

T I T L E X I X M O N T H L Y R E P O R T O F E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE

CATEGORY OF SERVICE	FEDERAL ONLY			REFUGEE TXXI			AGED		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
INPATIENT	2	2	18,392.24	0	0	0.00	492	1752	410,205.45
OUTPATIENT	21	529	6,090.63	0	0	0.00	4006	72833	563,134.04
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	154	2211	6,125.46
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	4510	142002	12600,247.61
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	5	356	110,074.72
HOME HEALTH	0	0	0.00	0	0	0.00	2294	48375	1723,684.05
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	48	89	10,146.44	0	0	0.00	6313	37660	364,777.69
CLINIC SERVICES	4	6	900.42	0	0	0.00	436	302	36,254.80
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	15	90	1,578.47	0	0	0.00	826	253	2,884.00
HABILITATION SERVICES	0	0	0.00	0	0	0.00	42	1432	83,165.24
REMEDIAL SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	2	0	62.34
AMBULANCE SERVICES	0	0	0.00	0	0	0.00	291	357	30,414.88
LOCAL EDUCATION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00

T I T L E X I X M O N T H L Y R E P O R T O F E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE

FEDERAL ONLY

REFUGEE TXXI

AGED

RECIPS UNITS OF
SERVED SERVICEAMOUNT
PAIDRECIPS UNITS OF
SERVED SERVICEAMOUNT
PAIDRECIPS UNITS OF
SERVED SERVICEAMOUNT
PAID

EARLY ACCESS SERVICES

0 0

0.00

0 0

0.00

0 0

0.00

PRESCRIBED DRUGS

29 79

6,707.28

0 0

0.00

2945 4948

61,533.20

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

0 0

0.00

0 0

0.00

IOWA PLAN PROGRAM

80 103

2,633.88

0 0

0.00

3 3

261.32

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

36.47

0 0

0.00

0 0

0.00

HMO SERVICES

0 0

0.00

0 0

0.00

0 0

0.00

PACE SERVICES

0 0

0.00

0 0

0.00

0 0

0.00

PATIENT MANAGEMENT

36 36

72.00

0 0

0.00

0 0

0.00

HEALTH INS PREMIUM PAYMENT

0 0

0.00

0 0

0.00

0 0

0.00

MEDICAL SUPPLIES

1 100

13.99

0 0

0.00

2681 121382

267,972.37

OTHER PRACTITIONER

2 3

267.14

0 0

0.00

321 1284

14,752.31

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

0 0

0.00

0 0

0.00

0 0

0.00

DENTAL

10 11

1,677.87

0 0

0.00

402 485

84,378.67

OPTOMETRIST

4 4

228.03

0 0

0.00

696 1017

25,972.85

T I T L E X I X M O N T H L Y R E P O R T O F E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE

FEDERAL ONLY

REFUGEE TXXI

AGED

	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
CHIROPRACTIC	0	0	0.00	0	0	0.00	419	1157	7,187.13
PODIATRIC	0	0	0.00	0	0	0.00	804	1246	12,447.73
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	1	36	4,007.82
PSYCHIATRIC	0	0	0.00	0	0	0.00	171	352	9,331.23
RESIDENTIAL CARE FACILITY	0	0	0.00	0	0	0.00	326	10423	78,325.39
MR WAIVER SERVICE	0	0	0.00	0	0	0.00	79	5147	228,660.19
CHILDRENS MENTAL HEALTH SVC	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	3397	147005	2163,097.14
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	0	0	0.00	0	0	0.00	78	77	20,200.14
UNASSIGNED	0	0	0.00	0	0	0.00	0	0	0.00
* A L L C A T E G O R I E S *	104	1053	48,744.86	0	0	0.00	14064	602095	18909,033.09

T I T L E X I X M O N T H L Y R E P O R T O F E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	BLIND			DISABLED			ADC - ADULT		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
INPATIENT	0	0	0.00	1598	8529	7069,897.28	655	2250	2739,640.29
OUTPATIENT	0	0	0.00	15028	269989	4881,997.46	7840	96300	3348,508.51
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	176	4371	1894,885.07	1	0	4,310.04
INTERMEDIATE CARE FACILITY	0	0	0.00	582	18339	1988,510.11	0	0	0.00
INTER CARE MENTAL RETARDA	0	0	0.00	11	303	94,514.56	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	3519	91119	2587,253.29	58	697	45,428.74
LEAD INSPECTION AGENCY	0	0	0.00	1	1	377.35	0	0	0.00
PHYSICIAN	0	0	0.00	23100	112750	3731,378.81	13819	27132	2551,760.86
CLINIC SERVICES	0	0	0.00	2750	4135	464,804.87	2513	3953	469,627.40
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	0	0	0.00	3119	5857	91,181.50	4123	9567	272,792.36
HABILITATION SERVICES	0	0	0.00	2261	63793	3154,902.70	25	474	17,681.32
REMEDIAL SERVICES	0	0	0.00	487	14946	246,022.87	143	4521	66,854.00
REHAB SUPPORT SERVICES	0	0	0.00	270	61	43,246.49	6	0	753.01
AMBULANCE SERVICES	0	0	0.00	886	1064	125,839.28	259	268	38,616.19
LOCAL EDUCATION AGENCY	0	0	0.00	270	43899	270,281.60	3	968	6,727.65

T I T L E X I X M O N T H L Y R E P O R T O F E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	BLIND			DISABLED			ADC - ADULT		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
EARLY ACCESS SERVICES	0	0	0.00	0	0	0.00	1	0	5.57-
PRESCRIBED DRUGS	0	0	0.00	22955	94489	6904,491.91	18728	50807	2544,676.09
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	113	129	9,604.19	5507	6295	560,448.75
IOWA PLAN PROGRAM	1	1	56.84	48621	50366	3697,622.53	38007	42120	1322,547.86
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	269	318	12,834.83	143	152	7,622.78
HMO SERVICES	0	0	0.00	0	0	0.00	901	936	252,726.45
PACE SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PATIENT MANAGEMENT	0	0	0.00	2	2	4.00	22593	22592	45,158.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	635	1353	140,059.07	224	503	18,432.10
MEDICAL SUPPLIES	0	0	0.00	8495	511920	1511,253.82	1002	21597	220,176.82
OTHER PRACTITIONER	0	0	0.00	1979	12005	303,424.91	1244	2854	171,885.78
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	0	0	0.00	0	0	0.00	0	0	0.00
DENTAL	0	0	0.00	3176	4098	610,868.08	2654	3582	590,068.40
OPTOMETRIST	1	1	59.98	2348	3070	150,337.61	1264	1503	110,095.92

T I T L E X I X M O N T H L Y R E P O R T O F E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	BLIND			DISABLED			ADC - ADULT		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
CHIROPRACTIC	0	0	0.00	2183	5827	79,076.80	1558	3770	131,867.56
PODIATRIC	0	0	0.00	1411	2488	90,952.67	263	423	47,823.39
PHYSICAL DISABILITIES SVCS	0	0	0.00	429	17209	220,183.64	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	299	17539	539,092.14	0	0	0.00
PSYCHIATRIC	0	0	0.00	2526	4839	146,952.49	21	37	2,334.30
RESIDENTIAL CARE FACILITY	0	0	0.00	1370	41673	332,516.48	0	0	0.00
MR WAIVER SERVICE	0	0	0.00	1010	64383	2662,670.12	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	34	1678	32,758.19	3	195	4,142.00
AIDS WAIVER SERVICES	0	0	0.00	12	1086	13,010.71	0	0	0.00
ELDERLY WAIVER SERVICES	0	0	0.00	35	1448	25,477.07	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	1765	97071	1602,024.20	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	1179	1294	343,531.03	3	4	1,922.76
UNASSIGNED	0	0	0.00	13	0	2.48-	2	0	0.00
* A L L C A T E G O R I E S *	1	2	116.82	52437	1573319	46073,837.25	48757	303500	15584,497.66

T I T L E X I X M O N T H L Y R E P O R T O F E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE

CATEGORY OF SERVICE	ADC - CHILD			CMAP			OTHER		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
INPATIENT	323	2306	2173,130.81	363	7582	2051,171.05	1650	8921	9221,720.05
OUTPATIENT	5940	33944	1408,028.86	1718	14237	460,808.21	10009	79531	2585,751.23
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	5	102	18,132.00
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	1	71	8,090.52
INTER CARE MENTAL RETARDA	0	0	0.00	1	116	37,484.68	1	0	82,631.00-
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	0	0	0.00
HOME HEALTH	370	1870	62,894.03	52	255	10,463.07	503	2177	120,570.12-
LEAD INSPECTION AGENCY	7	9	3,403.69	0	0	0.00	5	5	1,807.52
PHYSICIAN	15384	24963	1707,176.08	3438	5868	462,790.61	23462	43160	3792,610.92
CLINIC SERVICES	2668	3778	452,064.73	731	1177	132,817.19	5415	8435	937,054.92
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	1903	3444	64,157.32	498	1272	29,724.99	3564	8996	184,390.61
HABILITATION SERVICES	0	0	0.00	16	214	16,424.63	2	15	1,012.43
REMEDIAL SERVICES	1435	45952	753,770.18	491	16348	261,981.35	1177	32563	567,792.00
REHAB SUPPORT SERVICES	0	0	0.00	1	0	0.81-	3	0	33,863.86
AMBULANCE SERVICES	132	131	18,494.98	41	44	5,831.36	189	193	31,417.58
LOCAL EDUCATION AGENCY	90	9188	60,800.07	22	2511	21,110.53	83	9366	51,906.56

T I T L E X I X M O N T H L Y R E P O R T O F E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE

CATEGORY OF SERVICE	ADC - CHILD			CMAP			OTHER		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
EARLY ACCESS SERVICES	2	6	66.20	0	0	0.00	2	29	567.70
PRESCRIBED DRUGS	13707	22550	1273,511.48	3841	8264	507,851.03	19674	32453	1681,104.15
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	942	1101	96,157.76	166	191	17,394.27	283	311	33,928.22
IOWA PLAN PROGRAM	63040	68698	688,057.42	12533	13879	284,604.65	82909	92945	1154,972.63
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	4001	4444	334,329.43	872	960	89,405.49	6334	6932	682,485.43
HMO SERVICES	1543	1621	177,180.72	292	303	36,609.93	1642	1743	235,676.33
PACE SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PATIENT MANAGEMENT	39033	39032	78,044.00	7265	7265	14,528.00	53801	53792	107,556.00
HEALTH INS PREMIUM PAYMENT	286	673	17,301.11	49	125	4,474.42	2047	5575	135,129.14
MEDICAL SUPPLIES	803	14555	119,414.62	171	5034	24,121.76	1040	18613	172,667.85
OTHER PRACTITIONER	1353	3410	162,649.93	356	818	47,808.94	2230	6466	319,571.47
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	0	0	0.00	0	0	0.00	0	0	0.00
DENTAL	4255	4988	600,694.09	933	1132	167,311.42	6000	7055	900,615.20
OPTOMETRIST	1354	1529	105,771.66	381	437	30,507.40	1952	2217	147,165.38

T I T L E X I X M O N T H L Y R E P O R T O F E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	ADC - CHILD			CMAP			OTHER		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
CHIROPRACTIC	749	1443	46,068.96	201	376	13,189.63	1289	2562	80,205.57
PODIATRIC	77	98	12,135.76	28	36	3,649.68	120	150	17,300.27
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	2	7,237.67-
PSYCHIATRIC	32	63	5,664.57	15	54	3,068.52	49	89	22,666.32
RESIDENTIAL CARE FACILITY	0	0	0.00	0	0	0.00	0	0	0.00
MR WAIVER SERVICE	1	69	682.41	2	109	1,341.49	9	192	118,594.65-
CHILDRENS MENTAL HEALTH SVC	33	1513	29,710.08	72	3916	74,398.92	60	2950	58,186.01
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	4	73	1,065.14
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	0	0	0.00	2	8	43.12-
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	32	30	14,625.75	74	78	34,047.90	69	80	147,304.16-
UNASSIGNED	2	0	0.00	0	0	0.00	7	0	1416,722.25-
* A L L C A T E G O R I E S *	68473	291408	10465,986.70	13480	92601	4844,920.31	88632	427772	21293,310.04

T I T L E X I X M O N T H L Y R E P O R T O F E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE

CATEGORY OF SERVICE	FOSTER - PRESUB - SUB ADOPTS			INTERMEDIATE CARE FACILITY			MEDICALLY NEEDY NO SPEND DN		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
INPATIENT	43	631	369,958.21	728	3472	795,313.95	46	329	268,589.82
OUTPATIENT	833	6362	195,817.07	5010	97199	689,177.28	454	8181	190,121.76
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	356	5322	14,773.93	2	24	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	7214	221014	23246,259.06	0	0	0.00
INTER CARE MENTAL RETARDA	7	198	77,250.85	1	0	5,286.50	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	12	372	72,047.43	1	31	6,643.61
HOME HEALTH	81	2691	75,663.16	3682	83946	2921,264.41	50	949	26,061.27
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	2184	3318	209,313.38	7162	41226	488,442.14	741	2405	131,421.35
CLINIC SERVICES	436	651	72,562.56	423	441	34,965.05	118	153	22,449.26
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	248	640	11,537.49	1098	300	3,460.57	134	205	5,246.55
HABILITATION SERVICES	5	121	4,858.80	21	486	21,461.51	36	1341	80,888.66
REMEDIAL SERVICES	2055	159509	1790,103.32	3	69	1,396.42	4	46	827.36
REHAB SUPPORT SERVICES	0	0	0.00	10	11	1,486.99	1	31-	1,482.73-
AMBULANCE SERVICES	16	15	2,955.35	492	609	51,947.98	24	26	4,980.77
LOCAL EDUCATION AGENCY	57	7905	48,618.23	6	1380	8,990.37	0	0	0.00

T I T L E X I X M O N T H L Y R E P O R T O F E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	FOSTER - PRESUB - SUB ADOPTS			INTERMEDIATE CARE FACILITY			MEDICALLY NEEDY NO SPEND DN		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
EARLY ACCESS SERVICES	1	4	45.40	0	0	0.00	0	0	0.00
PRESCRIBED DRUGS	4657	11411	957,126.13	9846	21137	391,891.66	911	2879	124,559.30
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	40	47	5,599.48	0	0	0.00	20	23	2,569.71
IOWA PLAN PROGRAM	10032	10338	1045,071.18	2162	2248	149,358.61	1384	1527	55,858.52
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	251	274	15,709.32	5	6	224.61	13	14	653.16
HMO SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PACE SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PATIENT MANAGEMENT	81	81	162.00	0	0	0.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	158	350	13,578.55	35	62	9,729.01	5	6	700.51
MEDICAL SUPPLIES	196	19447	54,693.54	4340	301799	533,517.42	169	5298	17,757.18
OTHER PRACTITIONER	380	1632	57,729.00	482	1847	36,908.04	67	193	8,961.22
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	0	0	0.00	0	0	0.00	0	0	0.00
DENTAL	1059	1250	157,981.49	716	860	123,408.66	131	169	31,476.34
OPTOMETRIST	450	506	33,009.84	816	1152	29,885.12	65	83	4,396.26

T I T L E X I X M O N T H L Y R E P O R T O F E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE

CATEGORY OF SERVICE	FOSTER - PRESUB - SUB ADOPTS			INTERMEDIATE CARE FACILITY			MEDICALLY NEEDY NO SPEND DN		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
CHIROPRACTIC	159	296	8,490.41	293	742	5,218.91	82	174	5,315.24
PODIATRIC	39	46	3,922.73	1407	2075	23,648.17	47	71	1,912.48
PHYSICAL DISABILITIES SVCS	0	0	0.00	177	7040	80,452.58	0	0	0.00
BRAIN INJ WAIVER SERVICES	40	2068	61,667.84	443	22725	744,180.28	0	0	0.00
PSYCHIATRIC	26	52	4,060.91	280	511	15,413.37	40	62	1,766.72
RESIDENTIAL CARE FACILITY	0	0	0.00	8	172	2,472.95	0	0	0.00
MR WAIVER SERVICE	202	11744	246,294.43	3	76	4,341.45	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	1	12	1,080.00	0	0	0.00	0	0	0.00
AIDS WAIVER SERVICES	0	0	0.00	35	3499	35,529.48	0	0	0.00
ELDERLY WAIVER SERVICES	0	0	0.00	6247	286725	3610,109.78	1	1	74.80
ILL & HANDICAPPED WAIVER SVCS	31	2533	42,717.49	2	13	214.00	0	0	0.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	187	210	53,189.66	119	137	36,202.03	1	1	237.51
UNASSIGNED	1	0	0.00	2	0	50.46-	1	0	0.00
* A L L C A T E G O R I E S *	10161	244342	5620,767.82	14922	1108673	34188,929.26	1740	24160	991,986.63

T I T L E X I X M O N T H L Y R E P O R T O F E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE

MEDICALLY NEEDY WI SPEND DN

OTHER TXXI

OTHER BREAST CERVICAL CANCER

RECIPS UNITS OF
SERVED SERVICEAMOUNT
PAIDRECIPS UNITS OF
SERVED SERVICEAMOUNT
PAIDRECIPS UNITS OF
SERVED SERVICEAMOUNT
PAID

INPATIENT	163	780	903,072.39	67	403	218,694.48	6	15	38,980.08
OUTPATIENT	366	8949	334,017.90	881	7110	218,840.91	89	2173	163,870.48
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	1	30	0.00	0	0	0.00	0	0	0.00
INTERMEDIATE CARE FACILITY	1	31	3,378.67	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	34	459	20,127.19	36	119	4,607.13	4	58	15,517.53
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	611	3508	188,199.71	2579	3955	287,102.00	149	537	158,122.04
CLINIC SERVICES	53	63	9,897.14	521	716	75,167.28	13	17	2,821.93
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	30	49	1,274.36	184	542	10,154.57	32	265	4,660.96
HABILITATION SERVICES	8	393	17,194.06	0	0	0.00	0	0	0.00
REMEDIAL SERVICES	1	44	400.84	218	7329	118,183.66	0	0	0.00
REHAB SUPPORT SERVICES	2	0	53.49	0	0	0.00	1	0	58.72
AMBULANCE SERVICES	28	29	3,849.75	19	19	3,459.57	0	0	0.00
LOCAL EDUCATION AGENCY	0	0	0.00	17	3836	21,184.12	0	0	0.00

T I T L E X I X M O N T H L Y R E P O R T O F E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	MEDICALLY NEEDY WI SPEND DN			OTHER TXXI			OTHER BREAST CERVICAL CANCER		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
EARLY ACCESS SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PRESCRIBED DRUGS	230	1013	45,389.04	2771	4707	316,967.13	181	657	38,227.73
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	3	4	322.35	58	70	8,070.45	1	1	47.71
IOWA PLAN PROGRAM	0	0	0.00	12101	13067	141,459.55	224	227	24,053.40
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	638.28	518	542	36,284.28	0	0	0.00
HMO SERVICES	0	0	0.00	241	248	25,263.48	0	0	0.00
PACE SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PATIENT MANAGEMENT	0	0	0.00	8514	8511	17,004.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	34	96	3,780.88	0	0	0.00
MEDICAL SUPPLIES	73	2646	12,796.68	115	2564	13,382.59	24	439	17,355.20
OTHER PRACTITIONER	56	152	8,376.34	215	455	21,713.42	12	22	2,480.79
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	0	0	0.00	0	0	0.00	0	0	0.00
DENTAL	45	58	10,398.45	1243	1512	212,638.89	16	16	1,592.92
OPTOMETRIST	12	18	653.34	413	460	30,494.56	7	8	749.81

T I T L E X I X M O N T H L Y R E P O R T O F E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE

MEDICALLY NEEDY WI SPEND DN

OTHER TXXI

OTHER BREAST CERVICAL CANCER

	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
CHIROPRACTIC	16	39	1,315.56	239	381	12,507.67	8	24	833.35
PODIATRIC	13	24	1,684.70	18	23	4,000.19	3	3	411.44
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	42	117	6,818.17	11	25	1,675.49	1	1	45.01
RESIDENTIAL CARE FACILITY	0	0	0.00	0	0	0.00	0	0	0.00
MR WAIVER SERVICE	0	0	0.00	4	121	3,241.50	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	6	333	7,148.00	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	1	2	265.99	6	7	3,170.52	0	0	0.00
UNASSIGNED	0	0	0.00	0	0	0.00	0	0	0.00
* A L L C A T E G O R I E S *	743	18409	1570,124.40	11486	57151	1816,196.32	226	4463	469,711.66

T I T L E X I X M O N T H L Y R E P O R T O F E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE

OTHER ICARE ADULT 19-64

OTHER ICARE ADULT OB

OTHER ICARE CHRN DSH

RECIPS UNITS OF
SERVED SERVICEAMOUNT
PAIDRECIPS UNITS OF
SERVED SERVICEAMOUNT
PAIDRECIPS UNITS OF
SERVED SERVICEAMOUNT
PAID

INPATIENT	5	0	55,645.11	0	0	0.00	0	0	0.00
OUTPATIENT	3	0	1,675.78	1	4	31.96	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	0	0	0.00	0	0	0.00	0	0	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	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	0	0	0.00	0	0	0.00	0	0	0.00
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	7	2	4,062.50	2	2	912.01	0	0	0.00
CLINIC SERVICES	1	4	544.32	0	0	0.00	0	0	0.00
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	0	0	0.00	1	1	28.31	0	0	0.00
HABILITATION SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
REMEDIAL SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
LOCAL EDUCATION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00

TITLE XIX MONTHLY REPORT OF EXPENDITURES

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	OTHER ICARE ADULT 19-64			OTHER ICARE ADULT OB			OTHER ICARE CHRN DSH		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
EARLY ACCESS SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PRESCRIBED DRUGS	127	127	14,570.40	0	0	0.00	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	0	0	0.00	0	0	0.00	0	0	0.00
IOWA PLAN PROGRAM	0	0	0.00	0	0	0.00	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	0	0	0.00	0	0	0.00	0	0	0.00
HMO SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PACE 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	0	0	0.00	0	0	0.00	0	0	0.00
MEDICAL SUPPLIES	0	0	0.00	0	0	0.00	0	0	0.00
OTHER PRACTITIONER	0	0	0.00	0	0	0.00	0	0	0.00
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	0	0	0.00	0	0	0.00	0	0	0.00
DENTAL	0	0	0.00	0	0	0.00	0	0	0.00
OPTOMETRIST	0	0	0.00	0	0	0.00	0	0	0.00

T I T L E X I X M O N T H L Y R E P O R T O F E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	OTHER ICARE ADULT 19-64			OTHER ICARE ADULT OB			OTHER ICARE CHRN DSH		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
CHIROPRACTIC	0	0	0.00	0	0	0.00	0	0	0.00
PODIATRIC	0	0	0.00	0	0	0.00	0	0	0.00
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	0	0	0.00	0	0	0.00	0	0	0.00
RESIDENTIAL CARE FACILITY	0	0	0.00	0	0	0.00	0	0	0.00
MR WAIVER SERVICE	0	0	0.00	0	0	0.00	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	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	0	0	0.00	0	0	0.00	0	0	0.00
UNASSIGNED	0	0	0.00	0	0	0.00	0	0	0.00
* A L L C A T E G O R I E S *	125	133	76,498.11	4	7	972.28	0	0	0.00

T I T L E X I X M O N T H L Y R E P O R T O F E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	OTHER ICARE PMIC MHI 300%			OTHER ICARE MHI 300%			STATE ONLY		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
INPATIENT	11	238	42,132.73	3	3	2,544.00	4	5	3,058.10-
OUTPATIENT	45	234	9,425.40	11	81	1,448.20	71	639	18,959.34
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	0	0	0.00	1	0	142.51	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	1	19	951.40	1	14	25.20	0	0	0.00
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	81	145	8,100.00	37	428-	3,642.55-	99	172	11,771.96
CLINIC SERVICES	16	19	1,977.82	0	0	0.00	12	16	1,465.45
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	5	19	252.75	0	0	0.00	16	50	1,037.46
HABILITATION SERVICES	0	0	0.00	0	0	0.00	11	459	22,156.38
REMEDIAL SERVICES	93	4044	66,611.50	0	0	0.00	11	249	5,428.15
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	1	1	141.97	1	2	383.78	7	9	1,099.30
LOCAL EDUCATION AGENCY	7	2513	18,112.18	0	0	0.00	0	0	0.00

T I T L E X I X M O N T H L Y R E P O R T O F E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	OTHER ICARE PMIC MHI 300%			OTHER ICARE MHI 300%			STATE ONLY		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
EARLY ACCESS SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PRESCRIBED DRUGS	256	890	72,850.54	8	29	1,208.75	122	299	19,514.97
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	1	2	85.42	0	0	0.00	8	10	739.17
IOWA PLAN PROGRAM	295	299	29,645.42	21	23	1,448.60	325	368	53,044.58
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	12	12	445.01	0	0	0.00	5	5	146.00
HMO SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PACE SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PATIENT MANAGEMENT	2	2	4.00	0	0	0.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	33	72	7,888.11	0	0	0.00	0	0	0.00
MEDICAL SUPPLIES	11	803	1,594.21	0	0	0.00	6	7	251.89
OTHER PRACTITIONER	24	166	5,175.72	1	1	20.93	7	18	844.88
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	0	0	0.00	0	0	0.00	0	0	0.00
DENTAL	29	32	2,788.05	1	1	36.02	21	29	9,731.85
OPTOMETRIST	12	12	745.07	0	0	0.00	11	13	948.57

T I T L E X I X M O N T H L Y R E P O R T O F E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	OTHER ICARE PHIC MHI 300%			OTHER ICARE MHI 300%			STATE ONLY		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
CHIROPRACTIC	4	8	202.52	1	2	12.60	5	11	372.60
PODIATRIC	1	1	420.02	0	0	0.00	1	1	27.14
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	0	0	0.00	1	2	45.52	0	0	0.00
RESIDENTIAL CARE FACILITY	0	0	0.00	3	67	690.85	0	0	0.00
MR WAIVER SERVICE	0	0	0.00	2	59	8,184.10	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	246	10963	236,855.05	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	260	262	125,398.74	1	1	227.60	0	0	0.00
UNASSIGNED	0	0	0.00	0	0	0.00	0	0	0.00
* A L L C A T E G O R I E S *	281	20756	631,803.63	20	143-	12,776.11	291	2360	144,481.59

T I T L E X I X M O N T H L Y R E P O R T O F E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	STATE ONLY			FED CNTY - FED CNTY STATE			FEDERAL MEDICAID ONLY AGED		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
INPATIENT	19	210	149,828.97	150	796	693,911.49	0	0	0.00
OUTPATIENT	325	3439	151,386.28	2587	41881	475,865.60	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	0	0	0.00	7	88	14,348.94	0	0	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	7	113	12,656.62	0	0	0.00
INTER CARE MENTAL RETARDA	0	0	0.00	1877	56611	19762,326.24	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	0	0	0.00
HOME HEALTH	19	115	6,832.64	1049	40616	1158,630.77	0	0	0.00
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	471	1116	105,889.34	4302	13715	333,713.24	0	0	0.00
CLINIC SERVICES	104	145	18,845.50	330	454	47,600.33	0	0	0.00
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	77	289	6,001.24	481	628	12,175.33	0	0	0.00
HABILITATION SERVICES	3	161	2,157.11	13	300	9,600.29	0	0	0.00
REMEDIAL SERVICES	39	2274	22,402.92	93	2556	45,153.15	0	0	0.00
REHAB SUPPORT SERVICES	1	0	252.00-	3	0	120.28	0	0	0.00
AMBULANCE SERVICES	12	12	1,733.25	121	139	12,430.44	0	0	0.00
LOCAL EDUCATION AGENCY	0	0	0.00	191	31582	156,985.83	0	0	0.00

T I T L E X I X M O N T H L Y R E P O R T O F E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE

CATEGORY OF SERVICE	STATE ONLY			FED CNTY - FED CNTY STATE			FEDERAL MEDICAID ONLY AGED		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
EARLY ACCESS SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PRESCRIBED DRUGS	838	3640	209,450.63	5775	18188	1341,821.00	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	5	7	361.20	25	27	1,745.80	0	0	0.00
IOWA PLAN PROGRAM	1328	1407	142,427.01	10621	10725	710,656.23	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	145.16	76	81	3,218.01	0	0	0.00
HMO SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PACE SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PATIENT MANAGEMENT	1	1	2.00	0	0	0.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	3	8	592.20	546	1154	125,917.31	0	0	0.00
MEDICAL SUPPLIES	135	6597	40,094.62	2056	300635	479,879.85	0	0	0.00
OTHER PRACTITIONER	57	112	8,101.47	676	8835	268,834.27	0	0	0.00
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	0	0	0.00	0	0	0.00	0	0	0.00
DENTAL	78	112	23,340.70	1066	1200	122,257.84	0	0	0.00
OPTOMETRIST	67	87	5,725.41	556	670	29,901.01	0	0	0.00

T I T L E X I X M O N T H L Y R E P O R T O F E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE

STATE ONLY

FED CNTY - FED CNTY STATE

FEDERAL MEDICAID ONLY AGED

	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
CHIROPRACTIC	48	92	3,206.23	311	615	9,025.52	0	0	0.00
PODIATRIC	28	40	4,981.68	612	857	20,956.86	0	0	0.00
PHYSICAL DISABILITIES SVCS	0	0	0.00	0	0	0.00	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	272	14232	413,943.60	0	0	0.00
PSYCHIATRIC	5	9	307.02	487	738	23,617.87	0	0	0.00
RESIDENTIAL CARE FACILITY	0	0	0.00	15	433	4,340.14	0	0	0.00
MR WAIVER SERVICE	3	118	3,650.34	8267	587825	21652,588.53	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	1	66	864.60	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	5	280	3,889.91	2	70	1,112.79	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	2	158	1,967.68	149	8283	152,758.36	0	0	0.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	6	7	1,999.48	7244	7926	2029,283.64	0	0	0.00
UNASSIGNED	0	0	0.00	4	0	0.00	0	0	0.00
* A L L C A T E G O R I E S *	1383	20506	915,932.59	11253	1151973	50127,377.18	0	0	0.00

T I T L E X I X M O N T H L Y R E P O R T O F E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE

FEDERAL MEDICAID ONLY BLIND

TOTAL

	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
INPATIENT	0	0	0.00	6299	38224	27219,770.30			
OUTPATIENT	0	0	0.00	54788	743615	15704,956.90			
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	698	12148	1943,955.36			
INTERMEDIATE CARE FACILITY	0	0	0.00	12277	381570	37859,285.10			
INTER CARE MENTAL RETARDA	0	0	0.00	1898	57228	19894,231.83			
NURSING FAC FOR MENTAL ILL	0	0	0.00	18	759	188,765.76			
HOME HEALTH	0	0	0.00	11596	273479	8538,833.76			
LEAD INSPECTION AGENCY	0	0	0.00	13	15	5,588.56			
PHYSICIAN	0	0	0.00	102370	321295	14544,048.53			
CLINIC SERVICES	0	0	0.00	16346	24465	2781,820.97			
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00			
LAB AND RADIOLOGICAL	0	0	0.00	16236	32467	702,538.84			
HABILITATION SERVICES	0	0	0.00	2435	69189	3431,503.13			
REMEDIAL SERVICES	0	0	0.00	6103	290450	3946,927.72			
REHAB SUPPORT SERVICES	0	0	0.00	289	81-	76,161.50			
AMBULANCE SERVICES	0	0	0.00	2504	2918	333,596.43			
LOCAL EDUCATION AGENCY	0	0	0.00	728	113148	664,717.14			

T I T L E X I X M O N T H L Y R E P O R T O F E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	FEDERAL MEDICAID ONLY BLIND			TOTAL					
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
EARLY ACCESS SERVICES	0	0	0.00	6	39	673.73			
PRESCRIBED DRUGS	0	0	0.00	106122	278567	16513,452.42			
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	7161	8218	737,074.48			
IOWA PLAN PROGRAM	0	0	0.00	282912	308344	9503,780.23			
MANAGED SUBSTANCE ABUSE	0	0	0.00	0	0	0.00			
MENTAL HEALTH ACCESS PLAN	0	0	0.00	0	0	0.00			
EPSDT SCREENING	0	0	0.00	12466	13746	1184,178.26			
HMO SERVICES	0	0	0.00	4612	4851	727,456.91			
PACE SERVICES	0	0	0.00	0	0	0.00			
PATIENT MANAGEMENT	0	0	0.00	131327	131314	262,534.00			
HEALTH INS PREMIUM PAYMENT	0	0	0.00	4055	9977	477,582.41			
MEDICAL SUPPLIES	0	0	0.00	20935	1333436	3486,944.41			
OTHER PRACTITIONER	0	0	0.00	9400	40273	1439,506.56			
FAMILY CENTERED PROGRAM	0	0	0.00	0	0	0.00			
FAMILY PRESERVATION	0	0	0.00	0	0	0.00			
TREATMENT FOSTER FAMILY CARE	0	0	0.00	0	0	0.00			
GROUP TREATMENT THERAPY	0	0	0.00	0	0	0.00			
DENTAL	0	0	0.00	21754	26590	3651,264.94			
OPTOMETRIST	0	0	0.00	10396	12787	706,647.82			

T I T L E X I X M O N T H L Y R E P O R T O F E X P E N D I T U R E S

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE

FEDERAL MEDICAID ONLY BLIND

TOTAL

	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
CHIROPRACTIC	0	0	0.00	7508	17519	404,096.26			
PODIATRIC	0	0	0.00	4857	7582	246,274.91			
PHYSICAL DISABILITIES SVCS	0	0	0.00	601	24249	300,636.22			
BRAIN INJ WAIVER SERVICES	0	0	0.00	1039	56602	1755,654.01			
PSYCHIATRIC	0	0	0.00	3689	6951	243,767.51			
RESIDENTIAL CARE FACILITY	0	0	0.00	1718	52768	418,345.81			
MR WAIVER SERVICE	0	0	0.00	9535	669843	24693,059.91			
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	455	21626	445,142.85			
AIDS WAIVER SERVICES	0	0	0.00	46	4585	48,540.19			
ELDERLY WAIVER SERVICES	0	0	0.00	9428	435602	5804,826.63			
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	1946	108066	1799,638.61			
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00			
MEP SERVICES	0	0	0.00	9211	10116	2516,998.59			
UNASSIGNED	0	0	0.00	32	0	1416,775.19-			
* A L L C A T E G O R I E S *	0	0	0.00	338583	5944540	213788,004.31	0	0	0.00

* * * E N D O F R E P O R T * * *