

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	568	2161	554,080.69
OUTPATIENT	46	999	8,065.86	0	0	0.00	4559	108600	676,487.13
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	202	3711	130,305.71
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	4671	145738	13292,395.10
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	178	42,601.25
HOME HEALTH	0	0	0.00	0	0	0.00	2634	50625	1885,038.63
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	88	158	16,787.81	0	0	0.00	7256	36688	433,813.55
CLINIC SERVICES	22	37	5,427.83	0	0	0.00	571	324	30,723.54
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	21	132	2,613.40	0	0	0.00	938	284	3,660.98
HABILITATION SERVICES	0	0	0.00	0	0	0.00	53	1408	80,906.98
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	343	373	35,425.73
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	47	97	2,067.56	0	0	0.00	3477	6543	82,440.51
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	114	158	4,144.24	0	0	0.00	1	1	96.90
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	55	55	110.00	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	3	86.54	0	0	0.00	3303	280697	347,292.51
OTHER PRACTITIONER	3	25	612.31	0	0	0.00	473	2180	29,371.60
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	28	32	5,274.25	0	0	0.00	512	654	105,824.76
OPTOMETRIST	8	15	1,057.02	0	0	0.00	803	1304	32,422.81

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	FEDERAL 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	457	1245	8,522.53
PODIATRIC	0	0	0.00	0	0	0.00	869	1341	15,547.90
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	54	3,950.04
PSYCHIATRIC	0	0	0.00	0	0	0.00	193	468	13,694.94
RESIDENTIAL CARE FACILITY	0	0	0.00	0	0	0.00	297	9847	72,790.03
MR WAIVER SERVICE	0	0	0.00	0	0	0.00	76	4035	220,690.89
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	3769	170326	2449,773.93
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	129	127	33,584.35
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 *	161	1711	46,246.82	0	0	0.00	15019	828912	20581,442.99

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	2103	12524	10750,763.24	734	2255	3676,741.96
OUTPATIENT	1	9	17.35	17744	481217	6301,510.68	9804	172838	3389,117.02-
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	1	0	8.78-
ADULT DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
SKILLED NURSING FACILITY	0	0	0.00	232	5376	2187,897.27	0	0	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	635	20145	2326,299.20	1	9	964.98
INTER CARE MENTAL RETARDA	0	0	0.00	6	186	59,394.76	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	3915	101809	3215,452.82	59	499	36,314.25
LEAD INSPECTION AGENCY	0	0	0.00	1	2	762.24	0	0	0.00
PHYSICIAN	1	1	13.22	26445	133086	5011,020.01	17391	38385	3445,231.74
CLINIC SERVICES	0	0	0.00	3600	5113	690,797.51	3136	4508	627,605.80
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	0	0	0.00	3734	7815	146,575.94	4428	11058	331,216.13
HABILITATION SERVICES	0	0	0.00	2799	76960	4108,296.59	34	341	20,219.50
REMEDIAL SERVICES	0	0	0.00	788	25446	400,564.58	257	5600	146,178.57
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	1	0	346.34-
AMBULANCE SERVICES	0	0	0.00	1287	1564	182,317.90	408	423	57,938.33
LOCAL EDUCATION AGENCY	0	0	0.00	661	174245	1873,608.13	13	1274	18,619.19

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	147	835	12,083.61	2	2	65.00
PRESCRIBED DRUGS	1	1	55.16	25416	122183	9536,444.83	21862	66532	3387,879.88
DRUG CAPITATION	0	0	0.00	0	0	0.00	0	0	0.00
INDIAN HEALTH SERVICES	0	0	0.00	2	2	506.00	6	19	4,807.00
FAMILY PLANNING SERVICES	0	0	0.00	151	168	11,596.58	6686	8048	767,576.13
IOWA PLAN PROGRAM	2	2	89.56	50005	50956	3750,240.33	38607	42111	1313,723.70
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	212	264	13,176.74	86	90	5,003.22
HMO SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PACE SERVICES	0	0	0.00	18	18	58,579.00	0	0	0.00
PATIENT MANAGEMENT	0	0	0.00	3	3	6.00	24355	24406	48,812.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	646	1619	165,708.91	204	540	15,936.71
MEDICAL SUPPLIES	0	0	0.00	10237	870441	2257,814.99	1197	33684	262,680.20
OTHER PRACTITIONER	0	0	0.00	3079	37943	604,692.27	1933	4110	230,931.08
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	4489	5902	1025,647.88	3651	5093	989,244.02
OPTOMETRIST	0	0	0.00	2692	3780	183,852.50	1583	1980	143,232.26

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	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	2732	7001	107,126.74	2093	4885	172,591.08
PODIATRIC	0	0	0.00	1495	2860	87,504.34	234	317	41,783.17
PHYSICAL DISABILITIES SVCS	0	0	0.00	516	20019	263,298.65	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	326	17583	588,089.54	0	0	0.00
PSYCHIATRIC	0	0	0.00	2740	5058	168,072.61	36	59	3,778.95
RESIDENTIAL CARE FACILITY	0	0	0.00	1313	44568	359,536.98	1	10	258.50
MR WAIVER SERVICE	0	0	0.00	1006	59642	2829,146.79	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	33	1400	29,612.08	5	274	5,409.55
AIDS WAIVER SERVICES	0	0	0.00	13	1010	11,592.78	0	0	0.00
ELDERLY WAIVER SERVICES	0	0	0.00	30	1489	24,380.69	0	0	0.00
SICK & HANDICAPPED WAIVER SVCS	0	0	0.00	2013	99921	1675,072.94	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	1712	1493	394,480.62	12	9	3,245.56
UNASSIGNED	0	0	0.00	9	0	1,529.17	3	0	0.00
* A L L C A T E G O R I E S *	2	13	175.29	54825	2401646	61415,054.44	52005	429359	12368,516.32

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	ADC - CHILD			CMAP			OTHER		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
INPATIENT	359	2315	2494,939.18	423	8393	2673,816.00	2026	12553	11215,929.41
OUTPATIENT	8145	83854	2106,042.44	2472	38096	805,827.62	13464	198779	3575,880.07
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	11	5,555.00	6	122	15,688.88
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	5	26	42,995.02-
INTER CARE MENTAL RETARDA	0	0	0.00	1	1-	14.66-	2	146	1416,484.32-
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	1	30	12,903.30
HOME HEALTH	410	1434	50,990.79	72	224	14,851.06	707	4294	649,411.35-
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	2	2	762.24
PHYSICIAN	20178	35688	2474,431.88	4904	10698	811,646.23	32851	69723	5477,293.82
CLINIC SERVICES	3268	4152	598,214.92	1024	1442	192,669.42	6670	9987	1169,543.87
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	1432	3239	62,172.96	550	1697	40,128.68	2951	9271	185,922.35
HABILITATION SERVICES	0	0	0.00	22	412	32,510.47	6	128	6,469.15
REMEDIAL SERVICES	2243	56725	989,215.51	779	18494	319,648.51	2018	51293	820,653.70
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	1	0	360.00-
AMBULANCE SERVICES	239	242	34,862.34	97	102	13,317.31	327	327	48,624.24
LOCAL EDUCATION AGENCY	179	42180	296,970.94	53	11478	96,570.44	211	47401	353,156.73

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	128	575	11,157.17	38	146	2,438.64	176	747	14,673.04
PRESCRIBED DRUGS	16954	30253	1711,871.34	4982	12747	777,452.72	25251	46994	2537,210.44
DRUG CAPITATION	0	0	0.00	0	0	0.00	0	0	0.00
INDIAN HEALTH SERVICES	4	7	1,771.00	6	11	2,783.00	43	88	22,264.00
FAMILY PLANNING SERVICES	990	1162	103,309.58	242	290	27,022.35	426	490	52,102.13
IOWA PLAN PROGRAM	66300	70393	699,943.89	14931	16289	333,751.35	95476	105147	1284,764.87
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	3205	3616	389,348.01	566	639	95,878.85	4783	5269	873,561.13
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	44079	44175	88,350.00	9018	9043	18,086.00	65158	65249	130,498.00
HEALTH INS PREMIUM PAYMENT	285	809	15,894.59	54	131	4,890.91	1991	6151	157,537.80
MEDICAL SUPPLIES	1059	14623	153,897.26	251	4745	43,189.93	1470	22070	212,151.66
OTHER PRACTITIONER	2609	17469	307,090.03	717	6028	100,674.83	4106	21557	503,067.61
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	5071	6088	824,046.82	1342	1668	287,819.01	7932	9443	1291,856.22
OPTOMETRIST	1519	1760	114,386.97	454	538	36,130.34	2432	2823	182,475.23

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	1023	1922	63,176.51	294	681	23,956.12	1818	3688	114,411.41
PODIATRIC	87	109	12,890.71	34	46	3,958.11	138	178	16,556.97
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	2,597.34
PSYCHIATRIC	34	45	4,201.78	21	33	3,155.83	86	124	98,331.10
RESIDENTIAL CARE FACILITY	0	0	0.00	0	0	0.00	0	0	0.00
MR WAIVER SERVICE	0	0	0.00	1	28	366.80	6	115	129,820.20
CHILDRENS MENTAL HEALTH SVC	41	2075	38,439.57	96	5367	94,501.61	48	2406	42,994.50
AIDS WAIVER SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
ELDERLY WAIVER SERVICES	0	0	0.00	0	0	0.00	6	7	168.41
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	1	52	520.00	1	39	1,375.20
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	47	42	15,715.81	106	110	40,554.82	72	60	21,256.72
UNASSIGNED	2	0	0.00	0	0	0.00	7	0	270,463.03
* A L L C A T E G O R I E S *	73635	424952	13663,332.00	16128	149638	6903,657.30	102441	696727	28474,073.68

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	50	202	153,773.00	721	3669	913,744.62	55	412	419,634.89
OUTPATIENT	956	14000	259,257.78	5509	143900	792,587.13	508	12034	230,652.21
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	11,674.95	430	7381	90,601.48	4	64	46.26
INTERMEDIATE CARE FACILITY	0	0	0.00	6943	213566	22722,502.90	0	0	0.00
INTER CARE MENTAL RETARDA	8	284	101,178.07	2	30	9,371.55	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	27	798	235,108.11	0	0	0.00
HOME HEALTH	104	3995	114,951.28	3919	80880	3089,767.68	48	1004	14,712.09
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	2541	4138	261,972.50	7914	43648	570,551.24	909	3544	201,063.16
CLINIC SERVICES	513	673	87,701.61	539	435	43,894.16	131	175	23,819.88
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	287	869	16,244.52	1223	488	5,639.64	183	457	12,110.55
HABILITATION SERVICES	11	143	6,320.25	43	1064	55,380.04	29	530	42,585.36
REMEDIAL SERVICES	2765	156980	2377,062.03	5	95	2,041.67	6	101	1,111.67
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	37	37	5,360.44	542	675	62,508.30	31	35	5,781.75
LOCAL EDUCATION AGENCY	148	43658	437,012.67	26	9481	101,208.68	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	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	60	185	3,753.22	2	13	272.01	0	0	0.00
PRESCRIBED DRUGS	4951	14332	1376,703.08	10620	25523	506,565.04	1084	3981	200,497.88
DRUG CAPITATION	0	0	0.00	0	0	0.00	0	0	0.00
INDIAN HEALTH SERVICES	1	1	253.00	1	0	9.80-	1	9	2,277.00
FAMILY PLANNING SERVICES	37	43	5,181.79	0	0	0.00	33	38	4,053.64
IOWA PLAN PROGRAM	10092	10380	1073,035.88	2250	2258	151,487.45	1474	1617	55,580.38
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	220	245	14,420.29	2	2	113.54	2	2	72.94
HMO SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PACE SERVICES	0	0	0.00	19	19	54,140.00	0	0	0.00
PATIENT MANAGEMENT	101	101	202.00	0	0	0.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	153	387	15,863.84	36	83	9,974.51	0	0	0.00
MEDICAL SUPPLIES	265	28336	80,654.42	4867	454903	668,884.38	203	11538	27,132.42
OTHER PRACTITIONER	599	9030	118,244.96	662	2694	60,340.82	105	258	14,389.18
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	1099	1265	173,898.22	885	1139	182,628.23	168	216	48,874.11
OPTOMETRIST	416	468	30,548.38	883	1229	32,930.92	88	126	7,967.55

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	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	170	337	10,205.77	372	925	7,425.95	105	246	8,074.16
PODIATRIC	30	43	3,594.41	1318	1991	23,191.61	33	45	1,069.19
PHYSICAL DISABILITIES SVCS	0	0	0.00	201	7866	100,013.74	0	0	0.00
BRAIN INJ WAIVER SERVICES	36	1491	37,681.27	444	22475	767,015.59	0	0	0.00
PSYCHIATRIC	39	74	4,266.74	277	639	20,287.28	40	98	4,657.08
RESIDENTIAL CARE FACILITY	1	30	596.50	5	56	647.22	0	0	0.00
MR WAIVER SERVICE	207	8506	248,323.70	10	241	14,645.70	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	35	2896	31,785.76	0	0	0.00
ELDERLY WAIVER SERVICES	0	0	0.00	6492	304142	3926,052.72	2	57	3,390.60
ILL & HANDICAPPED WAIVER SVCS	34	2685	43,942.30	8	276	4,491.41	0	0	0.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	283	276	72,440.76	195	198	55,214.07	3	2	473.43
UNASSIGNED	1	0	0.00	0	0	0.00	1	0	0.00
* A L L C A T E G O R I E S *	10378	303165	7145,126.63	14805	1335678	35313,005.35	1835	36589	1330,027.38

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	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	181	705	956,816.49	67	734	343,803.46	9	35	69,362.36
OUTPATIENT	609	16256	406,128.05	1268	18838	402,359.73	114	3844	158,324.82
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	14	0.00	0	0	0.00	0	0	0.00
INTERMEDIATE CARE FACILITY	1	59	3,503.70	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	32	514	45,163.82	42	127	4,751.07	2	31	2,180.74
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	917	3165	309,907.70	3253	5202	360,173.64	175	931	152,164.04
CLINIC SERVICES	97	134	22,628.48	647	808	102,330.92	19	24	4,063.69
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	56	227	4,266.26	213	605	12,840.52	23	77	1,315.95
HABILITATION SERVICES	7	230	8,262.81	1	1	92.18	0	0	0.00
REMEDIAL SERVICES	3	31	287.92	413	9085	151,897.23	0	0	0.00
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	68	73	12,460.02	30	28	4,950.04	3	3	323.37
LOCAL EDUCATION AGENCY	0	0	0.00	48	13729	88,640.59	0	0	0.00

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	MEDICALLY NEEDY WI SPEND DN			OTHER TXXI			OTHER BREAST CERVICAL CANCER		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
EARLY ACCESS SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PRESCRIBED DRUGS	325	1764	70,296.20	3731	7197	691,009.99	212	918	74,022.29
DRUG CAPITATION	0	0	0.00	0	0	0.00	0	0	0.00
INDIAN HEALTH SERVICES	0	0	0.00	3	3	759.00	0	0	0.00
FAMILY PLANNING SERVICES	8	10	804.82	91	110	10,136.04	0	0	0.00
IOWA PLAN PROGRAM	0	0	0.00	14305	15409	171,781.14	242	234	24,384.76
MANAGED SUBSTANCE ABUSE	0	0	0.00	0	0	0.00	0	0	0.00
MENTAL HEALTH ACCESS PLAN	0	0	0.00	0	0	0.00	0	0	0.00
EPSDT SCREENING	2	2	1,033.62	198	205	8,779.88	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	10165	10185	20,370.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	11	25	666.02	0	0	0.00
MEDICAL SUPPLIES	104	6040	52,620.52	118	4449	19,087.78	27	1490	7,106.23
OTHER PRACTITIONER	94	143	12,345.83	425	3046	48,290.90	24	91	3,918.80
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	73	108	30,309.67	1719	2055	320,922.49	23	31	7,390.69
OPTOMETRIST	28	42	2,623.24	519	601	39,999.25	12	16	1,183.18

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	22	52	1,641.50	370	706	23,086.82	15	67	2,185.52
PODIATRIC	6	14	1,750.65	40	51	6,448.49	2	3	206.37
PHYSICAL DISABILITIES SVCS	0	0	0.00	0	0	0.00	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	2	40	1,400.44	0	0	0.00
PSYCHIATRIC	52	135	7,249.92	22	53	3,669.93	1	1	26.08
RESIDENTIAL CARE FACILITY	0	0	0.00	0	0	0.00	0	0	0.00
MR WAIVER SERVICE	0	0	0.00	2	23	614.48	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	9	599	9,313.63	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	4	2	650.05	15	15	4,829.67	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 *	1081	29720	1950,751.27	13919	93929	2853,005.33	246	7796	508,158.89

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	7	0	41,083.97	1	3	1,196.22	0	0	0.00
OUTPATIENT	9	0	3,968.16	2	3	69.11	0	0	0.00
CHILD PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
CHILD DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
ADULT PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
ADULT DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
SKILLED NURSING FACILITY	0	0	0.00	0	0	0.00	0	0	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	0	0	0.00
INTER CARE MENTAL RETARDA	0	0	0.00	0	0	0.00	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	0	0	0.00
HOME HEALTH	0	0	0.00	0	0	0.00	0	0	0.00
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	6	4	2,932.26	8	30	4,297.06	0	0	0.00
CLINIC SERVICES	0	0	0.00	1	3	91.25	0	0	0.00
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	1	0	0.00	1	1	37.01	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	98	107	10,556.21	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 *	102	111	58,540.60	9	40	5,690.65	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		
	RECIPES SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPES SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPES SERVED	UNITS OF SERVICE	AMOUNT PAID
INPATIENT	6	145	23,849.77	6	24	15,536.00	3	11	15,519.48
OUTPATIENT	56	809	8,388.33	10	781	724.20	83	1166	33,167.36
CHILD PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
CHILD DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
ADULT PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
ADULT DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
SKILLED NURSING FACILITY	0	0	0.00	0	0	0.00	0	0	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	0	0	0.00
INTER CARE MENTAL RETARDA	0	0	0.00	0	0	0.00	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	0	0	0.00
HOME HEALTH	1	12	432.00	1	3	318.75	0	0	0.00
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	114	193	9,294.80	40	129-	1,083.21-	134	262	18,644.04
CLINIC SERVICES	21	27	2,676.40	1	0	0.00	27	38	5,278.10
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	16	68	909.52	1	0	0.00	25	74	2,238.56
HABILITATION SERVICES	1	33	1,525.92	3	27	2,703.42	12	472	31,303.61
REMEDIAL SERVICES	133	3715	61,238.89	0	0	0.00	17	283	6,370.77
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	1	2	256.66	1	1	64.89	6	7	1,058.09
LOCAL EDUCATION AGENCY	21	9351	72,731.96	0	0	0.00	0	0	0.00

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	OTHER ICARE PMIC MHI 300%			OTHER ICARE MHI 300%			STATE ONLY		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
EARLY ACCESS SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PRESCRIBED DRUGS	319	1222	117,124.55	5	8	57.33	153	328	16,743.42
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	842.40	0	0	0.00	17	22	2,213.45
IOWA PLAN PROGRAM	363	363	44,983.15	11	11	693.21	322	339	49,952.67
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	5	12	537.40	0	0	0.00	3	3	115.45
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	43	101	9,261.93	0	0	0.00	0	0	0.00
MEDICAL SUPPLIES	13	710	1,435.55	2	3	35.02	6	7	512.17
OTHER PRACTITIONER	31	876	8,297.83	0	0	0.00	17	27	1,432.46
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	36	41	8,812.27	1	1	36.38	26	36	5,917.79
OPTOMETRIST	18	21	1,040.07	2	3	90.95	15	18	1,149.12

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	11	29	883.44	1	2	9.32	15	54	2,093.56
PODIATRIC	4	4	889.78	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	2	3	157.36	1	1	23.92	0	0	0.00
RESIDENTIAL CARE FACILITY	0	0	0.00	1	21	210.27	0	0	0.00
MR WAIVER SERVICE	1	18	312.52	2	36	6,539.04	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	329	14981	305,441.65	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	25	1,500.00	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	367	359	146,011.31	2	2	552.11	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 *	346	33122	828,835.46	21	795	26,511.60	324	3147	193,710.10

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	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	33	125	266,990.66	217	1330	632,291.55	0	0	0.00
OUTPATIENT	351	8302	163,961.81	3151	97617	605,507.24	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	31	18,712.22	14	212	0.00	0	0	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	8	189	20,067.93	0	0	0.00
INTER CARE MENTAL RETARDA	0	0	0.00	2044	66065	26567,338.80	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	0	0	0.00
HOME HEALTH	18	143	10,446.93	1234	46639	1524,409.09	0	0	0.00
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	592	1658	136,802.39	5000	18974	428,279.78	0	0	0.00
CLINIC SERVICES	131	218	28,102.49	379	443	56,032.12	0	0	0.00
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	93	562	9,042.25	575	751	9,283.08	0	0	0.00
HABILITATION SERVICES	6	66	3,981.08	37	660	35,413.78	0	0	0.00
REMEDIAL SERVICES	96	2171	42,306.90	118	3232	64,107.26	0	0	0.00
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	23	25	3,459.03	142	170	18,859.29	0	0	0.00
LOCAL EDUCATION AGENCY	3	2208	17,787.18	673	215094	2411,017.14	0	0	0.00

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	STATE ONLY			FED CNTY - FED CNTY STATE			FEDERAL MEDICAID ONLY AGED		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
EARLY ACCESS SERVICES	1	2	30.00	60	316	5,213.41	0	0	0.00
PRESCRIBED DRUGS	882	4439	268,681.15	6383	24196	2066,968.21	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	3	198.84	14	15	805.17	0	0	0.00
IOWA PLAN PROGRAM	1400	1436	146,694.25	10881	10942	727,015.01	0	0	0.00
MANAGED SUBSTANCE ABUSE	0	0	0.00	0	0	0.00	0	0	0.00
MENTAL HEALTH ACCESS PLAN	0	0	0.00	0	0	0.00	0	0	0.00
EPSDT SCREENING	7	7	321.25	33	46	1,509.67	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	6	13	1,172.97	600	1476	161,953.83	0	0	0.00
MEDICAL SUPPLIES	156	9237	30,881.54	2340	372756	648,606.30	0	0	0.00
OTHER PRACTITIONER	66	325	7,751.28	930	24837	404,755.98	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	119	157	34,562.66	1428	1623	171,817.02	0	0	0.00
OPTOMETRIST	87	106	8,185.94	684	859	39,763.65	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	126	4,294.21	361	801	13,632.75	0	0	0.00
PODIATRIC	24	29	3,265.21	676	893	23,269.95	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	271	13471	460,602.11	0	0	0.00
PSYCHIATRIC	4	5	304.03	575	883	37,496.83	0	0	0.00
RESIDENTIAL CARE FACILITY	0	0	0.00	19	513	4,176.91	0	0	0.00
MR WAIVER SERVICE	3	117	3,823.18	8670	541707	24737,974.84	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	2	103	1,884.51	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	156	2,689.93	1	2	1,187.00	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	3	79	1,038.39	165	8205	174,249.16	0	0	0.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	8	10	2,952.83	9503	10017	2665,111.70	0	0	0.00
UNASSIGNED	0	0	0.00	1	0	424.71-	0	0	0.00
* A L L C A T E G O R I E S *	1457	31859	1220,325.11	11469	1464934	64718,291.85	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	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	7521	47596	35219,872.95			
OUTPATIENT	0	0	0.00	68200	1401942	13149,810.06			
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	1	0	8.78-			
ADULT DAY TREATMENT	0	0	0.00	0	0	0.00			
SKILLED NURSING FACILITY	0	0	0.00	884	16953	2460,481.77			
INTERMEDIATE CARE FACILITY	0	0	0.00	12212	379732	38322,738.79			
INTER CARE MENTAL RETARDA	0	0	0.00	2061	66710	25320,784.20			
NURSING FAC FOR MENTAL ILL	0	0	0.00	34	1006	290,612.66			
HOME HEALTH	0	0	0.00	13085	292233	9360,369.65			
LEAD INSPECTION AGENCY	0	0	0.00	3	4	1,524.48			
PHYSICIAN	0	0	0.00	128316	406047	20125,237.66			
CLINIC SERVICES	0	0	0.00	20621	28541	3691,601.99			
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00			
LAB AND RADIOLOGICAL	0	0	0.00	16634	37675	846,218.30			
HABILITATION SERVICES	0	0	0.00	3031	82475	4435,971.14			
REMEDIAL SERVICES	0	0	0.00	9091	333251	5382,685.21			
REHAB SUPPORT SERVICES	0	0	0.00	2	0	706.34-			
AMBULANCE SERVICES	0	0	0.00	3567	4087	487,567.73			
LOCAL EDUCATION AGENCY	0	0	0.00	2006	570099	5767,323.65			

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	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	597	2821	49,686.10			
PRESCRIBED DRUGS	0	0	0.00	124780	369365	23434,647.79			
DRUG CAPITATION	0	0	0.00	0	0	0.00			
INDIAN HEALTH SERVICES	0	0	0.00	67	140	35,410.20			
FAMILY PLANNING SERVICES	0	0	0.00	8664	10401	985,842.92			
IOWA PLAN PROGRAM	0	0	0.00	306117	328046	9832,362.74			
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	9283	10402	1403,871.99			
HMO SERVICES	0	0	0.00	0	0	0.00			
PACE SERVICES	0	0	0.00	37	37	112,719.00			
PATIENT MANAGEMENT	0	0	0.00	152915	153217	306,434.00			
HEALTH INS PREMIUM PAYMENT	0	0	0.00	4028	11335	558,862.02			
MEDICAL SUPPLIES	0	0	0.00	25076	2115732	4814,069.42			
OTHER PRACTITIONER	0	0	0.00	15720	130639	2456,207.77			
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	28467	35552	5514,882.49			
OPTOMETRIST	0	0	0.00	12215	15689	859,039.38			

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	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	9829	22767	563,317.39			
PODIATRIC	0	0	0.00	4966	7924	241,926.86			
PHYSICAL DISABILITIES SVCS	0	0	0.00	715	27885	363,312.39			
BRAIN INJ WAIVER SERVICES	0	0	0.00	1053	55114	1861,336.33			
PSYCHIATRIC	0	0	0.00	4092	7679	369,374.38			
RESIDENTIAL CARE FACILITY	0	0	0.00	1621	54985	437,023.41			
MR WAIVER SERVICE	0	0	0.00	9928	614468	27932,617.74			
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	561	27205	527,597.10			
AIDS WAIVER SERVICES	0	0	0.00	46	3906	43,378.54			
ELDERLY WAIVER SERVICES	0	0	0.00	9973	476179	6407,643.28			
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	2216	111282	1902,189.40			
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00			
MEP SERVICES	0	0	0.00	11937	12722	3457,073.81			
UNASSIGNED	0	0	0.00	24	0	271,567.49			
* A L L C A T E G O R I E S *	0	0	0.00	370208	8273843	259604,479.06	0	0	0.00

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