

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	1	9	7,911.21	0	0	0.00	562	2114	424,231.20
OUTPATIENT	37	463	7,265.03	0	0	0.00	4465	100114	585,018.20
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	0	0	0.00	237	3671	70,677.54
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	4515	136810	11939,351.18
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	7	241	69,828.28
HOME HEALTH	0	0	0.00	0	0	0.00	2526	53599	1716,639.12
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	62	121	13,072.69	0	0	0.00	7067	41484	442,185.54
CLINIC SERVICES	20	25	3,932.50	0	0	0.00	541	392	32,566.72
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	18	72	1,280.03	0	0	0.00	893	203	2,903.43
HABILITATION SERVICES	0	0	0.00	0	0	0.00	48	1413	86,146.16
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	1	137.69	0	0	0.00	392	419	36,263.80
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	37	77	4,089.11	0	0	0.00	2699	4092	50,058.06
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	1	1	28.87
IOWA PLAN PROGRAM	109	141	3,765.12	0	0	0.00	2	2	122.36
MANAGED SUBSTANCE ABUSE	0	0	0.00	0	0	0.00	0	0	0.00
MENTAL HEALTH ACCESS PLAN	0	0	0.00	0	0	0.00	0	0	0.00
EPSDT SCREENING	1	1	36.47	0	0	0.00	0	0	0.00
HMO SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PACE SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PATIENT MANAGEMENT	62	62	124.00	0	0	0.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEDICAL SUPPLIES	1	1	52.51	0	0	0.00	2834	146227	293,610.39
OTHER PRACTITIONER	2	2	81.74	0	0	0.00	363	1297	22,515.97
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	24	29	3,866.14	0	0	0.00	412	516	75,486.48
OPTOMETRIST	6	9	533.23	0	0	0.00	702	1061	29,255.04

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	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	440	1085	9,744.01
PODIATRIC	0	0	0.00	0	0	0.00	879	1260	18,476.23
PHYSICAL DISABILITIES SVCS	0	0	0.00	0	0	0.00	1	27	486.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	0	0	0.00	1	81	6,363.79
PSYCHIATRIC	0	0	0.00	0	0	0.00	191	349	10,643.38
RESIDENTIAL CARE FACILITY	0	0	0.00	0	0	0.00	284	8612	61,927.43
MR WAIVER SERVICE	0	0	0.00	0	0	0.00	79	5294	241,471.44
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	3627	155868	2302,097.03
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	100	123	32,421.17
UNASSIGNED	0	0	0.00	0	0	0.00	1	0	0.00
* A L L C A T E G O R I E S *	162	1013	46,147.47	0	0	0.00	14593	666355	18560,518.82

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	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	1806	10706	8640,775.10	694	2483	3767,799.69
OUTPATIENT	1	10	13.34	15765	400680	5077,036.27	8944	161802	3732,916.94
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	197	4655	2215,794.83	0	0	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	603	18459	2017,380.84	1	30	3,888.28
INTER CARE MENTAL RETARDA	0	0	0.00	13	278	86,836.98	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	3618	93780	2552,343.57	56	506	30,202.69
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	1	1	8.55	25213	120968	4477,183.30	16662	35479	3210,597.14
CLINIC SERVICES	0	0	0.00	3301	4201	550,541.82	2895	4021	543,061.64
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	0	0	0.00	3283	6904	120,486.03	2957	10203	226,296.41
HABILITATION SERVICES	0	0	0.00	2551	69741	3599,972.50	28	404	19,669.30
REMEDIAL SERVICES	0	0	0.00	738	23982	378,493.81	171	4068	53,908.23
REHAB SUPPORT SERVICES	0	0	0.00	3	23	1,130.68	0	0	0.00
AMBULANCE SERVICES	0	0	0.00	817	1052	110,715.46	198	210	29,484.25
LOCAL EDUCATION AGENCY	0	0	0.00	514	105570	1111,558.25	15	1073	6,596.32

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	120	536	10,401.09	0	0	0.00
PRESCRIBED DRUGS	0	0	0.00	23802	94851	7180,868.12	20213	52117	2503,270.78
DRUG CAPITATION	0	0	0.00	0	0	0.00	0	0	0.00
INDIAN HEALTH SERVICES	0	0	0.00	2	3	759.00	7	13	3,289.00
FAMILY PLANNING SERVICES	0	0	0.00	139	151	9,605.04	6777	7375	639,770.11
IOWA PLAN PROGRAM	2	2	89.56	49602	51262	3777,741.82	38795	43196	1346,904.78
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	184	262	10,811.67	81	88	5,412.37
HMO SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PACE SERVICES	0	0	0.00	13	13	44,414.00	0	0	0.00
PATIENT MANAGEMENT	0	0	0.00	2	2	4.00	23985	24050	48,100.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	665	1497	183,644.23	220	501	16,048.43
MEDICAL SUPPLIES	0	0	0.00	9423	648660	1920,600.41	1118	23475	192,080.03
OTHER PRACTITIONER	0	0	0.00	2625	23352	421,967.97	1692	3341	220,807.41
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	4215	5411	886,680.97	3464	4657	834,648.94
OPTOMETRIST	0	0	0.00	2447	3341	174,974.03	1643	1995	145,337.95

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	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	2426	5831	101,206.52	1953	4830	171,213.87
PODIATRIC	0	0	0.00	1245	2226	78,161.80	246	315	40,986.83
PHYSICAL DISABILITIES SVCS	0	0	0.00	516	20035	283,806.09	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	313	15702	483,824.71	0	0	0.00
PSYCHIATRIC	0	0	0.00	2572	4525	157,875.54	34	59	3,977.87
RESIDENTIAL CARE FACILITY	0	0	0.00	1183	35271	288,566.68	0	0	0.00
MR WAIVER SERVICE	0	0	0.00	1000	61505	2764,713.31	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	36	1295	31,196.03	6	254	5,517.31
AIDS WAIVER SERVICES	0	0	0.00	15	1598	17,213.74	0	0	0.00
ELDERLY WAIVER SERVICES	0	0	0.00	29	1670	32,961.18	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	1977	92163	1520,765.97	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	1169	1308	345,878.14	7	7	3,045.26
UNASSIGNED	0	0	0.00	9	0	19.51-	4	0	18.08
* A L L C A T E G O R I E S *	2	13	111.45	53876	1933469	51668,871.99	51314	386552	17804,849.91

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	383	2123	2263,284.92	362	6652	1863,412.02	1916	10998	10976,813.15
OUTPATIENT	7889	87163	1910,996.15	2169	35652	670,789.47	12775	195978	2957,461.39
CHILD PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
CHILD DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
ADULT PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
ADULT DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
SKILLED NURSING FACILITY	0	0	0.00	0	0	0.00	5	79	9,473.91
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	3	81	6,013.93
INTER CARE MENTAL RETARDA	0	0	0.00	1	26	20,135.96	1	0	1423,238.00-
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	1	37	15,914.07
HOME HEALTH	528	1781	54,923.11	105	380	28,552.40	845	4252	339,815.26-
LEAD INSPECTION AGENCY	3	3	1,139.59	0	0	0.00	2	2	747.48
PHYSICIAN	20843	35967	2379,547.00	4695	8997	714,995.56	32048	73398	4278,143.74-
CLINIC SERVICES	3582	4565	617,008.81	969	1384	181,156.06	6934	9885	1101,361.75
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	2485	4489	71,412.12	579	1545	30,717.30	4348	10708	191,026.92
HABILITATION SERVICES	0	0	0.00	24	581	36,604.36	7	122	6,856.76
REMEDIAL SERVICES	2065	53325	847,699.12	674	18407	224,035.74	1838	50091	737,532.23
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	1	0	1,339.65-
AMBULANCE SERVICES	107	106	15,542.58	43	44	5,564.73	154	146	24,434.59
LOCAL EDUCATION AGENCY	187	26422	177,657.42	53	5775	39,769.02	201	33530	232,023.05

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	73	221	5,954.99	28	90	2,250.52	109	279	8,115.03
PRESCRIBED DRUGS	18674	29609	1601,073.01	4923	9958	470,003.09	27834	42415	1912,746.34
DRUG CAPITATION	0	0	0.00	0	0	0.00	0	0	0.00
INDIAN HEALTH SERVICES	9	13	3,289.00	5	7	1,771.00	21	46	11,638.00
FAMILY PLANNING SERVICES	1214	1297	110,472.94	238	276	23,400.69	503	574	50,049.16
IOWA PLAN PROGRAM	65912	71267	712,281.17	14258	15724	320,369.35	91802	102770	1259,032.15
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	3020	3464	365,469.68	488	590	77,763.20	4246	4687	796,917.58
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	43152	43226	86,452.00	8666	8668	17,336.00	63475	63538	127,076.00
HEALTH INS PREMIUM PAYMENT	311	764	18,428.31	50	118	5,063.83	1971	5383	139,315.19
MEDICAL SUPPLIES	1186	15172	151,025.11	242	4781	36,643.73	1454	19813	191,971.05
OTHER PRACTITIONER	2338	11592	249,385.56	538	3740	68,097.31	3552	13240	384,827.80
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	4890	5709	667,588.51	1169	1423	225,316.70	7142	8436	1104,261.19
OPTOMETRIST	1635	1866	130,351.65	462	530	37,229.73	2468	2821	189,596.51

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	1006	1826	59,214.34	260	556	19,264.51	1745	3591	107,690.08
PODIATRIC	71	81	10,327.68	36	40	5,635.79	102	121	13,932.70
PHYSICAL DISABILITIES SVCS	0	0	0.00	0	0	0.00	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	0	0	0.00	2	170	23,212.73-
PSYCHIATRIC	26	34	4,063.18	10	48	2,872.58	46	55	58,014.04
RESIDENTIAL CARE FACILITY	0	0	0.00	0	0	0.00	2	6	274.91
MR WAIVER SERVICE	1	44	557.04	3	15	421.79	8	223	170,234.32-
CHILDRENS MENTAL HEALTH SVC	43	1836	41,039.70	105	5397	101,680.59	53	2718	53,351.02
AIDS WAIVER SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
ELDERLY WAIVER SERVICES	0	0	0.00	0	0	0.00	4	3	2,832.00
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	44	44	20,587.78	98	99	44,825.84	60	60	26,737.84
UNASSIGNED	3	0	0.00	0	0	0.00	9	0	181,835.78
* A L L C A T E G O R I E S *	73744	404009	12576,772.47	15611	131503	5275,678.87	100721	660256	16643,889.90

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	62	781	239,591.30	700	3100	946,912.59	43	223	338,665.50
OUTPATIENT	942	15869	237,863.14	5269	129408	668,384.30	448	10210	158,809.69
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	1	31	10,655.67	383	5947	343.02	4	95	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	6943	210018	21865,223.70	0	0	0.00
INTER CARE MENTAL RETARDA	8	210	85,557.61	2	39	10,485.00	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	26	1111	373,359.45	1	31	6,730.72
HOME HEALTH	86	4129	125,317.92	3729	78218	2779,553.80	63	1176	16,861.95
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	2393	3681	210,987.91	8120	48285	579,947.27	866	2894	162,838.87
CLINIC SERVICES	482	598	75,031.71	447	436	32,999.00	98	111	14,808.00
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	309	720	11,383.08	1202	339	3,931.58	160	441	8,693.70
HABILITATION SERVICES	10	155	6,288.54	27	472	23,023.08	27	910	53,570.33
REMEDIAL SERVICES	2252	163450	1767,514.35	5	95	1,404.18	6	48	598.26
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	21	20	2,888.59	550	665	64,024.64	24	28	6,015.30
LOCAL EDUCATION AGENCY	120	31117	264,879.28	17	4644	65,267.81	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	44	135	3,273.40	1	7	79.52	0	0	0.00
PRESCRIBED DRUGS	5085	10914	699,551.27	9486	19731	330,421.89	933	2595	120,331.14
DRUG CAPITATION	0	0	0.00	0	0	0.00	0	0	0.00
INDIAN HEALTH SERVICES	2	3	759.00	0	0	0.00	1	3	759.00
FAMILY PLANNING SERVICES	35	38	4,407.34	2	2	31.04	28	33	3,569.08
IOWA PLAN PROGRAM	10004	10328	1064,137.12	2229	2301	155,645.90	1434	1579	56,405.95
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	190	218	14,883.83	4	4	72.76	4	4	138.99
HMO SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PACE SERVICES	0	0	0.00	23	22	63,504.00	0	0	0.00
PATIENT MANAGEMENT	116	116	232.00	0	0	0.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	160	355	15,613.29	36	79	12,267.14	1	2	31.48
MEDICAL SUPPLIES	253	24677	74,356.79	4734	361048	564,703.05	194	9191	17,660.14
OTHER PRACTITIONER	530	4595	77,055.12	504	2710	72,374.91	81	231	9,190.98
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	1054	1188	149,824.61	898	1056	167,572.97	170	218	35,923.73
OPTOMETRIST	439	482	32,839.42	817	1109	33,842.64	98	129	7,856.14

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	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	147	293	8,955.98	314	711	6,279.17	111	251	8,690.39
PODIATRIC	23	28	3,375.71	1418	2118	31,793.33	39	49	1,160.40
PHYSICAL DISABILITIES SVCS	0	0	0.00	194	7792	98,924.10	0	0	0.00
BRAIN INJ WAIVER SERVICES	37	1290	37,683.49	438	20379	673,184.11	0	0	0.00
PSYCHIATRIC	18	29	2,401.53	272	528	18,522.77	25	37	1,440.18
RESIDENTIAL CARE FACILITY	3	6	112.56-	5	70	328.20	1	28-	262.50-
MR WAIVER SERVICE	195	7671	228,275.54	5	214	14,338.75	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	34	3334	38,795.92	0	0	0.00
ELDERLY WAIVER SERVICES	0	0	0.00	6297	284578	3770,959.21	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	35	3427	51,754.69	6	109	1,628.36	0	0	0.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	194	205	59,007.15	136	141	37,718.56	3	4	969.86
UNASSIGNED	1	0	0.00	2	0	0.00	1	0	0.00
* A L L C A T E G O R I E S *	10164	286759	5566,233.82	14906	1190820	33507,847.72	1821	30465	1031,457.28

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	182	876	1306,653.87	53	416	163,876.40	5	32	52,449.08
OUTPATIENT	502	16955	379,819.47	1164	16108	309,889.48	119	3935	107,394.57
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	3	41	1,280.00	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	1	21	9,251.18	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	0	0	0.00
HOME HEALTH	36	385	35,939.20	83	219	5,079.07	2	17	721.80
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	803	3881	323,613.24	3302	5325	317,579.33	182	873	164,182.89
CLINIC SERVICES	84	137	16,685.97	739	907	116,650.55	20	23	3,958.89
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	50	123	2,581.07	228	672	11,113.89	22	66	1,432.42
HABILITATION SERVICES	3	91	3,860.74	0	0	0.00	0	0	0.00
REMEDIAL SERVICES	5	87	952.78	337	7477	114,221.71	0	0	0.00
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	43	42	7,634.11	13	11	1,149.69	0	0	0.00
LOCAL EDUCATION AGENCY	0	0	0.00	48	12560	93,018.46	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	2	2	100.00	0	0	0.00
PRESCRIBED DRUGS	297	1310	62,103.15	3922	6041	479,114.13	194	727	51,065.22
DRUG CAPITATION	0	0	0.00	0	0	0.00	0	0	0.00
INDIAN HEALTH SERVICES	1	1	135.00	0	0	0.00	0	0	0.00
FAMILY PLANNING SERVICES	9	10	691.61	116	129	12,446.75	1	1	105.30
IOWA PLAN PROGRAM	0	0	0.00	14159	15353	169,651.91	239	240	25,213.92
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	216	230	20,481.48	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	9321	9322	18,644.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	13	38	1,706.72	0	0	0.00
MEDICAL SUPPLIES	79	2981	71,183.51	160	4208	52,015.09	40	914	13,776.25
OTHER PRACTITIONER	58	134	10,801.63	372	2800	43,588.05	20	53	3,084.13
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	73	99	25,512.02	1494	1784	278,648.26	22	24	3,187.74
OPTOMETRIST	37	42	2,912.28	549	632	41,508.50	12	12	1,020.98

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	31	82	1,976.64	298	539	17,928.46	14	28	962.69
PODIATRIC	21	27	5,423.72	31	29	2,913.31	2	3	146.18
PHYSICAL DISABILITIES SVCS	0	0	0.00	0	0	0.00	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	2	68	2,530.60	0	0	0.00
PSYCHIATRIC	42	129	7,218.13	9	20	1,211.22	1	1	32.84
RESIDENTIAL CARE FACILITY	0	0	0.00	0	0	0.00	0	0	0.00
MR WAIVER SERVICE	0	0	0.00	4	51	1,477.93	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	3	181	2,491.88	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	5	1	2,681.79	7	6	2,544.38	0	0	0.00
UNASSIGNED	2	0	18.08-	2	0	0.00	0	0	0.00
* A L L C A T E G O R I E S *	959	27435	2269,678.32	12297	85149	2290,832.43	254	6949	428,734.90

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	0	0	0.00	2	8	4,439.71	0	0	0.00
OUTPATIENT	2	0	640.66	5	80	974.48	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	11	7,743.40	7	16	5,168.34	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	2	55.05	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	78	76	7,572.23	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	1	10	543.03	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 *	78	97	16,499.32	7	106	10,637.58	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	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	9	176	27,170.23	2	8	3,204.00	7	20	28,199.24
OUTPATIENT	50	615	4,956.09	12	375	1,121.39	81	1054	18,593.39
CHILD PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
CHILD DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
ADULT PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
ADULT DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
SKILLED NURSING FACILITY	0	0	0.00	0	0	0.00	0	0	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	1	0	0.00	0	0	0.00
INTER CARE MENTAL RETARDA	0	0	0.00	1	30	22,523.64	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	0	0	0.00
HOME HEALTH	1	3	15.00	1	3	330.15	0	0	0.00
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	106	162	5,973.60	19	26	86.05	132	234	23,812.62
CLINIC SERVICES	14	20	1,786.12	0	0	0.00	35	41	4,599.08
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	8	23	190.15	1	0	0.00	26	80	2,178.42
HABILITATION SERVICES	0	0	0.00	0	0	0.00	9	558	26,636.35
REMEDIAL SERVICES	140	4973	72,937.67	0	0	0.00	22	407	7,958.52
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	3	3	382.72
LOCAL EDUCATION AGENCY	17	5511	36,448.76	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	349	1012	58,730.64	7	9	76.37	151	305	16,645.31
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	97.56	0	0	0.00	15	24	1,457.44
IOWA PLAN PROGRAM	379	380	46,320.54	20	22	1,374.86	369	413	60,931.01
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	236.60	0	0	0.00	3	3	109.36
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	45	97	9,073.64	0	0	0.00	0	0	0.00
MEDICAL SUPPLIES	11	1369	1,105.39	1	2	51.45	4	6	659.66
OTHER PRACTITIONER	37	3644	23,937.65	0	0	0.00	9	11	898.18
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	37	46	7,938.63	1	1	53.01	18	19	2,131.37
OPTOMETRIST	18	19	1,215.71	1	1	142.74	17	19	1,509.64

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	9	26	703.66	1	8	51.84	9	38	1,619.51
PODIATRIC	0	0	0.00	0	0	0.00	1	1	178.94
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	0.00	3	3	86.76	1	1	33.60
RESIDENTIAL CARE FACILITY	0	0	0.00	2	31	176.34	0	0	0.00
MR WAIVER SERVICE	0	0	0.00	1	47	4,293.29	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	367	15498	358,821.92	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	12	180.00	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	371	372	177,390.53	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 *	352	33964	835,232.09	22	514	33,571.89	347	3237	198,534.36

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		
	RECIPES SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPES SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPES SERVED	UNITS OF SERVICE	AMOUNT PAID
INPATIENT	21	48	159,145.90	141	809	366,797.82	0	0	0.00
OUTPATIENT	306	7038	131,758.59	2888	73332	499,742.45	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	35	21,126.70	5	72	14,300.30	0	0	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	7	230	30,478.97	0	0	0.00
INTER CARE MENTAL RETARDA	0	0	0.00	2011	61097	25959,534.64	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	0	0	0.00
HOME HEALTH	16	83	6,182.46	1122	43550	1183,761.91	0	0	0.00
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	538	1238	110,023.60	4793	16951	444,301.80	0	0	0.00
CLINIC SERVICES	107	158	22,767.12	375	434	50,791.79	0	0	0.00
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	50	231	4,517.06	577	824	11,090.55	0	0	0.00
HABILITATION SERVICES	4	34	3,182.76	33	630	28,112.46	0	0	0.00
REMEDIAL SERVICES	52	2908	35,355.98	111	2903	51,884.00	0	0	0.00
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	9	8	1,546.93	108	128	13,128.41	0	0	0.00
LOCAL EDUCATION AGENCY	2	154	759.60	547	141079	1595,387.82	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	2	100.00	32	156	3,268.53	0	0	0.00
PRESCRIBED DRUGS	853	3554	213,282.48	6043	17905	1183,950.15	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	3	5	315.73	30	32	3,710.93	0	0	0.00
IOWA PLAN PROGRAM	1376	1473	150,831.37	10822	10919	725,302.89	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	3	3	94.60	33	71	3,269.07	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	7	12	2,146.77	612	1353	168,540.45	0	0	0.00
MEDICAL SUPPLIES	140	6357	26,112.96	2331	321078	548,052.20	0	0	0.00
OTHER PRACTITIONER	64	166	8,994.00	916	15543	326,433.94	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	113	141	28,107.71	1361	1555	168,356.94	0	0	0.00
OPTOMETRIST	64	86	6,102.73	658	789	36,700.61	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	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	57	111	3,734.41	327	668	12,088.95	0	0	0.00
PODIATRIC	17	25	3,912.07	531	743	18,029.01	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	264	12727	378,554.38	0	0	0.00
PSYCHIATRIC	4	6	683.44	532	824	37,216.53	0	0	0.00
RESIDENTIAL CARE FACILITY	0	0	0.00	8	222	2,179.66	0	0	0.00
MR WAIVER SERVICE	4	152	4,106.88	8510	534977	21952,446.36	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	2	101	1,726.04	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	127	2,215.29	1	2	1,187.00	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	2	36	771.17	157	7417	148,099.27	0	0	0.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	6	8	2,428.16	7792	8371	2185,434.12	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 *	1424	24300	952,032.51	11579	1277391	58152,133.91	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	6927	41582	31581,332.93			
OUTPATIENT	1	1	0.00	63262	1256842	17461,444.49			
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	825	14626	2343,651.97			
INTERMEDIATE CARE FACILITY	0	0	0.00	12037	365628	35862,336.90			
INTER CARE MENTAL RETARDA	0	0	0.00	2031	61701	24771,087.01			
NURSING FAC FOR MENTAL ILL	0	0	0.00	35	1420	465,832.52			
HOME HEALTH	0	0	0.00	12698	282081	8196,608.89			
LEAD INSPECTION AGENCY	0	0	0.00	5	5	1,887.07			
PHYSICIAN	0	0	0.00	125268	399940	9315,704.96			
CLINIC SERVICES	0	0	0.00	20468	27338	3369,707.53			
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00			
LAB AND RADIOLOGICAL	0	0	0.00	17067	37645	701,289.21			
HABILITATION SERVICES	0	0	0.00	2766	75111	3893,923.34			
REMEDIAL SERVICES	0	0	0.00	8127	332221	4294,496.58			
REHAB SUPPORT SERVICES	0	0	0.00	4	23	208.97-			
AMBULANCE SERVICES	0	0	0.00	2470	2883	318,913.49			
LOCAL EDUCATION AGENCY	0	0	0.00	1695	367435	3623,365.79			

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	407	1428	33,543.08			
PRESCRIBED DRUGS	0	0	0.00	123061	297298	16944,952.49			
DRUG CAPITATION	0	0	0.00	0	0	0.00			
INDIAN HEALTH SERVICES	0	0	0.00	45	89	22,399.00			
FAMILY PLANNING SERVICES	0	0	0.00	9084	9949	860,159.59			
IOWA PLAN PROGRAM	0	0	0.00	300491	327372	9876,121.78			
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	8441	9629	1295,734.13			
HMO SERVICES	0	0	0.00	0	0	0.00			
PACE SERVICES	0	0	0.00	36	35	107,918.00			
PATIENT MANAGEMENT	0	0	0.00	148775	148985	297,970.00			
HEALTH INS PREMIUM PAYMENT	0	0	0.00	4091	10199	571,879.48			
MEDICAL SUPPLIES	0	0	0.00	23745	1589960	4155,659.72			
OTHER PRACTITIONER	0	0	0.00	13600	86451	1944,042.35			
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	26462	32312	4665,105.92			
OPTOMETRIST	0	0	0.00	12045	14943	872,929.53			

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	9062	20474	531,325.03			
PODIATRIC	0	0	0.00	4633	7066	234,453.70			
PHYSICAL DISABILITIES SVCS	0	0	0.00	708	27854	383,216.19			
BRAIN INJ WAIVER SERVICES	0	0	0.00	1038	50417	1558,928.35			
PSYCHIATRIC	0	0	0.00	3770	6659	306,836.62			
RESIDENTIAL CARE FACILITY	0	0	0.00	1482	44190	353,078.16			
MR WAIVER SERVICE	0	0	0.00	9782	610193	25041,868.01			
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	613	27280	595,824.49			
AIDS WAIVER SERVICES	0	0	0.00	46	4932	56,009.66			
ELDERLY WAIVER SERVICES	0	0	0.00	9742	442248	6112,251.71			
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	2173	103164	1723,199.46			
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00			
MEP SERVICES	0	0	0.00	9945	10749	2941,670.58			
UNASSIGNED	0	0	0.00	34	0	181,816.27			
* A L L C A T E G O R I E S *	1	1	0.00	364234	7150357	227870,267.01	0	0	0.00

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