

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	5	16,442.67	0	0	0.00	514	1781	506,166.90
OUTPATIENT	17	97	1,516.62	0	0	0.00	4283	75343	601,492.75
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	160	1742	147,502.13
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	4177	129601	10002,979.51
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	4	215	46,004.15
HOME HEALTH	0	0	0.00	0	0	0.00	1884	40447	1544,850.50
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	63	114	11,331.16	0	0	0.00	5949	36622	370,282.33
CLINIC SERVICES	1	1	81.52	0	0	0.00	568	255	33,198.34
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	7	47	917.44	0	0	0.00	380	204	2,064.97
HABILITATION SERVICES	0	0	0.00	0	0	0.00	22	706	34,094.33
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	9	63	3,483.74
AMBULANCE SERVICES	0	0	0.00	0	0	0.00	216	239	26,788.83
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 UNITS OF
SERVED SERVICEAMOUNT
PAIDRECIPS UNITS OF
SERVED SERVICEAMOUNT
PAIDRECIPS UNITS OF
SERVED SERVICEAMOUNT
PAID

EARLY ACCESS SERVICES

0

0

0.00

0

0

0.00

0

0

0.00

PRESCRIBED DRUGS

36

85

1,510.18

0

0

0.00

2880

4937

80,078.85

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

82

108

2,552.78

0

0

0.00

5

5

444.26

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

107.57

0

0

0.00

0

0

0.00

HMO SERVICES

0

0

0.00

0

0

0.00

0

0

0.00

PATIENT MANAGEMENT

49

49

98.00

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

1

85.49

0

0

0.00

2378

175450

263,867.34

OTHER PRACTITIONER

2

4

321.14

0

0

0.00

247

1429

13,562.42

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

25

38

4,923.09

0

0

0.00

435

540

84,818.85

OPTOMETRIST

7

12

664.22

0

0

0.00

614

878

19,249.47

CHIROPRACTIC

0

0

0.00

0

0

0.00

324

809

5,344.36

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
RECIPS UNITS OF
SERVED SERVICEAMOUNT
PAIDREFUGEE TXXI
RECIPS UNITS OF
SERVED SERVICEAMOUNT
PAIDAGED
RECIPS UNITS OF
SERVED SERVICEAMOUNT
PAID

PODIATRIC	0	0	0.00	0	0	0.00	594	1071	12,185.62
PHYSICAL DISABILITIES SVCS	0	0	0.00	0	0	0.00	1	10	100.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	0	0	0.00	1	150	6,572.40
PSYCHIATRIC	0	0	0.00	0	0	0.00	159	222	6,676.50
RESIDENTIAL CARE FACILITY	0	0	0.00	0	0	0.00	320	10096	75,242.71
MR WAIVER SERVICE	0	0	0.00	0	0	0.00	81	4271	194,219.97
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	2852	118841	1602,092.39
SICK & 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	97	125	30,610.37
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 *	122	564	40,551.88	0	0	0.00	13483	606052	15713,973.99

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	1672	9953	5809,519.69	662	2417	2814,820.13
OUTPATIENT	0	0	0.00	15279	318326	5859,831.28	6926	76293	2911,134.10
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	159	3396	1567,249.65	1	18	11,133.90
INTERMEDIATE CARE FACILITY	0	0	0.00	522	15434	1478,568.19	1	22	2,347.62
INTER CARE MENTAL RETARDA	0	0	0.00	10	270	84,548.18	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	3096	81133	2581,617.12	50	594	39,560.77
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	0	0	0.00	22952	108532	3552,324.66	13827	26116	2457,790.64
CLINIC SERVICES	0	0	0.00	3122	4580	609,245.90	2362	3637	444,305.54
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	0	0	0.00	1945	5119	69,889.16	1953	5019	106,096.02
HABILITATION SERVICES	0	0	0.00	1508	53289	2520,313.71	14	288	11,590.39
REMEDIAL SERVICES	0	0	0.00	303	12540	194,622.14	47	1610	20,479.54
REHAB SUPPORT SERVICES	0	0	0.00	601	6456	264,975.15	6	69	2,755.26
AMBULANCE SERVICES	0	0	0.00	678	766	91,702.42	126	129	20,587.80
LOCAL EDUCATION AGENCY	0	0	0.00	57	11441	67,716.98	2	898	3,794.34

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	14	111	1,929.06	0	0	0.00
PRESCRIBED DRUGS	0	0	0.00	22732	95413	6970,750.14	18761	51645	2,672,882.51
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	102	120	7,959.21	5500	6357	491,067.63
IOWA PLAN PROGRAM	0	0	0.00	46252	47895	3,289,374.54	34722	39674	1,072,660.85
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	376	500	17,494.73	169	185	6,461.33
HMO SERVICES	0	0	0.00	0	0	0.00	889	948	224,446.61
PATIENT MANAGEMENT	0	0	0.00	4	4	8.00	20716	20824	41,648.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	606	1232	132,074.80	243	521	17,949.60
MEDICAL SUPPLIES	0	0	0.00	7407	621423	1,449,004.74	712	25621	164,909.15
OTHER PRACTITIONER	0	0	0.00	1663	8016	225,114.45	997	1741	126,284.87
FAMILY CENTERED PROGRAM	0	0	0.00	0	0	0.00	1	72	722.04
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	3344	4274	625,976.62	2680	3600	582,577.57
OPTOMETRIST	0	0	0.00	2249	2868	147,192.99	1384	1677	123,810.55
CHIROPRACTIC	0	0	0.00	1889	4804	76,704.75	1539	3712	129,728.23

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	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	1114	1848	70,817.10	212	268	32,849.75
PHYSICAL DISABILITIES SVCS	0	0	0.00	358	14965	182,673.95	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	250	16060	446,741.52	0	0	0.00
PSYCHIATRIC	0	0	0.00	2229	3664	107,214.40	31	26	1,875.03
RESIDENTIAL CARE FACILITY	0	0	0.00	1290	42169	331,271.34	0	0	0.00
MR WAIVER SERVICE	0	0	0.00	978	69399	2525,820.71	1	15	275.80
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	25	1370	22,411.98	4	105	2,930.91
AIDS WAIVER SERVICES	0	0	0.00	12	1168	14,816.77	0	0	0.00
ELDERLY WAIVER SERVICES	0	0	0.00	28	1292	21,957.04	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	1757	95233	1492,533.89	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	1167	1560	377,538.32	4	4	1,676.39
UNASSIGNED	0	0	0.00	6	0	0.00	4	0	31.36
* A L L C A T E G O R I E S *	0	0	0.00	50440	1666623	43289,505.28	45528	274105	14541,184.23

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

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	332	1786	1978,985.03	371	8067	1822,636.36	1560	7356	7920,977.17
OUTPATIENT	5320	29320	1161,189.84	1491	11919	365,667.44	9045	70498	2515,109.60
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	63.14
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	4	30	4,299.29
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	1	31	3,391.40
INTER CARE MENTAL RETARDA	0	0	0.00	0	0	0.00	1	0	1481,717.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	0	0	0.00
HOME HEALTH	431	1600	55,190.75	72	249	10,789.51	629	3072	118,425.87
LEAD INSPECTION AGENCY	4	4	1,509.40	0	0	0.00	3	3	1,132.05
PHYSICIAN	16259	26355	1904,571.43	3437	6027	502,154.59	25119	42683	3828,016.59
CLINIC SERVICES	2939	3849	469,990.45	694	1022	118,575.44	5254	7741	957,661.89
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	1051	2264	30,020.17	331	1081	16,923.48	2172	5771	98,005.25
HABILITATION SERVICES	0	0	0.00	4	164	7,680.70	4	101	3,483.32
REMEDIAL SERVICES	809	29263	476,293.75	318	11974	187,545.99	665	24100	363,109.41
REHAB SUPPORT SERVICES	0	0	0.00	6	50	4,047.93	4	27	2,560.35
AMBULANCE SERVICES	51	54	8,896.24	23	30	4,201.49	124	121	16,262.37
LOCAL EDUCATION AGENCY	29	3653	21,423.19	7	673	2,750.33	26	3409	4,870.63

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	8	40	810.43	3	10	508.30	12	40	826.99
PRESCRIBED DRUGS	15143	26971	1436,656.83	3850	9639	595,202.23	21025	37475	1536,306.50
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	898	1073	81,424.50	124	141	10,429.06	292	330	26,302.37
IOWA PLAN PROGRAM	57362	63475	606,244.64	11227	12686	247,836.75	76418	86862	1031,079.62
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	4484	5353	352,962.71	981	1189	71,433.42	6765	7681	654,523.17
HMO SERVICES	1486	1575	185,676.48	307	316	40,318.91	1586	1657	248,859.27
PATIENT MANAGEMENT	35904	36060	72,120.00	6604	6637	13,274.00	51740	51984	103,968.00
HEALTH INS PREMIUM PAYMENT	364	827	22,307.95	36	81	3,055.12	2417	6373	156,227.30
MEDICAL SUPPLIES	528	7616	75,765.07	88	2449	16,445.41	675	16802	105,159.28
OTHER PRACTITIONER	1224	2088	101,209.65	298	498	29,990.38	1951	3332	143,521.98
FAMILY CENTERED PROGRAM	4	56	2,421.17	0	0	0.00	1	3	149.34
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	3877	4496	558,651.76	848	1059	161,533.83	5349	6286	872,661.39
OPTOMETRIST	1402	1613	103,625.18	401	462	31,174.20	2023	2326	153,326.22
CHIROPRACTIC	777	1501	49,195.35	199	440	15,122.65	1286	2846	87,839.38

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
PODIATRIC	70	79	10,664.32	21	22	2,506.63	109	110	11,317.67
PHYSICAL DISABILITIES SVCS	0	0	0.00	0	0	0.00	2	48	535.20
BRAIN INJ WAIVER SERVICES	0	0	0.00	0	0	0.00	4	7	210.93
PSYCHIATRIC	13	4	875.60	14	4	499.21	35	23	1,717.60
RESIDENTIAL CARE FACILITY	0	0	0.00	2	75	820.13	0	0	0.00
MR WAIVER SERVICE	0	0	0.00	1	18	607.86	3	42	64,941.46
CHILDRENS MENTAL HEALTH SVC	17	787	15,263.48	31	1497	28,011.37	42	2055	43,251.79
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	5	35	4,658.74
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	0	0	0.00	2	40	1,658.14
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	30	34	15,530.91	40	47	22,301.05	64	74	34,058.61
UNASSIGNED	4	0	0.00	4	0	0.00	10	0	148,853.71
* A L L C A T E G O R I E S *	64518	251796	9799,476.28	12484	78426	4325,947.91	85229	391374	19323,921.35

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	47	488	190,182.68	733	2930	849,826.68	54	214	132,065.11
OUTPATIENT	793	6058	184,662.55	5598	109906	777,769.64	449	9487	226,754.38
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	331	3228	28,666.33	2	32	18,797.01
INTERMEDIATE CARE FACILITY	0	0	0.00	7504	231098	21710,799.83	1	31	2,197.65
INTER CARE MENTAL RETARDA	7	178	72,070.44	0	0	0.00	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	29	1208	351,767.99	0	0	0.00
HOME HEALTH	89	2548	72,023.24	3293	70823	2862,027.46	44	1552	14,118.49
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	2184	3197	200,528.64	6862	39226	426,227.55	772	1898	117,402.83
CLINIC SERVICES	469	673	80,510.27	572	339	54,101.79	124	178	22,395.39
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	204	560	8,153.61	482	353	4,152.72	80	242	4,921.91
HABILITATION SERVICES	0	0	0.00	5	174	5,551.50	31	866	49,734.43
REMEDIAL SERVICES	1660	140633	1566,696.70	4	77	1,433.00	1	12	262.68
REHAB SUPPORT SERVICES	2	0	172.88	6	13	56.24	3	172	3,224.91
AMBULANCE SERVICES	13	13	1,761.32	394	456	41,141.00	13	19	2,068.26
LOCAL EDUCATION AGENCY	16	5911	32,344.30	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	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	3	30	421.54	2	54	502.20	0	0	0.00
PRESCRIBED DRUGS	4512	11404	1055,954.06	9948	21244	372,143.97	890	3101	159,306.58
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	23	26	2,016.66	0	0	0.00	33	35	2,610.19
IOWA PLAN PROGRAM	9656	10203	956,174.67	1987	2060	126,882.17	1411	1599	51,399.80
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	260	317	14,880.82	3	3	138.50	17	21	822.83
HMO SERVICES	0	0	0.00	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	153	319	13,538.59	33	62	9,499.88	3	6	599.68
MEDICAL SUPPLIES	165	17586	181,263.58	3893	372542	523,894.92	119	6683	22,967.02
OTHER PRACTITIONER	330	1316	42,454.01	377	1565	41,714.39	69	143	8,885.48
FAMILY CENTERED PROGRAM	2	25	122.73	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	4	19	928.57	0	0	0.00	0	0	0.00
GROUP TREATMENT THERAPY	4	66	502.77	0	0	0.00	0	0	0.00
DENTAL	887	1020	155,111.61	722	900	136,776.58	170	227	42,069.13
OPTOMETRIST	441	502	31,587.29	739	1015	25,501.60	92	126	7,014.56
CHIROPRACTIC	150	253	6,767.79	241	516	3,582.68	97	216	6,835.86

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

	F O S T E R - P R E S U B - S U B A D O P T S			I N T E R M E D I A T E C A R E F A C I L I T Y			M E D I C A L L Y N E E D Y N O S P E N D D N		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
PODIATRIC	34	40	3,806.97	1059	1595	17,788.09	35	46	1,115.30
PHYSICAL DISABILITIES SVCS	0	0	0.00	146	6780	73,934.25	0	0	0.00
BRAIN INJ WAIVER SERVICES	28	1027	32,410.35	347	16339	464,408.43	0	0	0.00
PSYCHIATRIC	14	10	1,043.44	255	383	11,217.60	39	39	1,191.01
RESIDENTIAL CARE FACILITY	1	28	207.00	5	76	838.60	0	0	0.00
MR WAIVER SERVICE	163	8843	184,061.02	4	141	9,415.84	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	1	48	600.00	0	0	0.00	0	0	0.00
AIDS WAIVER SERVICES	0	0	0.00	32	3027	29,204.44	0	0	0.00
ELDERLY WAIVER SERVICES	0	0	0.00	5972	253626	3133,427.43	1	65	593.69
ILL & HANDICAPPED WAIVER SVCS	34	2162	42,592.01	7	205	2,936.59	0	0	0.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	174	250	61,439.44	113	148	36,786.80	4	4	1,088.78
UNASSIGNED	6	0	0.00	0	0	0.00	0	0	0.00
* A L L C A T E G O R I E S *	9879	215838	5197,161.55	15238	1142112	32134,004.21	1739	27014	900,442.96

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	131	489	617,529.30	48	228	204,039.00	5	6	19,352.53-
OUTPATIENT	398	7275	230,994.14	794	4740	206,798.02	74	1624	81,799.32
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	14-	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	20	1569	53,520.16	43	111	2,105.74	2	9	803.91
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	764	3447	236,327.63	2626	3857	275,256.60	138	361	129,473.38
CLINIC SERVICES	86	187	22,306.75	538	702	79,694.34	18	15	2,226.49
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	20	58	1,275.26	121	349	4,474.97	26	93	1,403.70
HABILITATION SERVICES	3	72	4,329.21	0	0	0.00	0	0	0.00
REMEDIAL SERVICES	0	0	0.00	140	6228	95,388.89	0	0	0.00
REHAB SUPPORT SERVICES	7	121	6,032.10	0	0	0.00	1	0	189.20-
AMBULANCE SERVICES	25	25	7,847.63	12	12	1,698.46	1	1	72.10
LOCAL EDUCATION AGENCY	0	0	0.00	4	553	3,373.63	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	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	231	1050	62,379.22	3040	5530	391,656.45	164	600	40,586.27
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	1	1	37.89	50	52	3,859.80	1	2	114.72
IOWA PLAN PROGRAM	0	0	0.00	11254	12408	127,870.05	200	202	20,401.90
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	590	639	38,246.88	0	0	0.00
HMO SERVICES	0	0	0.00	228	239	24,616.28	0	0	0.00
PATIENT MANAGEMENT	0	0	0.00	7934	7971	15,942.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	41	89	5,679.59	0	0	0.00
MEDICAL SUPPLIES	59	2063	10,619.85	85	2718	17,010.97	21	659	3,494.68
OTHER PRACTITIONER	48	78	7,290.72	235	437	23,086.09	4	4	268.04
FAMILY CENTERED PROGRAM	0	0	0.00	0	0	0.00	0	0	0.00
FAMILY PRESERVATION	0	0	0.00	0	0	0.00	0	0	0.00
TREATMENT FOSTER FAMILY CARE	0	0	0.00	0	0	0.00	0	0	0.00
GROUP TREATMENT THERAPY	0	0	0.00	0	0	0.00	0	0	0.00
DENTAL	44	61	10,000.67	1090	1289	210,904.16	11	14	1,781.41
OPTOMETRIST	25	29	1,580.59	416	485	29,868.19	6	8	449.67
CHIROPRACTIC	15	47	1,415.74	229	470	15,430.21	5	5	155.68

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	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	12	14	1,461.86	28	34	3,455.44	2	2	186.28
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	82	71	4,371.43	3	2	110.63	1	1	23.90
RESIDENTIAL CARE FACILITY	1	1-	25.07-	0	0	0.00	0	0	0.00
MR WAIVER SERVICE	0	0	0.00	1	24	427.92	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	2	80	1,836.20	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	5	6	1,346.08	4	4	1,490.04	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 *	887	16648	1280,641.16	10867	49251	1784,320.55	199	3606	263,699.72

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 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	0	0	0.00	0	0	0.00	0	0	0.00
OUTPATIENT	0	0	0.00	3	48	1,126.02	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	1	0	77.45	3	3	1,645.20	0	0	0.00
CLINIC SERVICES	0	0	0.00	1	1	8.46	0	0	0.00
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	0	0	0.00	1	2	26.75	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 UNITS OF
SERVED SERVICEAMOUNT
PAIDRECIPS UNITS OF
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PAIDRECIPS UNITS OF
SERVED SERVICEAMOUNT
PAID

EARLY ACCESS SERVICES

0 0

0.00

0 0

0.00

0 0

0.00

PRESCRIBED DRUGS

0 0

0.00

0 0

0.00

0 0

0.00

DRUG CAPITATION

0 0

0.00

0 0

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0 0

0.00

INDIAN HEALTH SERVICES

0 0

0.00

0 0

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FAMILY PLANNING SERVICES

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IOWA PLAN PROGRAM

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MANAGED SUBSTANCE ABUSE

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MENTAL HEALTH ACCESS PLAN

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EPSDT SCREENING

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HMO SERVICES

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PATIENT MANAGEMENT

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HEALTH INS PREMIUM PAYMENT

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MEDICAL SUPPLIES

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OTHER PRACTITIONER

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FAMILY CENTERED PROGRAM

0 0

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FAMILY PRESERVATION

0 0

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TREATMENT FOSTER FAMILY CARE

0 0

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GROUP TREATMENT THERAPY

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DENTAL

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OPTOMETRIST

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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 *	0	0	77.45	6	55	3,084.44	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 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	2	16	2,415.00	4	8	5,992.00	1	30	20,998.08
OUTPATIENT	22	139	7,472.44	9	1030	2,109.51	30	307	26,952.98
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	2	3	15.50	2	10	111.05	0	0	0.00
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	45	75	5,755.91	12	113	1,260.95	53	149	10,686.40
CLINIC SERVICES	10	18	2,225.25	0	0	0.00	8	28	2,238.86
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	3	16	142.01	0	0	0.00	8	19	454.21
HABILITATION SERVICES	0	0	0.00	1	45	4,460.10	3	138	4,155.80
REMEDIAL SERVICES	36	2101	28,975.72	0	0	0.00	3	71	1,423.96
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	1	1	47.25	0	0	0.00	1	1	124.82
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 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	166	569	57,074.97	9	17	532.78	79	185	12,134.11
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	7	8	580.92
IOWA PLAN PROGRAM	194	222	21,576.52	12	13	764.80	192	211	28,546.71
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	18	29	683.02	0	0	0.00	6	6	189.48
HMO SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PATIENT MANAGEMENT	10	10	20.00	0	0	0.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	14	25	2,269.08	0	0	0.00	0	0	0.00
MEDICAL SUPPLIES	3	447	425.20	1	1	129.99	1	1	6.65
OTHER PRACTITIONER	9	36	1,865.29	0	0	0.00	9	11	434.19
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	19	22	1,387.75	3	3	344.78	10	11	1,831.34
OPTOMETRIST	14	16	1,012.24	1	1	99.97	8	8	663.08
CHIROPRACTIC	4	5	145.21	1	1	6.35	3	10	417.28

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

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	2	2	851.67	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	8	214.83	0	0	0.00
RESIDENTIAL CARE FACILITY	0	0	0.00	1	29	240.00	0	0	0.00
MR WAIVER SERVICE	1	10	315.60	1	11	532.62	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	106	4284	83,389.68	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	162	207	98,066.19	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 *	169	8253	316,131.50	7	1290	16,799.73	170	1194	111,838.87

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

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	35	277	212,669.70	164	698	337,218.37	0	0	0.00
OUTPATIENT	288	3343	115,766.18	2454	35079	428,309.07	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	12	122	20,146.30	0	0	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	3	54	6,463.09	0	0	0.00
INTER CARE MENTAL RETARDA	0	0	0.00	2049	63461	23327,446.58	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	0	0	0.00
HOME HEALTH	12	229	9,814.87	892	37731	1233,993.92	0	0	0.00
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	570	1228	99,104.87	4160	14155	321,243.61	0	0	0.00
CLINIC SERVICES	134	195	26,313.50	353	378	47,232.59	0	0	0.00
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	69	215	3,280.39	247	515	5,381.49	0	0	0.00
HABILITATION SERVICES	3	20	867.76	0	0	0.00	0	0	0.00
REMEDIAL SERVICES	64	4591	52,731.31	56	1649	29,849.53	0	0	0.00
REHAB SUPPORT SERVICES	2	10	6,749.34	5	57	945.10	0	0	0.00
AMBULANCE SERVICES	9	9	1,219.67	94	110	11,685.31	0	0	0.00
LOCAL EDUCATION AGENCY	1	83	649.89	59	11190	75,732.76	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	0	0	0.00	10	128	1,607.72	0	0	0.00
PRESCRIBED DRUGS	878	3746	242,978.24	5602	17780	1450,508.60	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	7	11	841.70	15	18	957.39	0	0	0.00
IOWA PLAN PROGRAM	1515	1599	152,601.10	10266	10365	637,660.21	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	17	41	1,371.68	95	125	4,328.85	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	3	6	705.86	502	1018	109,518.35	0	0	0.00
MEDICAL SUPPLIES	106	6643	18,746.18	1822	292021	516,751.41	0	0	0.00
OTHER PRACTITIONER	55	133	6,286.70	575	6507	170,255.34	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	88	106	13,695.35	1134	1287	113,229.11	0	0	0.00
OPTOMETRIST	76	92	6,946.29	509	603	24,842.54	0	0	0.00
CHIROPRACTIC	44	95	3,549.49	237	510	7,575.78	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

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	27	30	3,347.03	409	574	11,986.24	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	214	11131	277,018.10	0	0	0.00
PSYCHIATRIC	8	1	117.66	464	672	20,696.47	0	0	0.00
RESIDENTIAL CARE FACILITY	0	0	0.00	19	502	4,581.18	0	0	0.00
MR WAIVER SERVICE	2	84	1,753.00	7608	563239	19059,853.10	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	3	32	1,296.16	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	210	2,462.94	1	61	1,246.60	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	1	101	1,261.80	152	8536	148,518.47	0	0	0.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	8	6	2,189.36	6761	9036	2198,101.54	0	0	0.00
UNASSIGNED	0	0	0.00	3	0	0.00	0	0	0.00
* A L L C A T E G O R I E S *	1591	23136	975,819.34	10997	1089312	50604,884.72	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	6315	36749	23423,131.34			
OUTPATIENT	0	0	0.00	52832	760832	15706,455.88			
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	63.14			
ADULT DAY TREATMENT	0	0	0.00	0	0	0.00			
SKILLED NURSING FACILITY	0	0	0.00	666	8554	1789,196.03			
INTERMEDIATE CARE FACILITY	0	0	0.00	12177	376271	33206,747.29			
INTER CARE MENTAL RETARDA	0	0	0.00	2065	63909	22002,348.20			
NURSING FAC FOR MENTAL ILL	0	0	0.00	33	1423	397,772.14			
HOME HEALTH	0	0	0.00	10490	241680	8598,968.86			
LEAD INSPECTION AGENCY	0	0	0.00	7	7	2,641.45			
PHYSICIAN	0	0	0.00	103827	314158	14451,462.42			
CLINIC SERVICES	0	0	0.00	17063	23799	2972,312.77			
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00			
LAB AND RADIOLOGICAL	0	0	0.00	9066	21927	357,583.51			
HABILITATION SERVICES	0	0	0.00	1593	55863	2646,261.25			
REMEDIAL SERVICES	0	0	0.00	4002	234849	3018,812.62			
REHAB SUPPORT SERVICES	0	0	0.00	633	6938	267,986.08			
AMBULANCE SERVICES	0	0	0.00	1776	1986	236,104.97			
LOCAL EDUCATION AGENCY	0	0	0.00	198	37811	202,914.79			

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	49	413	6,606.24			
PRESCRIBED DRUGS	0	0	0.00	108631	291391	17138,642.49			
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	7020	8174	628,202.04			
IOWA PLAN PROGRAM	0	0	0.00	261963	289587	8374,071.37			
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	13683	16092	1163,644.99			
HMO SERVICES	0	0	0.00	4487	4735	723,917.55			
PATIENT MANAGEMENT	0	0	0.00	123029	123624	247,248.00			
HEALTH INS PREMIUM PAYMENT	0	0	0.00	4415	10559	473,425.80			
MEDICAL SUPPLIES	0	0	0.00	17808	1550726	3370,546.93			
OTHER PRACTITIONER	0	0	0.00	8038	27339	942,823.15			
FAMILY CENTERED PROGRAM	0	0	0.00	8	156	3,415.28			
FAMILY PRESERVATION	0	0	0.00	0	0	0.00			
TREATMENT FOSTER FAMILY CARE	0	0	0.00	4	19	928.57			
GROUP TREATMENT THERAPY	0	0	0.00	4	66	502.77			
DENTAL	0	0	0.00	20635	25233	3578,275.00			
OPTOMETRIST	0	0	0.00	10394	12721	708,608.85			
CHIROPRACTIC	0	0	0.00	6961	16240	409,816.79			

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	3717	5735	184,339.97			
PHYSICAL DISABILITIES SVCS	0	0	0.00	502	21803	257,243.40			
BRAIN INJ WAIVER SERVICES	0	0	0.00	828	44714	1227,361.73			
PSYCHIATRIC	0	0	0.00	3326	5130	157,845.31			
RESIDENTIAL CARE FACILITY	0	0	0.00	1631	52974	413,175.89			
MR WAIVER SERVICE	0	0	0.00	8803	646097	21912,341.98			
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	228	10258	198,991.57			
AIDS WAIVER SERVICES	0	0	0.00	44	4195	44,021.21			
ELDERLY WAIVER SERVICES	0	0	0.00	8684	374130	4757,121.35			
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	1948	106277	1686,184.62			
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00			
MEP SERVICES	0	0	0.00	8577	11505	2882,223.88			
UNASSIGNED	0	0	0.00	39	0	148,822.35-			
* A L L C A T E G O R I E S *	0	0	0.00	323553	5846649	200623,467.12	0	0	0.00
				* * *	E N D O F R E P O R T	* * *			