

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

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	2	6	10,548.65	0	0	0.00	598	2155	574,333.45
OUTPATIENT	24	316	9,263.20	0	0	0.00	3809	61635	573,088.30
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	199	3174	223,803.23
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	4486	131967	11267,367.73
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	215	48,597.63
HOME HEALTH	0	0	0.00	0	0	0.00	2421	44976	1807,751.60
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	44	81	6,909.98	0	0	0.00	6284	39863	520,560.00
CLINIC SERVICES	1	2	304.10	0	0	0.00	483	504	41,648.39
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	5	28	597.68	0	0	0.00	462	201	2,429.64
HABILITATION SERVICES	0	0	0.00	0	0	0.00	44	1707	110,047.69
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	299	364	34,384.80
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

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	28	60	1,115.18	0	0	0.00	3311	6346	74,236.41
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	78	89	2,186.19	0	0	0.00	1	1	53.65
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
PATIENT MANAGEMENT	83	83	166.00	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	104	96.02	0	0	0.00	2638	223817	331,959.78
OTHER PRACTITIONER	1	1	58.59	0	0	0.00	335	1078	22,116.33
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	6	8	1,093.63	0	0	0.00	414	521	74,676.63
OPTOMETRIST	3	3	153.48	0	0	0.00	619	943	29,844.40
CHIROPRACTIC	0	0	0.00	0	0	0.00	298	841	9,986.80

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
PODIATRIC	0	0	0.00	0	0	0.00	745	1168	22,746.23
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	69	3,044.22
PSYCHIATRIC	0	0	0.00	0	0	0.00	136	256	9,512.90
RESIDENTIAL CARE FACILITY	0	0	0.00	0	0	0.00	348	10835	70,118.68
MR WAIVER SERVICE	0	0	0.00	0	0	0.00	77	4713	220,392.41
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	3173	139152	2034,371.82
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	123	30,195.50
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 *	118	781	32,492.70	0	0	0.00	13974	676624	18137,268.22

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	1916	11493	8936,806.43	765	2599	3341,737.04
OUTPATIENT	0	0	0.00	16222	338472	6123,731.68	9630	133045	3909,460.53
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	0	0	0.00	189	4494	1879,651.71	0	0	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	570	16338	1718,511.92	0	0	0.00
INTER CARE MENTAL RETARDA	0	0	0.00	12	345	134,493.40	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	1	29	6,214.99
HOME HEALTH	0	0	0.00	3880	84721	3145,747.05	68	738	37,527.58
LEAD INSPECTION AGENCY	0	0	0.00	1	0	377.35	0	0	0.00
PHYSICIAN	0	0	0.00	24992	124022	4896,232.90	16836	36208	3457,843.24
CLINIC SERVICES	0	0	0.00	3268	4680	629,844.30	2980	4514	585,663.78
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	0	0	0.00	2314	6065	91,502.91	3170	8249	228,591.20
HABILITATION SERVICES	0	0	0.00	2215	74173	3383,338.76	21	546	16,805.82
REMEDIAL SERVICES	0	0	0.00	479	19574	285,145.84	112	3589	52,557.84
REHAB SUPPORT SERVICES	0	0	0.00	37	640	30,953.03	1	0	0.00
AMBULANCE SERVICES	0	0	0.00	1093	1305	157,092.94	338	366	51,814.64
LOCAL EDUCATION AGENCY	0	0	0.00	534	159134	924,666.65	7	1055	5,444.69

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	92	584	10,925.02	1	1	50.00
PRESCRIBED DRUGS	0	0	0.00	25012	119829	9290,669.54	21796	67405	3417,409.25
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	114	135	9,002.89	7066	8984	756,745.28
IOWA PLAN PROGRAM	0	0	0.00	47424	48530	3342,982.41	36339	40426	1177,946.00
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	375	454	19,230.96	191	208	8,521.63
HMO SERVICES	0	0	0.00	0	0	0.00	935	978	233,804.88
PATIENT MANAGEMENT	0	0	0.00	3	3	6.00	22221	22211	44,422.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	640	1373	149,502.05	230	536	17,442.44
MEDICAL SUPPLIES	0	0	0.00	8039	735810	1879,792.55	934	30577	223,060.66
OTHER PRACTITIONER	0	0	0.00	2897	21798	406,677.38	1492	3284	204,167.52
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	3673	4730	681,859.30	3044	4086	678,624.77
OPTOMETRIST	0	0	0.00	2477	3337	179,373.61	1804	2208	164,023.07
CHIROPRACTIC	0	0	0.00	1983	5435	106,819.90	1876	4826	170,429.04

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	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
PODIATRIC	0	0	0.00	1306	2394	85,368.62	210	314	39,369.15
PHYSICAL DISABILITIES SVCS	0	0	0.00	418	18191	237,205.38	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	305	18854	480,428.48	0	0	0.00
PSYCHIATRIC	0	0	0.00	2401	4529	159,800.58	18	50	3,220.45
RESIDENTIAL CARE FACILITY	0	0	0.00	1464	49643	355,828.98	0	0	0.00
MR WAIVER SERVICE	0	0	0.00	984	61808	2729,926.60	1	10	332.20
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	35	1287	40,286.16	4	224	4,363.13
AIDS WAIVER SERVICES	0	0	0.00	13	1112	12,830.35	0	0	0.00
ELDERLY WAIVER SERVICES	0	0	0.00	32	1424	22,031.80	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	1827	101514	1587,101.38	1	43	430.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	0	0	0.00	1352	1632	381,668.50	8	12	3,162.72
UNASSIGNED	0	0	0.00	8	0	0.00	8	0	0.00
* A L L C A T E G O R I E S *	0	0	0.00	51593	2049862	54507,415.31	49118	377321	18841,185.54

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	455	2680	2601,635.50	400	8319	2146,910.31	2172	11473	13801,318.81
OUTPATIENT	8234	53135	1965,427.31	2085	20178	611,181.89	12808	111268	6159,569.45
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	14	7,191.24	4	50	4,375.97-
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	5	91	7,505.33-
INTER CARE MENTAL RETARDA	0	0	0.00	0	0	0.00	2	0	101,554.47-
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	0	0	0.00
HOME HEALTH	559	2511	93,335.92	95	373	23,004.91	923	3119	503,447.34
LEAD INSPECTION AGENCY	1	0	377.35	0	0	0.00	1	0	377.35
PHYSICIAN	20576	38398	2627,378.42	4224	8258	647,738.45	30758	62105	5468,148.80
CLINIC SERVICES	4125	5657	754,671.50	905	1377	176,515.72	7130	11255	2031,356.14
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	1514	3468	58,652.96	544	1517	39,599.07	3184	9069	205,839.52
HABILITATION SERVICES	0	0	0.00	20	529	28,222.80	4	34	2,469.84
REMEDIAL SERVICES	1328	43982	708,296.72	477	16923	273,481.21	1037	34660	586,152.38
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	218	226	34,241.27	79	95	11,343.25	306	355	56,473.99
LOCAL EDUCATION AGENCY	91	16092	78,160.98	36	6998	33,877.85	118	22728	124,188.71

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

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	118	509	11,212.39	26	70	1,887.88	115	565	12,861.40
PRESCRIBED DRUGS	20994	39008	2416,263.15	4925	11875	770,127.05	28774	53078	2966,573.07
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	1139	1420	112,680.48	178	207	16,940.28	347	415	29,247.26
IOWA PLAN PROGRAM	59731	65190	606,722.86	11834	13179	254,306.75	76752	86378	999,419.78
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	4910	5599	445,101.40	1092	1241	80,071.18	7621	8624	815,691.91
HMO SERVICES	1583	1654	193,383.97	295	296	38,212.28	1541	1616	254,181.76
PATIENT MANAGEMENT	38514	38501	77,000.00	6989	6989	13,978.00	51239	51230	102,460.00
HEALTH INS PREMIUM PAYMENT	337	814	20,762.00	44	115	3,803.88	2241	6146	147,007.58
MEDICAL SUPPLIES	1056	13909	154,608.43	182	5847	46,569.96	1302	20994	191,841.26
OTHER PRACTITIONER	2485	7846	220,749.10	529	1737	68,286.26	3619	11352	401,857.37
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	4524	5399	728,359.56	1031	1284	207,042.56	6192	7407	988,020.09
OPTOMETRIST	1543	1782	115,215.85	422	500	34,747.16	2159	2531	161,030.40
CHIROPRACTIC	906	1898	61,307.47	237	582	20,130.00	1554	3427	109,165.12

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	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
PODIATRIC	65	84	9,890.79	23	33	5,361.82	113	142	13,933.15
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	6	50.94
PSYCHIATRIC	4	10	477.63	18	35	2,677.65	30	85	3,914.61
RESIDENTIAL CARE FACILITY	0	0	0.00	1	30	527.23	0	0	0.00
MR WAIVER SERVICE	0	0	0.00	0	0	0.00	3	7	84,275.20
CHILDRENS MENTAL HEALTH SVC	29	1597	31,703.92	64	3147	62,008.99	59	2365	52,568.09
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	7	187	2,380.45
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	38	39	17,256.24	79	94	39,627.61	72	79	108,483.49
UNASSIGNED	6	0	0.00	3	0	0.00	11	0	210,561.03
* A L L C A T E G O R I E S *	67661	351408	14144,873.17	13181	111842	5665,373.24	86666	522841	35674,689.20

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	53	545	214,588.98	858	3750	1083,639.10	48	265	206,472.26
OUTPATIENT	1026	10303	264,508.14	5176	89213	744,994.10	473	6807	237,086.30
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	29	8,626.73	432	6429	39,282.32	3	2-	18,797.01-
INTERMEDIATE CARE FACILITY	0	0	0.00	7654	221791	22721,264.04	1	19	1,705.44
INTER CARE MENTAL RETARDA	9	266	92,678.69	3	19	3,299.51	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	26	727	205,324.44	0	0	0.00
HOME HEALTH	96	7880	217,056.17	4205	88484	3623,693.27	44	918	34,225.76
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	2587	4346	263,536.33	7628	43263	677,064.19	837	2570	166,120.46
CLINIC SERVICES	559	800	102,849.11	455	477	45,437.81	112	160	24,821.13
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	298	940	15,894.47	637	375	4,640.96	119	279	7,140.35
HABILITATION SERVICES	8	1230	32,986.49	21	535	25,330.76	41	1995	102,727.61
REMEDIAL SERVICES	2086	165382	1878,410.13	2	34	681.62	2	60	541.20
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	38	42	6,069.06	562	701	71,537.84	24	38	5,564.58
LOCAL EDUCATION AGENCY	115	34819	190,413.15	21	5683	50,897.16	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 NEEDED 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	30	120	2,890.03	5	23	332.04	0	0	0.00
PRESCRIBED DRUGS	5549	15508	1271,010.11	10632	25525	443,005.71	923	3727	185,520.36
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	33	43	3,121.73	0	0	0.00	37	44	3,256.39
IOWA PLAN PROGRAM	9964	10419	968,971.61	2105	2163	134,429.54	1311	1484	51,375.22
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	281	319	18,308.22	9	11	267.36	18	20	1,525.75
HMO SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PATIENT MANAGEMENT	72	72	144.00	0	0	0.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	160	334	14,003.03	35	64	8,683.20	5	9	744.15
MEDICAL SUPPLIES	202	23620	82,568.33	4541	451956	657,409.54	114	7059	28,722.49
OTHER PRACTITIONER	588	3319	72,492.54	509	3371	69,664.57	79	189	12,206.22
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	1090	1315	176,492.43	761	924	129,095.23	174	223	30,853.95
OPTOMETRIST	440	496	33,041.52	725	1039	34,617.90	98	135	7,018.82
CHIROPRACTIC	183	407	13,169.00	208	525	5,754.60	88	219	7,462.38

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	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
PODIATRIC	25	31	3,380.50	1247	2054	40,301.95	42	49	3,585.56
PHYSICAL DISABILITIES SVCS	0	0	0.00	182	8035	92,627.90	0	0	0.00
BRAIN INJ WAIVER SERVICES	38	1647	43,195.51	425	18783	558,957.53	0	0	0.00
PSYCHIATRIC	17	49	3,365.22	245	435	16,190.31	31	65	2,590.41
RESIDENTIAL CARE FACILITY	0	0	0.00	10	83	827.58	0	0	0.00
MR WAIVER SERVICE	192	7065	207,122.81	7	93	4,288.26	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	33	2999	29,131.83	0	0	0.00
ELDERLY WAIVER SERVICES	0	0	0.00	6449	302797	3784,251.44	1	1	70.00
ILL & HANDICAPPED WAIVER SVCS	35	2750	51,360.90	4	112	1,031.12	0	0	0.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	209	253	57,831.01	130	150	35,746.04	1	3	645.51
UNASSIGNED	0	0	0.00	2	0	0.00	0	0	0.00
* A L L C A T E G O R I E S *	10194	294349	6310,085.95	15416	1282623	35343,700.77	1623	26336	1103,185.29

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	189	873	978,326.61	80	605	397,548.80	8	74	72,711.76
OUTPATIENT	474	11375	420,636.93	1259	10305	322,849.15	102	3716	137,060.36
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	3	26	0.00	0	0	0.00	0	0	0.00
INTERMEDIATE CARE FACILITY	2	22	1,974.72	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	24	231	17,804.16	66	238	10,625.30	5	47	10,927.16
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	767	3919	282,529.88	3430	5855	389,160.74	157	659	186,499.60
CLINIC SERVICES	72	147	20,410.69	801	1147	135,809.01	17	29	4,098.53
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	36	139	1,851.61	217	584	12,736.20	29	116	2,055.47
HABILITATION SERVICES	10	327	16,552.02	0	0	0.00	0	0	0.00
REMEDIAL SERVICES	2	60	108.24	233	8315	134,673.09	0	0	0.00
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	58	66	9,684.68	25	25	3,659.21	1	2	528.50
LOCAL EDUCATION AGENCY	0	0	0.00	31	6869	36,818.05	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	1	2	21.74	0	0	0.00
PRESCRIBED DRUGS	263	1168	47,946.27	4053	7457	493,746.78	181	832	49,759.38
DRUG CAPITATION	0	0	0.00	0	0	0.00	0	0	0.00
INDIAN HEALTH SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
FAMILY PLANNING SERVICES	7	10	544.98	60	65	5,783.47	2	3	184.83
IOWA PLAN PROGRAM	0	0	0.00	11810	12685	126,693.02	210	210	20,765.55
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	0.00	662	712	50,432.13	0	0	0.00
HMO SERVICES	0	0	0.00	246	250	26,585.01	0	0	0.00
PATIENT MANAGEMENT	0	0	0.00	8551	8548	17,096.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	48	126	4,672.29	0	0	0.00
MEDICAL SUPPLIES	72	2999	17,784.78	154	5694	26,490.95	19	554	5,073.44
OTHER PRACTITIONER	76	139	9,024.32	457	1505	44,474.66	9	19	1,327.69
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	58	83	18,213.41	1340	1626	236,750.50	19	22	3,663.07
OPTOMETRIST	26	42	2,293.76	444	504	32,592.26	8	10	816.08
CHIROPRACTIC	19	44	1,495.46	297	582	19,649.16	13	26	811.89

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

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
PODIATRIC	15	26	1,657.00	17	25	3,434.16	4	4	267.80
PHYSICAL DISABILITIES SVCS	0	0	0.00	0	0	0.00	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	1	21	577.80	0	0	0.00
PSYCHIATRIC	46	153	8,543.34	2	16	429.15	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	1	26	482.00	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	3	52	1,770.10	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	590.74	5	5	1,477.12	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 *	905	21854	1857,973.60	11429	73844	2537,037.85	209	6323	496,551.11

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	3	14	32,663.09	0	0	0.00	0	0	0.00
OUTPATIENT	3	0	1,514.51	1	1	128.99	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	15	4,177.83	1	1	3.27	0	0	0.00
CLINIC SERVICES	0	0	0.00	2	2	259.56	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	3	10	154.78	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	2	4	32.03	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
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
CHIROPRACTIC	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
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 *	4	33	38,387.46	6	14	546.60	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	12	243	42,709.25	2	0	992.00	4	14	16,938.32
OUTPATIENT	56	587	11,435.82	7	127	410.02	51	835	21,057.08
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	3	6	390.81	2	10	33.20	0	0	0.00
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	89	154	7,291.60	11	17	557.83	82	193	16,311.01
CLINIC SERVICES	20	30	3,551.47	1	0	18.38	8	8	777.81
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	6	18	206.77	0	0	0.00	12	36	1,281.88
HABILITATION SERVICES	0	0	0.00	2	48	1,276.80	9	102	4,459.26
REMEDIAL SERVICES	79	2771	41,603.76	0	0	0.00	14	235	4,516.84
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	2	2	120.32	0	0	0.00	4	4	320.55
LOCAL EDUCATION AGENCY	11	3846	19,209.82	0	0	0.00	0	0	0.00

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	OTHER ICARE PMIC MHI 300%			OTHER ICARE MHI 300%			STATE ONLY		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
EARLY ACCESS SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PRESCRIBED DRUGS	275	1138	103,051.48	8	25	639.18	99	277	20,641.49
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	6	7	682.79
IOWA PLAN PROGRAM	299	310	28,515.04	17	22	1,275.42	226	251	33,689.46
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	15	17	452.99	0	0	0.00	7	8	321.10
HMO SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PATIENT MANAGEMENT	2	2	4.00	0	0	0.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	36	68	6,826.17	0	0	0.00	0	0	0.00
MEDICAL SUPPLIES	12	1380	1,455.58	1	4	33.89	4	5	230.54
OTHER PRACTITIONER	30	152	4,549.16	1	1	20.00	10	16	1,296.31
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	22	28	5,994.76	0	0	0.00	11	12	1,140.27
OPTOMETRIST	12	13	729.46	0	0	0.00	10	14	919.43
CHIROPRACTIC	11	26	874.38	0	0	0.00	6	11	380.87

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 PHIC 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
PODIATRIC	1	1	44.61	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	4	6	139.26	0	0	0.00
RESIDENTIAL CARE FACILITY	0	0	0.00	3	49	48.55	0	0	0.00
MR WAIVER SERVICE	0	0	0.00	0	0	0.00	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	263	11514	286,118.59	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	283	301	139,061.24	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 *	254	22607	704,197.08	11	309	5,444.53	215	2028	124,965.01

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

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	25	187	151,277.21	201	780	586,046.14	0	0	0.00
OUTPATIENT	334	5870	172,226.04	2742	40526	635,228.73	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	8	173	40,579.14	0	0	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	13	182	16,355.87	0	0	0.00
INTER CARE MENTAL RETARDA	0	0	0.00	2127	60975	21912,656.18	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	0	0	0.00
HOME HEALTH	23	366	23,024.62	1144	48494	1447,389.43	0	0	0.00
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	580	1453	121,397.88	4851	16831	501,453.53	0	0	0.00
CLINIC SERVICES	133	186	23,602.92	377	495	58,362.40	0	0	0.00
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	56	199	3,850.80	376	860	10,638.25	0	0	0.00
HABILITATION SERVICES	5	265	4,783.60	13	241	12,897.74	0	0	0.00
REMEDIAL SERVICES	42	2575	31,726.43	99	2500	44,201.19	0	0	0.00
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	14	15	2,020.21	148	187	19,522.93	0	0	0.00
LOCAL EDUCATION AGENCY	1	544	1,678.92	535	210849	1144,485.42	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	37	250	3,975.71	0	0	0.00
PRESCRIBED DRUGS	918	4424	256,353.63	6270	23467	1705,020.50	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	11	12	978.50	16	19	1,114.45	0	0	0.00
IOWA PLAN PROGRAM	1345	1402	133,177.00	10462	10545	655,966.77	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	5	5	262.09	82	123	5,713.82	0	0	0.00
HMO 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	2	4	497.00	561	1207	139,516.34	0	0	0.00
MEDICAL SUPPLIES	110	6273	31,056.32	2060	347608	556,101.73	0	0	0.00
OTHER PRACTITIONER	61	211	9,391.02	1201	19309	311,690.76	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	85	119	23,692.08	1269	1448	125,318.89	0	0	0.00
OPTOMETRIST	86	99	7,386.32	556	704	32,277.99	0	0	0.00
CHIROPRACTIC	56	136	4,700.03	278	681	13,847.59	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	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
PODIATRIC	28	48	4,502.97	748	1133	32,693.91	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	271	14189	359,430.68	0	0	0.00
PSYCHIATRIC	6	10	257.95	508	781	30,355.91	0	0	0.00
RESIDENTIAL CARE FACILITY	0	0	0.00	23	645	1,757.53-	0	0	0.00
MR WAIVER SERVICE	3	90	2,172.57	8188	520410	20902,076.28	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	4	143	2,949.40	1	64	783.36	0	0	0.00
AIDS WAIVER SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
ELDERLY WAIVER SERVICES	4	182	2,439.90	1	54	5,431.54	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	2	59	1,206.67	157	7365	139,081.33	0	0	0.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	6	7	2,117.75	8127	9668	2270,082.80	0	0	0.00
UNASSIGNED	0	0	0.00	2	0	0.00	0	0	0.00
* A L L C A T E G O R I E S *	1393	24884	1018,729.83	11211	1342763	53718,539.78	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	7749	46075	35197,203.71			
OUTPATIENT	0	0	0.00	63868	897714	22320,858.53			
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	827	14387	2175,961.39			
INTERMEDIATE CARE FACILITY	0	0	0.00	12655	370410	35719,674.39			
INTER CARE MENTAL RETARDA	0	0	0.00	2151	61605	22041,573.31			
NURSING FAC FOR MENTAL ILL	0	0	0.00	32	971	260,137.06			
HOME HEALTH	0	0	0.00	13424	283112	10995,984.28			
LEAD INSPECTION AGENCY	0	0	0.00	3	0	1,132.05			
PHYSICIAN	0	0	0.00	122159	388211	20240,915.94			
CLINIC SERVICES	0	0	0.00	21196	31470	4640,002.75			
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00			
LAB AND RADIOLOGICAL	0	0	0.00	12874	32153	687,664.52			
HABILITATION SERVICES	0	0	0.00	2395	81732	3741,899.19			
REMEDIAL SERVICES	0	0	0.00	5866	300660	4042,096.49			
REHAB SUPPORT SERVICES	0	0	0.00	38	640	30,953.03			
AMBULANCE SERVICES	0	0	0.00	3189	3793	464,378.77			
LOCAL EDUCATION AGENCY	0	0	0.00	1478	468617	2609,841.40			

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

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	417	2124	44,156.21			
PRESCRIBED DRUGS	0	0	0.00	131636	381153	23513,120.57			
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	8989	11364	940,283.33			
IOWA PLAN PROGRAM	0	0	0.00	269150	293284	8538,476.27			
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	15190	17344	1445,900.54			
HMO SERVICES	0	0	0.00	4593	4794	746,167.90			
PATIENT MANAGEMENT	0	0	0.00	127674	127639	255,276.00			
HEALTH INS PREMIUM PAYMENT	0	0	0.00	4339	10796	513,460.13			
MEDICAL SUPPLIES	0	0	0.00	21003	1878210	4234,856.25			
OTHER PRACTITIONER	0	0	0.00	14204	75327	1860,049.80			
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	23598	29235	4110,891.13			
OPTOMETRIST	0	0	0.00	11402	14360	836,081.51			
CHIROPRACTIC	0	0	0.00	7937	19666	545,983.69			

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
PODIATRIC	0	0	0.00	4577	7506	266,538.22			
PHYSICAL DISABILITIES SVCS	0	0	0.00	596	26226	329,833.28			
BRAIN INJ WAIVER SERVICES	0	0	0.00	1018	53569	1445,583.28			
PSYCHIATRIC	0	0	0.00	3450	6480	241,475.37			
RESIDENTIAL CARE FACILITY	0	0	0.00	1833	61285	425,593.49			
MR WAIVER SERVICE	0	0	0.00	9405	594222	23982,517.93			
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	460	20393	482,551.74			
AIDS WAIVER SERVICES	0	0	0.00	45	4111	41,962.18			
ELDERLY WAIVER SERVICES	0	0	0.00	9395	443797	5850,976.95			
SICK & HANDICAPPED WAIVER SVCS	0	0	0.00	2022	111843	1780,211.40			
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00			
MEP SERVICES	0	0	0.00	10349	12368	2870,979.29			
UNASSIGNED	0	0	0.00	42	0	210,561.03-			
* A L L C A T E G O R I E S *	0	0	0.00	335181	7188646	250262,642.24	0	0	0.00

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