
UNASSIGNED	64	0	0.00	2	0	0.00	0	0	0.00
* A L L C A T E G O R I E S *	10250	311212	6889,481.83	15092	1364943	33836,510.49	1885	42205	1669,498.07

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	435	1270	1799,571.27	191	498	256,743.75	23	38	100,761.35
OUTPATIENT	536	17074	549,555.46	1414	19107	357,560.18	141	4759	150,797.35
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	11	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	1	139	51,006.42	0	0	0.00
NURSING FAC FOR MENTAL ILL	1	0	0.00	0	0	0.00	0	0	0.00
HOME HEALTH	33	568	32,609.40	81	239	8,766.39	1	2	176.00
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	881	4661	367,676.47	4209	6506	381,044.09	211	1261	273,330.07
CLINIC SERVICES	92	212	34,991.72	862	1178	146,946.15	20	28	5,146.05
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	57	355	6,877.64	253	685	12,368.54	28	81	2,166.47
HABILITATION SERVICES	5	58	3,280.69	0	0	0.00	0	0	0.00
REMEDIAL SERVICES	1	32	299.20	374	8326	167,544.05	0	0	0.00
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	59	58	10,058.00	32	24	4,289.01	2	2	195.72
LOCAL EDUCATION AGENCY	0	0	0.00	42	8401	66,915.54	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	2	5	177.20	0	0	0.00
PRESCRIBED DRUGS	336	1607	71,567.91	4398	8004	556,394.07	210	976	72,351.40
DRUG CAPITATION	0	0	0.00	0	0	0.00	0	0	0.00
INDIAN HEALTH SERVICES	0	0	0.00	1	3	759.00	0	0	0.00
FAMILY PLANNING SERVICES	10	12	1,880.16	94	117	10,082.32	2	2	84.02
IOWA PLAN PROGRAM	0	0	0.00	12563	13619	148,554.53	243	234	24,529.75
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	503.90	420	359	44,117.12	0	0	0.00
HMO SERVICES	0	0	0.00	1	1	1,326.60	0	0	0.00
PACE SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PATIENT MANAGEMENT	0	0	0.00	9231	9231	18,462.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	15	48	3,129.51	0	0	0.00
MEDICAL SUPPLIES	92	6220	64,334.92	176	4963	31,400.44	28	1368	8,809.70
OTHER PRACTITIONER	72	132	11,346.84	455	1522	42,151.62	20	59	4,180.60
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	91	144	34,467.31	1703	2067	326,754.75	22	27	3,075.38
OPTOMETRIST	23	29	2,192.82	568	665	43,266.62	17	22	1,762.76

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	26	45	989.28	345	707	23,096.13	12	19	575.05
PODIATRIC	15	22	2,288.10	28	35	4,038.30	5	5	185.83
PHYSICAL DISABILITIES SVCS	0	0	0.00	0	0	0.00	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	2	62	1,369.45	0	0	0.00
PSYCHIATRIC	54	138	8,840.86	5	5	920.70	1	1	52.15
RESIDENTIAL CARE FACILITY	0	0	0.00	0	0	0.00	0	0	0.00
MR WAIVER SERVICE	0	0	0.00	2	67	1,924.70	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	3	444	5,876.21	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	3	7	1,733.66	7	14	4,511.62	0	0	0.00
UNASSIGNED	1	0	0.00	3	0	0.00	0	0	0.00
* A L L C A T E G O R I E S *	1077	32657	3005,065.61	11937	87041	2721,497.01	248	8884	648,179.65

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	1,535.16-	3	5	7,833.39	0	0	0.00
OUTPATIENT	1	0	914.40	5	115	1,076.51	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	1	4	63.80	0	0	0.00	0	0	0.00
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	3	1	532.51	9	14	1,315.42	0	0	0.00
CLINIC SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
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	104	38,462.95	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	2	1	1,120.29	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	2	2	629.97	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 *	104	109	38,438.50	12	137	11,975.58	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		
	RECIPES SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPES SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPES SERVED	UNITS OF SERVICE	AMOUNT PAID
INPATIENT	8	128	20,508.98	5	51	4,864.00	18	14	22,534.95
OUTPATIENT	61	724	6,549.14	12	339	1,121.44	97	1264	31,783.33
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	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	1	28	18,546.90	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	0	0	0.00
HOME HEALTH	1	3	155.25	1	3	330.15	0	0	0.00
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	136	218	6,721.03	39	26	2,094.50	148	297	23,730.62
CLINIC SERVICES	19	25	2,372.97	1	0	12.50	31	44	5,610.67
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	6	7	67.95	0	0	0.00	28	107	2,949.41
HABILITATION SERVICES	0	0	0.00	2	5	414.56	10	551	30,070.44
REMEDIAL SERVICES	160	4826	97,044.19	0	0	0.00	17	345	7,119.33
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	0	0	0.00	2	2	258.21	6	5	409.89
LOCAL EDUCATION AGENCY	23	4619	32,922.70	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	366	1481	110,255.21	6	13	103.59	164	470	26,328.66
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	1	77.12	0	0	0.00	16	21	2,026.41
IOWA PLAN PROGRAM	394	400	49,154.18	20	22	1,374.86	354	365	53,800.93
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	5	5	227.30	0	0	0.00	8	8	283.62
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	46	114	10,301.60	0	0	0.00	0	0	0.00
MEDICAL SUPPLIES	15	1615	1,489.30	0	0	0.00	9	10	665.25
OTHER PRACTITIONER	39	1998	13,550.52	0	0	0.00	12	13	1,502.71
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	46	59	6,205.94	0	0	0.00	30	41	7,308.36
OPTOMETRIST	18	18	909.21	0	0	0.00	14	16	919.04

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

OTHER ICARE PMIC MHI 300%

OTHER ICARE MHI 300%

STATE ONLY

RECIPS UNITS OF  
 SERVED SERVICE

AMOUNT  
 PAID

RECIPS UNITS OF  
 SERVED SERVICE

AMOUNT  
 PAID

RECIPS UNITS OF  
 SERVED SERVICE

AMOUNT  
 PAID

CHIROPRACTIC	12	21	554.28	1	6	67.26	11	24	921.76
PODIATRIC	3	3	251.37	0	0	0.00	2	1	33.12
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	2	2	398.84	3	5	135.81	0	0	0.00
RESIDENTIAL CARE FACILITY	0	0	0.00	2	12	106.70	0	0	0.00
MR WAIVER SERVICE	0	0	0.00	1	39	10,044.45	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	350	15536	340,686.86	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	1	38	570.00	1	16	195.99	0	0	0.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	382	413	195,352.76	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 *	355	32254	896,326.70	18	567	39,670.92	295	3596	217,998.50

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	74	155	199,205.70	322	1005	744,458.67	0	0	0.00
OUTPATIENT	371	8633	179,491.18	3295	75629	600,707.70	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	9	120	1,800.00	0	0	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	6	305	26,703.80	0	0	0.00
INTER CARE MENTAL RETARDA	0	0	0.00	2097	64499	26647,650.11	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	0	0	0.00
HOME HEALTH	21	158	15,555.53	1337	49863	1461,129.79	0	0	0.00
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	620	1706	153,741.22	5357	18919	515,866.55	0	0	0.00
CLINIC SERVICES	156	261	37,288.02	401	502	58,195.19	0	0	0.00
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	100	437	8,437.85	637	893	10,992.29	0	0	0.00
HABILITATION SERVICES	4	52	3,588.11	30	523	22,224.27	0	0	0.00
REMEDIAL SERVICES	78	1799	32,573.74	138	2923	71,304.39	0	0	0.00
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	19	24	3,101.25	140	165	18,137.80	0	0	0.00
LOCAL EDUCATION AGENCY	2	520	11,126.28	630	222537	2015,733.50	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
EARLY ACCESS SERVICES	3	5	95.20	46	341	6,972.84	0	0	0.00
PRESCRIBED DRUGS	935	4858	278,713.15	6622	25183	1886,262.31	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	6	8	605.20	20	23	1,805.97	0	0	0.00
IOWA PLAN PROGRAM	1371	1442	147,880.04	10794	10883	722,628.81	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	3	3	95.87	54	70	3,008.40	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	5	11	1,797.17	597	1459	178,732.94	0	0	0.00
MEDICAL SUPPLIES	163	6728	30,803.31	2466	377404	670,411.12	0	0	0.00
OTHER PRACTITIONER	77	165	9,918.68	1023	19311	347,675.94	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	136	184	30,557.24	1593	1831	183,641.55	0	0	0.00
OPTOMETRIST	104	132	10,909.39	700	849	41,692.40	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	60	139	4,886.58	340	752	14,663.04	0	0	0.00
PODIATRIC	24	32	2,786.56	627	898	25,868.81	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	267	13877	406,195.80	0	0	0.00
PSYCHIATRIC	2	4	214.69	531	818	36,617.35	0	0	0.00
RESIDENTIAL CARE FACILITY	0	0	0.00	14	730	5,348.11	0	0	0.00
MR WAIVER SERVICE	4	120	3,401.65	8610	610341	22072,413.28	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	3	118	3,002.39	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	3	126	2,196.94	1	4	2,374.00	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	3	72	1,290.45	159	8778	181,163.98	0	0	0.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	6	7	2,526.32	8413	9624	2458,074.74	0	0	0.00
UNASSIGNED	10	0	0.00	1	0	0.00	0	0	0.00
* A L L C A T E G O R I E S *	1448	27899	1175,789.71	11532	1521059	61440,455.45	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	17457	48275	45046,271.45			
OUTPATIENT	0	0	0.00	75467	1513576	25562,894.76			
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	1069	19310	2469,448.14			
INTERMEDIATE CARE FACILITY	0	0	0.00	12295	344085	32642,702.55			
INTER CARE MENTAL RETARDA	0	0	0.00	2114	65088	25479,429.26			
NURSING FAC FOR MENTAL ILL	0	0	0.00	24	541	114,286.78			
HOME HEALTH	0	0	0.00	15051	345127	10669,547.81			
LEAD INSPECTION AGENCY	0	0	0.00	11	12	4,507.43			
PHYSICIAN	0	0	0.00	144029	465784	31140,178.92			
CLINIC SERVICES	0	0	0.00	24417	35154	5046,838.51			
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00			
LAB AND RADIOLOGICAL	0	0	0.00	18960	41282	850,333.68			
HABILITATION SERVICES	0	0	0.00	2828	76923	4253,564.69			
REMEDIAL SERVICES	0	0	0.00	8879	341994	5386,990.92			
REHAB SUPPORT SERVICES	0	0	0.00	33	72	379,579.44-			
AMBULANCE SERVICES	0	0	0.00	3501	4060	479,912.46			
LOCAL EDUCATION AGENCY	0	0	0.00	1760	479336	4217,756.68			

## 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	566	2818	69,530.19			
PRESCRIBED DRUGS	0	0	0.00	143587	414475	25091,135.00			
DRUG CAPITATION	0	0	0.00	0	0	0.00			
INDIAN HEALTH SERVICES	0	0	0.00	24	30	7,590.00			
FAMILY PLANNING SERVICES	0	0	0.00	9067	10854	958,134.54			
IOWA PLAN PROGRAM	0	0	0.00	295383	320061	9709,773.38			
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	12253	10964	2040,904.98			
HMO SERVICES	0	0	0.00	35	34	24,986.36			
PACE SERVICES	0	0	0.00	30	30	93,753.00			
PATIENT MANAGEMENT	0	0	0.00	147913	147933	295,855.27			
HEALTH INS PREMIUM PAYMENT	0	0	0.00	4106	11725	587,383.30			
MEDICAL SUPPLIES	0	0	0.00	25776	2059448	5082,198.76			
OTHER PRACTITIONER	0	0	0.00	15850	88795	2152,197.92			
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	30764	38438	5755,122.03			
OPTOMETRIST	0	0	0.00	14124	18203	1034,624.60			

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	10050	23768	624,130.76			
PODIATRIC	0	0	0.00	5375	8383	291,191.35			
PHYSICAL DISABILITIES SVCS	0	0	0.00	701	28471	378,695.69			
BRAIN INJ WAIVER SERVICES	0	0	0.00	1055	61127	1757,178.87			
PSYCHIATRIC	0	0	0.00	3985	7393	298,789.21			
RESIDENTIAL CARE FACILITY	0	0	0.00	1697	53889	340,335.74			
MR WAIVER SERVICE	0	0	0.00	9879	701200	25285,380.53			
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	600	28274	579,411.65			
AIDS WAIVER SERVICES	0	0	0.00	47	4114	64,642.67			
ELDERLY WAIVER SERVICES	0	0	0.00	9875	456767	6321,635.04			
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	2198	112273	1895,775.53			
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00			
MEP SERVICES	0	0	0.00	10688	12248	3274,084.08			
UNASSIGNED	0	0	0.00	114	0	210,151.43-			
* A L L C A T E G O R I E S *	0	0	0.00	365951	8402334	286789,373.62	0	0	0.00

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