

TITLE XIX MONTHLY REPORT OF EXPENDITURES

(BY CATEGORY OF SERVICE BY PROGRAM)

<u>CATEGORY OF SERVICE</u>	<u>RECIPS</u>	<u>UNITS OF</u>	<u>AMOUNT</u>	<u>RECIPS</u>	<u>UNITS OF</u>	<u>AMOUNT</u>	<u>RECIPS</u>	<u>UNITS OF</u>	<u>AMOUNT</u>
	<u>SERVED</u>	<u>SERVICE</u>	<u>PAID</u>	<u>SERVED</u>	<u>SERVICE</u>	<u>PAID</u>	<u>SERVED</u>	<u>SERVICE</u>	<u>PAID</u>
		<u>FEDERAL ONLY</u>		<u>REFUGEE TXXI</u>			<u>AGED</u>		
INPATIENT	0	0	\$0.00	0	0	\$0.00	422	1,732	\$494,607.71
OUTPATIENT	27	237	\$5,357.67	0	0	\$0.00	2,334	27,918	\$416,101.97
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	49	725	\$143,609.30
INTERMEDIATE CARE FACILITY	0	0	\$0.00	0	0	\$0.00	3,010	96,775	\$6,725,314.27
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	2	61	\$11,979.73
HOME HEALTH	0	0	\$0.00	0	0	\$0.00	1,577	27,748	\$1,300,690.66
LEAD INSPECTION AGENCY	0	0	\$0.00	0	0	\$0.00	0	0	\$0.00
PHYSICIAN	35	63	\$5,046.86	0	0	\$0.00	5,214	28,626	\$510,582.96
CLINIC SERVICES	1	1	\$931.03	0	0	\$0.00	552	252	\$57,849.68
MEP CASE MANAGEMENT	0	0	\$0.00	0	0	\$0.00	0	0	\$0.00
LAB AND RADIOLOGICAL	0	0	\$0.00	0	0	\$0.00	85	243	\$3,532.98
REHAB SUPPORT SERVICES	0	0	\$0.00	0	0	\$0.00	48	1,118	\$58,091.80
AMBULANCE SERVICES	0	0	\$0.00	0	0	\$0.00	219	259	\$23,758.85
LOCAL EDUCATION AGENCY	0	0	\$0.00	0	0	\$0.00	0	0	\$0.00
EARLY ACCESS SERVICES	0	0	\$0.00	0	0	\$0.00	0	0	\$0.00
PRESCRIBED DRUGS	22	46	\$4,032.20	0	0	\$0.00	7,914	53,322	\$2,192,880.67
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	2	2	\$79.98	0	0	\$0.00	0	0	\$0.00
IOWA PLAN PROGRAM	57	62	\$2,004.43	0	0	\$0.00	10	10	\$615.24
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	1	1	\$15.36	0	0	\$0.00	0	0	\$0.00
HMO SERVICES	0	0	\$0.00	0	0	\$0.00	0	0	\$0.00
PATIENT MANAGEMENT	33	33	\$66.00	0	0	\$0.00	0	0	\$0.00
HEALTH INS PREMIUM PAYMENT	0	0	\$0.00	0	0	\$0.00	2	3	\$385.60
MEDICAL SUPPLIES	0	0	\$0.00	0	0	\$0.00	1,988	143,564	\$243,677.85
OTHER PRACTITIONER	1	2	\$93.57	0	0	\$0.00	332	1,075	\$21,431.66
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	1	33	\$2,845.08	0	0	\$0.00	0	0	\$0.00
DENTAL	19	21	\$2,895.30	0	0	\$0.00	357	429	\$70,632.95
OPTOMETRIST	1	1	\$21.43	0	0	\$0.00	614	862	\$27,139.11
CHIROPRACTIC	0	0	\$0.00	0	0	\$0.00	317	865	\$10,205.93

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PODIATRIC	0	0	\$0.00	0	0	\$0.00	710	1,013	\$19,545.79
PHYSICAL DISABILITIES SVCS	0	0	\$0.00	0	0	\$0.00	2	3	\$157.00
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	182	272	\$8,707.15
RESIDENTIAL CARE FACILITY	0	0	\$0.00	0	0	\$0.00	427	13,297	\$104,315.85
MR WAIVER SERVICE	0	0	\$0.00	0	0	\$0.00	39	2,325	\$101,407.07
MR OBRA WAIVER SERVICES	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	1,537	75,789	\$852,728.73
ILL & HANDICAPPED WAIVER SVCS	0	0	\$0.00	0	0	\$0.00	2	76	\$899.85
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	93	150	\$32,624.44
UNASSIGNED	0	0	\$0.00	0	0	\$0.00	0	0	\$0.00
ALL CATEGORIES*	78	502	\$23,388.91	0	0	\$0.00	11,371	478,512	\$13,433,474.80

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		<u>BLIND</u>		<u>DISABLED</u>			<u>ADC - ADULT</u>		
INPATIENT	0	0	\$0.00	1,559	9,109	\$7,122,240.75	705	2,423	\$2,496,927.52
OUTPATIENT	0	0	\$0.00	12,766	161,105	\$4,243,949.34	7,752	64,426	\$2,790,079.22
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	128	3,505	\$1,191,001.98	3	32	\$10,911.01
INTERMEDIATE CARE FACILITY	0	0	\$0.00	460	14,129	\$1,282,107.06	0	0	\$0.00
INTER CARE MENTAL RETARDA	0	0	\$0.00	19	648	\$188,281.80	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	3,273	78,592	\$3,148,519.01	56	366	\$31,553.79
LEAD INSPECTION AGENCY	0	0	\$0.00	0	0	\$0.00	0	0	\$0.00
PHYSICIAN	1	2	\$56.29	23,813	113,953	\$4,272,157.99	15,622	32,845	\$2,740,755.98
CLINIC SERVICES	0	0	\$0.00	2,760	3,313	\$505,384.86	2,169	3,223	\$354,021.90
MEP CASE MANAGEMENT	0	0	\$0.00	0	0	\$0.00	0	0	\$0.00
LAB AND RADIOLOGICAL	0	0	\$0.00	1,373	4,363	\$60,869.46	1,788	4,840	\$101,399.34
REHAB SUPPORT SERVICES	0	0	\$0.00	2,376	56,497	\$2,854,808.16	21	252	\$9,852.07
AMBULANCE SERVICES	0	0	\$0.00	655	760	\$79,713.03	101	105	\$16,238.66
LOCAL EDUCATION AGENCY	0	0	\$0.00	451	129,610	\$857,985.39	6	1,514	\$13,044.20
EARLY ACCESS SERVICES	0	0	\$0.00	129	1,225	\$21,751.19	1	9	\$242.52
PRESCRIBED DRUGS	2	13	\$796.00	34,929	223,396	\$16,854,766.05	19,574	58,175	\$2,772,576.00
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	996	1,162	\$54,049.80	4,007	4,623	\$206,113.79
IOWA PLAN PROGRAM	1	1	\$77.59	42,362	43,616	\$3,082,542.79	36,940	40,846	\$1,019,981.83
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	366	429	\$12,730.56	176	205	\$6,637.23
HMO SERVICES	0	0	\$0.00	0	0	\$0.00	1,303	1,341	\$321,223.91
PATIENT MANAGEMENT	0	0	\$0.00	1	1	\$2.00	21,185	21,185	\$42,370.00
HEALTH INS PREMIUM PAYMENT	0	0	\$0.00	673	1,541	\$144,278.81	514	1,229	\$36,970.77
MEDICAL SUPPLIES	2	174	\$155.46	7,035	631,227	\$1,540,615.24	765	18,298	\$116,054.51
OTHER PRACTITIONER	0	0	\$0.00	2,511	15,556	\$357,137.20	865	2,016	\$105,438.51
FAMILY CENTERED PROGRAM	0	0	\$0.00	196	3,369	\$92,046.76	42	781	\$20,350.52
FAMILY PRESERVATION	0	0	\$0.00	0	0	\$0.00	0	0	\$0.00
TREATMENT FOSTER FAMILY CARE	0	0	\$0.00	3	26	\$1,121.28	0	0	\$0.00
GROUP TREATMENT THERAPY	0	0	\$0.00	8	273	\$14,262.66	3	108	\$6,430.69
DENTAL	0	0	\$0.00	3,891	5,058	\$684,791.01	3,555	4,919	\$776,417.54
OPTOMETRIST	0	0	\$0.00	2,770	3,578	\$169,289.77	1,921	2,447	\$149,401.24
CHIROPRACTIC	0	0	\$0.00	2,007	5,918	\$114,389.75	1,784	4,539	\$149,085.58

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PODIATRIC	0	0	\$0.00	1,172	1,861	\$75,398.98	192	289	\$33,935.50
PHYSICAL DISABILITIES SVCS	0	0	\$0.00	284	9,663	\$133,169.39	0	0	\$0.00
BRAIN INJ WAIVER SERVICES	0	0	\$0.00	136	9,433	\$213,105.83	0	0	\$0.00
PSYCHIATRIC	0	0	\$0.00	2,739	6,711	\$223,159.36	16	42	\$2,836.69
RESIDENTIAL CARE FACILITY	0	0	\$0.00	1,608	50,566	\$408,434.62	0	0	\$0.00
MR WAIVER SERVICE	0	0	\$0.00	845	58,088	\$1,999,659.23	0	0	\$0.00
MR OBRA WAIVER SERVICES	0	0	\$0.00	0	0	\$0.00	0	0	\$0.00
AIDS WAIVER SERVICES	0	0	\$0.00	7	520	\$5,593.59	0	0	\$0.00
ELDERLY WAIVER SERVICES	0	0	\$0.00	85	3,514	\$40,694.66	0	0	\$0.00
ILL & HANDICAPPED WAIVER SVCS	0	0	\$0.00	1,458	69,035	\$1,147,047.08	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	1,512	2,094	\$442,780.55	6	7	\$1,717.65
UNASSIGNED	0	0	\$0.00	1	0	\$0.00	0	0	\$0.00
ALL CATEGORIES*	2	190	\$1,085.34	47,322	1,723,444	\$53,639,836.99	42,102	271,085	\$14,332,568.17

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		<u>ADC - CHILD</u>			<u>CMAP</u>			<u>OTHER</u>	
INPATIENT	382	2,708	\$2,640,153.68	442	9,996	\$2,160,252.50	1,648	8,109	\$8,361,081.15
OUTPATIENT	6,957	35,276	\$1,399,365.71	1,504	12,703	\$354,232.01	9,676	66,145	\$2,520,392.93
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	4	58	-\$13,235.61
INTERMEDIATE CARE FACILITY	0	0	\$0.00	1	0	-\$1,745.98	4	87	-\$129,851.00
INTER CARE MENTAL RETARDA	0	0	\$0.00	1	23	\$9,429.13	1	0	-\$1,210,858.00
NURSING FAC FOR MENTAL ILL	0	0	\$0.00	0	0	\$0.00	0	0	\$0.00
HOME HEALTH	619	1,953	\$54,140.13	66	260	\$10,014.71	732	2,581	-\$378,284.00
LEAD INSPECTION AGENCY	2	2	\$711.38	0	0	\$0.00	1	1	\$355.69
PHYSICIAN	21,285	38,309	\$2,332,189.85	3,427	6,905	\$510,660.17	25,947	51,947	\$4,055,175.37
CLINIC SERVICES	3,626	4,697	\$563,750.63	643	981	\$111,643.94	4,938	7,415	\$868,982.97
MEP CASE MANAGEMENT	0	0	\$0.00	0	0	\$0.00	0	0	\$0.00
LAB AND RADIOLOGICAL	1,310	2,415	\$33,054.52	333	923	\$16,265.45	2,465	6,305	\$101,646.33
REHAB SUPPORT SERVICES	0	0	\$0.00	9	706	\$16,690.13	5	122	\$4,635.32
AMBULANCE SERVICES	58	56	\$9,196.90	32	31	\$5,002.92	121	122	\$21,114.99
LOCAL EDUCATION AGENCY	181	23,010	\$124,589.71	27	4,523	\$16,504.19	99	19,530	\$100,457.77
EARLY ACCESS SERVICES	158	992	\$21,742.38	17	95	\$2,075.12	127	900	\$18,155.65
PRESCRIBED DRUGS	24,501	48,287	\$2,398,688.33	3,958	10,564	\$627,895.96	27,364	52,849	\$2,369,041.97
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	610	684	\$30,484.03	463	528	\$23,776.94	1,403	1,529	\$69,390.21
IOWA PLAN PROGRAM	62,039	67,234	\$737,682.84	8,865	9,802	\$215,918.16	66,451	74,099	\$1,686,014.21
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	1	0	-\$213.06
EPSDT SCREENING	4,957	5,831	\$320,007.53	802	911	\$51,264.30	6,604	7,532	\$545,004.79
HMO SERVICES	2,265	2,355	\$325,641.00	292	300	\$50,218.74	1,957	2,092	\$401,253.43
PATIENT MANAGEMENT	37,482	37,482	\$74,964.00	4,867	4,867	\$9,734.00	41,333	41,333	\$82,666.00
HEALTH INS PREMIUM PAYMENT	828	2,048	\$48,433.49	38	79	\$3,941.00	3,013	8,359	\$209,108.95
MEDICAL SUPPLIES	724	8,664	\$85,593.11	137	4,142	\$16,667.82	788	20,466	\$106,578.55
OTHER PRACTITIONER	2,303	8,420	\$200,231.38	323	943	\$32,644.31	2,540	8,831	\$260,574.15
FAMILY CENTERED PROGRAM	818	10,668	\$344,892.44	289	4,279	\$132,787.51	504	8,165	\$240,045.74
FAMILY PRESERVATION	0	0	\$0.00	0	0	\$0.00	1	1	\$2,675.36
TREATMENT FOSTER FAMILY CARE	1	3	\$129.93	4	22	\$961.14	0	0	\$0.00
GROUP TREATMENT THERAPY	8	172	\$9,453.65	20	576	\$29,432.92	8	226	\$11,327.19
DENTAL	4,731	5,689	\$696,581.98	896	1,154	\$147,966.20	5,541	6,626	\$778,215.63
OPTOMETRIST	1,879	2,234	\$125,060.56	436	533	\$31,112.38	2,201	2,592	\$145,658.10
CHIROPRACTIC	944	2,037	\$62,610.85	172	429	\$14,693.00	1,235	2,749	\$80,170.74

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PODIATRIC	61	89	\$8,964.92	13	18	\$2,352.92	67	93	\$8,903.84
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	2	39	\$792.25
PSYCHIATRIC	3	3	\$89.70	6	6	\$188.92	21	34	\$2,967.29
RESIDENTIAL CARE FACILITY	0	0	\$0.00	3	152	\$2,149.93	1	0	\$2,629.48
MR WAIVER SERVICE	0	0	\$0.00	1	33	\$526.32	6	66	-\$122,853.54
MR OBRA WAIVER SERVICES	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	1	16	\$194.13
ILL & HANDICAPPED WAIVER SVCS	0	0	\$0.00	0	0	\$0.00	2	59	\$922.16
COUNTY OFFICE REIMBURSEMENT	0	0	\$0.00	0	0	\$0.00	0	0	\$0.00
MEP SERVICES	1	1	\$215.00	3	9	\$2,037.90	9	23	\$5,144.09
UNASSIGNED	0	0	\$0.00	0	0	\$0.00	2	0	-\$213,789.06
ALL CATEGORIES*	68,419	311,319	\$12,648,619.63	9,981	76,493	\$4,607,294.66	74,652	401,101	\$20,992,192.16

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	<u>FOSTER - PRESUB - SUB ADOPTS</u>			<u>INTERMEDIATE CARE FACILITY</u>			<u>MEDICALLY NEEDY NO SPEND DN</u>		
INPATIENT	65	512	\$151,794.03	778	3,118	\$778,371.91	73	302	\$271,242.85
OUTPATIENT	1,052	8,798	\$208,506.46	3,783	54,233	\$628,891.50	554	6,119	\$149,355.21
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	152	1,717	\$11,481.54	4	34	-\$1,367.62
INTERMEDIATE CARE FACILITY	0	0	\$0.00	10,326	319,972	\$26,742,194.22	1	31	\$38.85
INTER CARE MENTAL RETARDA	4	109	\$36,121.02	0	0	\$0.00	0	0	\$0.00
NURSING FAC FOR MENTAL ILL	0	0	\$0.00	31	935	\$218,179.04	0	0	\$0.00
HOME HEALTH	89	4,751	\$85,829.21	3,568	70,337	\$3,543,542.24	85	1,222	\$29,758.68
LEAD INSPECTION AGENCY	0	0	\$0.00	0	0	\$0.00	0	0	\$0.00
PHYSICIAN	2,821	4,877	\$265,320.33	8,086	43,783	\$732,361.74	1,031	3,732	\$191,316.24
CLINIC SERVICES	449	562	\$58,420.55	896	436	\$82,045.75	179	198	\$25,488.45
MEP CASE MANAGEMENT	0	0	\$0.00	0	0	\$0.00	0	0	\$0.00
LAB AND RADIOLOGICAL	262	689	\$8,612.89	124	377	\$3,974.61	90	224	\$3,968.64
REHAB SUPPORT SERVICES	2	15	\$860.80	18	300	\$16,350.53	35	1,041	\$65,194.23
AMBULANCE SERVICES	12	10	\$774.79	523	632	\$56,371.74	24	27	\$4,118.90
LOCAL EDUCATION AGENCY	93	23,373	\$133,968.18	6	2,875	\$17,738.03	0	0	\$0.00
EARLY ACCESS SERVICES	41	334	\$6,387.89	3	12	\$182.30	0	0	\$0.00
PRESCRIBED DRUGS	5,281	15,054	\$1,207,409.86	18,824	178,724	\$7,774,049.89	1,643	9,316	\$480,325.85
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	250	287	\$12,482.25	32	32	\$1,617.64	145	174	\$8,261.13
IOWA PLAN PROGRAM	9,313	9,664	\$820,121.26	1,733	1,798	\$98,463.27	1,506	1,721	\$51,857.60
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	297	340	\$15,081.03	5	10	\$285.45	21	21	\$621.23
HMO SERVICES	0	0	\$0.00	0	0	\$0.00	0	0	\$0.00
PATIENT MANAGEMENT	72	72	\$144.00	0	0	\$0.00	0	0	\$0.00
HEALTH INS PREMIUM PAYMENT	111	261	\$10,043.83	28	48	\$5,783.51	13	28	\$3,540.09
MEDICAL SUPPLIES	212	26,595	\$53,161.70	4,098	358,721	\$626,219.15	189	13,309	\$24,378.10
OTHER PRACTITIONER	580	2,842	\$74,341.48	557	1,832	\$38,331.29	64	247	\$6,206.18
FAMILY CENTERED PROGRAM	739	12,192	\$369,889.01	0	0	\$0.00	0	0	\$0.00
FAMILY PRESERVATION	1	1	\$2,353.38	0	0	\$0.00	0	0	\$0.00
TREATMENT FOSTER FAMILY CARE	518	4,919	\$207,867.57	0	0	\$0.00	0	0	\$0.00
GROUP TREATMENT THERAPY	974	37,479	\$2,366,874.85	0	0	\$0.00	0	0	\$0.00
DENTAL	1,044	1,207	\$143,068.29	761	940	\$134,964.56	214	309	\$46,877.28
OPTOMETRIST	518	593	\$30,947.04	844	1,135	\$34,609.46	144	190	\$10,037.15
CHIROPRACTIC	126	282	\$8,726.69	195	550	\$6,805.89	110	307	\$8,323.10

TITLE XIX MONTHLY REPORT OF EXPENDITURES

(BY CATEGORY OF SERVICE BY PROGRAM)

<u>CATEGORY OF SERVICE</u>	<u>RECIPS SERVED</u>	<u>UNITS OF SERVICE</u>	<u>AMOUNT PAID</u>	<u>RECIPS SERVED</u>	<u>UNITS OF SERVICE</u>	<u>AMOUNT PAID</u>	<u>RECIPS SERVED</u>	<u>UNITS OF SERVICE</u>	<u>AMOUNT PAID</u>
PODIATRIC	33	42	\$2,969.64	1,735	2,429	\$46,171.16	49	71	\$2,789.96
PHYSICAL DISABILITIES SVCS	0	0	\$0.00	99	3,236	\$40,447.86	0	0	\$0.00
BRAIN INJ WAIVER SERVICES	17	1,403	\$25,805.48	220	12,585	\$367,267.66	0	0	\$0.00
PSYCHIATRIC	21	55	\$2,289.58	307	441	\$15,276.72	52	102	\$2,686.49
RESIDENTIAL CARE FACILITY	2	53	\$442.00	17	498	\$3,983.58	3	61	\$2,425.88
MR WAIVER SERVICE	137	7,154	\$182,749.89	10	412	\$9,821.97	0	0	\$0.00
MR OBRA WAIVER SERVICES	0	0	\$0.00	0	0	\$0.00	0	0	\$0.00
AIDS WAIVER SERVICES	0	0	\$0.00	28	2,342	\$20,865.50	0	0	\$0.00
ELDERLY WAIVER SERVICES	0	0	\$0.00	5,136	232,972	\$2,496,857.30	1	44	\$235.40
ILL & HANDICAPPED WAIVER SVCS	24	1,334	\$21,875.29	13	621	\$5,900.76	0	0	\$0.00
COUNTY OFFICE REIMBURSEMENT	0	0	\$0.00	0	0	\$0.00	0	0	\$0.00
MEP SERVICES	136	223	\$47,687.52	80	99	\$21,398.51	12	17	\$3,724.94
UNASSIGNED	0	0	\$0.00	0	0	\$0.00	1	-1	-\$10.72
ALL CATEGORIES*	9,563	166,082	\$6,562,927.79	17,149	1,298,152	\$44,580,806.28	2,288	38,846	\$1,391,394.09

TITLE XIX MONTHLY REPORT OF EXPENDITURES

(BY CATEGORY OF SERVICE BY PROGRAM)

<u>CATEGORY OF SERVICE</u>	<u>RECIPS SERVED</u>	<u>UNITS OF SERVICE</u>	<u>AMOUNT PAID</u>	<u>RECIPS SERVED</u>	<u>UNITS OF SERVICE</u>	<u>AMOUNT PAID</u>	<u>RECIPS SERVED</u>	<u>UNITS OF SERVICE</u>	<u>AMOUNT PAID</u>
	<u>MEDICALLY NEEDY WI SPEND DN</u>			<u>OTHER TXXI</u>			<u>OTHER BREAST CERVICAL CANCER</u>		
INPATIENT	281	1,420	\$1,601,586.39	47	170	\$157,863.62	8	27	\$28,292.45
OUTPATIENT	956	13,398	\$538,898.18	901	5,916	\$206,762.98	91	1,865	\$200,659.84
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	0	0	\$0.00
INTERMEDIATE CARE FACILITY	6	-47	-\$13,026.21	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	184	2,799	\$176,402.17	17	47	\$885.96	3	21	\$1,621.94
LEAD INSPECTION AGENCY	0	0	\$0.00	0	0	\$0.00	0	0	\$0.00
PHYSICIAN	1,727	8,541	\$424,413.18	2,840	4,594	\$275,518.81	147	793	\$163,482.69
CLINIC SERVICES	153	153	\$23,050.28	552	759	\$80,773.00	18	32	\$4,543.71
MEP CASE MANAGEMENT	0	0	\$0.00	0	0	\$0.00	0	0	\$0.00
LAB AND RADIOLOGICAL	69	298	\$3,673.90	140	359	\$5,343.34	32	82	\$1,847.34
REHAB SUPPORT SERVICES	59	1,599	\$101,940.75	1	144	\$3,234.87	0	0	\$0.00
AMBULANCE SERVICES	73	84	\$13,766.33	7	7	\$1,795.78	0	0	\$0.00
LOCAL EDUCATION AGENCY	0	0	\$0.00	32	4,639	\$29,241.93	0	0	\$0.00
EARLY ACCESS SERVICES	0	0	\$0.00	4	16	\$375.59	0	0	\$0.00
PRESCRIBED DRUGS	1,535	8,776	\$670,773.00	3,762	7,446	\$424,534.66	150	703	\$47,387.27
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	21	21	\$1,221.25	216	242	\$10,764.72	0	0	\$0.00
IOWA PLAN PROGRAM	0	0	\$0.00	10,200	10,891	\$127,767.34	174	178	\$13,811.02
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	440	465	\$21,768.18	0	0	\$0.00
HMO SERVICES	0	0	\$0.00	249	253	\$27,337.88	0	0	\$0.00
PATIENT MANAGEMENT	0	0	\$0.00	6,883	6,883	\$13,766.00	0	0	\$0.00
HEALTH INS PREMIUM PAYMENT	0	0	\$0.00	48	95	\$4,105.75	0	0	\$0.00
MEDICAL SUPPLIES	365	22,844	\$59,445.65	82	2,658	\$8,766.69	18	376	\$2,718.31
OTHER PRACTITIONER	106	271	\$11,901.21	356	1,556	\$31,213.92	7	13	\$1,550.47
FAMILY CENTERED PROGRAM	0	0	\$0.00	112	1,582	\$47,965.15	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	3	25	\$1,083.42	0	0	\$0.00
GROUP TREATMENT THERAPY	0	0	\$0.00	10	360	\$20,865.90	0	0	\$0.00
DENTAL	135	194	\$29,312.94	1,211	1,418	\$215,169.28	14	18	\$2,659.27
OPTOMETRIST	106	151	\$5,560.98	463	566	\$32,213.26	13	17	\$1,153.46
CHIROPRACTIC	69	164	\$2,588.53	246	470	\$14,122.29	19	62	\$1,765.42

TITLE XIX MONTHLY REPORT OF EXPENDITURES

(BY CATEGORY OF SERVICE BY PROGRAM)

<u>CATEGORY OF SERVICE</u>	<u>RECIPS SERVED</u>	<u>UNITS OF SERVICE</u>	<u>AMOUNT PAID</u>	<u>RECIPS SERVED</u>	<u>UNITS OF SERVICE</u>	<u>AMOUNT PAID</u>	<u>RECIPS SERVED</u>	<u>UNITS OF SERVICE</u>	<u>AMOUNT PAID</u>
PODIATRIC	59	98	\$3,077.30	27	35	\$3,840.85	3	3	\$210.60
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	139	519	\$21,575.10	4	4	\$157.99	0	0	\$0.00
RESIDENTIAL CARE FACILITY	0	0	\$0.00	0	0	\$0.00	0	0	\$0.00
MR WAIVER SERVICE	2	135	\$4,968.00	2	135	\$1,698.12	0	0	\$0.00
MR OBRA WAIVER SERVICES	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	57	95	\$20,149.26	2	3	\$634.31	0	0	\$0.00
UNASSIGNED	0	0	\$0.00	0	0	\$0.00	0	0	\$0.00
ALL CATEGORIES*	2,363	61,513	\$3,701,278.19	10,057	51,738	\$1,769,571.59	167	4,190	\$471,703.79

TITLE XIX MONTHLY REPORT OF EXPENDITURES

(BY CATEGORY OF SERVICE BY PROGRAM)

<u>CATEGORY OF SERVICE</u>	<u>RECIPS SERVED</u>	<u>UNITS OF SERVICE</u>	<u>AMOUNT PAID</u>	<u>RECIPS SERVED</u>	<u>UNITS OF SERVICE</u>	<u>AMOUNT PAID</u>	<u>RECIPS SERVED</u>	<u>UNITS OF SERVICE</u>	<u>AMOUNT PAID</u>
		<u>STATE ONLY</u>		<u>FED CNTY - FED CNTY STATE</u>			<u>FEDERAL MEDICAID ONLY AGED</u>		
INPATIENT	21	113	\$95,415.83	137	575	\$448,420.99	0	0	\$0.00
OUTPATIENT	263	2,647	\$122,419.26	1,855	18,886	\$395,298.94	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	2	37	\$18,699.48	3	55	\$10,207.37	0	0	\$0.00
INTERMEDIATE CARE FACILITY	0	0	\$0.00	5	125	\$9,761.48	0	0	\$0.00
INTER CARE MENTAL RETARDA	1	28	\$12,060.98	2,162	66,895	\$19,908,552.57	0	0	\$0.00
NURSING FAC FOR MENTAL ILL	0	0	\$0.00	0	0	\$0.00	0	0	\$0.00
HOME HEALTH	13	109	\$6,025.25	923	32,585	\$1,226,915.80	0	0	\$0.00
LEAD INSPECTION AGENCY	0	0	\$0.00	0	0	\$0.00	0	0	\$0.00
PHYSICIAN	521	1,411	\$112,391.73	4,220	16,389	\$453,389.49	0	0	\$0.00
CLINIC SERVICES	80	127	\$15,051.02	362	332	\$39,572.68	0	0	\$0.00
MEP CASE MANAGEMENT	0	0	\$0.00	0	0	\$0.00	0	0	\$0.00
LAB AND RADIOLOGICAL	64	193	\$3,838.55	183	546	\$6,410.95	0	0	\$0.00
REHAB SUPPORT SERVICES	3	64	\$5,291.65	41	610	\$37,048.09	0	0	\$0.00
AMBULANCE SERVICES	7	8	\$1,251.23	68	74	\$7,598.21	0	0	\$0.00
LOCAL EDUCATION AGENCY	3	1,738	\$4,882.00	372	124,204	\$934,997.05	0	0	\$0.00
EARLY ACCESS SERVICES	1	19	\$425.86	34	288	\$4,653.33	0	0	\$0.00
PRESCRIBED DRUGS	759	3,552	\$215,647.29	7,608	42,108	\$3,190,037.51	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	16	20	\$947.61	534	626	\$29,161.77	0	0	\$0.00
IOWA PLAN PROGRAM	1,097	1,150	\$96,568.87	8,822	8,878	\$654,067.92	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	4	4	\$577.14	85	126	\$2,277.64	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	4	9	\$416.55	416	911	\$89,142.55	0	0	\$0.00
MEDICAL SUPPLIES	90	5,432	\$11,731.44	1,614	265,960	\$374,498.32	0	0	\$0.00
OTHER PRACTITIONER	50	159	\$7,210.04	1,160	11,540	\$259,911.14	0	0	\$0.00
FAMILY CENTERED PROGRAM	6	75	\$2,660.89	13	120	\$4,693.03	0	0	\$0.00
FAMILY PRESERVATION	0	0	\$0.00	0	0	\$0.00	0	0	\$0.00
TREATMENT FOSTER FAMILY CARE	4	52	\$2,231.62	1	3	\$114.57	0	0	\$0.00
GROUP TREATMENT THERAPY	8	326	\$21,344.49	0	0	\$0.00	0	0	\$0.00
DENTAL	86	102	\$12,666.71	1,354	1,511	\$120,513.76	0	0	\$0.00
OPTOMETRIST	65	81	\$5,373.89	669	775	\$33,496.80	0	0	\$0.00
CHIROPRACTIC	43	141	\$4,659.04	260	617	\$11,905.81	0	0	\$0.00

TITLE XIX MONTHLY REPORT OF EXPENDITURES

(BY CATEGORY OF SERVICE BY PROGRAM)

<u>CATEGORY OF SERVICE</u>	<u>RECIPS SERVED</u>	<u>UNITS OF SERVICE</u>	<u>AMOUNT PAID</u>	<u>RECIPS SERVED</u>	<u>UNITS OF SERVICE</u>	<u>AMOUNT PAID</u>	<u>RECIPS SERVED</u>	<u>UNITS OF SERVICE</u>	<u>AMOUNT PAID</u>
PODIATRIC	24	32	\$2,638.99	671	850	\$28,895.22	0	0	\$0.00
PHYSICAL DISABILITIES SVCS	0	0	\$0.00	2	153	\$1,918.02	0	0	\$0.00
BRAIN INJ WAIVER SERVICES	0	0	\$0.00	131	8,362	\$202,606.51	0	0	\$0.00
PSYCHIATRIC	0	0	\$0.00	487	985	\$32,331.42	0	0	\$0.00
RESIDENTIAL CARE FACILITY	2	31	\$406.77	232	7,128	\$52,461.15	0	0	\$0.00
MR WAIVER SERVICE	1	28	\$4,671.24	6,913	484,055	\$16,684,465.28	0	0	\$0.00
MR OBRA WAIVER SERVICES	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	1	60	\$540.00	11	330	\$3,242.91	0	0	\$0.00
ILL & HANDICAPPED WAIVER SVCS	1	8	\$302.48	145	7,341	\$129,354.56	0	0	\$0.00
COUNTY OFFICE REIMBURSEMENT	0	0	\$0.00	0	0	\$0.00	0	0	\$0.00
MEP SERVICES	1	1	\$215.00	6,433	8,547	\$1,826,593.28	0	0	\$0.00
UNASSIGNED	0	0	\$0.00	0	0	\$0.00	0	0	\$0.00
ALL CATEGORIES*	1,143	17,757	\$788,562.90	9,371	1,112,490	\$47,214,516.12	0	0	\$0.00

TITLE XIX MONTHLY REPORT OF EXPENDITURES

(BY CATEGORY OF SERVICE BY PROGRAM)

<u>CATEGORY OF SERVICE</u>	<u>RECIPS</u>	<u>UNITS OF</u>	<u>AMOUNT</u>	<u>RECIPS</u>	<u>UNITS OF</u>	<u>AMOUNT</u>	<u>RECIPS</u>	<u>UNITS OF</u>	<u>AMOUNT</u>
	<u>SERVED</u>	<u>SERVICE</u>	<u>PAID</u>	<u>SERVED</u>	<u>SERVICE</u>	<u>PAID</u>	<u>SERVED</u>	<u>SERVICE</u>	<u>PAID</u>
	<u>FEDERAL MEDICAID ONLY BLIND</u>			<u>TOTAL</u>					
INPATIENT	0	0	\$0.00	6,531	40,314	\$26,808,251.38			
OUTPATIENT	0	0	\$0.00	49,899	479,672	\$14,180,271.22			
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	341	6,163	\$1,371,307.45			
INTERMEDIATE CARE FACILITY	0	0	\$0.00	13,683	431,072	\$34,614,792.69			
INTER CARE MENTAL RETARDA	0	0	\$0.00	2,181	67,703	\$18,943,587.50			
NURSING FAC FOR MENTAL ILL	0	0	\$0.00	33	996	\$230,158.77			
HOME HEALTH	0	0	\$0.00	11,030	223,371	\$9,237,615.55			
LEAD INSPECTION AGENCY	0	0	\$0.00	3	3	\$1,067.07			
PHYSICIAN	0	0	\$0.00	114,253	356,770	\$17,044,819.68			
CLINIC SERVICES	0	0	\$0.00	17,223	22,481	\$2,791,510.45			
MEP CASE MANAGEMENT	0	0	\$0.00	0	0	\$0.00			
LAB AND RADIOLOGICAL	0	0	\$0.00	8,280	21,857	\$354,438.30			
REHAB SUPPORT SERVICES	0	0	\$0.00	2,598	62,468	\$3,173,998.40			
AMBULANCE SERVICES	0	0	\$0.00	1,885	2,175	\$240,702.33			
LOCAL EDUCATION AGENCY	0	0	\$0.00	1,242	335,016	\$2,233,408.45			
EARLY ACCESS SERVICES	0	0	\$0.00	507	3,890	\$75,991.83			
PRESCRIBED DRUGS	0	0	\$0.00	153,733	712,331	\$41,230,842.51			
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	8,646	9,930	\$448,351.12			
IOWA PLAN PROGRAM	0	0	\$0.00	249,051	269,950	\$8,607,494.37			
MANAGED SUBSTANCE ABUSE	0	0	\$0.00	0	0	\$0.00			
MENTAL HEALTH ACCESS PLAN	0	0	\$0.00	1	0	-\$213.06			
EPSDT SCREENING	0	0	\$0.00	13,696	15,875	\$976,270.44			
HMO SERVICES	0	0	\$0.00	6,051	6,341	\$1,125,674.96			
PATIENT MANAGEMENT	0	0	\$0.00	111,856	111,856	\$223,712.00			
HEALTH INS PREMIUM PAYMENT	0	0	\$0.00	5,688	14,611	\$556,150.90			
MEDICAL SUPPLIES	0	0	\$0.00	17,735	1,522,430	\$3,270,261.90			
OTHER PRACTITIONER	0	0	\$0.00	11,649	55,303	\$1,408,216.51			
FAMILY CENTERED PROGRAM	0	0	\$0.00	2,665	41,231	\$1,255,331.05			
FAMILY PRESERVATION	0	0	\$0.00	2	2	\$5,028.74			
TREATMENT FOSTER FAMILY CARE	0	0	\$0.00	534	5,050	\$213,509.53			
GROUP TREATMENT THERAPY	0	0	\$0.00	1,029	39,553	\$2,482,837.43			
DENTAL	0	0	\$0.00	23,727	29,595	\$3,862,732.70			
OPTOMETRIST	0	0	\$0.00	12,610	15,755	\$801,074.63			
CHIROPRACTIC	0	0	\$0.00	7,473	19,130	\$490,052.62			

TITLE XIX MONTHLY REPORT OF EXPENDITURES

(BY CATEGORY OF SERVICE BY PROGRAM)

<u>CATEGORY OF SERVICE</u>	<u>RECIPS SERVED</u>	<u>UNITS OF SERVICE</u>	<u>AMOUNT PAID</u>	<u>RECIPS SERVED</u>	<u>UNITS OF SERVICE</u>	<u>AMOUNT PAID</u>	<u>RECIPS SERVED</u>	<u>UNITS OF SERVICE</u>	<u>AMOUNT PAID</u>
PODIATRIC	0	0	\$0.00	4,792	6,923	\$239,695.67			
PHYSICAL DISABILITIES SVCS	0	0	\$0.00	381	13,055	\$175,692.27			
BRAIN INJ WAIVER SERVICES	0	0	\$0.00	492	31,822	\$809,577.73			
PSYCHIATRIC	0	0	\$0.00	3,946	9,174	\$312,266.41			
RESIDENTIAL CARE FACILITY	0	0	\$0.00	2,274	71,786	\$577,249.26			
MR WAIVER SERVICE	0	0	\$0.00	7,872	552,431	\$18,867,113.58			
MR OBRA WAIVER SERVICES	0	0	\$0.00	0	0	\$0.00			
AIDS WAIVER SERVICES	0	0	\$0.00	35	2,862	\$26,459.09			
ELDERLY WAIVER SERVICES	0	0	\$0.00	6,663	312,725	\$3,394,493.13			
ILL & HANDICAPPED WAIVER SVCS	0	0	\$0.00	1,636	78,474	\$1,306,302.18			
COUNTY OFFICE REIMBURSEMENT	0	0	\$0.00	0	0	\$0.00			
MEP SERVICES	0	0	\$0.00	8,256	11,269	\$2,404,922.45			
UNASSIGNED	0	0	\$0.00	4	-1	-\$213,799.78			
ALL CATEGORIES*	0	0	\$0.00	306,028	6,013,414	\$226,159,221.41	0	0	\$0.00