

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	0	0	0.00	0	0	0.00	560	2487	544,378.69
OUTPATIENT	33	514	5,597.54	0	0	0.00	4339	72899	642,271.69
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	198	3169	113,030.01
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	4622	142981	12728,821.63
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	4	214	76,155.38
HOME HEALTH	0	0	0.00	0	0	0.00	2532	51663	1954,455.11
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	70	134	12,060.53	0	0	0.00	6598	36686	397,282.83
CLINIC SERVICES	3	4	521.86	0	0	0.00	462	366	35,868.28
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	9	43	739.62	0	0	0.00	890	247	2,788.55
HABILITATION SERVICES	0	0	0.00	0	0	0.00	45	1263	71,922.53
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	18	0	15,951.80
AMBULANCE SERVICES	0	0	0.00	0	0	0.00	308	374	35,929.02
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 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	31	82	3,456.80	0	0	0.00	3219	5923	72,636.40
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	89	108	2,834.32	0	0	0.00	6	6	346.61
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	2	2	72.94	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	44	44	86.00	0	0	0.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	1	3	38.66	0	0	0.00	0	0	0.00
MEDICAL SUPPLIES	1	3	86.54	0	0	0.00	3129	17902	362,918.83
OTHER PRACTITIONER	2	2	479.28	0	0	0.00	385	1206	19,168.90
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	25	33	4,250.01	0	0	0.00	447	572	84,077.80
OPTOMETRIST	9	13	744.48	0	0	0.00	782	1211	27,340.44

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	467	1308	9,106.22
PODIATRIC	1	4	163.38	0	0	0.00	888	1397	15,050.27
PHYSICAL DISABILITIES SVCS	0	0	0.00	0	0	0.00	1	50	515.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	0	0	0.00	1	59	4,944.31
PSYCHIATRIC	0	0	0.00	0	0	0.00	158	302	9,106.04
RESIDENTIAL CARE FACILITY	0	0	0.00	0	0	0.00	338	10831	80,421.65
MR WAIVER SERVICE	0	0	0.00	0	0	0.00	76	5787	226,657.17
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	3513	155458	2310,351.98
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	94	134	33,194.07
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 *	128	989	31,133.96	0	0	0.00	14513	675895	19874,691.21

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	1937	11158	8607,766.12	767	2342	3151,767.05
OUTPATIENT	0	0	0.00	16843	332263	5965,511.34	9313	109946	3740,187.76
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	235	5860	2285,389.98	0	0	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	592	17499	1887,912.52	2	49	5,892.06
INTER CARE MENTAL RETARDA	0	0	0.00	11	295	98,106.79	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	3979	118855	3332,161.17	50	596	27,789.68
LEAD INSPECTION AGENCY	0	0	0.00	1	1	377.35	0	0	0.00
PHYSICIAN	0	0	0.00	25849	127259	4796,047.43	17285	36744	3388,449.95
CLINIC SERVICES	0	0	0.00	3389	4521	606,036.13	3004	4676	583,638.26
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	0	0	0.00	3457	6328	99,002.25	3408	8490	205,628.16
HABILITATION SERVICES	0	0	0.00	2394	70463	3569,619.07	23	410	15,699.70
REMEDIAL SERVICES	0	0	0.00	583	13308	243,344.96	178	2498	48,762.05
REHAB SUPPORT SERVICES	0	0	0.00	1192	634-	541,057.04	16	17-	2,816.53
AMBULANCE SERVICES	0	0	0.00	1035	1232	143,952.74	280	303	49,803.16
LOCAL EDUCATION AGENCY	0	0	0.00	171	51161	298,936.10	2	92	1,344.20

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	81	528	10,786.40	2	13	190.34
PRESCRIBED DRUGS	0	0	0.00	24907	120581	9076,429.34	21699	67245	3390,739.04
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	164	206	16,123.88	7471	9439	870,832.52
IOWA PLAN PROGRAM	1	1	56.84	48653	49301	3623,914.46	37888	41040	1291,392.19
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	334	412	17,576.03	174	194	8,530.13
HMO SERVICES	0	0	0.00	0	0	0.00	913	935	252,737.92
PACE SERVICES	0	0	0.00	1	1	4,350.00	0	0	0.00
PATIENT MANAGEMENT	0	0	0.00	1	1	2.00	22802	22790	45,580.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	637	1538	149,365.43	219	583	19,475.26
MEDICAL SUPPLIES	0	0	0.00	9487	668009	2170,702.51	1083	25215	260,410.18
OTHER PRACTITIONER	0	0	0.00	2752	17276	399,387.63	1709	3450	221,798.44
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	4108	5512	819,493.19	3366	4694	747,500.58
OPTOMETRIST	0	0	0.00	2893	3956	191,452.09	1841	2292	168,087.63

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	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	2470	6572	97,009.67	1932	4764	169,951.90
PODIATRIC	0	0	0.00	1439	2651	83,193.67	230	329	37,587.28
PHYSICAL DISABILITIES SVCS	0	0	0.00	444	18480	238,060.14	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	314	20308	566,245.80	0	0	0.00
PSYCHIATRIC	0	0	0.00	2541	5210	166,252.18	33	91	6,236.00
RESIDENTIAL CARE FACILITY	0	0	0.00	1409	45446	366,493.13	0	0	0.00
MR WAIVER SERVICE	0	0	0.00	1005	71285	2818,985.88	1	8	97.92
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	34	1369	30,763.19	4	380	5,308.37
AIDS WAIVER SERVICES	0	0	0.00	11	923	11,221.76	0	0	0.00
ELDERLY WAIVER SERVICES	0	0	0.00	35	1327	21,229.66	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	1856	99995	1628,982.01	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	1267	1685	436,919.56	3	7	2,516.20
UNASSIGNED	0	0	0.00	7	0	0.00	0	0	0.00
* A L L C A T E G O R I E S *	1	1	56.84	53038	1902141	55420,160.60	50472	349598	18720,750.46

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	359	1722	1567,599.73	531	8226	2473,820.67	2215	9619	10510,268.71
OUTPATIENT	7954	46855	1733,492.44	2207	19023	600,625.79	12493	101602	3744,393.67
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	2	1,866.32	0	0	0.00	7	257	85,608.00
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	4	32	82,566.59
INTER CARE MENTAL RETARDA	0	0	0.00	1	52	18,616.44	1	0	2753,212.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	0	0	0.00
HOME HEALTH	475	2649	66,830.85	65	293	9,593.97	780	3845	357,384.79
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	3	4	1,482.05
PHYSICIAN	21691	37709	2473,453.26	4717	8750	691,505.63	31848	61011	5306,356.82
CLINIC SERVICES	3904	5388	658,596.28	1041	1575	181,181.11	7103	10842	1556,246.09
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	1	0	199.84
LAB AND RADIOLOGICAL	2137	4252	60,186.13	530	1419	28,365.31	3785	9677	172,366.55
HABILITATION SERVICES	0	0	0.00	22	249	13,643.32	2	12	1,263.60
REMEDIAL SERVICES	1732	42363	707,427.20	631	9432	200,212.11	1525	28378	1741,809.33
REHAB SUPPORT SERVICES	0	0	0.00	7	0	71.06	2	0	1154,432.21
AMBULANCE SERVICES	135	196	18,273.81	65	66	10,905.34	223	219	36,575.35
LOCAL EDUCATION AGENCY	37	5261	29,704.74	7	269	1,255.36	40	5544	30,390.39

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
EARLY ACCESS SERVICES	99	413	10,586.24	18	66	2,305.54	128	570	15,589.63
PRESCRIBED DRUGS	18604	34865	1900,583.31	4683	11598	695,857.69	25811	48649	2453,685.90
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	1302	1679	149,182.18	227	285	28,091.03	452	540	51,870.31
IOWA PLAN PROGRAM	63672	67815	679,553.14	12723	13842	281,549.75	85374	94181	1160,861.72
MANAGED SUBSTANCE ABUSE	0	0	0.00	0	0	0.00	0	0	0.00
MENTAL HEALTH ACCESS PLAN	1	0	5.03-	0	0	0.00	0	0	0.00
EPSDT SCREENING	4626	5246	424,434.08	935	1063	84,487.85	6882	7679	812,456.21
HMO SERVICES	1556	1610	184,868.08	294	296	37,291.44	1678	1717	232,504.93
PACE SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PATIENT MANAGEMENT	39813	39808	79,616.00	7362	7363	14,726.00	54950	54952	109,904.00
HEALTH INS PREMIUM PAYMENT	295	832	19,801.41	50	145	4,446.02	2067	6603	158,413.84
MEDICAL SUPPLIES	919	15557	155,425.95	197	4495	35,303.94	1153	18434	173,773.57
OTHER PRACTITIONER	2379	6364	226,805.03	554	1594	61,914.04	3428	10316	398,484.54
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	5812	7039	857,138.84	1251	1616	250,473.53	7703	9287	1211,397.89
OPTOMETRIST	2054	2357	153,193.54	548	656	44,571.12	2859	3342	216,047.80

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

CHIROPRACTIC	989	1888	60,044.68	264	555	19,585.42	1656	3319	101,875.14
PODIATRIC	72	74	11,132.31	25	34	3,263.72	131	149	13,113.22
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	3	31	17,312.21-
PSYCHIATRIC	19	25	2,272.92	17	58	3,910.41	42	90	7,561.06
RESIDENTIAL CARE FACILITY	0	0	0.00	2	77	708.81	1	0	1,121.92
MR WAIVER SERVICE	0	0	0.00	1	62	6,005.81	8	167	38,883.76
CHILDRENS MENTAL HEALTH SVC	31	1656	30,603.81	75	3752	69,524.43	59	2808	59,629.44
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	6	17	11,475.53-
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	0	0	0.00	2	12	416.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	32	36	17,196.50	69	79	37,640.75	60	62	489,415.79-
UNASSIGNED	3	0	0.00	1	0	0.00	13	0	6225,163.87
* A L L C A T E G O R I E S *	70524	333661	12279,863.75	14058	96990	5911,311.29	91995	493967	28995,066.95

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
INPATIENT	71	437	225,797.03	726	3386	810,509.04	71	272	305,649.59
OUTPATIENT	1019	8876	259,042.87	5532	116773	831,771.78	526	6994	188,804.00
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	1	92	54,123.90	418	6947	82,566.34	7	80	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	7379	224127	23466,997.73	1	62	8,244.76
INTER CARE MENTAL RETARDA	10	267	110,113.46	0	0	0.00	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	25	1016	331,342.07	1	31	6,643.61
HOME HEALTH	89	6744	147,098.19	3898	81339	3220,719.02	60	957	38,961.43
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	2784	4454	254,579.34	7571	43108	500,174.00	923	2804	189,378.58
CLINIC SERVICES	553	783	88,107.92	461	424	34,216.00	125	185	24,712.38
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	290	751	11,420.03	1167	388	3,411.85	184	305	5,887.28
HABILITATION SERVICES	9	255	12,339.96	22	474	28,183.02	32	1239	78,381.97
REMEDIAL SERVICES	2594	59814-	137,098.57	4	66	1,241.63	4	60	1,104.42
REHAB SUPPORT SERVICES	0	0	0.00	21	13	198.47	36	27-	22,731.08
AMBULANCE SERVICES	22	24	2,893.76	482	627	58,021.15	33	38	5,189.39
LOCAL EDUCATION AGENCY	29	6432	33,876.45	5	318	1,031.57	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	29	109	3,745.45	4	10	290.00	0	0	0.00
PRESCRIBED DRUGS	5073	14437	1263,679.84	10166	24644	445,726.95	1086	3776	173,215.02
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	52	59	4,441.85	1	1	65.24	34	44	3,957.78
IOWA PLAN PROGRAM	9932	10268	1035,175.01	2253	2173	143,482.58	1394	1497	53,715.98
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	257	288	13,247.39	4	6	224.99	5	5	248.91
HMO SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PACE SERVICES	0	0	0.00	3	3	7,521.00	0	0	0.00
PATIENT MANAGEMENT	76	76	152.00	2	2	4.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	167	407	15,015.96	35	71	10,550.86	3	4	364.13
MEDICAL SUPPLIES	209	26507	86,568.88	5079	417411	777,099.99	215	13347	28,319.09
OTHER PRACTITIONER	589	3438	78,580.91	582	2281	53,513.00	90	262	9,331.76
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	1364	1619	199,846.92	954	1183	185,594.87	175	222	25,279.27
OPTOMETRIST	575	654	39,947.03	1000	1446	38,186.94	113	137	7,777.49

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	179	380	11,163.40	329	852	5,630.10	95	203	6,327.26
PODIATRIC	34	37	3,021.78	1465	2168	22,945.00	51	71	2,660.64
PHYSICAL DISABILITIES SVCS	0	0	0.00	189	8860	98,936.24	0	0	0.00
BRAIN INJ WAIVER SERVICES	37	1565	40,035.29	454	25790	753,438.93	0	0	0.00
PSYCHIATRIC	23	72	3,773.50	254	449	14,094.96	34	58	1,372.72
RESIDENTIAL CARE FACILITY	1	19	0.00	6	168	2,118.60	0	0	0.00
MR WAIVER SERVICE	191	9108	207,853.84	10	355	11,336.89	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	1	4	134.48	0	0	0.00	0	0	0.00
AIDS WAIVER SERVICES	0	0	0.00	29	2383	26,975.71	0	0	0.00
ELDERLY WAIVER SERVICES	0	0	0.00	6338	303816	3877,125.71	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	33	2462	39,008.87	3	47	621.44	0	0	0.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	214	277	70,819.85	133	181	46,958.67	1	1	233.47
UNASSIGNED	1	0	0.00	0	0	0.00	0	0	0.00
* A L L C A T E G O R I E S *	10190	41087	4452,703.73	15123	1273306	35892,826.34	1831	32627	1188,492.01

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	184	957	1285,614.43	73	378	199,694.24	8	10	22,928.71
OUTPATIENT	435	9474	661,094.90	1141	8649	302,506.01	110	2093	110,568.72
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	5	59	2,041.26	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	25	351	24,723.18	60	167	4,202.35	6	70	11,262.28
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	749	3075	261,263.04	3592	5658	374,484.92	177	716	189,354.48
CLINIC SERVICES	71	115	20,853.92	773	1049	121,764.10	14	18	3,079.58
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	43	128	2,076.81	185	501	8,291.08	26	99	1,976.04
HABILITATION SERVICES	5	51	5,147.93	0	0	0.00	0	0	0.00
REMEDIAL SERVICES	1	27	245.97	277	2382	74,605.71	0	0	0.00
REHAB SUPPORT SERVICES	3	0	538.81	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	44	47	9,327.06	28	26	4,012.05	2	2	107.67
LOCAL EDUCATION AGENCY	0	0	0.00	10	3502	28,626.58	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	4	15	326.68	0	0	0.00
PRESCRIBED DRUGS	259	1231	69,987.78	3674	6906	446,320.69	192	838	53,451.92
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	18	18	1,045.37	79	97	9,737.32	1	1	102.00
IOWA PLAN PROGRAM	0	0	0.00	12403	13261	142,609.26	230	234	24,849.52
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	0	0	0.00	544	596	42,628.25	0	0	0.00
HMO SERVICES	0	0	0.00	231	235	21,909.60	0	0	0.00
PACE SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PATIENT MANAGEMENT	0	0	0.00	8612	8612	17,224.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	28	73	4,015.53	0	0	0.00
MEDICAL SUPPLIES	86	3053	59,197.86	121	2641	22,132.00	30	587	12,849.82
OTHER PRACTITIONER	67	118	10,328.60	409	1071	37,623.01	14	39	2,203.07
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	52	59	12,606.18	1488	1743	266,762.59	18	21	2,744.45
OPTOMETRIST	27	35	1,746.32	634	738	48,855.92	9	9	647.14

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

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	33	937.73	300	560	18,311.89	16	38	1,292.65
PODIATRIC	7	8	949.46	41	59	6,154.63	4	5	453.72
PHYSICAL DISABILITIES SVCS	0	0	0.00	0	0	0.00	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	1	71	1,145.19	0	0	0.00
PSYCHIATRIC	41	77	4,626.14	7	9	673.99	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	5	95	2,194.06	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	4	261	6,500.62	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	1	265.99	9	20	5,888.82	0	0	0.00
UNASSIGNED	0	0	0.00	1	0	0.00	0	0	0.00
* A L L C A T E G O R I E S *	843	18917	2434,618.74	11794	59375	2219,201.09	230	4780	437,871.77

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	1	0	2,591.23-	2	7	5,102.02	0	0	0.00
OUTPATIENT	5	7	1,815.30	1	1	146.00	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	6	2	1,017.96	3	12	2,584.31	0	0	0.00
CLINIC SERVICES	0	0	0.00	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	5	143.28	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	1	0	167.78	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	133	144	14,964.07	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	1	307	267.55	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 *	131	153	15,373.88	5	332	8,243.16	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 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
INPATIENT	17	191	33,144.52	6	26	6,112.00	5	13	12,667.58
OUTPATIENT	54	531	10,352.19	14	228	1,594.09	88	1615	28,476.09
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	1	4	380.56	1	1	21.98	1	2	10.50
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	106	188	9,226.64	31	192	2,415.82	127	302	25,725.43
CLINIC SERVICES	15	20	2,246.27	1	0	0.00	26	38	3,556.18
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	10	38	391.32	1	0	0.00	15	39	1,495.00
HABILITATION SERVICES	0	0	0.00	6	18-	238.26-	9	288	14,665.52
REMEDIAL SERVICES	113	3638	65,226.37	0	0	0.00	20	285	6,328.50
REHAB SUPPORT SERVICES	0	0	0.00	7	20	1,097.40	1	3-	320.16
AMBULANCE SERVICES	1	2	458.69	0	0	0.00	7	7	1,062.94
LOCAL EDUCATION AGENCY	3	390	1,404.96	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	275	1134	98,965.32	9	22	887.47	148	454	29,528.64
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	1	78.12	0	0	0.00	10	15	1,116.99
IOWA PLAN PROGRAM	298	305	30,530.73	20	22	1,334.03	361	385	55,233.63
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	7	9	314.97	0	0	0.00	13	14	499.04
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	35	75	7,743.73	0	0	0.00	0	0	0.00
MEDICAL SUPPLIES	15	1130	1,712.64	4	27	59.89	5	39	1,405.58
OTHER PRACTITIONER	31	269	5,906.66	0	0	0.00	17	25	1,918.87
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	49	2,833.81	1	1	109.13	14	21	2,875.59
OPTOMETRIST	23	32	1,686.20	3	5	171.44	15	18	1,312.37

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	8	17	233.33	2	3	17.14	7	15	431.26
PODIATRIC	1	2	77.74	1	2	16.58	1	1	108.44
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	1	1	372.75	1	1	10.72	0	0	0.00
RESIDENTIAL CARE FACILITY	0	0	0.00	6	122	376.25	0	0	0.00
MR WAIVER SERVICE	0	0	0.00	3	59	8,153.56	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	257	11242	251,595.27	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	264	283	136,820.67	1	1	222.87	1	2	414.28
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 *	269	19553	661,707.46	14	714	22,362.11	277	3575	189,152.59

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

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	31	213	239,341.76	176	759	484,923.40	0	0	0.00
OUTPATIENT	335	5221	191,536.35	2983	50208	515,932.22	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	1	0	3,429.14	10	158	35,586.00	0	0	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	9	214	25,347.74	0	0	0.00
INTER CARE MENTAL RETARDA	0	0	0.00	2102	63975	23934,820.48	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	0	0	0.00
HOME HEALTH	23	320	20,696.33	1203	55656	1577,362.69	0	0	0.00
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	608	1963	138,720.63	4915	17088	445,825.10	0	0	0.00
CLINIC SERVICES	131	171	21,493.44	391	474	44,766.14	0	0	0.00
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	82	252	4,325.82	560	813	9,707.07	0	0	0.00
HABILITATION SERVICES	3	120	1,851.63	13	161	8,169.36	0	0	0.00
REMEDIAL SERVICES	69	10156-	70,240.48-	122	2153	38,058.58	0	0	0.00
REHAB SUPPORT SERVICES	2	0	801.20-	23	0	1,482.26	0	0	0.00
AMBULANCE SERVICES	18	18	3,938.41	117	138	17,254.76	0	0	0.00
LOCAL EDUCATION AGENCY	1	839	4,682.24	212	96270	574,810.29	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
EARLY ACCESS SERVICES	1	8	295.00	33	302	5,742.84	0	0	0.00
PRESCRIBED DRUGS	888	4529	268,453.37	5978	22418	1865,408.67	0	0	0.00
DRUG CAPITATION	0	0	0.00	1	0	20.47-	0	0	0.00
INDIAN HEALTH SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
FAMILY PLANNING SERVICES	12	13	1,662.26	33	41	3,015.79	0	0	0.00
IOWA PLAN PROGRAM	1330	1391	142,642.68	10642	10636	704,989.06	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	7	7	318.54	96	152	5,145.05	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	3	9	600.35	575	1362	151,069.73	0	0	0.00
MEDICAL SUPPLIES	140	5684	34,937.32	2299	383223	617,340.27	0	0	0.00
OTHER PRACTITIONER	76	465	10,292.25	1016	14531	314,756.99	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	103	140	34,233.79	1469	1676	154,678.33	0	0	0.00
OPTOMETRIST	75	98	7,959.06	708	901	37,266.80	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	68	175	6,307.34	343	787	11,033.06	0	0	0.00
PODIATRIC	22	14	2,624.46	737	1018	19,854.61	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	273	13704	400,971.42	0	0	0.00
PSYCHIATRIC	3	4	397.14	565	940	35,823.20	0	0	0.00
RESIDENTIAL CARE FACILITY	0	0	0.00	21	651	6,107.02	0	0	0.00
MR WAIVER SERVICE	4	151	4,335.29	8412	632159	22516,381.21	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	2	70	1,418.37	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	4	285	4,077.12	3	87	3,309.35	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	1	135	1,661.42	158	9241	164,908.80	0	0	0.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	6	7	2,020.00	8270	10645	2760,902.78	0	0	0.00
UNASSIGNED	1	0	0.00	3	0	0.00	0	0	0.00
* A L L C A T E G O R I E S *	1388	12146	1083,209.83	11329	1392541	57492,730.60	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	7644	42203	30484,494.06			
OUTPATIENT	0	0	0.00	64814	893772	19535,720.75			
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	871	16624	2663,640.95			
INTERMEDIATE CARE FACILITY	0	0	0.00	12558	384964	38040,649.85			
INTER CARE MENTAL RETARDA	0	0	0.00	2123	64589	21408,445.17			
NURSING FAC FOR MENTAL ILL	0	0	0.00	30	1261	414,141.06			
HOME HEALTH	0	0	0.00	13094	323512	10793,654.08			
LEAD INSPECTION AGENCY	0	0	0.00	4	5	1,859.40			
PHYSICIAN	0	0	0.00	127153	387855	19459,906.70			
CLINIC SERVICES	0	0	0.00	21233	30649	3986,883.94			
MEP CASE MANAGEMENT	0	0	0.00	1	0	199.84			
LAB AND RADIOLOGICAL	0	0	0.00	16669	33775	618,202.15			
HABILITATION SERVICES	0	0	0.00	2571	74967	3820,649.35			
REMEDIAL SERVICES	0	0	0.00	7381	34620	288,393.74-			
REHAB SUPPORT SERVICES	0	0	0.00	1274	648-	569,110.92-			
AMBULANCE SERVICES	0	0	0.00	2791	3319	397,873.08			
LOCAL EDUCATION AGENCY	0	0	0.00	507	170078	1006,062.88			

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	384	2034	49,858.12			
PRESCRIBED DRUGS	0	0	0.00	124905	369476	22323,978.22			
DRUG CAPITATION	0	0	0.00	1	0	20.47-			
INDIAN HEALTH SERVICES	0	0	0.00	0	0	0.00			
FAMILY PLANNING SERVICES	0	0	0.00	9814	12439	1141,322.64			
IOWA PLAN PROGRAM	0	0	0.00	286556	306466	9375,071.51			
MANAGED SUBSTANCE ABUSE	0	0	0.00	0	0	0.00			
MENTAL HEALTH ACCESS PLAN	0	0	0.00	1	0	5.03-			
EPSDT SCREENING	0	0	0.00	13832	15673	1410,184.38			
HMO SERVICES	0	0	0.00	4670	4793	729,311.97			
PACE SERVICES	0	0	0.00	4	4	11,871.00			
PATIENT MANAGEMENT	0	0	0.00	133664	133650	267,300.00			
HEALTH INS PREMIUM PAYMENT	0	0	0.00	4115	11705	540,900.91			
MEDICAL SUPPLIES	0	0	0.00	23610	1764971	4800,512.41			
OTHER PRACTITIONER	0	0	0.00	13915	62707	1852,492.98			
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	28258	35487	4861,896.77			
OPTOMETRIST	0	0	0.00	14136	17900	986,993.81			

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

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	9057	21469	519,258.19			
PODIATRIC	0	0	0.00	5129	8023	222,370.91			
PHYSICAL DISABILITIES SVCS	0	0	0.00	630	27390	337,511.38			
BRAIN INJ WAIVER SERVICES	0	0	0.00	1055	61528	1749,468.73			
PSYCHIATRIC	0	0	0.00	3718	7387	256,483.73			
RESIDENTIAL CARE FACILITY	0	0	0.00	1773	57314	457,347.38			
MR WAIVER SERVICE	0	0	0.00	9659	719236	25840,885.39			
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	465	21542	455,477.98			
AIDS WAIVER SERVICES	0	0	0.00	39	3306	38,197.47			
ELDERLY WAIVER SERVICES	0	0	0.00	9633	460990	6204,618.29			
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	2047	111892	1835,598.54			
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00			
MEP SERVICES	0	0	0.00	10393	13421	3062,598.69			
UNASSIGNED	0	0	0.00	30	0	6225,163.87			
* A L L C A T E G O R I E S *	0	0	0.00	348153	6712348	247331,528.37	0	0	0.00

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