

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	0	0	0.00	0	0	0.00	543	1652	251,561.28
OUTPATIENT	22	162	5,516.19	0	0	0.00	4441	79127	511,330.84
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	373	1988	91,947.65
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	5198	152868	18377,823.32
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	3	140	47,585.20
HOME HEALTH	0	0	0.00	0	0	0.00	2599	76877	1886,923.69
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	58	103	9,916.79	0	0	0.00	6573	42225	429,490.95
CLINIC SERVICES	1	1	138.42	0	0	0.00	672	212	50,121.68
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	10	49	1,071.77	0	0	0.00	464	185	2,210.18
HABILITATION SERVICES	0	0	0.00	0	0	0.00	35	1104	60,288.80
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	3	19-	940.08
AMBULANCE SERVICES	0	0	0.00	0	0	0.00	308	363	30,332.59
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	24	64	1,156.26	0	0	0.00	3488	8263	68,809.92
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	157	112	2,848.56	0	0	0.00	8	4	301.57
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	0	0	0.00	0	0	0.00	0	0	0.00
HMO SERVICES	2	2	195.14	0	0	0.00	0	0	0.00
PATIENT MANAGEMENT	85	85	170.00	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	3	181.98	0	0	0.00	2692	218425	309,003.77
OTHER PRACTITIONER	0	0	0.00	0	0	0.00	285	1019	22,154.82
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	23	29	2,794.27	0	0	0.00	533	679	104,854.30
OPTOMETRIST	1	2	94.14	0	0	0.00	723	1091	24,080.31
CHIROPRACTIC	0	0	0.00	0	0	0.00	390	1048	6,793.85

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	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	685	1166	11,241.12
PHYSICAL DISABILITIES SVCS	0	0	0.00	0	0	0.00	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	0	0	0.00	1	70	3,113.60
PSYCHIATRIC	0	0	0.00	0	0	0.00	140	202	6,084.88
RESIDENTIAL CARE FACILITY	0	0	0.00	0	0	0.00	325	10513	71,584.89
MR WAIVER SERVICE	0	0	0.00	0	0	0.00	86	5162	243,833.68
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	3044	140365	2078,733.19
SILL & 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	108	151	36,356.73
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 *	178	612	24,083.52	0	0	0.00	14771	744880	24727,502.89

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	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	1770	10178	7324,865.41	753	2871	3126,374.07
OUTPATIENT	0	0	0.00	16114	311576	5353,760.81	8859	107066	3533,248.18
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	279	5290	2658,621.77	2	97	61,652.69
INTERMEDIATE CARE FACILITY	0	0	0.00	703	18841	2671,957.05	1	0	382.55
INTER CARE MENTAL RETARDA	0	0	0.00	14	327	103,020.96	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	1	23	4,929.13	0	0	0.00
HOME HEALTH	0	0	0.00	3875	97115	3319,084.14	87	437	33,984.89
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	0	0	0.00	24504	125107	4055,507.95	15620	32278	3076,831.64
CLINIC SERVICES	0	0	0.00	3238	4327	679,877.51	2376	3622	449,509.34
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	0	0	0.00	2135	5750	80,117.28	2550	6277	139,106.94
HABILITATION SERVICES	0	0	0.00	2095	59928	2762,547.71	21	522	13,567.38
REMEDIAL SERVICES	0	0	0.00	414	19789	269,517.43	91	3021	42,662.82
REHAB SUPPORT SERVICES	0	0	0.00	138	2962	103,222.15	0	0	0.00
AMBULANCE SERVICES	0	0	0.00	700	842	95,524.70	115	102	14,849.06
LOCAL EDUCATION AGENCY	0	0	0.00	346	94690	542,801.21	7	2417	10,821.70

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	97	815	14,435.21	0	0	0.00
PRESCRIBED DRUGS	0	0	0.00	24453	132726	8391,262.09	20128	64214	3015,651.27
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	134	165	9,904.53	6822	8309	622,039.00
IOWA PLAN PROGRAM	0	0	0.00	54346	48001	3329,649.81	55485	39496	1236,783.54
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	367	463	19,019.35	155	183	9,203.24
HMO SERVICES	0	0	0.00	0	0	0.00	889	927	221,555.62
PATIENT MANAGEMENT	0	0	0.00	2	2	4.00	21871	21869	43,738.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	633	1401	158,053.88	247	604	20,937.09
MEDICAL SUPPLIES	0	0	0.00	8469	817101	2047,068.31	947	36190	227,281.65
OTHER PRACTITIONER	0	0	0.00	2535	18388	404,559.79	1321	2968	172,263.55
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	4113	5527	835,568.68	3188	4551	784,875.14
OPTOMETRIST	0	0	0.00	2507	3429	162,347.46	1495	1755	127,249.85
CHIROPRACTIC	0	0	0.00	2201	6254	102,015.55	1808	4916	170,362.09

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	1131	1893	56,991.87	194	285	30,755.17
PHYSICAL DISABILITIES SVCS	0	0	0.00	408	18901	229,304.82	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	312	18680	526,695.10	2	59	1,169.00
PSYCHIATRIC	0	0	0.00	2361	4574	137,055.45	13	13	1,278.04
RESIDENTIAL CARE FACILITY	0	0	0.00	1399	42860	319,322.54	0	0	0.00
MR WAIVER SERVICE	0	0	0.00	1021	67118	2758,422.16	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	43	1798	45,552.52	4	104	3,187.39
AIDS WAIVER SERVICES	0	0	0.00	11	962	11,255.49	0	0	0.00
ELDERLY WAIVER SERVICES	0	0	0.00	29	1100	19,478.27	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	1799	99639	1540,729.50	1	54	810.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	0	0	0.00	1275	1821	435,521.30	3	4	1,885.52
UNASSIGNED	0	0	0.00	16	0	0.00	4	0	0.00
* A L L C A T E G O R I E S *	0	0	0.00	56293	2050363	51579,572.89	64650	345211	17194,016.42

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
INPATIENT	387	2241	2487,217.03	403	9537	2342,092.32	2094	10965	11340,186.20
OUTPATIENT	7518	46925	1773,069.35	1964	18349	579,575.12	12124	99427	2768,776.25
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	24	11,336.13	1	0	262.10	10	88	47,096.01
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	8	104	34,784.81
INTER CARE MENTAL RETARDA	0	0	0.00	1	54	16,558.02	1	0	2024,682.00-
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	0	0	0.00
HOME HEALTH	529	2639	128,842.94	95	275	14,056.03	819	3820	234,988.50-
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	19891	35969	2309,981.03	4124	7833	609,246.73	29796	57768	4874,945.43
CLINIC SERVICES	3332	4577	563,038.22	794	1130	136,386.58	5987	8885	1297,175.18
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	1735	3256	46,195.87	452	1181	21,853.55	3289	8142	152,462.33
HABILITATION SERVICES	0	0	0.00	19	630	28,227.29	3	55	3,046.30
REMEDIAL SERVICES	1108	42319	638,483.58	450	18086	277,975.32	927	33014	517,257.59
REHAB SUPPORT SERVICES	0	0	0.00	1	5	172.95	1	0	10,729.69-
AMBULANCE SERVICES	62	167	7,872.32	33	43	5,119.60	109	106	17,686.87
LOCAL EDUCATION AGENCY	63	11122	61,825.84	20	4473	21,697.16	76	16946	80,624.52

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	99	460	10,568.00	17	96	2,339.85	94	461	10,386.00
PRESCRIBED DRUGS	18856	35813	2006,351.56	4545	11772	707,544.72	26189	49899	2614,860.35
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	1151	1447	107,484.61	193	222	17,673.84	321	385	30,281.95
IOWA PLAN PROGRAM	89495	63652	570,954.90	19216	12704	252,949.27	123140	85396	990,803.52
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	4804	5407	387,346.04	980	1126	70,101.47	6822	7615	753,387.88
HMO SERVICES	1495	1573	193,074.90	294	304	40,072.09	1543	1628	240,734.87
PATIENT MANAGEMENT	37971	37970	75,940.00	6798	6798	13,596.00	50818	50818	101,636.00
HEALTH INS PREMIUM PAYMENT	344	893	23,226.37	36	82	3,390.97	2295	6496	164,053.66
MEDICAL SUPPLIES	838	15614	146,899.83	184	5141	33,153.13	1109	27670	202,615.26
OTHER PRACTITIONER	2327	7380	196,660.62	478	1477	56,097.77	3479	9504	383,325.72
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	4481	5436	740,161.06	987	1274	225,289.35	6351	7852	1142,373.52
OPTOMETRIST	1509	1718	112,329.49	409	495	31,372.96	2208	2553	164,380.34
CHIROPRACTIC	919	2137	69,912.50	241	601	21,035.99	1493	3682	113,020.20

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

ADC - CHILD

CMAP

OTHER

RECIPS UNITS OF
SERVED SERVICEAMOUNT
PAIDRECIPS UNITS OF
SERVED SERVICEAMOUNT
PAIDRECIPS UNITS OF
SERVED SERVICEAMOUNT
PAID

PODIATRIC	61	78	9,592.69	19	30	1,692.37	116	145	16,150.06
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	4	34	30,648.50
PSYCHIATRIC	1	1	190.47	14	46	2,911.59	26	81	3,215.91
RESIDENTIAL CARE FACILITY	0	0	0.00	0	0	0.00	1	0	961.40
MR WAIVER SERVICE	0	0	0.00	0	0	0.00	4	118	2,579.13
CHILDRENS MENTAL HEALTH SVC	34	1370	31,577.64	57	2810	52,506.38	57	2152	49,752.02
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	2	127	539.52
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	0	0	0.00	3	55	1,142.65
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	36	74	19,040.31	59	80	30,444.90	64	72	29,980.82
UNASSIGNED	2	0	0.00	0	0	0.00	10	0	791,226.43
* A L L C A T E G O R I E S *	92818	330262	12729,173.30	16668	106654	5615,395.42	104591	496063	26701,697.01

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	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	722	339,852.26	779	3328	843,379.77	47	254	180,232.11
OUTPATIENT	987	8463	236,678.81	6054	160856	698,037.03	476	9733	257,441.68
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	1	122	36,415.14	767	4372	20,926.08	8	36	96.78-
INTERMEDIATE CARE FACILITY	0	0	0.00	9037	233758	31937,254.81	3	0	327.44
INTER CARE MENTAL RETARDA	9	251	88,789.62	0	0	0.00	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	31	1356	439,124.05	0	0	0.00
HOME HEALTH	100	7171	178,488.70	4370	120426	3864,340.94	53	529	17,224.79
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	2502	4179	248,695.36	7633	44084	505,859.42	778	2147	157,873.27
CLINIC SERVICES	457	604	72,945.90	664	281	50,658.23	122	160	21,087.62
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	294	791	12,145.55	580	338	3,182.36	91	208	4,730.95
HABILITATION SERVICES	5	81	4,730.91	17	336	14,363.92	35	1276	76,940.54
REMEDIAL SERVICES	2012	180202	2006,188.22	4	75	1,567.09	3	94	889.52
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	1	30	4,716.30
AMBULANCE SERVICES	11	7	998.11	530	693	57,789.81	13	13	1,779.31
LOCAL EDUCATION AGENCY	65	19516	108,729.96	11	2025	15,142.82	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	21	76	1,845.86	5	22	329.57	0	0	0.00
PRESCRIBED DRUGS	5106	14512	1274,330.38	10560	25704	434,264.95	932	3908	187,266.54
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	40	48	3,320.69	1	1	109.27	30	40	3,020.42
IOWA PLAN PROGRAM	13186	10570	937,255.01	2642	1746	111,960.51	2480	1405	51,214.44
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	287	322	16,059.60	5	6	84.18	17	17	638.70
HMO SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PATIENT MANAGEMENT	69	69	138.00	0	0	0.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	166	355	14,850.77	37	74	9,177.28	5	8	702.41
MEDICAL SUPPLIES	199	24838	80,716.14	4619	463780	691,080.06	122	7526	19,659.73
OTHER PRACTITIONER	559	2702	70,865.74	411	2329	58,238.52	67	521	9,367.56
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	1044	1292	187,910.03	819	1049	169,540.20	176	237	36,288.97
OPTOMETRIST	465	517	32,218.75	872	1216	28,329.71	96	125	6,200.24
CHIROPRACTIC	169	318	9,776.28	285	718	5,417.52	85	250	7,349.33

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

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	22	27	3,185.36	1096	1779	17,377.78	29	39	2,172.58
PHYSICAL DISABILITIES SVCS	0	0	0.00	171	7877	91,478.75	0	0	0.00
BRAIN INJ WAIVER SERVICES	34	1473	30,785.81	376	18728	565,719.98	0	0	0.00
PSYCHIATRIC	14	35	1,561.06	250	447	13,692.56	37	89	2,556.50
RESIDENTIAL CARE FACILITY	0	0	0.00	6	136	702.71	0	0	0.00
MR WAIVER SERVICE	181	7939	189,827.80	12	308	28,629.10	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	2	7	265.00	0	0	0.00	0	0	0.00
AIDS WAIVER SERVICES	0	0	0.00	34	2991	28,873.24	0	0	0.00
ELDERLY WAIVER SERVICES	0	0	0.00	6391	301706	3870,566.56	1	1	70.00
ILL & HANDICAPPED WAIVER SVCS	29	2135	33,795.05	4	87	1,580.87	0	0	0.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	179	236	57,152.05	120	146	36,237.74	1	1	240.00
UNASSIGNED	14	0	0.00	4	0	0.00	0	0	0.00
* A L L C A T E G O R I E S *	10740	289580	6280,517.92	15740	1402778	44615,017.39	1975	28647	1049,894.17

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	152	617	705,586.36	55	354	374,057.92	9	27	38,581.88
OUTPATIENT	406	9308	436,178.34	1073	8333	253,097.99	97	2356	96,211.67
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	5	23	0.00	0	0	0.00	0	0	0.00
INTERMEDIATE CARE FACILITY	2	1-	2,452.02-	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	31	1044	53,180.72	85	232	7,333.98	2	15	1,500.00
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	743	3380	275,708.27	3297	5455	368,762.16	146	643	192,838.66
CLINIC SERVICES	67	142	18,308.83	640	863	98,194.17	17	26	3,766.35
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	37	83	1,313.09	174	469	6,928.65	30	123	1,732.11
HABILITATION SERVICES	4	105	6,193.04	0	0	0.00	0	0	0.00
REMEDIAL SERVICES	3	132	1,229.04	193	8216	120,585.74	0	0	0.00
REHAB SUPPORT SERVICES	2	6-	312.12-	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	17	18	2,570.63	19	16	2,206.21	1	1	86.43
LOCAL EDUCATION AGENCY	0	0	0.00	21	3971	15,783.94	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	3	44.40	0	0	0.00
PRESCRIBED DRUGS	288	1557	114,185.36	3675	6927	462,363.90	182	991	54,981.04
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	6	375.03	82	100	7,514.12	1	1	32.36
IOWA PLAN PROGRAM	0	0	0.00	21579	12751	123,165.22	282	206	19,771.82
MANAGED SUBSTANCE ABUSE	0	0	0.00	0	0	0.00	0	0	0.00
MENTAL HEALTH ACCESS PLAN	0	0	0.00	0	0	0.00	0	0	0.00
EPSDT SCREENING	2	2	36.11	564	599	31,108.75	1	1	25.11
HMO SERVICES	0	0	0.00	245	255	37,169.42	0	0	0.00
PATIENT MANAGEMENT	0	0	0.00	8412	8412	16,824.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	66	179	6,659.86	0	0	0.00
MEDICAL SUPPLIES	54	1648	9,155.27	139	7416	30,716.81	25	794	5,241.20
OTHER PRACTITIONER	45	56	7,350.39	413	1466	37,995.01	10	18	2,152.92
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	63	103	31,418.31	1432	1752	309,729.37	15	18	1,759.81
OPTOMETRIST	31	40	2,104.01	499	570	36,775.23	8	10	846.70
CHIROPRACTIC	25	64	1,886.30	298	599	20,312.00	11	34	1,290.97

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	16	47	2,082.20	17	25	1,653.10	5	6	314.76
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	36	90	3,602.74	2	7	666.47	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	24	579.60	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	5	58	1,934.56	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	3	60.00	1	6	73.44	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	4	5	2,151.39	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 *	698	18461	1669,759.90	12426	69063	2374,387.41	261	5270	421,133.79

TITLE XIX MONTHLY REPORT OF EXPENDITURES

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE

OTHER ICARE ADULT 19-64

OTHER ICARE ADULT OB

OTHER ICARE CHRN DSH

RECIPS UNITS OF
SERVED SERVICEAMOUNT
PAIDRECIPS UNITS OF
SERVED SERVICEAMOUNT
PAIDRECIPS UNITS OF
SERVED SERVICEAMOUNT
PAID

INPATIENT	0	0	0.00	0	0	0.00	0	0	0.00
OUTPATIENT	0	0	0.00	1	11	26.89	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	4	0	1,750.30	3	3	1,760.24	0	0	0.00
CLINIC SERVICES	0	0	0.00	1	7	630.97	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	4	9	239.58	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	1	0	42.64	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	915.60	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 UNITS OF
SERVED SERVICEAMOUNT
PAIDRECIPS UNITS OF
SERVED SERVICEAMOUNT
PAIDRECIPS UNITS OF
SERVED SERVICEAMOUNT
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
SILL & 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 *	1	0	1,792.94	7	31	3,573.28	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	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
INPATIENT	8	107	25,776.32	1	1-	992.00-	3	26	8,549.65
OUTPATIENT	38	285	5,431.71	4	48	100.13	56	750	18,868.91
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	1	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	1	36	11,330.95	0	0	0.00	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	0	0	0.00
HOME HEALTH	1	4	380.56	1	120	58.40	1	2	184.80
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	80	142	5,791.16	12	18	604.02	74	197	13,028.98
CLINIC SERVICES	20	34	4,158.02	1	0	72.00	11	13	1,288.79
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	14	65	571.42	1	0	0.00	12	26	694.18
HABILITATION SERVICES	0	0	0.00	3	37	1,609.39	7	121	5,247.92
REMEDIAL SERVICES	62	3460	46,304.26	0	0	0.00	14	327	6,857.92
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	0	0	0.00	2	2	99.33	2	0	186.68
LOCAL EDUCATION AGENCY	7	2216	10,420.92	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	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
EARLY ACCESS SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PRESCRIBED DRUGS	237	928	86,941.05	3	13	613.39	97	278	17,645.73
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	6	423.38
IOWA PLAN PROGRAM	302	276	24,952.83	31	17	1,097.37	282	224	29,411.22
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	21	29	898.52	0	0	0.00	3	3	87.76
HMO SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PATIENT MANAGEMENT	11	11	22.00	0	0	0.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	25	51	4,496.89	0	0	0.00	0	0	0.00
MEDICAL SUPPLIES	14	1444	1,389.91	2	17	112.70	6	134	383.09
OTHER PRACTITIONER	28	88	3,200.48	0	0	0.00	6	7	294.51
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	20	21	8,190.09	3	4	398.05	12	16	1,551.99
OPTOMETRIST	13	13	818.76	1	1	12.00	9	12	996.86
CHIROPRACTIC	7	14	376.16	1	2	9.18	7	15	522.60

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	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	0	0	0.00	1	1	398.28	1	1	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	5	13	343.85	1	18	1,050.82
RESIDENTIAL CARE FACILITY	0	0	0.00	4	38	876.00	0	0	0.00
MR WAIVER SERVICE	0	0	0.00	1	162	5,076.40	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	212	8911	202,072.35	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	50	865.00	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	243	280	127,968.36	1	1	222.87	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 *	126	18465	572,357.72	6	493	10,711.36	90	2176	106,902.43

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	27	229	112,172.58	164	681	500,283.04	0	0	0.00
OUTPATIENT	335	4430	153,487.71	2812	41549	487,327.66	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	10	10,092.90	19	154	26,080.20	0	0	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	16	100	11,647.32	0	0	0.00
INTER CARE MENTAL RETARDA	0	0	0.00	2125	69262	27046,079.39	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	0	0	0.00
HOME HEALTH	20	356	21,834.48	1191	45494	1487,815.59	0	0	0.00
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	603	1535	129,671.74	4768	16463	381,726.42	0	0	0.00
CLINIC SERVICES	106	217	30,388.91	379	392	58,691.27	0	0	0.00
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	62	180	2,543.14	313	559	6,396.50	0	0	0.00
HABILITATION SERVICES	4	65	2,482.83	9	292	19,041.59	0	0	0.00
REMEDIAL SERVICES	70	3437	48,079.03	88	2729	45,990.28	0	0	0.00
REHAB SUPPORT SERVICES	1	5	495.35	3	80	1,645.46	0	0	0.00
AMBULANCE SERVICES	7	7	796.67	87	94	8,991.43	0	0	0.00
LOCAL EDUCATION AGENCY	0	0	0.00	365	125905	767,726.20	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	2	15	290.69	26	216	4,064.54	0	0	0.00
PRESCRIBED DRUGS	925	4548	259,139.44	5988	22200	1787,096.80	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	8	10	978.08	20	22	808.34	0	0	0.00
IOWA PLAN PROGRAM	2391	1525	143,049.38	11141	10457	656,121.04	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	13	16	1,070.79	95	144	5,630.82	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	488.86	546	1201	132,067.06	0	0	0.00
MEDICAL SUPPLIES	134	7995	31,228.27	2187	420504	727,549.61	0	0	0.00
OTHER PRACTITIONER	56	208	9,503.12	1017	16067	347,377.05	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	100	135	21,751.10	1506	1763	159,927.04	0	0	0.00
OPTOMETRIST	70	83	5,545.10	629	787	32,157.15	0	0	0.00
CHIROPRACTIC	63	140	4,728.89	274	735	11,320.82	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	18	21	1,583.64	535	785	16,013.05	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	244	12421	348,804.92	0	0	0.00
PSYCHIATRIC	2	2	65.51	484	842	22,641.28	0	0	0.00
RESIDENTIAL CARE FACILITY	0	0	0.00	22	765	11,625.04	0	0	0.00
MR WAIVER SERVICE	3	93	2,297.48	8083	563710	21040,561.02	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	4	103	2,126.22	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	5	611	6,392.08	0	0	0.00	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	1	14	231.00	155	8432	159,442.16	0	0	0.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	7	7	2,547.80	7419	9969	2435,234.60	0	0	0.00
UNASSIGNED	2	0	0.00	3	0	0.00	0	0	0.00
* A L L C A T E G O R I E S *	1680	26001	1005,062.79	10472	1374774	58747,884.69	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	7201	43788	29999,776.20			
OUTPATIENT	0	0	0.00	62732	908754	17168,165.27			
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	1432	12204	2964,333.89			
INTERMEDIATE CARE FACILITY	0	0	0.00	14585	405670	53031,725.28			
INTER CARE MENTAL RETARDA	0	0	0.00	2146	69930	25241,096.94			
NURSING FAC FOR MENTAL ILL	0	0	0.00	35	1519	491,638.38			
HOME HEALTH	0	0	0.00	13717	356556	10780,246.15			
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00			
PHYSICIAN	0	0	0.00	118795	379529	17649,990.52			
CLINIC SERVICES	0	0	0.00	18690	25493	3536,437.99			
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00			
LAB AND RADIOLOGICAL	0	0	0.00	12181	27691	483,495.45			
HABILITATION SERVICES	0	0	0.00	2247	64552	2998,287.62			
REMEDIAL SERVICES	0	0	0.00	5274	314901	4023,587.84			
REHAB SUPPORT SERVICES	0	0	0.00	148	3057	100,150.48			
AMBULANCE SERVICES	0	0	0.00	2011	2474	246,516.39			
LOCAL EDUCATION AGENCY	0	0	0.00	973	283281	1635,574.27			

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

FEDERAL MEDICAID ONLY BLIND

TOTAL

	RECIPIS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPIS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPIS SERVED	UNITS OF SERVICE	AMOUNT PAID
EARLY ACCESS SERVICES	0	0	0.00	345	2164	44,304.12			
PRESCRIBED DRUGS	0	0	0.00	123510	384317	21484,507.39			
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	8788	10762	803,965.62			
IOWA PLAN PROGRAM	0	0	0.00	353422	288542	8482,290.01			
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	14065	15934	1295,613.92			
HMO SERVICES	0	0	0.00	4459	4689	732,802.04			
PATIENT MANAGEMENT	0	0	0.00	126037	126034	252,068.00			
HEALTH INS PREMIUM PAYMENT	0	0	0.00	4402	11348	538,105.10			
MEDICAL SUPPLIES	0	0	0.00	21312	2056240	4563,436.72			
OTHER PRACTITIONER	0	0	0.00	12859	64198	1781,407.57			
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	24733	31738	4764,381.28			
OPTOMETRIST	0	0	0.00	11529	14417	767,859.06			
CHIROPRACTIC	0	0	0.00	8198	21527	546,130.23			

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
PODIATRIC	0	0	0.00	3935	6328	171,204.03			
PHYSICAL DISABILITIES SVCS	0	0	0.00	576	26778	320,783.57			
BRAIN INJ WAIVER SERVICES	0	0	0.00	945	51465	1506,936.91			
PSYCHIATRIC	0	0	0.00	3364	6460	196,917.13			
RESIDENTIAL CARE FACILITY	0	0	0.00	1741	54312	405,072.58			
MR WAIVER SERVICE	0	0	0.00	9327	644634	24271,806.37			
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	413	17313	388,974.08			
AIDS WAIVER SERVICES	0	0	0.00	45	3953	40,128.73			
ELDERLY WAIVER SERVICES	0	0	0.00	9202	443910	5975,779.62			
SICK & HANDICAPPED WAIVER SVCS	0	0	0.00	1986	110475	1738,729.67			
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00			
MEP SERVICES	0	0	0.00	9484	12847	3214,984.39			
UNASSIGNED	0	0	0.00	57	0	791,226.43			
* A L L C A T E G O R I E S *	0	0	0.00	404191	7309784	255430,437.24	0	0	0.00

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