

TITLE XIX REPORT OF EXPENDITURES
(BY CATEGORY OF SERVICE)
(FISCAL YTD TOTALS AS OF 12/31/06)

| CATEGORY OF SERVICE | RECIPIENTS SERVED | NUMBER OF CLAIMS | UNITS OF SERVICE | TOTAL PAYMENT |
|------------------------------|----------------------|---------------------|---------------------|------------------|
| INPATIENT | 64,653 | 37,247 | 219,102 | \$166,572,638.05 |
| OUTPATIENT | 257,535 | 447,905 | 10,198,002 | \$84,006,587.56 |
| CHILD PART HOSP | 2 | 0 | 0 | \$483.02- |
| CHILD DAY TREATMENT | 0 | 0 | 0 | \$0.00 |
| ADULT PART HOSP | 0 | 0 | 0 | \$0.00 |
| ADULT DAY TREATMENT | 1 | 2 | 46 | \$709.32 |
| SKILLED NURSING FACILITY | 2,513 | 4,451 | 54,220 | \$9,495,042.00 |
| INTERMEDIATE CARE FACILITY | 16,864 | 82,733 | 2,384,327 | \$212,538,132.33 |
| INTER CARE MENTAL RETARDA | 2,264 | 13,164 | 389,399 | \$125,791,009.06 |
| NURSING FAC FOR MENTAL ILL | 44 | 197 | 5,835 | \$1,395,113.11 |
| HOME HEALTH | 21,941 | 74,721 | 1,283,272 | \$46,335,374.70 |
| LEAD INSPECTION AGENCY | 59 | 63 | 64 | \$26,164.29 |
| PHYSICIAN | 256,358 | 1,365,321 | 1,978,763 | \$125,118,364.23 |
| CLINIC SERVICES | 58,612 | 145,674 | 134,766 | \$16,429,960.46 |
| REP CASE MANAGEMENT | 9 | 0 | 0 | \$3,368.77 |
| LAB AND RADIOLOGICAL | 77,239 | 83,371 | 137,743 | \$2,437,569.87 |
| REMEDIAL SERVICES | 215 | 784 | 19,487 | \$186,999.31 |
| REHAB SUPPORT SERVICES | 3,316 | 20,447 | 359,635 | \$18,390,910.55 |
| AMBULANCE SERVICES | 12,107 | 17,526 | 17,220 | \$1,943,245.01 |
| LOCAL EDUCATION AGENCY | 2,610 | 11,450 | 1,210,990 | \$5,437,353.11 |
| EARLY ACCESS SERVICES | 1,034 | 5,440 | 9,780 | \$206,945.38 |
| PRESCRIBED DRUGS | 218,324 | 2,041,124 | 1,825,050 | \$110,954,772.07 |
| DRUG CAPITATION | 0 | 0 | 0 | \$0.00 |
| INDIAN HEALTH SERVICES | 0 | 0 | 0 | \$0.00 |
| FAMILY PLANNING SERVICES | 24,421 | 57,370 | 57,816 | \$4,023,808.89 |
| IOWA PLAN PROGRAM | 315,885 | 1,685,793 | 1,685,793 | \$49,279,270.53 |
| MANAGED SUBSTANCE ABUSE | 2 | 0 | 0 | \$3.51- |
| MENTAL HEALTH ACCESS PLAN | 3 | 0 | 0 | \$758.32- |
| EPSDT SCREENING | 62,040 | 91,968 | 91,830 | \$7,285,441.49 |
| HMO SERVICES | 6,373 | 29,482 | 29,480 | \$4,602,996.36 |
| PATIENT MANAGEMENT | 160,998 | 747,725 | 747,690 | \$1,495,258.08 |
| HEALTH INS PREMIUM PAYMENT | 6,942 | 19,114 | 81,834 | \$3,577,577.67 |
| MEDICAL SUPPLIES | 42,930 | 180,838 | 9,162,112 | \$20,222,340.31 |
| OTHER PRACTITIONER | 37,904 | 149,757 | 1,206,050 | \$7,364,506.82 |
| FAMILY CENTERED PROGRAM | 3,396 | 17,837 | 158,665 | \$4,576,165.53 |
| FAMILY PRESERVATION | 2 | 2 | 2 | \$5,014.25 |
| TREATMENT FOSTER FAMILY CARE | 762 | 4,855 | 22,154 | \$983,551.04 |
| GROUP TREATMENT THERAPY | 1,565 | 10,333 | 186,705 | \$12,102,320.78 |
| DENTAL | 96,729 | 159,835 | 162,012 | \$22,099,611.82 |
| OPTOMETRIST | 51,705 | 73,038 | 77,345 | \$4,030,686.73 |
| CHIROPRACTIC | 20,989 | 84,279 | 108,388 | \$2,602,646.36 |
| PODIATRIC | 16,121 | 32,375 | 40,003 | \$1,104,562.40 |
| PHYSICAL DISABILITIES SVCS | 683 | 4,500 | 119,261 | \$1,517,413.98 |
| BRAIN INJ WAIVER SERVICES | 789 | 8,901 | 235,995 | \$6,222,014.95 |
| PSYCHIATRIC | 7,758 | 27,451 | 33,219 | \$1,033,537.82 |
| RESIDENTIAL CARE FACILITY | 2,428 | 12,499 | 353,362 | \$2,700,994.66 |
| MR WAIVER SERVICE | 9,696 | 95,637 | 3,597,436 | \$129,679,920.31 |
| CHILDRENS MENTAL HEALTH SVC | 286 | 1,792 | 37,027 | \$1,042,516.97 |
| AIDS WAIVER SERVICES | 48 | 368 | 21,870 | \$221,754.97 |
| ELDERLY WAIVER SERVICES | 9,631 | 109,363 | 2,066,836 | \$23,474,007.99 |

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|--------------------------------|----------------------|-----------------------|---------------------|--------------------|
| SILL & HANDICAPPED WAIVER SVCS | 2,520 | 18,572 | 598,004 | \$9,293,327.93 |
| COUNTY OFFICE REIMBURSEMENT | 0 | 0 | 0 | \$0.00 |
| MEP SERVICES | 11,047 | 60,594 | 63,224 | \$15,538,768.61 |
| UNASSIGNED | 2,331 | 0 | 0 | \$1,383,914.33 |
| * ALL CATEGORIES * | 421,961 | 8,107,898 | 41,171,754 | \$1,264,732,945.88 |
| | | *** END OF REPORT *** | | |