

TITLE XIX REPORT OF EXPENDITURES
(BY CATEGORY OF SERVICE)
(FISCAL YTD TOTALS AS OF 12/31/05)

CATEGORY OF SERVICE	RECIPIENTS SERVED	NUMBER OF CLAIMS	UNITS OF SERVICE	TOTAL PAYMENT
INPATIENT	27,484	33,284	203,081	\$128,813,769.30
OUTPATIENT	147,379	383,320	2,519,445	\$79,523,790.58
CHILD PART HOSP	0	0	0	\$0.00
CHILD DAY TREATMENT	0	0	0	\$0.00
ADULT PART HOSP	0	0	0	\$0.00
ADULT DAY TREATMENT	17	17	213	\$2,559.39
SKILLED NURSING FACILITY	1,331	2,488	33,099	\$7,363,444.67
INTERMEDIATE CARE FACILITY	16,603	82,936	2,408,872	\$204,132,304.98
INTER CARE MENTAL RETARDA	2,278	12,940	380,143	\$115,374,943.61
NURSING PAC FOR MENTAL ILL	37	238	7,068	\$1,651,705.03
HOME HEALTH	17,156	62,490	955,985	\$38,309,465.64
LEAD INSPECTION AGENCY	57	65	68	\$24,158.35
PHYSICIAN	241,728	1,286,078	1,734,395	\$80,709,819.87
CLINIC SERVICES	48,896	115,607	116,758	\$14,084,566.99
MEP CASE MANAGEMENT	9	0	0	\$5,628.35
LAB AND RADIOLOGICAL	37,990	64,256	128,154	\$2,018,044.05
REHAB SUPPORT SERVICES	3,271	20,901	370,238	\$18,114,664.54
AMBULANCE SERVICES	9,080	13,677	13,561	\$1,444,984.18
LOCAL EDUCATION AGENCY	2,175	12,221	1,122,500	\$9,170,650.88
EARLY ACCESS SERVICES	2,820	22,848	12,442	\$251,587.91
PRESCRIBED DRUGS	236,816	3,831,792	3,556,564	\$215,499,926.72
DRUG CAPITATION	1	0	0	\$6.17
INDIAN HEALTH SERVICES	0	0	0	\$0.00
FAMILY PLANNING SERVICES	5,190	9,316	9,394	\$453,793.14
IOWA PLAN PROGRAM	312,409	1,667,464	1,667,464	\$48,221,745.42
MANAGED SUBSTANCE ABUSE	0	0	0	\$0.00
MENTAL HEALTH ACCESS PLAN	2	0	0	\$672.49
EPSDT SCREENING	52,760	81,063	81,013	\$5,848,901.56
HMO SERVICES	6,787	31,505	31,493	\$4,816,815.39
PATIENT MANAGEMENT	161,505	748,853	748,853	\$1,497,706.00
HEALTH INS PREMIUM PAYMENT	7,312	85,626	85,626	\$3,648,859.93
MEDICAL SUPPLIES	38,912	171,172	7,643,958	\$16,312,781.13
OTHER PRACTITIONER	33,314	143,509	260,722	\$7,180,354.09
FAMILY CENTERED PROGRAM	4,658	26,415	227,117	\$6,698,815.68
FAMILY PRESERVATION	4	4	4	\$10,466.66
TREATMENT FOSTER FAMILY CARE	948	6,332	30,416	\$1,306,580.37
GROUP TREATMENT THERAPY	1,679	12,262	221,215	\$13,974,168.15
DENTAL	92,643	152,001	154,892	\$19,718,989.26
OPTOMETRIST	49,968	72,458	77,952	\$3,725,082.79
CHIROPRACTIC	18,870	76,625	99,082	\$2,380,578.69
PODIATRIC	13,345	28,733	35,827	\$1,023,722.43
PHYSICAL DISABILITIES SVCS	478	3,012	81,403	\$1,014,969.98
BRAIN INJ WAIVER SERVICES	586	6,336	183,834	\$4,590,518.31
PSYCHIATRIC	7,805	30,619	38,239	\$1,172,902.03
RESIDENTIAL CARE FACILITY	2,567	12,974	376,386	\$2,837,638.53
MR WAIVER SERVICE	9,150	84,757	3,360,430	\$117,015,530.79
CHILDRENS MENTAL HEALTH SVC	24	30	214	\$4,254.74
AIDS WAIVER SERVICES	41	332	18,879	\$171,279.49
ELDERLY WAIVER SERVICES	8,545	90,156	1,807,973	\$19,881,871.97
ILL & HANDICAPPED WAIVER SVCS	2,053	14,667	474,877	\$7,620,614.81

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)
(FISCAL YTD TOTALS AS OF 12/31/05)

CATEGORY OF SERVICE	RECIPIENTS SERVED	NUMBER OF CLAIMS	UNITS OF SERVICE	TOTAL PAYMENT
COUNTY OFFICE REIMBURSEMENT	0	0	0	\$0.00
MEP SERVICES	10,094	50,736	54,505	\$12,108,737.38
UNASSIGNED	61	1	0	\$1,676,297.19
* A L L C A T E G O R I E S *	371,460	9,552,116	31,334,354	\$1,221,409,324.64

*** END OF REPORT ***