

TITLE XIX REPORT OF EXPENDITURES  
(BY CATEGORY OF SERVICE)  
(MONTHLY TOTALS AS OF 05/31/07)

CATEGORY OF SERVICE	RECIPIENTS SERVED	NUMBER OF CLAIMS	UNITS OF SERVICE	TOTAL PAYMENT	***** AVERAGES *****			
					COST PER UNIT OF SERVICE	COST PER ELIGIBLE RECIPIENT	UNITS PER RECIPIENT SERVED	COST PER RECIPIENT SERVED
INPATIENT	5,793	5,835	34,221	\$21,674,736.17	\$633.38	\$62.12	5.9	\$3,741.55
OUTPATIENT	50,139	70,655	650,338	\$12,452,809.60	\$19.15	\$35.69	13.0	\$248.37
CHILD PART HOSP	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
CHILD DAY TREATMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
ADULT PART HOSP	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
ADULT DAY TREATMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
SKILLED NURSING FACILITY	576	669	8,025	\$1,531,677.56	\$190.86	\$4.39	13.9	\$2,659.16
INTERMEDIATE CARE FACILITY	12,752	13,119	372,450	\$32,816,346.12	\$88.11	\$94.06	29.2	\$2,573.43
INTER CARE MENTAL RETARDA	2,141	2,155	63,185	\$20,849,129.57	\$329.97	\$59.76	29.5	\$9,738.03
NURSING FAC FOR MENTAL ILL	31	32	900	\$230,511.78	\$256.12	\$1.33	29.0	\$7,435.86
HOME HEALTH	10,755	13,236	237,574	\$6,895,991.92	\$29.03	\$19.77	22.1	\$641.19
LEAD INSPECTION AGENCY	3	2	2	\$1,093.71	\$546.86	\$0.00	.7	\$364.57
PHYSICIAN	100,584	210,897	302,009	\$14,450,988.75	\$47.85	\$41.42	3.0	\$143.67
CLINIC SERVICES	15,780	22,235	22,699	\$2,420,236.79	\$106.62	\$6.94	1.4	\$153.37
MEP CASE MANAGEMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
LAB AND RADIOLOGICAL	9,102	12,057	20,133	\$353,029.43	\$17.53	\$1.01	2.2	\$38.79
HABILITATION SERVICES	10	8	46	\$1,180.48	\$25.66	\$0.00	4.6	\$118.05
REMEDIAL SERVICES	3,201	10,745	214,998	\$2,332,904.10	\$10.85	\$6.69	67.2	\$728.80
REHAB SUPPORT SERVICES	2,276	2,800	49,882	\$3,069,286.14	\$61.53	\$8.80	21.9	\$1,348.54
AMBULANCE SERVICES	2,112	2,379	2,331	\$283,958.25	\$121.82	\$0.81	1.1	\$134.45
LOCAL EDUCATION AGENCY	1,588	3,718	380,039	\$2,023,215.74	\$5.32	\$5.80	239.3	\$1,274.07
EARLY ACCESS SERVICES	330	785	1,496	\$30,027.78	\$20.07	\$0.09	4.5	\$90.99
PRESCRIBED DRUGS	106,872	315,582	284,913	\$18,341,896.14	\$64.38	\$53.18	2.7	\$171.62
DRUG CAPITATION	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
INDIAN HEALTH SERVICES	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
FAMILY PLANNING SERVICES	5,825	6,615	6,635	\$499,289.38	\$75.25	\$1.43	1.1	\$85.71
IOWA MANAGED PROGRAM	258,522	283,315	283,315	\$8,182,583.53	\$28.88	\$23.45	1.1	\$31.65
MANAGED SUBSTANCE ABUSE	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
MENTAL HEALTH ACCESS PLAN	1	0	0	\$3,573.87	\$0.00	\$0.01	.0	\$3,573.87
EPSDT SCREENING	12,412	14,135	14,103	\$1,000,244.63	\$70.92	\$5.19	1.1	\$80.59
HMO SERVICES	4,495	4,704	4,704	\$709,044.02	\$150.73	\$554.81	1.0	\$157.74
PATIENT MANAGEMENT	123,539	123,532	123,510	\$247,020.00	\$2.00	\$28.65	1.0	\$2.00
HEALTH INS PREMIUM PAYMENT	4,768	13,421	13,421	\$599,801.04	\$44.69	\$1.72	2.8	\$125.80
MEDICAL SUPPLIES	19,069	32,903	1,454,880	\$3,039,270.65	\$2.09	\$8.81	76.3	\$159.38
OTHER PRACTITIONER	12,465	30,378	831,421	\$1,374,197.18	\$1.65	\$3.94	66.7	\$110.24
FAMILY CENTERED PROGRAM	31	46	263	\$9,350.29	\$35.55	\$0.05	8.5	\$301.62
FAMILY PRESERVATION	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
TREATMENT FOSTER FAMILY CARE	5	8	30	\$1,344.81	\$44.83	\$0.01	6.0	\$268.96
GROUP TREATMENT THERAPY	8	13	239	\$16,975.79	\$71.03	\$0.09	29.9	\$2,121.97
DENTAL	20,612	24,897	25,125	\$3,547,590.47	\$141.20	\$10.28	1.2	\$172.11
OPTOMETRIST	9,058	10,477	11,123	\$623,883.16	\$56.09	\$1.79	1.2	\$68.88
CHIROPRACTIC	7,476	13,359	16,408	\$418,104.83	\$25.48	\$1.21	2.2	\$55.93
PODIATRIC	3,422	4,162	5,254	\$196,211.72	\$37.35	\$0.56	1.5	\$57.34
PHYSICAL DISABILITIES SVCS	532	741	22,057	\$249,063.13	\$11.29	\$0.71	41.5	\$468.16
BRAIN INJ WAIVER SERVICES	783	1,709	45,243	\$1,146,819.86	\$25.35	\$3.29	57.8	\$1,464.65
PSYCHIATRIC	3,000	4,860	5,671	\$188,109.07	\$33.17	\$0.54	1.9	\$62.70
RESIDENTIAL CARE FACILITY	1,829	1,920	52,608	\$347,355.24	\$6.60	\$1.00	28.8	\$189.92
MR WAIVER SERVICE	9,055	15,996	587,293	\$22,519,976.38	\$38.35	\$2,345.34	64.9	\$2,487.02
CHILDRENS MENTAL HEALTH SVC	215	353	7,533	\$186,087.33	\$24.70	\$747.34	35.0	\$865.52

T I T L E X I X R E P O R T O F E X P E N D I T U R E S  
(BY CATEGORY OF SERVICE)  
(MONTHLY TOTALS AS OF 05/31/07)

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					COST PER UNIT OF SERVICE	COST PER ELIGIBLE RECIPIENT	UNITS PER RECIPIENT SERVED	COST PER RECIPIENT SERVED
AIDS WAIVER SERVICES	37	51	3,127	\$34,321.32	\$10.98	\$730.24	84.5	\$927.60
ELDERLY WAIVER SERVICES	8,399	22,597	374,702	\$4,529,011.61	\$12.09	\$513.78	44.6	\$539.23
ILL & HANDICAPPED WAIVER SVCS	1,961	2,969	95,767	\$1,465,714.73	\$15.31	\$601.69	48.8	\$747.43
COUNTY OFFICE REIMBURSEMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
MEP SERVICES	8,869	9,556	9,928	\$2,414,543.46	\$243.21	\$6.92	1.1	\$272.25
UNASSIGNED	29	1	0	\$506,135.40	\$0.00	\$1.45	.0	\$17,452.94
* A L L C A T E G O R I E S *	318,906	1,309,567	6,639,601	\$193,807,495.19	\$29.19	\$555.50	20.8	\$607.73

\*\*\* END OF REPORT \*\*\*