

TITLE XIX REPORT OF EXPENDITURES
(BY CATEGORY OF SERVICE)
(FISCAL YTD TOTALS AS OF 02/29/08)

CATEGORY OF SERVICE	RECIPIENTS SERVED	NUMBER OF CLAIMS	UNITS OF SERVICE	TOTAL PAYMENT
INPATIENT	38,180	52,267	308,190	\$205,684,510.85
OUTPATIENT	188,914	633,938	5,550,666	\$121,972,891.96
CHILD PART HOSP	0	0	0	\$0.00
CHILD DAY TREATMENT	0	0	0	\$0.00
ADULT PART HOSP	1	0	0	\$63.14
ADULT DAY TREATMENT	0	0	0	\$0.00
SKILLED NURSING FACILITY	3,091	5,888	74,657	\$16,013,454.13
INTERMEDIATE CARE FACILITY	17,045	105,627	3,051,201	\$294,766,469.95
INTER CARE MENTAL RETARDA	2,254	17,390	516,965	\$174,967,761.51
NURSING FAC FOR MENTAL ILL	48	294	8,709	\$2,376,292.14
HOME HEALTH	27,924	117,409	1,956,699	\$71,221,486.91
LEAD INSPECTION AGENCY	54	57	57	\$21,635.48
PHYSICIAN	279,894	1,823,004	2,621,526	\$125,196,503.41
CLINIC SERVICES	66,858	191,054	177,911	\$22,592,596.92
MEP CASE MANAGEMENT	0	0	0	\$0.00
LAB AND RADIOLOGICAL	53,117	109,763	193,501	\$3,364,419.61
HABILITATION SERVICES	2,764	21,853	409,262	\$18,904,097.69
REMEDIAL SERVICES	9,182	77,928	2,229,832	\$26,467,697.79
REHAB SUPPORT SERVICES	2,665	3,902	63,633	\$3,333,435.92
AMBULANCE SERVICES	13,092	20,492	20,744	\$2,431,337.92
LOCAL EDUCATION AGENCY	3,120	19,126	1,937,998	\$10,922,014.79
EARLY ACCESS SERVICES	1,262	8,434	14,357	\$313,493.70
PRESCRIBED DRUGS	257,253	2,853,332	2,571,776	\$144,846,288.07
DRUG CAPITATION	4	0	0	\$31.37
INDIAN HEALTH SERVICES	0	0	0	\$0.00
FAMILY PLANNING SERVICES	26,341	68,936	69,471	\$5,199,191.31
IOWA PLAN PROGRAM	393,682	2,303,895	2,303,874	\$68,518,318.76
MANAGED SUBSTANCE ABUSE	0	0	0	\$0.00
MENTAL HEALTH ACCESS PLAN	0	0	0	\$0.00
EPSDT SCREENING	72,908	118,918	118,763	\$9,656,508.45
HMO SERVICES	6,593	37,667	37,667	\$5,877,515.95
PATIENT MANAGEMENT	172,551	996,878	996,834	\$1,993,668.00
HEALTH INS PREMIUM PAYMENT	6,371	95,022	95,022	\$4,546,104.59
MEDICAL SUPPLIES	50,621	275,881	13,486,637	\$29,311,553.40
OTHER PRACTITIONER	48,318	214,861	386,332	\$11,001,691.90
FAMILY CENTERED PROGRAM	50	78	541	\$17,641.76
FAMILY PRESERVATION	0	0	0	\$0.00
TREATMENT FOSTER FAMILY CARE	8	10	35	\$1,416.37
GROUP TREATMENT THERAPY	13	16	186	\$6,946.98
DENTAL	115,198	211,657	214,117	\$30,681,216.53
OPTOMETRIST	63,852	95,166	100,733	\$5,587,516.97
CHIROPRACTIC	23,201	107,833	134,838	\$3,430,617.62
PODIATRIC	15,488	36,525	48,480	\$1,490,645.22
PHYSICAL DISABILITIES SVCS	771	6,484	194,553	\$2,361,181.23
BRAIN INJ WAIVER SERVICES	1,099	15,926	393,509	\$10,907,549.49
PSYCHIATRIC	8,880	38,968	45,872	\$1,463,442.45
RESIDENTIAL CARE FACILITY	2,439	15,704	440,296	\$3,425,761.21
MR WAIVER SERVICE	10,428	137,002	5,067,516	\$188,496,933.09
CHILDRENS MENTAL HEALTH SVC	571	3,899	112,484	\$2,438,275.04
AIDS WAIVER SERVICES	53	630	31,198	\$318,854.77

TITLE XIX REPORT OF EXPENDITURES
(BY CATEGORY OF SERVICE)
(FISCAL YTD TOTALS AS OF 02/29/08)

CATEGORY OF SERVICE	RECIPIENTS SERVED	NUMBER OF CLAIMS	UNITS OF SERVICE	TOTAL PAYMENT
ELDERLY WAIVER SERVICES	11,127	207,825	3,305,775	\$42,406,119.32
ILL & HANDICAPPED WAIVER SVCS	2,615	25,509	839,008	\$13,050,769.69
COUNTY OFFICE REIMBURSEMENT	0	0	0	\$0.00
MEP SERVICES	11,625	83,684	88,681	\$21,312,245.57
UNASSIGNED	271	3	13-	\$835,573.33
* ALL CATEGORIES *	462,585	11,160,735	50,220,093	\$1,709,733,679.52

*** END OF REPORT ***