TITLE XIX REPORT OF EXPENDITURES

AID CATEGORY	NUMBER OF RE	CIPIENTS SERVED	NUMBER OF CLAIMS	TOTAL PAYMENT	AVERAGE PAYMENTELIGIBLE	T PER RECIPIENT SERVED
FEDERAL ONLY						
FEDERAL ONLY - MONEY PAYMENT						
REFUGEE ONLY	3	3	15	\$4,160.82	\$1,386.94	\$1,386.94
TOTAL FEDERAL ONLY - MONEY PAYMENT	3	3	15	\$4,160.82	\$1,386.94	\$1,386.94
FEDERAL ONLY -NO MONEY PAYMENT						
REFUGEE	64	71	237	\$21,468.13	\$335.44	\$302.37
TOTAL FEDERAL ONLY -NO MONEY PAYMENT	64	71	237	\$21,468.13	\$335.44	\$302.37
TOTAL FEDERAL ONLY	67	74	252	\$25,628.95	\$382.52	\$346.34
FEDERAL-STATE						
FEDERAL-STATE - MONEY PAYMENT						
SSI AGED SSI BLIND SSI DISABLED ADC ADULT ADC CHILD FOSTER CARE SUBSIDIZED ADOPTION SSA RCF IHHRC SUBSIDIZED ADOPTION-INTERSTATE FOSTER CARE - INTERSTATE TOTAL FEDERAL-STATE - MONEY PAYMENT	4,913 2 33,169 19,126 34,850 2,189 3,978 728 44 3	4,730 2 34,660 20,786 37,108 2,300 3,976 5,509 43 3	36,815 23 235,218 86,418 114,677 10,207 10,252 55,200 62 5	\$3,677,788.97 \$1,321.42 \$30,876,656.21 \$6,431,932.02 \$5,936,726.31 \$1,899,443.90 \$1,148,337.42 \$10,897,005.70 \$8,044.58 \$472.74 \$60,877,729.27	\$748.58 \$660.71 \$930.89 \$336.29 \$170.35 \$867.72 \$288.67 \$14,968.41 \$182.83 \$157.58	\$777.55 \$660.71 \$890.84 \$309.44 \$159.99 \$825.85 \$288.82 \$1,978.04 \$187.08 \$157.58
INTERMEDIATE CARE FACILITY	20,799	16,952	170,504	\$36,167,961.31	\$1,738.93	\$2,133.55
NON-INTERMEDIATE CARE FACILITY	28,612	28,868	148,441	\$14,155,108.84	\$494.73	\$490.34

TITLE XIX REPORT OF EXPENDITURES

	NUMBER OF RECIPIENTS		NUMBER OF	<u>TOTAL</u>	AVERAGE PAYMENT PER RECIPIENT	
AID CATEGORY	ELIGIBLE	SERVED	<u>CLAIMS</u>	<u>PAYMENT</u>	<u>ELIGIBLE</u>	<u>SERVED</u>
CMAP	11,032	11,456	42,164	\$5,242,769.55	\$475.23	\$457.64
SUBSIDIZED ADOPTIONS	1,469	1,463	3,699	\$355,462.15	\$241.98	\$242.97
NO MONEY - ADC - VOLUNTARY	33,106	31,725	102,094	\$6,282,571.06	\$189.77	\$198.03
NO MONEY - SSI-SSA - VOLUNTARY	436	398	2,349	\$254,757.72	\$584.31	\$640.09
MED NEEDY - NO SPEND - CHILDRN	214	211	673	\$58,217.27	\$272.04	\$275.91
MED NEEDY - NO SPEND - PREG WM	0	1	1	\$968.73	\$0.00	\$968.73
MED NEEDY - WI SPEND - CHILDRN	10	69	182	\$55,297.73	\$5,529.77	\$801.42
MED NEEDY - WI SPEND - PREG WM	0	1	8	\$2,945.51	\$0.00	\$2,945.51
MED NEEDY - NO SPEND - AGED	610	541	3,305	\$148,070.58	\$242.74	\$273.70
MED NEEDY - NO SPEND - BLIND	0	1	0	-\$25,489.22	\$0.00	-\$25,489.22
MED NEEDY - NO SPEND - DISABLE	332	357	2,941	\$393,465.03	\$1,185.14	\$1,102.14
MED NEEDY - WITH SPEND - AGED	456	742	3,834	\$248,746.20	\$545.50	\$335.24
MED NEEDY - WITH SPEND - DISAB	452	797	5,465	\$1,046,959.74	\$2,316.28	\$1,313.63
MED NEEDY - NO SPEND - CRTKR	1,115	1,101	4,881	\$417,127.44	\$374.11	\$378.86
MED NEEDY - WITH SPEND - CRTKR	155	571	1,975	\$666,146.51	\$4,297.72	\$1,166.63
MAC SOBRA - PREGNANT WOMEN	6,276	7,388	31,489	\$3,471,007.82	\$553.06	\$469.82
MAC SOBRA - INFANTS	8,008	8,618	33,768	\$3,986,315.37	\$497.79	\$462.56
MAC SOBRA - CHILDREN	57,021	56,787	163,395	\$6,335,611.24	\$111.11	\$111.57
QUALIFIED MEDICARE BENE - AGED	2,811	911	2,061	\$113,724.45	\$40.46	\$124.83
QUALIFIED MEDICARE BENE - DISA	1,828	646	1,583	\$90,428.76	\$49.47	\$139.98
MAC (SOBRA/TXXI) CHILD	10,601	9,964	27,040	\$1,048,390.25	\$98.90	\$105.22
BREAST CERVICAL CANCER	174	185	1,370	\$278,031.04	\$1,597.88	\$1,502.87
TOTAL FEDERAL-STATE - NO MONEY PYMT	185,517	179,753	753,222	\$80,794,595.08	\$435.51	\$449.48
TOTAL FEDERAL-STATE	284,519	288,870	1,302,099	\$141,672,324.35	\$497.94	\$490.44
FEDERAL-COUNTY						
FEDERAL-COUNTY - MONEY PAYMENT						
FED COUNTY ICF MR SSI	828	852	6,263	\$8,343,062.65	\$10,076.16	\$9,792.33
TOTAL FEDERAL-COUNTY - MONEY PAYMENT	828	852	6,263	\$8,343,062.65	\$10,076.16	\$9,792.33
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FEDERAL-COUNTY - NO MONEY PYMT						
INTERMED CARE FAC-MENTALLY RTD	9,049	8,498	66,289	\$32,278,907.05	\$3,567.12	\$3,798.41

IOWA DEPARTMENT OF HUMAN SERVICES MEDICAID MANAGEMENT INFORMATION SYSTEM

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TITLE XIX REPORT OF EXPENDITURES

AID CATEGORY	NUMBER OF R ELIGIBLE	ECIPIENTS SERVED	NUMBER OF CLAIMS	TOTAL PAYMENT	AVERAGE PAYMEN ELIGIBLE	T PER RECIPIENT SERVED
TOTAL FEDERAL-COUNTY - NO MONEY PYMT	9,049	8,498	66,289	\$32,278,907.05	\$3,567.12	\$3,798.41
TOTAL FEDERAL-COUNTY	9,877	9,350	72,552	\$40,621,969.70	\$4,112.78	\$4,344.60
STATE ONLY STATE ONLY - MONEY PAYMENT						
STATE ONLY - MONEY PAYMENT	1,034	1,017	5,482	\$619,258.02	\$598.90	\$608.91
TOTAL STATE ONLY - MONEY PAYMENT	1,034	1,017	5,482	\$619,258.02	\$598.90	\$608.91
STATE ONLY - NO MONEY PAYMENT						
STATE ONLY - NO MONEY PAYMENT	152	136	437	\$55,870.46	\$367.57	\$410.81
TOTAL STATE ONLY - NO MONEY PAYMENT	152	136	437	\$55,870.46	\$367.57	\$410.81
TOTAL STATE ONLY	1,186	1,153	5,919	\$675,128.48	\$569.25	\$585.54
FEDERAL-COUNTY-STATE						
FEDERAL-COUNTY-STATE MONEY						
FED STATE COUNTY - MHI SSI	0	11	17	\$80,538.92	\$0.00	\$7,321.72
TOTAL FEDERAL-COUNTY-STATE MONEY	0	11	17	\$80,538.92	\$0.00	\$7,321.72
FEDERAL-COUNTY-STATE NO MONEY						
TOTAL FEDERAL-COUNTY-STATE NO MONEY	0	0	0	\$0.00	\$0.00	\$0.00

IOWA DEPARTMENT OF HUMAN SERVICES MEDICAID MANAGEMENT INFORMATION SYSTEM

RUN DATE 01/23/05

TITLE XIX REPORT OF EXPENDITURES

AID CATEGORY	NUMBER OF RE	CIPIENTS SERVED	NUMBER OF CLAIMS	TOTAL PAYMENT	AVERAGE PAYMENT P	ER RECIPIENT SERVED
TOTAL FEDERAL-COUNTY-STATE	0	11	17	\$80,538.92	\$0.00	\$7,321.72
UNDEFINED						
UNDEFINED SUBTOTAL						
UNDEFINED CATEGORY	474	469	988	\$1,163,672.88	\$2,455.01	\$2,481.18
TOTAL UNDEFINED SUBTOTAL	474	469	988	\$1,163,672.88	\$2,455.01	\$2,481.18
TOTAL UNDEFINED	474	469	988	\$1,163,672.88	\$2,455.01	\$2,481.18
TOTAL S T A T E	296,123	299,927	1,381,827	\$184,239,263.28	\$622.17	\$614.28