

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	2	2,434.89	0	0	0.00	544	2276	759,330.22
OUTPATIENT	55	703	10,020.17	0	0	0.00	5578	179438	675,621.68
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	957	1593	77,057.98
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	6600	155937	16038,877.06
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	7	185	35,923.20
HOME HEALTH	0	0	0.00	0	0	0.00	3303	100712	2214,032.64
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	77	136	15,341.86	0	0	0.00	6802	44725	425,024.98
CLINIC SERVICES	18	26	4,207.74	0	0	0.00	601	453	52,229.28
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	9	52	949.78	0	0	0.00	919	217	2,374.90
HABILITATION SERVICES	0	0	0.00	0	0	0.00	53	1423	85,177.38
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	331	402	36,511.61
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	41	105	5,425.19	0	0	0.00	3471	6815	93,038.14
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	120	146	3,936.62	0	0	0.00	4	4	280.52
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	78	78	156.00	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	2	2	46.79	0	0	0.00	3200	219834	357,193.68
OTHER PRACTITIONER	1	1	7.95	0	0	0.00	455	1456	29,071.63
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	26	34	4,203.19	0	0	0.00	520	661	104,399.40
OPTOMETRIST	6	8	450.02	0	0	0.00	793	1333	31,965.37

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	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	442	1187	7,000.65
PODIATRIC	0	0	0.00	0	0	0.00	810	1228	15,197.91
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	53	3,694.64
PSYCHIATRIC	0	0	0.00	0	0	0.00	190	384	9,782.48
RESIDENTIAL CARE FACILITY	0	0	0.00	0	0	0.00	300	11121	83,395.26
MR WAIVER SERVICE	0	0	0.00	0	0	0.00	77	8991	284,698.05
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	3804	176330	2692,473.74
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	107	126	32,432.90
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 *	156	1293	47,180.20	0	0	0.00	16638	916884	24146,785.30

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	1929	11854	8519,808.66	794	2283	3570,947.22
OUTPATIENT	1	0	13.34	18267	559381	6271,120.16	9923	192461	4380,847.74
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	438	5014	2005,308.72	0	0	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	903	19764	2319,028.93	3	14	2,313.42
INTER CARE MENTAL RETARDA	0	0	0.00	8	185	59,381.86	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	4251	124612	3177,108.16	74	2967	96,109.51
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	1	2	15.32	26964	138214	5000,525.82	17840	39607	3661,409.94
CLINIC SERVICES	0	0	0.00	3739	5410	687,457.38	3314	4761	703,896.00
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	0	0	0.00	4138	8814	164,518.08	4569	13601	387,552.01
HABILITATION SERVICES	0	0	0.00	2838	79103	4022,778.82	36	410	22,677.01
REMEDIAL SERVICES	0	0	0.00	913	26480	548,073.66	270	6008	157,391.37
REHAB SUPPORT SERVICES	0	0	0.00	5	0	18,903.12	0	0	0.00
AMBULANCE SERVICES	0	0	0.00	1326	1647	193,300.36	421	426	59,583.13
LOCAL EDUCATION AGENCY	0	0	0.00	274	78147	696,847.37	13	1151	14,191.48

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	40	154	2,229.65	0	0	0.00
PRESCRIBED DRUGS	1	1-	55.16-	25733	125974	9858,581.52	22238	68821	3441,654.43
DRUG CAPITATION	0	0	0.00	0	0	0.00	0	0	0.00
INDIAN HEALTH SERVICES	0	0	0.00	1	3	804.00	1	8	2,144.00
FAMILY PLANNING SERVICES	0	0	0.00	186	218	17,857.59	7559	9138	852,038.05
IOWA PLAN PROGRAM	2	2	89.56	50212	51918	3829,126.86	39244	43512	1355,061.02
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	0	0	0.00	219	295	16,603.85	82	88	4,830.09
HMO SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PACE SERVICES	0	0	0.00	21	21	68,269.00	0	0	0.00
PATIENT MANAGEMENT	0	0	0.00	0	0	0.00	24115	24109	48,218.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	617	1295	131,715.76	198	461	13,078.29
MEDICAL SUPPLIES	0	0	0.00	10056	805672	2248,240.86	1175	28987	256,898.20
OTHER PRACTITIONER	0	0	0.00	2866	27075	553,076.75	2104	4655	256,839.42
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	4621	6113	1001,957.96	3732	5256	1021,508.74
OPTOMETRIST	0	0	0.00	2619	3667	180,250.58	1799	2220	161,888.02

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	2683	7157	100,638.12	2119	4976	174,575.45
PODIATRIC	0	0	0.00	1537	2853	97,888.43	284	399	49,434.78
PHYSICAL DISABILITIES SVCS	0	0	0.00	540	21181	272,159.80	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	321	18452	583,678.32	0	0	0.00
PSYCHIATRIC	0	0	0.00	2781	5061	129,908.49	37	43	6,268.77
RESIDENTIAL CARE FACILITY	0	0	0.00	1323	47148	371,287.32	0	0	0.00
MR WAIVER SERVICE	0	0	0.00	1031	78765	3083,263.39	1	0	0.79
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	33	1336	30,677.90	4	259	4,669.41
AIDS WAIVER SERVICES	0	0	0.00	17	1512	16,752.37	0	0	0.00
ELDERLY WAIVER SERVICES	0	0	0.00	41	1097	28,020.51	1	0	961.38
SICK & HANDICAPPED WAIVER SVCS	0	0	0.00	2040	115029	1888,971.22	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	1245	1475	375,401.52	4	6	2,092.44
UNASSIGNED	0	0	0.00	4	0	0.00	4	0	0.00
* A L L C A T E G O R I E S *	2	3	63.06	55293	2382096	58571,522.87	53189	456627	20707,155.77

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	403	2038	2287,947.60	410	7396	1991,044.56	2119	12117	16935,157.16
OUTPATIENT	7634	82796	1822,491.18	2439	41956	746,825.23	13251	222154	3739,802.89
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	1	0	600.00-
ADULT DAY TREATMENT	0	0	0.00	0	0	0.00	1	0	29.48
SKILLED NURSING FACILITY	0	0	0.00	2	63	32,574.34	12	26	2,973.73
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	18	145	13,468.71
INTER CARE MENTAL RETARDA	0	0	0.00	1	47	15,882.46	1	0	1428,268.00-
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	0	0	0.00
HOME HEALTH	411	3217	48,945.22	72	361	11,298.94	763	3958	738,967.80
LEAD INSPECTION AGENCY	2	3	1,143.36	1	1	381.12	4	4	1,524.48
PHYSICIAN	20579	35906	2438,799.62	4967	9911	744,362.36	33553	69048	5847,282.95
CLINIC SERVICES	3655	4494	685,249.39	1111	1499	212,694.21	7029	10208	1286,750.10
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	2216	4520	79,710.57	682	2148	48,513.08	4233	11592	233,828.05
HABILITATION SERVICES	0	0	0.00	28	256	20,308.74	8	118	6,297.45
REMEDIAL SERVICES	2545	68781	1447,021.66	854	21972	503,655.22	2286	60807	1128,797.55
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	1	0	18,123.33-
AMBULANCE SERVICES	225	223	31,570.47	98	105	12,422.53	340	336	48,140.25
LOCAL EDUCATION AGENCY	142	21735	166,984.82	64	10908	73,455.42	118	15189	111,072.01

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	42	136	2,383.60	13	35	668.62	51	213	3,186.44
PRESCRIBED DRUGS	16747	30645	1765,566.84	5116	12895	753,519.33	25173	47947	2614,090.08
DRUG CAPITATION	0	0	0.00	0	0	0.00	0	0	0.00
INDIAN HEALTH SERVICES	5	7	1,876.00	1	1	268.00	13	20	5,360.00
FAMILY PLANNING SERVICES	1152	1420	128,059.26	287	346	33,045.35	569	676	65,031.54
IOWA PLAN PROGRAM	67139	72177	715,515.74	15159	16614	344,121.98	96664	107860	1316,717.63
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	3157	3513	469,670.57	528	622	95,771.14	4724	5085	1012,551.08
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	44018	44018	88,036.00	9366	9362	18,724.00	67283	67285	134,570.00
HEALTH INS PREMIUM PAYMENT	298	730	14,950.44	57	125	3,890.54	1964	5085	131,086.53
MEDICAL SUPPLIES	974	12153	123,104.06	240	5829	42,984.08	1411	26427	232,640.75
OTHER PRACTITIONER	2468	9217	257,169.08	692	3032	86,547.68	4085	13502	508,473.69
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	6223	7433	884,943.18	1462	1863	317,442.24	9535	11393	1402,196.79
OPTOMETRIST	2336	2700	181,209.70	690	815	57,388.93	3312	3795	255,889.38

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	1091	2065	66,272.49	309	669	23,508.40	1841	3725	115,062.03
PODIATRIC	74	88	11,441.82	45	57	7,292.19	167	206	22,362.65
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	22	254.28
PSYCHIATRIC	18	23	2,509.04	18	51	4,134.57	46	83	21,962.88
RESIDENTIAL CARE FACILITY	0	0	0.00	2	142	2,134.70	2	14	0.00
MR WAIVER SERVICE	1	21	318.50	1	32	1,119.36	3	136	209,271.02-
CHILDRENS MENTAL HEALTH SVC	41	2223	39,591.47	97	5790	101,650.36	40	2310	39,361.30
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	3	51	32,470.18
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	35	36	15,082.08	86	88	35,217.09	45	47	17,997.62
UNASSIGNED	2	0	0.00	1	0	0.00	9	0	606,609.84-
* A L L C A T E G O R I E S *	74898	412318	13777,563.76	16652	154991	6342,846.77	105483	701584	35762,485.27

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	40	428	178,074.60	725	3181	1028,700.70	60	262	264,152.53
OUTPATIENT	1062	18512	266,374.04	7249	386146	881,600.67	545	16845	302,921.82
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	2	118	57,365.79	1763	6970	108,751.00	16	61-	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	9995	191891	23701,004.26	8	43	4,298.50
INTER CARE MENTAL RETARDA	5	138	59,717.90	2	9	2,925.96	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	29	855	253,374.65	1	0	0.00
HOME HEALTH	100	4485	125,803.07	4800	164370	3394,886.12	61	1692	26,719.06
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	2570	4122	262,767.06	7441	47402	603,755.20	911	3260	198,475.94
CLINIC SERVICES	521	617	85,233.42	507	416	60,276.53	134	170	20,776.21
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	270	775	13,819.15	1222	419	4,690.84	172	414	9,148.22
HABILITATION SERVICES	13	253	11,337.00	47	967	43,281.00	20	533	26,628.89
REMEDIAL SERVICES	2450	165116	2235,381.19	6	103	2,525.75	11	178	9,157.37
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	38	40	6,373.69	493	644	57,381.30	37	42	5,102.92
LOCAL EDUCATION AGENCY	68	16412	126,030.69	9	1986	49,234.08	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	18	112	1,473.12	0	0	0.00	0	0	0.00
PRESCRIBED DRUGS	4848	14347	1350,368.73	10468	25932	471,197.07	1072	3989	217,708.81
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	2	3	804.00
FAMILY PLANNING SERVICES	49	58	6,303.39	3	5	416.94	47	51	5,334.67
IOWA PLAN PROGRAM	9901	10223	1055,643.17	2271	2332	157,607.47	1458	1668	57,967.78
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	190	231	14,921.21	2	2	90.78	2	2	72.94
HMO SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PACE SERVICES	0	0	0.00	25	25	70,463.00	0	0	0.00
PATIENT MANAGEMENT	99	99	198.00	0	0	0.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	142	290	14,726.63	36	62	8,642.19	0	0	0.00
MEDICAL SUPPLIES	247	28126	93,178.39	4988	431591	700,964.46	176	7873	21,316.13
OTHER PRACTITIONER	545	2984	102,563.98	618	2565	75,487.47	106	265	11,373.63
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	1336	1596	207,069.35	987	1237	193,716.08	203	300	60,985.28
OPTOMETRIST	609	694	45,642.88	882	1376	37,189.43	95	124	7,336.89

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

	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	189	348	10,817.53	348	830	6,047.09	102	231	7,165.99
PODIATRIC	33	45	3,446.95	1258	1838	23,215.53	36	43	2,237.25
PHYSICAL DISABILITIES SVCS	0	0	0.00	202	7577	98,855.04	0	0	0.00
BRAIN INJ WAIVER SERVICES	38	1771	43,047.11	456	22243	694,301.92	0	0	0.00
PSYCHIATRIC	35	63	5,578.08	285	534	14,933.74	37	68	1,668.92
RESIDENTIAL CARE FACILITY	1	91	820.74	8	104	549.64	0	0	0.00
MR WAIVER SERVICE	216	15193	354,224.70	10	270	13,362.94	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	1	72	1,099.98	0	0	0.00	0	0	0.00
AIDS WAIVER SERVICES	0	0	0.00	34	2828	29,264.27	0	0	0.00
ELDERLY WAIVER SERVICES	0	0	0.00	6583	315555	4030,605.24	2	38	817.40
ILL & HANDICAPPED WAIVER SVCS	35	2774	46,418.26	10	224	4,360.14	0	0	0.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	221	277	70,439.60	156	177	47,772.73	4	4	1,073.61
UNASSIGNED	7	0	0.00	0	0	0.00	0	0	0.00
* A L L C A T E G O R I E S *	10070	290410	6856,259.40	16328	1622666	36871,431.23	1859	38037	1263,244.76

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
INPATIENT	220	1072	1334,637.05	82	727	273,983.97	4	12	39,414.86
OUTPATIENT	620	25128	583,621.21	1206	17213	384,061.28	129	3880	151,369.47
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	8	61	15,665.00	0	0	0.00	0	0	0.00
INTERMEDIATE CARE FACILITY	1	59-	3,503.70-	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	49	1623	24,409.95	36	95	3,310.29	6	56	2,718.58
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	926	3150	312,102.36	3430	5363	369,165.01	183	1094	227,340.64
CLINIC SERVICES	86	103	16,451.78	732	851	118,188.11	16	25	5,195.56
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	58	372	7,469.31	262	799	16,776.10	35	101	4,547.92
HABILITATION SERVICES	13	580	32,761.78	1	3-	57.99-	0	0	0.00
REMEDIAL SERVICES	3	88	1,261.52	437	10638	225,537.10	0	0	0.00
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	65	68	12,912.68	38	37	4,323.91	2	2	220.69
LOCAL EDUCATION AGENCY	0	0	0.00	27	3763	28,277.00	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	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	363	1726	83,993.61	3900	7780	700,265.86	218	1074	92,886.30
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	9	11	1,475.63	124	156	17,145.37	2	2	212.71
IOWA PLAN PROGRAM	0	0	0.00	13972	15022	169,183.41	246	255	26,703.95
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	0.00	210	216	16,727.68	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	10401	10401	20,802.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	15	41	1,448.03	0	0	0.00
MEDICAL SUPPLIES	95	3345	37,660.27	126	3022	9,241.06	29	1404	9,220.48
OTHER PRACTITIONER	86	174	12,426.08	454	1382	47,697.73	24	48	3,841.31
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	77	101	29,323.49	2116	2590	368,763.69	23	31	4,748.12
OPTOMETRIST	35	53	2,937.95	782	887	58,175.17	8	7	500.56

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	34	104	1,994.08	389	786	26,307.35	16	39	1,296.37
PODIATRIC	11	18	4,069.34	36	52	6,582.64	2	2	199.60
PHYSICAL DISABILITIES SVCS	0	0	0.00	0	0	0.00	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	2	83	1,080.26	0	0	0.00
PSYCHIATRIC	51	107	4,878.30	10	11	1,004.42	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	2	66	1,372.58	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	9	503	13,463.38	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	3	886.68	10	10	3,513.00	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 *	1080	37829	2517,434.37	14051	82491	2886,338.41	249	8032	570,417.12

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	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	5	0	23,260.15	0	0	0.00	0	0	0.00
OUTPATIENT	13	55	10,538.82	5	35	1,018.77	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	0	1,042.00-	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	18	39	7,263.58	10	23	4,516.13	0	0	0.00
CLINIC SERVICES	1	1	103.49	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	2	4	82.31	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	82	89	9,135.36	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	1	1	1,130.24	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	1	0	27.25-	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	1	0	0.00	0	0	0.00	0	0	0.00
* A L L C A T E G O R I E S *	84	184	49,232.15	12	63	6,747.45	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	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	6	188	29,133.91	0	0	0.00	8	47	38,749.15
OUTPATIENT	54	731	11,649.33	8	160	1,201.51	85	1857	32,091.91
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	3	0	63.78	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	26	468.00	1	4	440.20	0	0	0.00
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	106	163	8,190.14	12	12	295.17	140	285	30,263.38
CLINIC SERVICES	15	18	2,042.81	0	0	0.00	31	46	5,270.96
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	13	51	585.40	0	0	0.00	38	120	3,205.45
HABILITATION SERVICES	2	27	1,196.16	3	1	23.82	11	475	24,745.59
REMEDIAL SERVICES	157	3874	96,312.96	1	0	57.00	29	516	13,363.58
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	4	4	705.91	1	1	209.83	2	2	274.85
LOCAL EDUCATION AGENCY	10	4813	33,714.89	0	0	0.00	1	4	55.44

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	318	1218	124,721.53	5	7	77.28	172	427	21,414.47
DRUG CAPITATION	0	0	0.00	0	0	0.00	0	0	0.00
INDIAN HEALTH SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
FAMILY PLANNING SERVICES	2	2	92.83	0	0	0.00	13	14	2,197.59
IOWA PLAN PROGRAM	365	374	45,586.58	12	15	1,009.37	334	385	56,694.57
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	106.81	0	0	0.00	2	3	93.85
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	4	4	8.00	0	0	0.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	45	93	7,479.45	0	0	0.00	0	0	0.00
MEDICAL SUPPLIES	10	750	1,053.46	2	55	347.33	4	4	172.80
OTHER PRACTITIONER	28	610	8,343.21	1	1	21.78	29	37	2,975.74
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	49	50	5,114.95	1	1	149.66	34	46	9,090.89
OPTOMETRIST	23	28	1,371.15	1	3	35.00	14	16	1,259.30

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	29	1,066.74	0	0	0.00	6	19	790.67
PODIATRIC	0	0	0.00	1	2	23.77	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	1	1	3.94
RESIDENTIAL CARE FACILITY	0	0	0.00	2	6	531.92-	0	0	0.00
MR WAIVER SERVICE	0	0	0.00	1	36	774.36	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	327	16227	325,834.71	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	54	810.00	1	13	100.23	0	0	0.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	302	307	134,127.21	2	4	843.83	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 *	344	29644	839,716.14	12	321	5,142.00	324	4304	242,714.13

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	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	28	75-	139,628.98	183	896	704,634.54	0	0	0.00
OUTPATIENT	365	8389	183,673.52	3213	98001	679,636.03	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	1	0	799.49	0	0	0.00
SKILLED NURSING FACILITY	3	46	28,242.90	54	152	11,085.09	0	0	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	56	381	32,636.79	0	0	0.00
INTER CARE MENTAL RETARDA	0	0	0.00	2074	62714	25610,501.47	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	0	0	0.00
HOME HEALTH	19	224	10,094.38	1236	64080	1785,301.73	0	0	0.00
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	592	1600	143,478.81	5022	17767	445,784.51	0	0	0.00
CLINIC SERVICES	148	984	34,867.20	370	466	56,409.63	0	0	0.00
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	91	379	7,309.91	606	922	13,068.70	0	0	0.00
HABILITATION SERVICES	7	57	4,918.07	40	1323	51,705.33	0	0	0.00
REMEDIAL SERVICES	49	1995	32,145.94	128	3489	83,422.80	0	0	0.00
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	32	38	5,153.46	164	198	21,129.70	0	0	0.00
LOCAL EDUCATION AGENCY	1	2	21.66	210	85130	861,848.76	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	1	2	40.00	11	48	681.58	0	0	0.00
PRESCRIBED DRUGS	905	4772	274,208.32	6465	24591	2060,959.64	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	1	3	804.00	0	0	0.00
FAMILY PLANNING SERVICES	5	5	382.61	17	16	648.32	0	0	0.00
IOWA PLAN PROGRAM	1431	1492	152,176.33	10931	11019	733,250.24	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	326.30	37	59	2,805.72	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	3	3	6.00	0	0	0.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	5	8	713.06	596	1215	128,418.66	0	0	0.00
MEDICAL SUPPLIES	143	8679	37,418.99	2494	383308	686,731.86	0	0	0.00
OTHER PRACTITIONER	68	175	8,378.91	876	19060	480,167.85	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	115	156	26,950.67	1467	1716	181,666.00	0	0	0.00
OPTOMETRIST	95	116	9,165.12	699	869	39,588.83	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	65	162	5,099.29	381	776	11,667.17	0	0	0.00
PODIATRIC	20	32	1,947.76	751	1615	23,313.02	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	268	12729	453,065.11	0	0	0.00
PSYCHIATRIC	3	3	347.87	547	808	26,516.90	0	0	0.00
RESIDENTIAL CARE FACILITY	0	0	0.00	21	871	7,958.24	0	0	0.00
MR WAIVER SERVICE	3	104	3,126.79	8858	726981	24470,445.85	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	3	56	1,191.45	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	129	3,002.05	1	3	2,304.00	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	2	285	2,136.32	167	10371	185,132.07	0	0	0.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	6	7	2,207.60	8545	10485	2680,365.96	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 *	1485	29828	1118,360.27	11697	1542062	62534,455.59	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	7515	44704	38121,040.75			
OUTPATIENT	0	0	0.00	70872	1855841	21136,500.77			
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	1	0	600.00-			
ADULT DAY TREATMENT	0	0	0.00	2	0	828.97			
SKILLED NURSING FACILITY	0	0	0.00	3075	13982	2337,982.55			
INTERMEDIATE CARE FACILITY	0	0	0.00	16591	368116	42108,187.75			
INTER CARE MENTAL RETARDA	0	0	0.00	2088	63093	24320,141.65			
NURSING FAC FOR MENTAL ILL	0	0	0.00	34	1040	289,297.85			
HOME HEALTH	0	0	0.00	14994	472482	11660,613.65			
LEAD INSPECTION AGENCY	0	0	0.00	7	8	3,048.96			
PHYSICIAN	0	0	0.00	129915	421829	20746,160.78			
CLINIC SERVICES	0	0	0.00	21810	30548	4037,299.80			
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00			
LAB AND RADIOLOGICAL	0	0	0.00	19454	45300	998,149.78			
HABILITATION SERVICES	0	0	0.00	3077	85523	4353,779.05			
REMEDIAL SERVICES	0	0	0.00	9331	370045	6484,104.67			
REHAB SUPPORT SERVICES	0	0	0.00	6	0	779.79			
AMBULANCE SERVICES	0	0	0.00	3599	4215	495,317.29			
LOCAL EDUCATION AGENCY	0	0	0.00	918	239240	2161,733.62			

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	171	700	10,663.01			
PRESCRIBED DRUGS	0	0	0.00	125473	379153	23938,757.35			
DRUG CAPITATION	0	0	0.00	0	0	0.00			
INDIAN HEALTH SERVICES	0	0	0.00	23	45	12,060.00			
FAMILY PLANNING SERVICES	0	0	0.00	9990	12118	1130,241.85			
IOWA PLAN PROGRAM	0	0	0.00	308700	335018	10020,672.80			
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	9117	10124	1635,702.26			
HMO SERVICES	0	0	0.00	0	0	0.00			
PACE SERVICES	0	0	0.00	46	46	138,732.00			
PATIENT MANAGEMENT	0	0	0.00	155367	155359	310,718.00			
HEALTH INS PREMIUM PAYMENT	0	0	0.00	3973	9405	456,149.58			
MEDICAL SUPPLIES	0	0	0.00	24849	1967061	4858,386.40			
OTHER PRACTITIONER	0	0	0.00	15396	86239	2444,463.89			
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	32382	40577	5824,229.68			
OPTOMETRIST	0	0	0.00	14770	18711	1072,244.28			

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	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	9932	23103	559,309.42			
PODIATRIC	0	0	0.00	5047	8478	268,653.64			
PHYSICAL DISABILITIES SVCS	0	0	0.00	738	28758	371,014.84			
BRAIN INJ WAIVER SERVICES	0	0	0.00	1056	55353	1779,121.64			
PSYCHIATRIC	0	0	0.00	4048	7240	229,498.40			
RESIDENTIAL CARE FACILITY	0	0	0.00	1638	59497	465,613.98			
MR WAIVER SERVICE	0	0	0.00	10137	830595	28003,434.71			
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	553	28776	557,539.96			
AIDS WAIVER SERVICES	0	0	0.00	49	4340	46,016.64			
ELDERLY WAIVER SERVICES	0	0	0.00	9987	493203	6788,731.74			
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	2250	128750	2127,928.24			
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00			
MEP SERVICES	0	0	0.00	10743	13052	3419,453.87			
UNASSIGNED	0	0	0.00	30	0	606,609.84-			
* A L L C A T E G O R I E S *	0	0	0.00	379906	8711667	275117,096.02	0	0	0.00

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