

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
INPATIENT	0	0	0.00	0	0	0.00	502	2087	432,808.70
OUTPATIENT	32	398	8,303.98	0	0	0.00	4031	82418	454,816.87
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	180	2797	77,516.33
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	4606	140126	12637,177.54
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	154	39,542.58
HOME HEALTH	1	6	553.80	0	0	0.00	2209	45270	1599,931.88
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	41	67	5,153.92	0	0	0.00	5976	35029	357,279.15
CLINIC SERVICES	5	6	900.42	0	0	0.00	414	433	34,610.74
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	4	24	295.91	0	0	0.00	792	221	2,892.89
HABILITATION SERVICES	0	0	0.00	0	0	0.00	47	1228	72,939.97
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	2	3	385.80	0	0	0.00	292	363	32,286.32
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	26	56	3,740.67	0	0	0.00	3009	4775	51,804.41
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	188	163	4,204.68	0	0	0.00	22	5	358.06
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	2	2	488.17	0	0	0.00	0	0	0.00
PACE SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PATIENT MANAGEMENT	52	52	104.00	0	0	0.00	1	0	61.97-
HEALTH INS PREMIUM PAYMENT	1	1	122.94	0	0	0.00	0	0	0.00
MEDICAL SUPPLIES	1	19	10,966.01	0	0	0.00	2951	179053	300,127.18
OTHER PRACTITIONER	0	0	0.00	0	0	0.00	299	940	18,428.79
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	12	14	1,583.51	0	0	0.00	323	378	63,632.19
OPTOMETRIST	0	0	0.00	0	0	0.00	520	814	20,772.49

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	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	417	1072	10,079.26
PODIATRIC	0	0	0.00	0	0	0.00	664	1005	11,406.55
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	49	4,886.19
PSYCHIATRIC	0	0	0.00	0	0	0.00	193	496	13,455.22
RESIDENTIAL CARE FACILITY	0	0	0.00	0	0	0.00	316	10307	76,153.09
MR WAIVER SERVICE	0	0	0.00	0	0	0.00	77	4435	249,083.18
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	3493	143874	2112,138.35
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	97	111	29,023.06
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 *	192	812	36,840.28	0	0	0.00	14160	657440	18703,089.02

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	1639	9265	6415,991.17	582	1860	2316,704.33
OUTPATIENT	0	0	0.00	14471	341304	4175,896.67	7477	118561	2809,597.89
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	1	18	355.64	0	0	0.00
SKILLED NURSING FACILITY	0	0	0.00	194	4689	2695,714.37	1	5	1,889.25
INTERMEDIATE CARE FACILITY	0	0	0.00	594	18489	2051,054.98	0	0	0.00
INTER CARE MENTAL RETARDA	0	0	0.00	9	237	89,298.78	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	3559	89180	2915,119.10	76	942	41,450.44
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	0	0	0.00	22905	101424	3886,405.46	13925	26948	2624,554.38
CLINIC SERVICES	0	0	0.00	2665	3848	512,422.55	2377	3258	435,673.90
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	0	0	0.00	2787	5002	89,867.67	2165	5749	138,773.50
HABILITATION SERVICES	0	0	0.00	2416	65216	3332,086.06	26	397	21,004.05
REMEDIAL SERVICES	0	0	0.00	717	18964	292,744.59	172	3643	56,149.55
REHAB SUPPORT SERVICES	0	0	0.00	35	133	12,533.96	2	0	360.50
AMBULANCE SERVICES	0	0	0.00	814	949	106,474.67	188	191	29,595.08
LOCAL EDUCATION AGENCY	0	0	0.00	308	72425	733,766.19	12	760	4,469.70

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	59	252	5,684.59	0	0	0.00
PRESCRIBED DRUGS	0	0	0.00	23848	99112	7889,738.42	19533	52855	2653,143.58
DRUG CAPITATION	0	0	0.00	1	0	0.01-	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	130	151	9,941.78	5838	6631	585,768.39
IOWA PLAN PROGRAM	1	0	5.80	54336	51844	3867,590.77	51844	42348	1283,687.64
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	362	434	15,540.75	117	140	5,743.19
HMO SERVICES	0	0	0.00	0	0	0.00	826	862	236,893.70
PACE SERVICES	0	0	0.00	5	5	17,199.00	0	0	0.00
PATIENT MANAGEMENT	0	0	0.00	0	0	0.00	22958	22955	45,910.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	660	1448	172,121.46	200	481	18,228.74
MEDICAL SUPPLIES	0	0	0.00	9267	677253	1851,948.17	1014	28090	233,075.12
OTHER PRACTITIONER	0	0	0.00	2122	18249	339,178.40	1365	2883	172,724.07
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	0	0	0.00	2771	3396	534,938.13	2230	2846	459,395.60
OPTOMETRIST	0	0	0.00	1942	2627	132,229.67	1133	1368	103,454.84

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	2255	5803	97,931.44	1567	3388	122,307.29
PODIATRIC	0	0	0.00	1101	1848	73,026.79	208	277	31,478.04
PHYSICAL DISABILITIES SVCS	0	0	0.00	427	16463	207,165.17	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	316	15165	488,040.22	0	0	0.00
PSYCHIATRIC	0	0	0.00	2576	5380	176,727.83	20	26	2,286.21
RESIDENTIAL CARE FACILITY	0	0	0.00	1354	43428	352,125.14	0	0	0.00
MR WAIVER SERVICE	0	0	0.00	983	57714	2792,327.09	1	14	184.20
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	36	1214	24,725.55	3	233	3,882.72
AIDS WAIVER SERVICES	0	0	0.00	13	1155	13,965.80	0	0	0.00
ELDERLY WAIVER SERVICES	0	0	0.00	26	1230	22,166.63	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	1854	86873	1407,168.56	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	1223	1382	359,267.76	3	3	1,478.10
UNASSIGNED	0	0	0.00	9	0	0.00	4	0	0.00
* A L L C A T E G O R I E S *	1	0	5.80	56172	1823569	48160,480.97	58565	327714	14439,864.00

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	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	305	1484	1670,385.08	348	6860	2045,248.00	1675	8751	8134,063.35
OUTPATIENT	6013	62806	1386,756.53	1720	20620	486,551.34	10317	141567	1591,760.99
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	7	46	4,213.96
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	4	58	4,490.27
INTER CARE MENTAL RETARDA	0	0	0.00	0	0	0.00	1	0	2750,228.00-
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	0	0	0.00
HOME HEALTH	511	2217	64,761.49	77	247	12,482.25	808	2906	17,414.90
LEAD INSPECTION AGENCY	4	4	1,520.71	1	1	377.35	4	4	1,513.17
PHYSICIAN	16190	26874	1835,961.32	3594	6449	535,886.87	25455	45918	4010,860.17
CLINIC SERVICES	2853	3544	471,065.16	775	1094	139,719.92	5557	7852	955,361.47
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	1151	2352	32,591.04	344	902	17,422.96	2502	7073	125,513.13
HABILITATION SERVICES	1	26	1,162.72	17	496	38,147.81	6	120	5,514.53
REMEDIAL SERVICES	2096	46152	700,506.77	739	15955	231,432.63	1804	39373	586,270.13
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	1	0	160,102.01-
AMBULANCE SERVICES	90	93	14,621.07	37	39	4,886.00	141	136	19,903.59
LOCAL EDUCATION AGENCY	112	15006	91,584.92	41	4443	42,272.13	129	13601	110,350.71

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	43	101	3,883.73	14	20	734.23	59	180	4,501.12
PRESCRIBED DRUGS	16517	27516	1708,820.84	4328	9861	601,914.96	23802	39627	2139,463.21
DRUG CAPITATION	0	0	0.00	0	0	0.00	1	0	705.86-
INDIAN HEALTH SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
FAMILY PLANNING SERVICES	958	1133	104,169.71	189	216	19,654.94	324	363	44,522.60
IOWA PLAN PROGRAM	83653	69051	667,738.59	19601	15090	361,453.67	122027	99512	2203,625.08
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	3910	4519	297,153.93	1014	1171	78,720.28	6148	6938	672,296.91
HMO SERVICES	1487	1553	166,571.28	342	359	52,516.33	1746	1823	218,655.64
PACE SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PATIENT MANAGEMENT	40875	40865	81,730.00	7969	7962	15,924.00	60062	60036	120,072.00
HEALTH INS PREMIUM PAYMENT	294	713	19,764.63	59	144	5,425.86	2022	5527	140,423.81
MEDICAL SUPPLIES	735	11588	118,606.62	168	5515	31,593.85	1034	22429	182,651.71
OTHER PRACTITIONER	1766	9019	202,360.07	426	2004	57,343.37	2823	7659	288,620.67
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	3324	3790	504,270.30	814	974	143,611.53	4873	5740	811,184.81
OPTOMETRIST	1203	1370	92,001.92	335	398	27,741.45	1762	2051	132,502.02

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	753	1266	40,924.99	179	316	11,386.50	1257	2554	78,444.55
PODIATRIC	60	75	8,539.38	29	38	3,351.54	92	122	13,520.29
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	0	2,249.37-
PSYCHIATRIC	3	3	357.61	11	64	3,851.63	37	51	965.72
RESIDENTIAL CARE FACILITY	0	0	0.00	1	34	582.63	1	0	289.34
MR WAIVER SERVICE	3	26	706.76	4	63	9,679.43	5	97	3,361.29
CHILDRENS MENTAL HEALTH SVC	42	1679	35,874.93	91	4837	93,359.38	54	2545	51,482.94
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	3	22	1,962.80
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	0	0	0.00	5	7	369.74
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	50	54	24,726.19	109	127	51,268.87	61	79	30,813.29
UNASSIGNED	0	0	0.00	1	0	0.00	4	0	1931,942.05
* A L L C A T E G O R I E S *	84792	334879	10349,118.29	16915	106299	5124,541.71	102993	524767	21725,616.72

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	40	467	193,428.62	737	3511	850,059.51	48	327	480,239.44
OUTPATIENT	751	11493	184,165.51	5136	125422	533,446.31	413	7426	132,909.51
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	2	80	31,501.57	356	5507	34,818.63	3	77	1,024.00
INTERMEDIATE CARE FACILITY	0	0	0.00	7139	215030	22555,676.80	2	77	7,697.49
INTER CARE MENTAL RETARDA	9	215	86,949.33	3	6-	482.65-	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	29	838	251,676.50	1	31	6,730.72
HOME HEALTH	108	3842	102,556.13	3511	71562	2800,218.95	52	798	22,574.22
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	1924	3006	194,198.45	7615	39996	554,608.55	786	2418	144,226.82
CLINIC SERVICES	385	496	60,491.65	401	430	21,155.09	89	113	16,222.79
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	202	582	10,306.64	1071	417	5,313.34	131	201	4,837.70
HABILITATION SERVICES	10	192	7,443.37	24	356	17,477.16	28	814	61,276.10
REMEDIAL SERVICES	2295	146411	1975,524.36	5	70	2,311.76	8	97	1,498.92
REHAB SUPPORT SERVICES	0	0	0.00	1	17	883.32	0	0	0.00
AMBULANCE SERVICES	13	14	2,877.58	491	634	54,645.90	18	18	2,884.63
LOCAL EDUCATION AGENCY	76	23432	161,279.12	15	3976	56,479.70	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	21	69	2,144.82	1	1	50.00	0	0	0.00
PRESCRIBED DRUGS	4797	11379	957,935.23	9842	21218	377,756.70	941	2850	135,716.84
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	29	34	1,913.05	2	3	354.75	33	34	3,649.32
IOWA PLAN PROGRAM	12290	11376	1236,010.62	2688	455	51,105.29	2191	1466	52,584.06
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	199	246	11,579.16	3	4	91.26	5	5	166.85
HMO SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PACE SERVICES	0	0	0.00	14	14	39,110.00	0	0	0.00
PATIENT MANAGEMENT	74	74	148.00	0	0	0.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	158	355	13,517.24	39	78	12,890.67	0	0	0.00
MEDICAL SUPPLIES	216	24996	66,380.34	4521	370339	608,263.67	232	15278	27,819.71
OTHER PRACTITIONER	436	2464	50,750.28	486	1734	44,589.22	69	230	9,477.80
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	809	938	121,857.90	540	638	98,789.01	144	182	24,803.68
OPTOMETRIST	353	395	25,107.34	598	866	24,908.67	74	80	5,627.93

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
CHIROPRACTIC	149	271	8,454.61	311	779	9,991.66	80	181	5,307.40
PODIATRIC	27	33	3,996.86	1316	1838	30,623.69	37	49	2,856.64
PHYSICAL DISABILITIES SVCS	0	0	0.00	168	7262	89,669.22	0	0	0.00
BRAIN INJ WAIVER SERVICES	34	1436	39,078.01	432	20344	670,393.98	0	0	0.00
PSYCHIATRIC	10	36	2,120.50	323	530	19,759.70	31	39	796.47
RESIDENTIAL CARE FACILITY	3	89	1,620.55	5	164	2,047.54	0	0	0.00
MR WAIVER SERVICE	178	5814	184,352.80	13	455	18,581.58	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	31	2623	28,857.55	0	0	0.00
ELDERLY WAIVER SERVICES	0	0	0.00	6269	272915	3561,171.78	2	112	2,362.00
ILL & HANDICAPPED WAIVER SVCS	29	2087	32,466.63	6	174	6,854.17	0	0	0.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	208	237	58,992.09	143	165	44,161.90	1	1	237.51
UNASSIGNED	0	0	0.00	2	0	183.47	1	0	0.00
* A L L C A T E G O R I E S *	9996	252559	5829,148.36	14818	1170359	33478,494.35	1938	32904	1153,528.55

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
INPATIENT	118	435	593,430.77	47	529	210,431.67	3	9-	31,617.54-
OUTPATIENT	375	9522	228,938.46	820	10311	203,724.94	111	3222	97,444.80
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	27	0.00	0	0	0.00	0	0	0.00
INTERMEDIATE CARE FACILITY	1	28-	2,507.27-	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	27	640	53,854.81	86	201	5,808.15	2	6	463.67
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	686	2750	185,706.04	2477	3768	259,769.74	166	839	213,467.53
CLINIC SERVICES	52	74	11,431.44	562	685	85,332.03	13	17	2,129.07
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	31	82	1,874.12	134	332	5,438.50	20	225	4,046.87
HABILITATION SERVICES	3	40	5,809.30	0	0	0.00	0	0	0.00
REMEDIAL SERVICES	1	24	224.40	353	6229	101,643.88	0	0	0.00
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	39	42	7,978.44	18	18	2,530.44	1	1	144.50
LOCAL EDUCATION AGENCY	0	0	0.00	21	2789	35,357.78	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	2	4	85.01	0	0	0.00
PRESCRIBED DRUGS	226	1000	43,576.72	3180	5164	394,737.45	192	769	47,702.69
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	6	7	504.10	62	71	5,994.65	0	0	0.00
IOWA PLAN PROGRAM	0	0	0.00	20318	13630	147,724.42	273	247	25,251.62
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	3	3	175.58	534	571	36,399.23	0	0	0.00
HMO SERVICES	0	0	0.00	232	239	24,920.20	0	0	0.00
PACE SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PATIENT MANAGEMENT	0	0	0.00	9127	9127	18,254.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	18	43	1,762.96	0	0	0.00
MEDICAL SUPPLIES	64	1946	15,903.56	91	4611	30,887.62	24	631	3,806.62
OTHER PRACTITIONER	44	110	6,096.61	273	789	28,223.41	9	15	1,899.45
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	39	55	14,707.00	1018	1187	187,648.49	9	10	1,130.73
OPTOMETRIST	18	28	1,142.41	372	436	28,461.17	13	15	972.82

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	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	11	16	446.74	222	432	14,345.12	10	34	1,114.78
PODIATRIC	7	13	1,750.59	21	29	2,087.80	2	3	334.82
PHYSICAL DISABILITIES SVCS	0	0	0.00	0	0	0.00	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	2	93	2,637.60	0	0	0.00
PSYCHIATRIC	26	75	4,019.02	1	1	327.41	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	2	45	1,096.40	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	1	60	600.00	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	1	279.48	6	6	2,207.72	0	0	0.00
UNASSIGNED	4	0	0.00	1	0	0.00	0	0	0.00
* A L L C A T E G O R I E S *	702	16862	1175,342.32	10016	61400	1838,437.79	255	6025	368,292.43

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
INPATIENT	3	0	8,290.02	0	0	0.00	0	0	0.00
OUTPATIENT	2	0	499.88	3	13	273.03	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	8	0	11,159.69	4	9	2,167.91	0	0	0.00
CLINIC SERVICES	0	0	0.00	1	3	126.61	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	2	9	130.69	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

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
EARLY ACCESS SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PRESCRIBED DRUGS	82	76	7,230.97	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 *	83	76	27,180.56	7	34	2,698.24	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	6	111	18,056.52	2	12	9,138.96	3	8	9,837.29
OUTPATIENT	34	363	3,541.20	7	68	462.12	70	1126	22,487.60
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	1-	136.83-	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	81	140	5,050.66	36	426	810.49	118	222	17,438.98
CLINIC SERVICES	10	14	1,900.94	1	0	18.38	19	24	2,794.10
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	7	10	195.04	2	0	0.00	12	36	767.52
HABILITATION SERVICES	0	0	0.00	0	0	0.00	7	447	21,685.28
REMEDIAL SERVICES	127	3699	61,394.02	0	0	0.00	17	384	8,143.94
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	2	2	247.58
LOCAL EDUCATION AGENCY	9	1947	18,638.78	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	352	1174	103,120.95	6	11	82.86	153	363	22,271.62
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	200.37	0	0	0.00	18	19	1,145.77
IOWA PLAN PROGRAM	482	458	84,098.02	49	43	2,938.12	477	415	67,095.03
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	22	23	955.34	0	0	0.00	7	8	264.94
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	8	8	16.00	0	0	0.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	44	95	8,651.61	0	0	0.00	0	0	0.00
MEDICAL SUPPLIES	14	915	970.95	3	17	208.02	8	82	914.82
OTHER PRACTITIONER	28	817	6,342.36	1	1	27.85	15	21	1,735.26
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	30	35	3,476.15	0	0	0.00	13	14	1,243.57
OPTOMETRIST	19	25	1,481.35	1	4	39.37	9	10	689.97

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
CHIROPRACTIC	10	18	595.29	1	10	57.72	10	17	564.87
PODIATRIC	3	3	57.60	2	4	40.50	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	1	1	32.84	1	1	40.20
RESIDENTIAL CARE FACILITY	0	0	0.00	4	126	1,512.55	0	0	0.00
MR WAIVER SERVICE	0	0	0.00	0	0	0.00	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	349	15029	333,744.09	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	1	14	210.00	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	388	404	192,947.76	1	1	222.41	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 *	304	25304	845,645.00	12	723	15,455.36	291	3199	179,368.34

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	20	115	103,315.65	144	831	528,400.31	0	0	0.00
OUTPATIENT	290	4674	110,864.65	2496	55638	273,316.26	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	15	222	3,737.70	0	0	0.00
INTERMEDIATE CARE FACILITY	1	1	107.33	7	106	11,238.18	0	0	0.00
INTER CARE MENTAL RETARDA	0	0	0.00	1879	56277	20613,519.62	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	0	0	0.00
HOME HEALTH	24	314	18,930.18	1166	40507	1416,302.69	0	0	0.00
LEAD INSPECTION AGENCY	0	0	0.00	1	0	0.00	0	0	0.00
PHYSICIAN	536	1205	108,776.55	4146	13092	328,235.57	0	0	0.00
CLINIC SERVICES	106	187	30,338.22	300	362	39,424.81	0	0	0.00
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	52	178	3,294.24	428	471	5,529.99	0	0	0.00
HABILITATION SERVICES	4	68	1,906.05	22	366	15,876.10	0	0	0.00
REMEDIAL SERVICES	56	768	18,891.93	125	3347	52,922.54	0	0	0.00
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	7	8	1,080.27	98	178	14,409.71	0	0	0.00
LOCAL EDUCATION AGENCY	0	0	0.00	339	94106	887,528.46	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	2	6	75.38	19	119	1,961.27	0	0	0.00
PRESCRIBED DRUGS	846	3788	214,728.38	6048	19180	1493,194.42	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	2	2	118.75	17	19	1,139.76	0	0	0.00
IOWA PLAN PROGRAM	1638	1405	137,207.80	11223	10740	722,859.84	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	28	31	610.67	88	122	3,929.53	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	173	173	346.00	0	0	0.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	4	9	817.24	581	1258	167,226.48	0	0	0.00
MEDICAL SUPPLIES	150	7093	28,496.05	2254	312450	492,153.14	0	0	0.00
OTHER PRACTITIONER	52	62	4,753.01	776	9951	222,448.85	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	81	101	24,257.22	884	1002	96,993.78	0	0	0.00
OPTOMETRIST	48	60	4,797.22	503	602	27,417.85	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	47	108	3,765.02	316	658	10,648.39	0	0	0.00
PODIATRIC	24	31	2,256.52	535	703	15,929.44	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	265	12638	392,299.63	0	0	0.00
PSYCHIATRIC	3	10	226.44	487	718	24,275.03	0	0	0.00
RESIDENTIAL CARE FACILITY	0	0	0.00	17	634	4,801.98	0	0	0.00
MR WAIVER SERVICE	3	60	1,501.92	8337	470248	20635,253.56	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	3	57	1,149.64	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	3	154	2,420.20	1	4	78.40	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	1	9	414.00	156	7525	150,943.50	0	0	0.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	7	8	2,454.80	7948	8614	2211,685.11	0	0	0.00
UNASSIGNED	0	0	0.00	2	0	20.00	0	0	0.00
* A L L C A T E G O R I E S *	1460	20685	827,901.33	11228	1122688	50865,701.90	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	6194	36644	23988,211.85			
OUTPATIENT	0	0	0.00	54110	996952	12705,758.54			
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	1	18	355.64			
SKILLED NURSING FACILITY	0	0	0.00	752	13450	2850,415.81			
INTERMEDIATE CARE FACILITY	0	0	0.00	12316	373858	37264,798.49			
INTER CARE MENTAL RETARDA	0	0	0.00	1899	56723	18039,057.08			
NURSING FAC FOR MENTAL ILL	0	0	0.00	34	1023	297,949.80			
HOME HEALTH	0	0	0.00	12151	258638	9072,422.66			
LEAD INSPECTION AGENCY	0	0	0.00	10	9	3,411.23			
PHYSICIAN	0	0	0.00	104557	310580	15281,718.25			
CLINIC SERVICES	0	0	0.00	16454	22440	2821,119.29			
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00			
LAB AND RADIOLOGICAL	0	0	0.00	11763	23866	449,091.75			
HABILITATION SERVICES	0	0	0.00	2602	69766	3602,328.50			
REMEDIAL SERVICES	0	0	0.00	7711	285116	4089,659.42			
REHAB SUPPORT SERVICES	0	0	0.00	39	150	146,324.23-			
AMBULANCE SERVICES	0	0	0.00	2240	2689	294,951.58			
LOCAL EDUCATION AGENCY	0	0	0.00	1054	232485	2141,727.49			

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	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	216	752	19,120.15			
PRESCRIBED DRUGS	0	0	0.00	115878	300774	18846,680.92			
DRUG CAPITATION	0	0	0.00	2	0	705.87-			
INDIAN HEALTH SERVICES	0	0	0.00	0	0	0.00			
FAMILY PLANNING SERVICES	0	0	0.00	7598	8685	779,077.94			
IOWA PLAN PROGRAM	0	0	0.00	343278	318248	10915,539.11			
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	12377	14216	1123,664.09			
HMO SERVICES	0	0	0.00	4624	4838	700,045.32			
PACE SERVICES	0	0	0.00	19	19	56,309.00			
PATIENT MANAGEMENT	0	0	0.00	141299	141252	282,442.03			
HEALTH INS PREMIUM PAYMENT	0	0	0.00	4080	10152	560,953.64			
MEDICAL SUPPLIES	0	0	0.00	22305	1662305	4004,773.16			
OTHER PRACTITIONER	0	0	0.00	10903	56948	1454,999.47			
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	17865	21300	3093,523.60			
OPTOMETRIST	0	0	0.00	8883	11149	629,348.49			

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

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
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CHIROPRACTIC	0	0	0.00	7534	16923	416,365.63			
PODIATRIC	0	0	0.00	4113	6071	201,257.05			
PHYSICAL DISABILITIES SVCS	0	0	0.00	593	23725	296,834.39			
BRAIN INJ WAIVER SERVICES	0	0	0.00	1026	49725	1595,086.26			
PSYCHIATRIC	0	0	0.00	3697	7431	249,241.83			
RESIDENTIAL CARE FACILITY	0	0	0.00	1690	54782	439,132.82			
MR WAIVER SERVICE	0	0	0.00	9581	538971	23896,128.21			
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	577	25654	544,819.25			
AIDS WAIVER SERVICES	0	0	0.00	43	3778	42,823.35			
ELDERLY WAIVER SERVICES	0	0	0.00	9569	418311	5702,300.16			
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	2049	96689	1598,426.60			
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00			
MEP SERVICES	0	0	0.00	10222	11193	3009,766.05			
UNASSIGNED	0	0	0.00	28	0	1932,145.52			
* A L L C A T E G O R I E S *	0	0	0.00	384900	6488298	215146,751.32	0	0	0.00

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