

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	623	2764	692,427.61
OUTPATIENT	31	302	7,873.73	0	0	0.00	4615	97767	696,397.81
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	274	3933	54,905.81
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	4539	135553	11861,396.55
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	6	196	57,236.72
HOME HEALTH	0	0	0.00	0	0	0.00	2571	55164	1725,491.10
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	55	77	5,587.59	0	0	0.00	6669	40389	601,218.46
CLINIC SERVICES	15	20	3,001.40	0	0	0.00	500	388	29,377.75
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	7	40	713.77	0	0	0.00	878	190	2,856.65
HABILITATION SERVICES	0	0	0.00	0	0	0.00	53	1610	100,830.00
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	351	418	43,227.47
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	38	78	2,389.76	0	0	0.00	3034	4929	62,858.18
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	120	127	3,372.04	0	0	0.00	9	9	722.64
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	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	1	1	2,507.00
PATIENT MANAGEMENT	49	49	98.00	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	4	15	443.86	0	0	0.00	2688	173962	334,338.35
OTHER PRACTITIONER	1	1	81.35	0	0	0.00	358	1003	19,949.39
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	16	23	1,957.49	0	0	0.00	436	531	88,764.33
OPTOMETRIST	1	2	109.87	0	0	0.00	609	936	36,396.75

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	387	911	15,013.17
PODIATRIC	0	0	0.00	0	0	0.00	876	1314	30,019.74
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	51	4,997.27
PSYCHIATRIC	0	0	0.00	0	0	0.00	178	406	19,418.46
RESIDENTIAL CARE FACILITY	0	0	0.00	0	0	0.00	310	10323	76,021.51
MR WAIVER SERVICE	0	0	0.00	0	0	0.00	79	3733	224,664.31
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	3569	159223	2385,593.77
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	95	109	27,447.37
UNASSIGNED	0	0	0.00	0	0	0.00	3	0	0.00
* A L L C A T E G O R I E S *	142	734	25,628.86	0	0	0.00	14495	695813	19194,078.17

## 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	1822	11814	8804,587.38	678	2385	2908,954.26
OUTPATIENT	0	0	0.00	15851	379889	5139,198.38	8158	143588	3562,577.20
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	214	5112	2335,526.92	2	7	2,592.90
INTERMEDIATE CARE FACILITY	0	0	0.00	595	17563	1912,507.80	1	27	3,665.86
INTER CARE MENTAL RETARDA	0	0	0.00	13	354	121,480.26	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	3881	94905	3218,892.77	77	715	36,221.76
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	0	0	0.00	24163	113604	4749,145.43	15451	31244	3070,674.20
CLINIC SERVICES	0	0	0.00	3233	4635	630,897.78	2750	3861	514,652.69
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	0	0	0.00	3012	5735	95,858.73	2708	8140	184,507.88
HABILITATION SERVICES	0	0	0.00	2503	70321	3598,662.12	24	459	22,631.31
REMEDIAL SERVICES	0	0	0.00	643	15761	291,517.87	165	3740	61,335.43
REHAB SUPPORT SERVICES	0	0	0.00	5	56	11,460.74	0	0	0.00
AMBULANCE SERVICES	0	0	0.00	867	1066	131,992.96	215	236	32,740.72
LOCAL EDUCATION AGENCY	0	0	0.00	533	124444	1316,800.02	9	1337	7,247.19

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	122	683	13,358.92	1	3	115.00
PRESCRIBED DRUGS	0	0	0.00	24093	101265	8160,228.15	20140	55656	2831,884.92
DRUG CAPITATION	0	0	0.00	0	0	0.00	1	0	7.07-
INDIAN HEALTH SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
FAMILY PLANNING SERVICES	0	0	0.00	136	154	13,529.00	5721	6432	608,555.47
IOWA PLAN PROGRAM	1	1	58.29	48999	50264	3705,916.75	37948	41646	1299,253.84
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	217	293	15,362.72	126	140	6,439.33
HMO SERVICES	0	0	0.00	0	0	0.00	42	42	11,272.39
PACE SERVICES	0	0	0.00	6	6	21,549.00	0	0	0.00
PATIENT MANAGEMENT	0	0	0.00	3	3	6.00	22910	22912	45,824.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	620	1293	133,838.68	215	486	14,958.05
MEDICAL SUPPLIES	0	0	0.00	8995	688218	1965,708.93	1170	26186	247,688.43
OTHER PRACTITIONER	0	0	0.00	2495	20715	383,365.48	1528	3348	209,059.54
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	0	0	0.00	4011	5298	855,243.21	3091	4302	775,394.28
OPTOMETRIST	0	0	0.00	2385	3188	191,054.23	1578	1914	145,545.49

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	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	2265	5132	115,804.16	1798	4060	143,961.07
PODIATRIC	0	0	0.00	1238	2152	95,390.04	237	326	40,098.90
PHYSICAL DISABILITIES SVCS	0	0	0.00	468	19687	260,540.05	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	316	17076	550,385.89	0	0	0.00
PSYCHIATRIC	0	0	0.00	2398	3965	176,176.30	28	44	3,352.33
RESIDENTIAL CARE FACILITY	0	0	0.00	1327	43742	371,192.54	0	0	0.00
MR WAIVER SERVICE	0	0	0.00	999	62496	2825,328.24	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	30	1282	28,029.54	4	243	4,345.61
AIDS WAIVER SERVICES	0	0	0.00	13	1046	6,031.05-	0	0	0.00
ELDERLY WAIVER SERVICES	0	0	0.00	31	1235	24,032.31	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	1857	90320	1490,911.42	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	1197	1416	366,391.00	6	8	3,077.19
UNASSIGNED	0	0	0.00	3	0	0.00	10	0	0.00
* A L L C A T E G O R I E S *	1	1	58.29	53369	1966188	54115,840.67	48676	363487	16798,620.17

## 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	403	2296	2218,479.00	336	6954	2180,176.49	1801	10008	9683,499.83
OUTPATIENT	7198	74497	1836,175.69	2013	28487	568,437.16	11529	166693	3162,737.93
CHILD PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
CHILD DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
ADULT PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
ADULT DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
SKILLED NURSING FACILITY	0	0	0.00	0	0	0.00	8	82	33,872.35
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	1	31	2,569.14
INTER CARE MENTAL RETARDA	0	0	0.00	0	0	0.00	1	0	28,191.00-
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	0	0	0.00
HOME HEALTH	623	2233	65,792.64	109	422	20,402.37	1028	5630	205,471.25
LEAD INSPECTION AGENCY	4	5	1,843.36	0	0	0.00	4	4	1,524.48
PHYSICIAN	19323	33224	2244,443.98	4233	7690	586,322.76	29366	54935	4663,492.24
CLINIC SERVICES	3520	4630	594,834.44	955	1325	162,807.94	6529	9141	1677,530.60
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	1700	3393	50,010.79	466	1314	25,394.71	3119	8989	160,119.26
HABILITATION SERVICES	0	0	0.00	19	583	38,904.39	4	112	8,238.52
REMEDIAL SERVICES	1905	44666	827,945.04	702	19094	336,841.06	1625	41023	721,203.69
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	1	0	1,339.65-
AMBULANCE SERVICES	98	94	13,535.50	46	51	7,314.56	174	182	29,977.48
LOCAL EDUCATION AGENCY	155	24145	167,575.96	41	8197	58,011.03	140	21318	210,082.66

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	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	142	626	16,785.47	35	129	3,470.85	154	651	16,360.25
PRESCRIBED DRUGS	19577	34593	2122,472.16	4883	11280	746,468.66	27867	49836	2884,154.81
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	1028	1194	110,483.46	190	213	22,073.02	403	488	49,661.49
IOWA PLAN PROGRAM	64401	68728	686,362.32	13737	14832	306,021.69	89763	98229	1201,249.08
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	3314	3876	325,081.53	791	962	76,806.59	5328	5968	673,053.58
HMO SERVICES	45	50	16,717.45	11	12	4,396.38	67	82	25,538.78
PACE SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PATIENT MANAGEMENT	41084	41084	82,168.00	8110	8110	16,220.00	60508	60508	121,016.00
HEALTH INS PREMIUM PAYMENT	302	762	20,552.88	53	114	3,598.68	2017	5182	126,750.22
MEDICAL SUPPLIES	1064	13916	142,783.47	219	3700	34,798.47	1283	21109	184,707.34
OTHER PRACTITIONER	2219	10913	207,043.13	488	3445	57,916.41	3321	15820	372,645.39
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	4586	5427	752,874.91	1078	1377	251,653.91	6616	8075	1181,655.69
OPTOMETRIST	1495	1744	116,993.63	449	527	37,635.46	2282	2651	180,958.27



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	860	1492	49,241.04	234	463	16,262.01	1523	3145	100,367.56
PODIATRIC	62	83	8,524.77	30	46	5,188.35	110	143	4,814.38
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	68	2,040.47
PSYCHIATRIC	8	16	1,941.58	19	63	3,991.48	20	31	2,942.73
RESIDENTIAL CARE FACILITY	0	0	0.00	1	31	835.45	0	0	0.00
MR WAIVER SERVICE	0	0	0.00	2	166	2,349.48	6	106	1,049.06
CHILDRENS MENTAL HEALTH SVC	40	1831	36,340.24	95	5038	92,640.61	55	2800	53,323.04
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	8	111	2,749.10
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	42	47	22,336.40	100	110	48,172.84	64	72	69,004.56-
UNASSIGNED	1	0	0.00	1	0	0.00	9	0	1990,708.06-
* A L L C A T E G O R I E S *	71165	375565	12739,338.84	14904	124735	5715,112.81	96888	593223	25605,035.84

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	FOSTER - PRESUB - SUB ADOPTS			INTERMEDIATE CARE FACILITY			MEDICALLY NEEDY NO SPEND DN		
	RECIPES SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPES SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPES SERVED	UNITS OF SERVICE	AMOUNT PAID
INPATIENT	52	561	196,603.58	808	3615	1082,674.65	55	240	313,669.06
OUTPATIENT	849	11437	232,111.20	5539	130865	808,803.20	434	8917	221,603.76
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	1	31	10,655.67	443	6225	58,649.47	2	11	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	7070	213630	22141,991.31	1	31	1,417.14
INTER CARE MENTAL RETARDA	9	265	108,807.98	0	0	0.00	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	28	1524	548,565.54	1	31	6,730.72
HOME HEALTH	89	2970	106,158.29	3898	90749	3143,957.73	61	790	22,295.79
LEAD INSPECTION AGENCY	1	1	381.12	0	0	0.00	0	0	0.00
PHYSICIAN	2224	3638	225,399.88	7775	42727	752,989.55	817	2482	170,586.82
CLINIC SERVICES	469	647	73,628.75	501	495	43,042.59	120	151	22,441.40
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	248	658	11,925.82	1110	412	4,690.21	161	346	7,254.40
HABILITATION SERVICES	10	189	7,173.70	34	626	31,244.70	33	894	62,102.23
REMEDIAL SERVICES	2466	170828	2648,755.96	3	51	1,118.82	4	86	1,390.18
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	16	16	1,752.00	506	669	71,428.05	21	29	4,698.11
LOCAL EDUCATION AGENCY	124	32531	330,288.02	18	3170	48,266.33	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	46	148	3,946.78	3	12	236.78	0	0	0.00
PRESCRIBED DRUGS	4915	12734	1306,326.01	9794	21207	387,360.22	982	2986	144,403.04
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	36	42	5,176.08	1	1	80.17	32	36	3,988.11
IOWA PLAN PROGRAM	10586	9392	1010,349.79	2167	2198	148,279.17	1370	1487	54,419.19
MANAGED SUBSTANCE ABUSE	1	0	38.40	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	174	237	16,844.70	2	6	258.32	10	10	368.21
HMO SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PACE SERVICES	0	0	0.00	16	16	44,124.00	0	0	0.00
PATIENT MANAGEMENT	68	68	136.00	0	0	0.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	156	328	13,170.74	37	67	12,017.35	1	2	31.48
MEDICAL SUPPLIES	247	27998	85,090.16	4657	395495	678,972.88	216	12940	23,168.55
OTHER PRACTITIONER	439	3391	69,396.94	538	2324	45,752.16	83	203	12,221.86
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	1016	1229	199,428.11	761	955	141,637.46	194	268	38,941.29
OPTOMETRIST	398	466	30,762.58	759	1047	47,932.98	101	136	8,026.10

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	164	316	9,660.62	311	650	10,816.61	80	177	5,355.95
PODIATRIC	33	41	2,558.06	1485	2194	55,295.97	54	80	3,125.39
PHYSICAL DISABILITIES SVCS	0	0	0.00	183	7773	95,715.73	0	0	0.00
BRAIN INJ WAIVER SERVICES	36	1572	47,026.27	439	21055	714,758.11	0	0	0.00
PSYCHIATRIC	12	14	1,921.15	280	595	26,917.94	34	48	2,155.54
RESIDENTIAL CARE FACILITY	0	0	0.00	5	58	873.87	0	0	0.00
MR WAIVER SERVICE	186	7167	234,833.12	8	244	13,220.38	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	32	3275	33,288.52	0	0	0.00
ELDERLY WAIVER SERVICES	0	0	0.00	6248	295622	3742,187.32	4	108	1,893.70
ILL & HANDICAPPED WAIVER SVCS	27	1482	23,914.63	8	390	5,553.97	0	0	0.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	217	253	64,199.06	133	138	36,188.11	0	0	0.00
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 *	10756	290650	7078,421.17	14944	1250080	34978,890.17	1795	32489	1132,288.02

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	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	166	919	910,262.72	64	630	353,444.04	8	44	70,197.88
OUTPATIENT	441	18401	333,437.44	1013	12165	295,372.48	113	3877	147,026.64
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	24	14,400.00	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	31	455	42,209.82	85	224	6,414.56	3	24	2,104.15
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	754	5166	273,394.10	3013	4780	339,150.33	173	880	210,458.89
CLINIC SERVICES	64	85	11,461.30	683	854	103,439.86	16	27	4,442.91
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	47	249	4,029.02	169	402	6,505.18	24	66	1,566.85
HABILITATION SERVICES	5	46	3,193.46	0	0	0.00	0	0	0.00
REMEDIAL SERVICES	1	40	374.00	309	6196	118,562.42	0	0	0.00
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	40	42	7,397.97	13	11	1,786.94	1	1	135.42
LOCAL EDUCATION AGENCY	0	0	0.00	36	7506	58,807.46	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	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	1	4	54.40	0	0	0.00
PRESCRIBED DRUGS	252	1223	63,226.96	3592	6295	475,948.67	206	861	54,022.95
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	5	1,316.82	69	76	7,910.91	0	0	0.00
IOWA PLAN PROGRAM	0	0	0.00	12401	13210	143,323.15	243	245	25,552.73
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	1	601.81-	398	421	35,038.37	0	0	0.00
HMO SERVICES	0	0	0.00	5	5	3,966.34	0	0	0.00
PACE SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PATIENT MANAGEMENT	0	0	0.00	9034	9034	18,068.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	11	23	1,340.81	0	0	0.00
MEDICAL SUPPLIES	81	3164	54,424.89	146	4828	24,766.39	24	891	4,238.93
OTHER PRACTITIONER	60	147	8,711.75	330	1447	35,146.48	9	9	1,236.38
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	55	93	22,101.25	1261	1482	225,024.63	24	33	5,980.92
OPTOMETRIST	20	27	1,776.39	430	499	34,015.23	10	11	1,009.61

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	19	43	1,428.98	307	562	19,145.57	8	20	739.56
PODIATRIC	9	12	580.79	36	47	5,219.26	6	6	354.62
PHYSICAL DISABILITIES SVCS	0	0	0.00	0	0	0.00	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	2	55	1,904.15	0	0	0.00
PSYCHIATRIC	31	68	4,058.48	2	6	303.56	2	2	76.78
RESIDENTIAL CARE FACILITY	0	0	0.00	0	0	0.00	0	0	0.00
MR WAIVER SERVICE	0	0	0.00	3	69	2,005.53	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	3	153	2,040.00	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	8	2,912.96	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 *	833	30211	1757,463.81	11866	70992	2321,617.68	242	6997	529,145.22

## 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	48,092.69	0	0	0.00	0	0	0.00
OUTPATIENT	4	0	26,464.97	3	109	1,291.27	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	4	0	15,070.25	6	4	481.21	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	198.00	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	75	69	9,983.84	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	1	1	1,133.01	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	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	2	2	283.98	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 *	75	69	99,611.75	9	121	3,387.47	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	4	62	5,683.74	3	5	1,024.00	2	4	8,882.56
OUTPATIENT	32	225	4,638.15	7	138	532.57	72	772	24,998.70
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	1	38	22,426.00	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	1	2	10.50
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	103	140	5,416.55	26	182	2,253.37	117	225	20,694.21
CLINIC SERVICES	14	18	1,941.35	1	0	0.00	25	39	4,222.91
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	8	18	220.56	0	0	0.00	21	63	1,619.36
HABILITATION SERVICES	0	0	0.00	2	1	275.00	10	1355	48,890.95
REMEDIAL SERVICES	154	4697	85,571.87	0	0	0.00	22	350	8,752.38
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	2	2	222.44	0	0	0.00	7	8	953.46
LOCAL EDUCATION AGENCY	15	3053	25,267.70	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	343	1171	119,704.28	9	9	79.90	143	324	19,421.57
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	106.92	0	0	0.00	18	17	2,161.02
IOWA PLAN PROGRAM	397	384	47,619.06	21	21	1,322.35	369	384	56,646.40
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	7	7	312.27	0	0	0.00	4	4	138.84
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	43	88	8,290.08	0	0	0.00	0	0	0.00
MEDICAL SUPPLIES	15	756	806.58	2	3	64.99	5	247	724.23
OTHER PRACTITIONER	29	1309	8,652.47	1	1	9.45	13	15	902.13
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	38	48	4,961.43	1	1	25.99	23	29	2,973.15
OPTOMETRIST	11	15	848.87	0	0	0.00	18	24	1,721.29

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	8	11	367.88	0	0	0.00	12	30	1,156.18
PODIATRIC	1	4	52.43	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	1	1	121.54	2	2	46.97	0	0	0.00
RESIDENTIAL CARE FACILITY	0	0	0.00	2	9	85.95-	0	0	0.00
MR WAIVER SERVICE	0	0	0.00	0	0	0.00	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	340	13959	311,690.25	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	370	392	187,622.56	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 *	376	26362	820,120.98	19	410	27,974.64	332	3892	204,869.84

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	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	24	151	149,779.23	184	873	553,667.07	0	0	0.00
OUTPATIENT	312	6345	167,162.86	2720	63222	431,835.26	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	10	166	1,280.00	0	0	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	4	137	14,323.94	0	0	0.00
INTER CARE MENTAL RETARDA	0	0	0.00	2103	64372	25515,671.49	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	0	0	0.00
HOME HEALTH	20	158	8,492.78	1219	38788	1411,427.63	0	0	0.00
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	553	1287	116,357.30	4533	16414	493,085.92	0	0	0.00
CLINIC SERVICES	107	145	22,479.81	379	482	58,111.51	0	0	0.00
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	55	164	2,380.55	484	668	8,653.93	0	0	0.00
HABILITATION SERVICES	5	27	2,019.07	29	566	24,880.66	0	0	0.00
REMEDIAL SERVICES	57	574	29,477.17	119	2810	54,316.22	0	0	0.00
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	11	11	1,506.39	102	130	15,420.72	0	0	0.00
LOCAL EDUCATION AGENCY	2	1761	11,478.18	563	144859	1613,043.47	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	10	125.36	46	300	5,400.98	0	0	0.00
PRESCRIBED DRUGS	844	3804	230,299.30	6120	19396	1703,822.54	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	4	5	430.45	30	31	2,095.73	0	0	0.00
IOWA PLAN PROGRAM	1368	1372	142,364.09	10754	10843	720,759.97	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	5	155.58	56	77	2,631.90	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	5	11	1,802.21	558	1140	124,952.82	0	0	0.00
MEDICAL SUPPLIES	150	7075	19,941.80	2298	334722	598,326.83	0	0	0.00
OTHER PRACTITIONER	50	91	6,780.98	824	14581	307,169.19	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	99	146	27,078.24	1342	1548	164,817.55	0	0	0.00
OPTOMETRIST	66	85	7,149.82	572	729	37,392.68	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	58	108	3,922.99	296	556	13,324.29	0	0	0.00
PODIATRIC	18	26	2,459.27	544	734	25,301.24	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	12988	395,864.64	0	0	0.00
PSYCHIATRIC	2	8	686.82	505	710	38,310.39	0	0	0.00
RESIDENTIAL CARE FACILITY	0	0	0.00	25	710	6,225.91	0	0	0.00
MR WAIVER SERVICE	4	167	4,409.56	8408	512422	22307,654.68	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	2	84	1,438.75	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	2	124	2,143.93	0	0	0.00	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	2	43	800.08	144	6720	132,913.38	0	0	0.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	7	9	2,433.32	8318	9366	2406,260.07	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 *	1433	23796	965,555.89	11549	1261060	59188,942.61	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	6999	43325	30182,105.79			
OUTPATIENT	0	0	0.00	60448	1147696	17668,676.40			
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	946	15629	2534,309.12			
INTERMEDIATE CARE FACILITY	0	0	0.00	12169	366972	35937,871.74			
INTER CARE MENTAL RETARDA	0	0	0.00	2121	64991	25717,768.73			
NURSING FAC FOR MENTAL ILL	0	0	0.00	34	1751	612,532.98			
HOME HEALTH	0	0	0.00	13572	293229	10015,343.14			
LEAD INSPECTION AGENCY	0	0	0.00	9	10	3,748.96			
PHYSICIAN	0	0	0.00	117082	359088	18546,223.04			
CLINIC SERVICES	0	0	0.00	19691	26943	3958,314.99			
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00			
LAB AND RADIOLOGICAL	0	0	0.00	14156	30852	568,505.67			
HABILITATION SERVICES	0	0	0.00	2720	76789	3949,046.11			
REMEDIAL SERVICES	0	0	0.00	7661	309916	5187,162.11			
REHAB SUPPORT SERVICES	0	0	0.00	6	56	10,121.09			
AMBULANCE SERVICES	0	0	0.00	2456	2966	364,090.19			
LOCAL EDUCATION AGENCY	0	0	0.00	1611	372321	3846,868.02			

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	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	527	2566	59,854.79			
PRESCRIBED DRUGS	0	0	0.00	125452	327716	21325,055.92			
DRUG CAPITATION	0	0	0.00	1	0	7.07-			
INDIAN HEALTH SERVICES	0	0	0.00	0	0	0.00			
FAMILY PLANNING SERVICES	0	0	0.00	7652	8695	827,568.65			
IOWA PLAN PROGRAM	0	0	0.00	293901	313372	9553,592.55			
MANAGED SUBSTANCE ABUSE	0	0	0.00	1	0	38.40			
MENTAL HEALTH ACCESS PLAN	0	0	0.00	0	0	0.00			
EPSDT SCREENING	0	0	0.00	10388	12008	1153,023.14			
HMO SERVICES	0	0	0.00	170	191	10,813.78			
PACE SERVICES	0	0	0.00	23	23	68,180.00			
PATIENT MANAGEMENT	0	0	0.00	141767	141769	283,538.00			
HEALTH INS PREMIUM PAYMENT	0	0	0.00	4018	9496	461,304.00			
MEDICAL SUPPLIES	0	0	0.00	22838	1715225	4400,995.08			
OTHER PRACTITIONER	0	0	0.00	12665	78765	1746,324.46			
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	24536	30865	4740,513.84			
OPTOMETRIST	0	0	0.00	11159	14001	879,329.25			

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	8262	17676	506,567.64			
PODIATRIC	0	0	0.00	4719	7208	278,983.21			
PHYSICAL DISABILITIES SVCS	0	0	0.00	649	27460	356,255.78			
BRAIN INJ WAIVER SERVICES	0	0	0.00	1036	52865	1716,976.80			
PSYCHIATRIC	0	0	0.00	3513	5979	282,422.05			
RESIDENTIAL CARE FACILITY	0	0	0.00	1662	54873	455,063.33			
MR WAIVER SERVICE	0	0	0.00	9652	586570	25615,514.36			
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	566	25390	529,848.04			
AIDS WAIVER SERVICES	0	0	0.00	44	4321	27,257.47			
ELDERLY WAIVER SERVICES	0	0	0.00	9652	456423	6158,600.13			
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	2033	98955	1654,093.48			
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00			
MEP SERVICES	0	0	0.00	10534	11929	3098,315.80			
UNASSIGNED	0	0	0.00	29	0	1990,708.06-			
* A L L C A T E G O R I E S *	0	0	0.00	353869	7116875	243302,002.90	0	0	0.00

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