

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	4	2,943.50	0	0	0.00	602	2580	713,866.32
OUTPATIENT	35	468	6,794.44	0	0	0.00	4519	106508	566,494.89
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	184	3079	11,748.52
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	4380	130370	10632,738.88
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	6	156	39,852.88
HOME HEALTH	0	0	0.00	0	0	0.00	2491	52136	1795,830.29
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	63	110	8,795.15	0	0	0.00	6860	40063	402,605.98
CLINIC SERVICES	20	25	3,749.50	0	0	0.00	590	383	38,729.62
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	14	85	1,412.03	0	0	0.00	890	205	2,298.79
HABILITATION SERVICES	0	0	0.00	0	0	0.00	49	1247	77,630.95
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	124.06	0	0	0.00	268	279	25,156.37
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	40	83	2,695.47	0	0	0.00	3436	5764	69,409.35
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	91	113	3,117.56	0	0	0.00	7	7	550.11
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	888.79	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	67	67	134.00	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	2830	183468	284,962.75
OTHER PRACTITIONER	1	1	30.52	0	0	0.00	377	1374	15,674.87
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	15	17	2,178.59	0	0	0.00	482	613	101,335.30
OPTOMETRIST	5	8	489.84	0	0	0.00	657	1012	27,467.13

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	431	1029	8,016.46
PODIATRIC	0	0	0.00	0	0	0.00	845	1229	15,051.57
PHYSICAL DISABILITIES SVCS	0	0	0.00	0	0	0.00	1	0	87.85-
BRAIN INJ WAIVER SERVICES	0	0	0.00	0	0	0.00	1	50	3,298.70
PSYCHIATRIC	0	0	0.00	0	0	0.00	174	322	9,627.09
RESIDENTIAL CARE FACILITY	0	0	0.00	0	0	0.00	302	10477	72,033.39
MR WAIVER SERVICE	0	0	0.00	0	0	0.00	78	5403	235,784.19
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	3742	157856	2357,577.83
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	0	0	0.00	1	0	429.79-
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	111	107	27,866.30
UNASSIGNED	0	0	0.00	0	0	0.00	3	0	348.52-
* A L L C A T E G O R I E S *	140	983	33,353.45	0	0	0.00	14632	705717	17534,742.37

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	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	1919	10919	7406,938.65	655	1717	2981,173.69
OUTPATIENT	0	0	0.00	16731	471474	5587,060.51	8873	154579	11095,845.04
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	202	4715	1898,776.48	0	0	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	563	16651	1671,813.84	1	30	3,756.00
INTER CARE MENTAL RETARDA	0	0	0.00	10	212	65,448.61	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	3733	92253	2723,203.78	56	632	30,389.94
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	0	0	0.00	25090	118807	4298,719.78	16125	32943	3024,345.99
CLINIC SERVICES	0	0	0.00	3318	3975	535,006.28	2988	4083	553,862.62
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	0	0	0.00	3451	6963	158,581.11	3197	9819	244,242.58
HABILITATION SERVICES	0	0	0.00	2644	71688	3750,228.47	28	384	19,518.04
REMEDIAL SERVICES	0	0	0.00	745	22839	354,817.58	193	4587	62,301.21
REHAB SUPPORT SERVICES	0	0	0.00	9	0	14,603.91	0	0	0.00
AMBULANCE SERVICES	0	0	0.00	1030	1207	143,812.54	281	287	39,256.88
LOCAL EDUCATION AGENCY	0	0	0.00	637	170743	1644,732.83	12	3937	36,407.58

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	52	159	2,610.46	0	0	0.00
PRESCRIBED DRUGS	0	0	0.00	25084	110106	8864,961.10	21536	62154	3075,165.26
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	117	128	8,349.14	5872	6727	633,079.70
IOWA PLAN PROGRAM	2	2	89.56	49769	50869	3749,548.65	39226	43415	1352,153.04
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	196	222	12,012.19	48	57	3,822.23
HMO SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PACE SERVICES	0	0	0.00	15	15	50,080.00	0	0	0.00
PATIENT MANAGEMENT	0	0	0.00	4	4	8.00	24205	24234	48,468.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	623	1330	135,811.63	213	473	13,158.40
MEDICAL SUPPLIES	0	0	0.00	9202	691370	1779,753.22	1163	34924	223,790.13
OTHER PRACTITIONER	0	0	0.00	2474	33154	466,483.78	1892	4209	243,187.77
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	4238	5410	918,136.53	3385	4566	848,715.69
OPTOMETRIST	0	0	0.00	2385	3128	159,727.86	1454	1766	132,149.40

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	2463	6098	93,690.14	1912	4384	153,935.32
PODIATRIC	0	0	0.00	1263	2128	72,418.29	208	268	31,442.93
PHYSICAL DISABILITIES SVCS	0	0	0.00	520	19599	269,508.89	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	334	17526	469,269.62	0	0	0.00
PSYCHIATRIC	0	0	0.00	2573	4535	148,115.34	14	31	3,217.18
RESIDENTIAL CARE FACILITY	0	0	0.00	1327	46243	358,129.03	1	26	260.00
MR WAIVER SERVICE	0	0	0.00	1027	67128	2878,523.93	1	1	14.70
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	36	1453	31,264.16	5	264	4,959.58
AIDS WAIVER SERVICES	0	0	0.00	15	1403	14,246.50	0	0	0.00
ELDERLY WAIVER SERVICES	0	0	0.00	33	1300	25,757.24	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	1896	89509	1442,814.51	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	1501	1434	396,797.39	12	7	3,697.41
UNASSIGNED	0	0	0.00	5	0	25.20-	5	0	35.98-
* A L L C A T E G O R I E S *	2	2	89.56	54235	2146697	52601,736.77	50534	400504	24862,280.33

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	379	2345	2693,318.49	359	6403	1870,856.90	1838	11070	10746,019.06
OUTPATIENT	7888	78874	1932,577.48	2254	32418	710,982.25	12790	185728	3433,366.53
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	2,883.39	0	0	0.00	8	191	50,312.94
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	3	43	3,805.00
INTER CARE MENTAL RETARDA	0	0	0.00	1	0	0.00	1	0	1465,540.00-
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	1	31	13,333.41
HOME HEALTH	460	2001	56,262.66	94	253	11,071.14	736	4124	166,180.92-
LEAD INSPECTION AGENCY	1	1	381.12	1	1	381.12	1	1	381.12
PHYSICIAN	20048	34299	2308,092.75	4596	9418	678,095.92	30875	63903	4512,645.87
CLINIC SERVICES	3570	4577	626,592.64	988	1351	174,723.78	6902	9543	1144,157.72
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	1334	2903	44,149.71	500	1651	33,625.63	2886	8991	169,661.27
HABILITATION SERVICES	0	0	0.00	22	393	35,320.03	7	142	6,980.38
REMEDIAL SERVICES	2244	51707	843,728.54	814	18140	260,506.31	1947	47050	659,625.49
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	1	0	1,339.65-
AMBULANCE SERVICES	182	189	26,678.63	70	76	11,174.77	273	272	43,808.42
LOCAL EDUCATION AGENCY	188	37924	257,793.13	65	16196	111,869.86	205	46473	323,628.68

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	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	38	130	1,959.18	12	26	387.02	55	163	2,287.89
PRESCRIBED DRUGS	19576	34400	1832,613.19	5211	11887	671,435.35	28538	50703	2637,256.81
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	930	1072	87,674.95	222	257	25,140.52	446	486	51,435.00
IOWA PLAN PROGRAM	66834	71491	714,507.40	14558	16010	326,855.70	94204	104529	1281,593.63
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	2570	2829	328,212.03	417	455	68,792.30	3743	4003	719,010.32
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	43648	43693	87,386.00	8903	8898	17,796.00	63938	63990	127,980.00
HEALTH INS PREMIUM PAYMENT	316	760	16,988.73	47	98	4,056.22	1930	4985	121,787.26
MEDICAL SUPPLIES	1134	17061	154,531.86	244	5649	30,131.34	1534	26518	217,111.42
OTHER PRACTITIONER	2479	13035	253,271.59	582	3750	75,791.34	3518	14723	381,164.11
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	4913	5858	786,057.96	1158	1410	221,484.53	7171	8529	1112,659.26
OPTOMETRIST	1501	1720	114,550.81	425	490	33,199.20	2176	2475	165,747.85

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	968	1795	57,689.37	246	496	16,981.05	1691	3516	108,166.00
PODIATRIC	84	111	11,488.49	32	37	5,141.12	116	138	13,918.05
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	0	5,344.15-
PSYCHIATRIC	11	15	2,192.01	8	12	1,132.39	30	56	12,379.68
RESIDENTIAL CARE FACILITY	0	0	0.00	1	10	0.00	1	27	180.50
MR WAIVER SERVICE	0	0	0.00	0	0	0.00	16	19	138,652.87-
CHILDRENS MENTAL HEALTH SVC	39	1987	41,232.83	95	5002	92,243.43	47	2132	26,432.35
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	9	121	71,308.55-
ILL & HANDICAPPED WAIVER SVCS	1	0	2.76-	0	0	0.00	12	196	9,032.84-
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	49	42	18,863.50	116	123	49,030.96	64	62	22,704.44
UNASSIGNED	1	0	0.00	0	0	0.00	4	0	1141,339.47
* A L L C A T E G O R I E S *	73636	410822	13301,675.68	15769	140910	5538,206.18	100419	664933	27393,480.95

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	38	462	211,031.09	747	3403	1082,494.10	52	269	217,651.33
OUTPATIENT	856	14153	233,237.02	5207	142323	727,894.95	469	10778	191,985.81
CHILD PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
CHILD DAY TREATMENT	1	0	73.65-	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	2	30	11,263.66	354	5579	23,202.70	2	29	8,214.40
INTERMEDIATE CARE FACILITY	0	0	0.00	6710	196439	19657,031.13	1	30	2,573.10
INTER CARE MENTAL RETARDA	8	230	88,159.02	0	0	0.00	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	27	792	236,913.27	1	30	7,115.40-
HOME HEALTH	107	5835	166,576.14	3714	83786	2916,749.00	41	638	13,940.22
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	2268	3520	222,896.46	7425	36754	492,151.20	835	2313	163,949.50
CLINIC SERVICES	451	579	71,591.35	468	415	39,825.92	119	157	22,159.72
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	258	723	10,673.07	1071	352	3,960.37	171	311	6,449.99
HABILITATION SERVICES	8	121	7,982.84	35	694	36,376.60	29	859	52,840.23
REMEDIAL SERVICES	2806	160033	2163,620.19	4	68	1,201.85	6	99	1,159.72
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	1	0	2,348.71
AMBULANCE SERVICES	27	27	4,337.62	497	587	54,647.13	27	33	5,540.13
LOCAL EDUCATION AGENCY	136	33072	288,287.21	28	8005	139,931.26	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	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	15	40	584.96	1	4	55.36	0	0	0.00
PRESCRIBED DRUGS	5213	13713	1238,780.64	10203	23051	413,476.36	1059	3427	166,083.52
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	35	40	3,728.05	1	1	70.81	30	37	2,267.09
IOWA PLAN PROGRAM	10103	10417	1074,771.90	2241	2262	152,715.23	1455	1584	55,347.63
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	133	136	14,689.64	5	3	63.75	0	0	0.00
HMO SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PACE SERVICES	0	0	0.00	22	22	61,987.00	0	0	0.00
PATIENT MANAGEMENT	114	114	228.00	0	0	0.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	153	325	14,039.94	35	62	10,246.27	0	0	0.00
MEDICAL SUPPLIES	246	23258	75,335.34	4450	354925	558,135.73	191	10179	17,628.28
OTHER PRACTITIONER	434	4175	68,058.46	552	2616	52,895.14	79	131	7,954.61
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	1026	1211	165,093.11	933	1132	171,357.53	185	253	44,586.93
OPTOMETRIST	370	429	27,498.02	781	1167	31,719.67	83	93	5,939.15

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	156	287	9,010.71	343	799	6,272.89	105	221	7,610.22
PODIATRIC	28	31	2,645.90	1240	1770	23,844.14	35	45	1,187.72
PHYSICAL DISABILITIES SVCS	0	0	0.00	199	6157	82,340.56	0	0	0.00
BRAIN INJ WAIVER SERVICES	40	1816	58,437.82	435	21826	640,695.67	0	0	0.00
PSYCHIATRIC	14	23	1,759.92	265	460	14,312.46	35	72	3,058.60
RESIDENTIAL CARE FACILITY	4	98	1,487.94	4	46	113.06	0	0	0.00
MR WAIVER SERVICE	203	7546	227,707.14	15	645	31,291.44	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	35	2634	28,035.67	0	0	0.00
ELDERLY WAIVER SERVICES	0	0	0.00	6502	289577	3798,790.88	4	17	542.60
ILL & HANDICAPPED WAIVER SVCS	29	1942	30,358.61	9	268	2,233.61	0	0	0.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	256	245	63,507.40	164	166	44,267.68	1	1	319.27
UNASSIGNED	0	0	0.00	7	0	434.25-	0	0	0.00
* A L L C A T E G O R I E S *	10325	284631	6557,305.52	14778	1188790	31536,866.14	1812	31606	994,223.08

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	140	858	1302,513.45	69	658	213,154.08	7	29	53,444.21
OUTPATIENT	530	20510	833,004.66	1260	18417	331,929.93	109	3766	146,992.01
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	27	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	35	755	50,313.35	26	56	3,198.91	2	18	1,040.22
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	846	3115	369,560.93	3115	5327	300,762.60	178	712	134,252.75
CLINIC SERVICES	65	130	16,193.68	718	887	110,150.14	22	33	4,808.23
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	57	253	4,678.21	188	568	9,944.72	28	255	6,346.35
HABILITATION SERVICES	3	74	3,498.03	0	0	0.00	0	0	0.00
REMEDIAL SERVICES	1	32	299.20	434	8524	141,891.36	0	0	0.00
REHAB SUPPORT SERVICES	1	0	727.61	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	51	52	9,171.62	18	18	3,155.70	1	1	373.76
LOCAL EDUCATION AGENCY	0	0	0.00	41	7051	49,161.49	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	0	0	0.00	0	0	0.00
PRESCRIBED DRUGS	316	1456	70,968.99	4167	7556	740,778.27	195	874	68,707.39
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	8	10	712.18	79	89	7,274.71	0	0	0.00
IOWA PLAN PROGRAM	0	0	0.00	14003	15114	168,967.03	243	237	24,615.48
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	155	153	10,890.53	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	10210	10226	20,452.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	8	21	942.48	0	0	0.00
MEDICAL SUPPLIES	78	4158	23,704.45	130	4981	41,300.35	26	758	4,587.50
OTHER PRACTITIONER	66	126	9,724.70	404	2359	44,723.54	13	20	1,419.04
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	76	118	34,275.80	1426	1719	264,523.04	15	15	1,965.23
OPTOMETRIST	27	28	2,347.50	493	564	40,882.44	8	11	736.71

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	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	28	88	2,567.43	316	583	19,953.35	14	36	1,310.31
PODIATRIC	17	28	2,299.13	42	58	6,293.72	0	0	0.00
PHYSICAL DISABILITIES SVCS	0	0	0.00	0	0	0.00	0	0	0.00
BRAIN INJ WAIVER SERVICES	1	0	272.70-	3	34	101.44-	0	0	0.00
PSYCHIATRIC	46	106	5,941.01	2	2	42.17	2	2	189.18
RESIDENTIAL CARE FACILITY	0	0	0.00	0	0	0.00	0	0	0.00
MR WAIVER SERVICE	0	0	0.00	3	33	954.78	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	9	526	8,730.16	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	2	561.36	11	9	4,110.66	0	0	0.00
UNASSIGNED	0	0	0.00	1	0	0.00	0	0	0.00
* A L L C A T E G O R I E S *	969	31926	2742,790.59	13554	85533	2544,066.72	244	6767	450,788.37

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	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	23,737.80	0	0	0.00	0	0	0.00
OUTPATIENT	3	0	3,831.80	0	0	0.00	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	8	20	758.32	5	5	130.44	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	1	2	62.73	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	83	89	9,365.78	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
SICK & HANDICAPPED WAIVER SVCS	1	0	666.55-	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 *	85	109	37,027.15	4	7	193.17	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
INPATIENT	2	20	3,327.20	1	0	992.00-	10	23	33,068.91
OUTPATIENT	47	567	2,555.94	14	275	745.74	75	1290	30,083.28
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	0	0	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	1	14	201.58	0	0	0.00
INTER CARE MENTAL RETARDA	0	0	0.00	1	24-	17,622.00-	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	0	0	0.00
HOME HEALTH	1	25	931.50	1	15	1,011.91	0	0	0.00
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	116	178	5,793.78	39	138	1,086.70	129	247	18,548.04
CLINIC SERVICES	10	11	1,136.69	1	1	21.14	25	34	4,501.30
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	6	7	77.77	0	0	0.00	17	44	829.43
HABILITATION SERVICES	1	29	1,340.96	1	36	1,225.08	11	350	16,899.63
REMEDIAL SERVICES	143	3996	68,568.19	0	0	0.00	24	299	5,762.20
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	5	6	735.76
LOCAL EDUCATION AGENCY	17	7025	52,895.48	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	344	1203	98,437.14	8	16	119.53	153	358	17,449.26
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	12	16	1,993.73
IOWA PLAN PROGRAM	379	383	47,377.67	13	15	943.71	353	366	53,931.02
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	4	21	960.03	0	0	0.00	2	4	161.44
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	43	88	8,045.79	0	0	0.00	0	0	0.00
MEDICAL SUPPLIES	15	851	1,122.22	2	2	10.30	5	16	2,125.04
OTHER PRACTITIONER	27	650	5,757.60	0	0	0.00	15	18	1,937.44
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	31	33	2,836.15	1	1	63.39	19	23	2,959.22
OPTOMETRIST	17	17	1,210.33	0	0	0.00	12	16	1,025.41

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	14	30	898.64	0	0	0.00	9	21	993.74
PODIATRIC	1	1	220.81	1	13	171.90	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	4	11	132.05	1	1	69.62
RESIDENTIAL CARE FACILITY	0	0	0.00	4	40	957.95	1	75	814.45
MR WAIVER SERVICE	1	44	756.64	1	53	4,409.69	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	341	14704	328,257.46	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	1	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	390	366	160,305.72	3	2	599.79	0	0	0.00
UNASSIGNED	0	0	0.00	0	0	0.00	1	0	0.00
* A L L C A T E G O R I E S *	354	30251	792,813.71	15	608	6,913.54-	317	3207	193,888.92

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	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	20	98	195,641.05	161	791	479,955.35	0	0	0.00
OUTPATIENT	280	6136	140,205.22	2936	72666	550,360.55	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	1	30	18,108.60	7	176	0.00	0	0	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	12	319	32,471.18	0	0	0.00
INTER CARE MENTAL RETARDA	0	0	0.00	2014	52741	20940,415.71	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	1	0	2,478.00-	0	0	0.00
HOME HEALTH	14	92	6,809.81	1199	41185	1322,493.25	0	0	0.00
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	506	1130	105,915.91	4678	15276	395,328.25	0	0	0.00
CLINIC SERVICES	137	196	27,940.42	374	418	49,119.10	0	0	0.00
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	66	329	6,115.38	533	680	8,788.83	0	0	0.00
HABILITATION SERVICES	7	70	4,378.11	32	536	24,060.03	0	0	0.00
REMEDIAL SERVICES	71	2206	44,052.06	102	2614	47,352.30	0	0	0.00
REHAB SUPPORT SERVICES	0	0	0.00	1	0	623.70-	0	0	0.00
AMBULANCE SERVICES	13	14	1,940.17	120	139	16,675.28	0	0	0.00
LOCAL EDUCATION AGENCY	3	1013	14,319.48	648	191047	1815,205.23	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	0	0	0.00	27	108	1,501.00	0	0	0.00
PRESCRIBED DRUGS	891	4137	235,891.87	6343	21492	1739,097.10	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	5	5	308.92	19	17	1,066.07	0	0	0.00
IOWA PLAN PROGRAM	1381	1414	144,707.86	10869	10931	725,539.68	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	2	151.16	32	46	2,414.29	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	7	13	1,255.37	585	1190	158,555.18	0	0	0.00
MEDICAL SUPPLIES	140	7543	23,064.90	2259	299379	532,379.59	0	0	0.00
OTHER PRACTITIONER	58	134	6,350.05	863	21490	365,291.24	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	106	136	26,899.05	1404	1620	162,412.09	0	0	0.00
OPTOMETRIST	61	75	5,400.89	588	739	32,629.92	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	57	106	3,787.81	334	946	12,162.44	0	0	0.00
PODIATRIC	22	25	2,134.19	572	775	20,978.36	0	0	0.00
PHYSICAL DISABILITIES SVCS	0	0	0.00	1	0	1,300.12-	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	277	12770	399,273.53	0	0	0.00
PSYCHIATRIC	4	5	333.35	489	734	30,318.67	0	0	0.00
RESIDENTIAL CARE FACILITY	0	0	0.00	14	538	4,347.67	0	0	0.00
MR WAIVER SERVICE	3	121	3,331.28	8537	537782	22003,808.85	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	2	101	1,726.04	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	2	126	2,213.29	1	2	1,187.00	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	3	102	1,428.43	186	6767	110,930.41	0	0	0.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	6	6	1,472.61	8950	9127	2419,672.44	0	0	0.00
UNASSIGNED	0	0	0.00	2	0	282.23-	0	0	0.00
* A L L C A T E G O R I E S *	1428	25365	1025,883.28	11479	1305041	54401,106.54	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	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	6969	41649	30230,143.18			
OUTPATIENT	0	0	0.00	64377	1320930	26525,948.05			
CHILD PART HOSP	0	0	0.00	0	0	0.00			
CHILD DAY TREATMENT	0	0	0.00	1	0	73.65-			
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	758	13859	2024,510.69			
INTERMEDIATE CARE FACILITY	0	0	0.00	11620	343896	32004,390.71			
INTER CARE MENTAL RETARDA	0	0	0.00	2031	53159	19610,861.34			
NURSING FAC FOR MENTAL ILL	0	0	0.00	34	1009	280,506.16			
HOME HEALTH	0	0	0.00	12617	283804	8933,641.20			
LEAD INSPECTION AGENCY	0	0	0.00	3	3	1,143.36			
PHYSICIAN	0	0	0.00	121716	368278	17444,436.32			
CLINIC SERVICES	0	0	0.00	20613	26798	3424,269.85			
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00			
LAB AND RADIOLOGICAL	0	0	0.00	14576	34141	711,897.97			
HABILITATION SERVICES	0	0	0.00	2861	76623	4038,279.38			
REMEDIAL SERVICES	0	0	0.00	8771	322194	4654,886.20			
REHAB SUPPORT SERVICES	0	0	0.00	12	0	15,716.88			
AMBULANCE SERVICES	0	0	0.00	2851	3189	386,588.84			
LOCAL EDUCATION AGENCY	0	0	0.00	1939	522486	4734,232.23			

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	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	198	630	9,385.87			
PRESCRIBED DRUGS	0	0	0.00	130241	352469	21952,692.38			
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	7758	8885	823,100.87			
IOWA PLAN PROGRAM	0	0	0.00	304958	329159	9877,332.86			
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	7285	7932	1162,068.70			
HMO SERVICES	0	0	0.00	0	0	0.00			
PACE SERVICES	0	0	0.00	37	37	112,067.00			
PATIENT MANAGEMENT	0	0	0.00	151077	151226	302,452.00			
HEALTH INS PREMIUM PAYMENT	0	0	0.00	3960	9345	484,887.27			
MEDICAL SUPPLIES	0	0	0.00	23231	1665040	3969,674.42			
OTHER PRACTITIONER	0	0	0.00	13736	101965	1999,715.80			
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	26477	32664	4867,539.40			
OPTOMETRIST	0	0	0.00	11029	13738	782,722.13			

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
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CHIROPRACTIC	0	0	0.00	9028	20435	503,045.88			
PODIATRIC	0	0	0.00	4475	6657	209,236.32			
PHYSICAL DISABILITIES SVCS	0	0	0.00	717	25756	350,461.48			
BRAIN INJ WAIVER SERVICES	0	0	0.00	1061	54022	1565,257.05			
PSYCHIATRIC	0	0	0.00	3660	6387	232,820.72			
RESIDENTIAL CARE FACILITY	0	0	0.00	1644	57580	438,323.99			
MR WAIVER SERVICE	0	0	0.00	9795	618775	25247,929.77			
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	573	26169	534,846.01			
AIDS WAIVER SERVICES	0	0	0.00	47	4037	42,282.17			
ELDERLY WAIVER SERVICES	0	0	0.00	9972	448999	6114,760.29			
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	2125	98785	1577,633.63			
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00			
MEP SERVICES	0	0	0.00	11388	11699	3213,776.93			
UNASSIGNED	0	0	0.00	29	0	1140,213.29			
* A L L C A T E G O R I E S *	0	0	0.00	364731	7464409	242535,604.94	0	0	0.00

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