

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	444	1602	354,970.57
OUTPATIENT	46	452	5,578.08	0	0	0.00	3836	77813	471,636.11
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	131	2129	136,971.28
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	4629	133532	11536,212.78
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	8	231	58,970.54
HOME HEALTH	0	0	0.00	0	0	0.00	2352	45020	1712,401.48
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	53	93	7,784.73	0	0	0.00	5958	31463	302,733.50
CLINIC SERVICES	22	30	6,512.43	0	0	0.00	527	321	37,574.91
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	14	65	1,360.04	0	0	0.00	788	165	1,721.86
HABILITATION SERVICES	0	0	0.00	0	0	0.00	49	1345	98,153.28
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	245	280	27,289.53
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	46	73	666.40	0	0	0.00	2823	4966	61,427.55
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	119	142	3,716.22	0	0	0.00	1	1	58.29
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	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	2	3	66.70	0	0	0.00	2819	173398	247,352.02
OTHER PRACTITIONER	1	1	41.10	0	0	0.00	286	968	14,586.22
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	4,769.78	0	0	0.00	381	465	77,939.10
OPTOMETRIST	1	2	109.87	0	0	0.00	627	924	21,703.33

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	421	904	6,295.24
PODIATRIC	0	0	0.00	0	0	0.00	667	1024	10,511.25
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	52	3,519.28
PSYCHIATRIC	0	0	0.00	0	0	0.00	167	278	8,200.64
RESIDENTIAL CARE FACILITY	0	0	0.00	0	0	0.00	275	8219	57,330.64
MR WAIVER SERVICE	0	0	0.00	0	0	0.00	77	5778	228,237.22
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	3661	158658	2338,405.03
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	0	0	0.00	1	3	108.00
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	96	98	24,406.55
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	955	30,729.35	0	0	0.00	14360	649637	17838,716.20

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	BLIND			DISABLED			ADC - ADULT		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
INPATIENT	0	0	0.00	1647	9729	7765,905.79	673	1669	2403,093.10
OUTPATIENT	0	0	0.00	15554	410905	4599,094.44	8685	152352	3227,795.76
CHILD PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
CHILD DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
ADULT PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
ADULT DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
SKILLED NURSING FACILITY	0	0	0.00	182	4406	1972,153.37	2	21	9,693.12
INTERMEDIATE CARE FACILITY	0	0	0.00	605	17270	1872,117.97	0	0	0.00
INTER CARE MENTAL RETARDA	0	0	0.00	7	198	63,941.82	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	3781	110708	2513,518.61	58	626	41,246.62
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	1	0	20.30
PHYSICIAN	0	0	0.00	23644	105677	3702,714.03	15209	29287	2600,208.73
CLINIC SERVICES	0	0	0.00	3155	6343	602,161.53	2717	3752	513,147.94
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	0	0	0.00	3308	6021	109,887.68	3565	9212	266,705.23
HABILITATION SERVICES	0	0	0.00	2652	71311	3673,788.42	27	320	16,749.66
REMEDIAL SERVICES	0	0	0.00	798	24202	442,155.48	230	4711	74,293.63
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	0	0	0.00	716	803	87,570.84	149	144	20,126.37
LOCAL EDUCATION AGENCY	0	0	0.00	318	65440	793,473.69	7	1165	12,233.69

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	27	105	1,312.66	0	0	0.00
PRESCRIBED DRUGS	0	0	0.00	24071	101279	7460,372.54	19788	53283	2665,532.80
DRUG CAPITATION	0	0	0.00	0	0	0.00	0	0	0.00
INDIAN HEALTH SERVICES	0	0	0.00	1	2	536.00	4	5	1,310.00
FAMILY PLANNING SERVICES	0	0	0.00	102	116	9,841.83	5661	6573	616,553.99
IOWA PLAN PROGRAM	2	2	89.56	50098	51437	3793,841.52	38797	42784	1333,506.88
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	148	170	8,934.56	47	49	3,623.70
HMO SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PACE SERVICES	0	0	0.00	18	18	58,253.00	0	0	0.00
PATIENT MANAGEMENT	0	0	0.00	3	3	6.00	24422	24416	48,832.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	656	1494	177,038.37	207	461	15,211.78
MEDICAL SUPPLIES	0	0	0.00	8813	662773	1731,506.76	1058	28178	177,040.10
OTHER PRACTITIONER	0	0	0.00	2484	16546	449,918.91	1690	3412	190,124.66
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	3471	4316	720,699.74	2881	3844	724,857.53
OPTOMETRIST	0	0	0.00	2235	3016	149,152.34	1324	1591	115,172.85

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	2432	5578	85,617.67	1803	3878	132,355.31
PODIATRIC	0	0	0.00	1243	2365	72,670.25	231	293	31,611.06
PHYSICAL DISABILITIES SVCS	0	0	0.00	522	20327	270,936.63	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	319	16923	561,058.65	0	0	0.00
PSYCHIATRIC	0	0	0.00	2349	3847	121,972.46	25	56	5,050.82
RESIDENTIAL CARE FACILITY	0	0	0.00	1110	30594	231,825.56	0	0	0.00
MR WAIVER SERVICE	0	0	0.00	1003	66595	2821,005.19	1	1	731.50
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	30	1436	32,039.21	5	269	5,040.98
AIDS WAIVER SERVICES	0	0	0.00	14	1175	15,008.62	0	0	0.00
ELDERLY WAIVER SERVICES	0	0	0.00	26	913	20,442.18	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	1960	97438	1603,321.78	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	1158	1207	298,514.08	6	6	2,520.51
UNASSIGNED	0	0	0.00	3	0	0.00	1	0	0.00
* A L L C A T E G O R I E S *	2	2	89.56	54374	1922686	48894,310.18	50579	372358	15254,390.62

## 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	282	1303	1161,658.69	390	6381	1492,468.69	1802	9577	9611,362.38
OUTPATIENT	6636	62036	1392,823.56	2112	28318	560,482.08	11646	164446	2907,521.55
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	31	15,655.00	5	70	2,027.82-
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	3	48	2,543.51
INTER CARE MENTAL RETARDA	0	0	0.00	0	0	0.00	1	0	1428,388.00-
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	0	0	0.00
HOME HEALTH	331	1141	37,890.04	76	277	15,293.41	642	3460	144,749.11
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	16323	27033	1834,078.34	4192	8245	596,705.47	27271	61626	4097,668.09
CLINIC SERVICES	2561	3116	447,442.92	863	1138	156,696.13	5492	7748	951,109.55
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	2969	4488	82,567.23	698	1694	39,174.86	4965	10395	196,121.05
HABILITATION SERVICES	0	0	0.00	19	432	27,083.80	7	125	7,784.04
REMEDIAL SERVICES	2279	58623	1226,574.82	734	18230	372,877.82	2016	51819	1040,163.33
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	98	86	11,075.51	38	36	5,234.03	159	141	19,615.04
LOCAL EDUCATION AGENCY	95	22018	151,083.89	26	4757	50,736.12	81	12397	112,832.93

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	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	42	148	2,466.37	11	19	274.05	31	87	1,432.84
PRESCRIBED DRUGS	14134	22497	1199,913.96	4382	9683	543,680.57	21842	35941	1716,474.00
DRUG CAPITATION	0	0	0.00	0	0	0.00	0	0	0.00
INDIAN HEALTH SERVICES	4	9	2,292.00	0	0	0.00	30	60	15,504.00
FAMILY PLANNING SERVICES	955	1096	106,604.99	211	248	23,748.58	381	415	51,330.51
IOWA PLAN PROGRAM	66686	71252	707,791.82	15078	16333	334,084.26	96835	106556	1300,826.53
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	2405	2567	282,801.66	398	410	73,166.32	3674	3864	657,613.57
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	44202	44198	88,396.00	9438	9426	18,852.00	67040	67037	134,074.00
HEALTH INS PREMIUM PAYMENT	292	700	16,675.33	57	134	4,915.56	1964	5240	142,771.68
MEDICAL SUPPLIES	813	11655	99,052.78	201	4723	28,320.96	1184	19842	167,078.00
OTHER PRACTITIONER	1874	5093	185,944.40	498	1103	52,172.58	3154	8603	356,287.33
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	4052	4640	606,157.48	1041	1257	196,264.61	6571	7729	1035,498.84
OPTOMETRIST	1318	1465	94,676.02	417	490	33,925.72	2045	2286	143,367.78



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	922	1590	49,822.43	236	455	15,780.76	1499	2796	83,480.69
PODIATRIC	67	99	11,800.95	32	45	4,373.12	131	153	14,968.49
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	1	327.47
PSYCHIATRIC	22	30	3,706.85	16	41	2,980.59	46	74	4,476.77
RESIDENTIAL CARE FACILITY	0	0	0.00	1	31-	289.45-	2	4	0.00
MR WAIVER SERVICE	1	9	306.27	1	1	501.60	4	28	627.39
CHILDRENS MENTAL HEALTH SVC	41	2473	46,294.47	90	5771	102,217.58	46	2908	54,052.29
AIDS WAIVER SERVICES	0	0	0.00	0	0	0.00	1	0	5,932.40-
ELDERLY WAIVER SERVICES	0	0	0.00	0	0	0.00	4	35	57,487.72-
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	0	0	0.00	1	31	519.25
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	41	41	18,035.90	100	101	41,441.09	53	54	22,831.08
UNASSIGNED	1	0	0.00	0	0	0.00	5	0	650,945.42
* A L L C A T E G O R I E S *	73994	349406	9867,934.68	16324	119748	4808,817.91	103570	585596	24152,122.57

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	38	377	245,908.39	533	2225	712,297.61	49	169	268,046.90
OUTPATIENT	872	14679	193,288.91	4601	107177	611,121.27	465	11148	188,122.86
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	10	12,999.00	311	4688	19,826.77	1	8	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	6890	198122	20376,788.48	0	0	0.00
INTER CARE MENTAL RETARDA	7	135	57,455.16	0	0	0.00	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	27	818	241,154.43	0	0	0.00
HOME HEALTH	75	8434	257,381.45	3512	74409	2629,832.60	41	897	12,950.88
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	2040	3097	179,084.41	6772	33284	404,414.56	790	2036	143,300.65
CLINIC SERVICES	380	473	59,178.53	467	334	36,937.60	111	136	19,027.67
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	307	653	12,077.36	1035	270	3,056.35	138	268	7,174.01
HABILITATION SERVICES	15	538	29,338.76	32	656	30,438.06	25	657	43,268.96
REMEDIAL SERVICES	2238	150556	1832,514.29	5	84	932.64	6	137	2,373.56
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	1	126-	5,700.24-
AMBULANCE SERVICES	17	20	2,456.37	412	505	46,040.84	16	17	1,930.48
LOCAL EDUCATION AGENCY	68	21674	178,381.37	16	3127	58,263.29	0	0	0.00

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	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	14	46	653.59	3	6	75.56	0	0	0.00
PRESCRIBED DRUGS	4617	11107	893,101.35	10086	22759	402,259.59	947	3054	146,253.90
DRUG CAPITATION	0	0	0.00	0	0	0.00	0	0	0.00
INDIAN HEALTH SERVICES	2	2	506.00	0	0	0.00	2	7	1,801.00
FAMILY PLANNING SERVICES	40	42	4,374.99	0	0	0.00	27	31	2,865.57
IOWA PLAN PROGRAM	10125	9903	1033,968.83	2261	2328	157,450.69	1461	1594	55,735.62
MANAGED SUBSTANCE ABUSE	0	0	0.00	0	0	0.00	0	0	0.00
MENTAL HEALTH ACCESS PLAN	0	0	0.00	0	0	0.00	0	0	0.00
EPSDT SCREENING	140	152	10,571.52	1	1	8.23	3	3	109.41
HMO SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PACE SERVICES	0	0	0.00	24	26	69,333.00	0	0	0.00
PATIENT MANAGEMENT	93	93	186.00	0	0	0.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	145	323	13,658.75	36	81	11,726.85	0	0	0.00
MEDICAL SUPPLIES	253	30754	67,388.54	4449	379277	523,799.39	170	8762	17,292.39
OTHER PRACTITIONER	445	5901	87,309.16	447	1481	35,284.65	79	164	9,700.48
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	962	1094	141,075.92	789	947	149,041.98	158	199	34,208.40
OPTOMETRIST	357	387	23,149.21	781	1098	28,890.94	77	97	5,660.00

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

CHIROPRACTIC	170	281	8,275.85	312	707	5,097.86	104	203	6,620.59
PODIATRIC	19	23	2,541.45	1156	1758	20,795.40	41	61	1,435.36
PHYSICAL DISABILITIES SVCS	0	0	0.00	204	7617	95,954.36	0	0	0.00
BRAIN INJ WAIVER SERVICES	36	1337	46,930.53	438	21564	674,757.22	0	0	0.00
PSYCHIATRIC	14	22	2,337.69	259	518	16,520.11	28	36	1,150.26
RESIDENTIAL CARE FACILITY	0	0	0.00	5	55	17.02	0	0	0.00
MR WAIVER SERVICE	216	11152	308,346.97	8	332	10,431.86	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	3286	34,485.02	0	0	0.00
ELDERLY WAIVER SERVICES	0	0	0.00	6365	289221	3821,519.80	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	36	2944	47,868.17	10	169	2,666.14	0	0	0.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	193	205	49,167.79	132	134	34,330.41	2	2	473.61
UNASSIGNED	0	0	0.00	1	0	0.00	1	0	0.00
* A L L C A T E G O R I E S *	10257	276414	5801,476.31	14745	1159064	31265,550.58	1815	29560	963,802.32

## 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	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	164	704	1024,299.04	65	575	241,985.30	3	13	27,102.76
OUTPATIENT	540	13903	406,071.61	1005	14668	278,681.17	114	2634	107,127.30
CHILD PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
CHILD DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
ADULT PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
ADULT DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
SKILLED NURSING FACILITY	2	2	869.90	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	35	557	29,145.19	36	81	3,440.54	2	9	914.20
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	782	2576	258,385.81	2583	3697	265,295.09	162	653	132,324.68
CLINIC SERVICES	80	106	15,870.44	568	695	99,039.14	16	19	3,988.63
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	48	170	4,288.94	195	532	10,734.49	25	246	7,627.57
HABILITATION SERVICES	3	121	3,174.99	0	0	0.00	0	0	0.00
REMEDIAL SERVICES	1	32	299.20	400	9930	207,514.02	0	0	0.00
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	24	25	5,486.49	20	14	680.35	1	1	121.60
LOCAL EDUCATION AGENCY	0	0	0.00	20	2827	19,599.60	0	0	0.00

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	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	337	1484	81,057.96	3254	5649	422,258.19	198	786	71,196.01
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	8	9	764.39	87	100	9,095.10	1	1	35.98
IOWA PLAN PROGRAM	0	0	0.00	14244	15247	171,147.68	236	238	24,907.90
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	1	0	503.90-	161	160	6,299.32	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	10466	10466	20,932.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	4	11	306.24	0	0	0.00
MEDICAL SUPPLIES	70	3041	31,320.61	120	3959	17,766.81	19	517	8,796.92
OTHER PRACTITIONER	56	104	7,641.82	324	1862	37,152.35	23	45	2,397.44
FAMILY CENTERED PROGRAM	0	0	0.00	0	0	0.00	0	0	0.00
FAMILY PRESERVATION	0	0	0.00	0	0	0.00	0	0	0.00
TREATMENT FOSTER FAMILY CARE	0	0	0.00	0	0	0.00	0	0	0.00
GROUP TREATMENT THERAPY	0	0	0.00	0	0	0.00	0	0	0.00
DENTAL	77	110	23,150.20	1477	1707	251,032.58	17	18	3,664.19
OPTOMETRIST	38	47	2,879.89	429	482	31,762.97	10	13	1,105.68

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	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	27	51	1,250.40	332	574	18,258.98	13	23	701.36
PODIATRIC	10	15	2,465.82	32	37	4,173.82	1	1	111.97
PHYSICAL DISABILITIES SVCS	0	0	0.00	0	0	0.00	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	2	21	2,014.38	0	0	0.00
PSYCHIATRIC	42	108	5,410.11	11	11	1,020.67	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	57	1,166.03	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	10	619	10,860.25	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	1	1	15.00	0	0	0.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	2	4	1,000.00	12	12	4,461.10	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 *	986	23169	1904,328.91	14133	73994	2136,693.17	244	5218	392,150.27

## 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	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	1	43,581.95	3	7	7,906.51	0	0	0.00
OUTPATIENT	7	15	10,958.68	3	19	567.60	0	0	0.00
CHILD PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
CHILD DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
ADULT PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
ADULT DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
SKILLED NURSING FACILITY	1	0	2,036.45	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	13	18	7,616.65	3	2	920.15	0	0	0.00
CLINIC SERVICES	0	0	0.00	2	7	437.90	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	98.08	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	82	7,435.60	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	1,017.66	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	3	243.26	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 *	79	119	71,872.59	7	38	10,947.90	0	0	0.00

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	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	7	226	33,457.86	0	0	0.00	4	13	13,128.90
OUTPATIENT	46	642	6,104.02	8	63	354.29	72	1064	25,515.49
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	14	535.50	0	0	0.00	0	0	0.00
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	89	136	6,530.64	14	3-	245.56	111	222	20,391.00
CLINIC SERVICES	13	18	3,056.30	0	0	0.00	23	35	4,314.85
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	3	11	44.16	0	0	0.00	29	80	2,002.34
HABILITATION SERVICES	1	34	1,572.16	2	10	680.86	12	338	21,908.48
REMEDIAL SERVICES	130	3565	83,144.35	0	0	0.00	13	162	4,032.46
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	1	1	114.52	0	0	0.00	3	3	289.27
LOCAL EDUCATION AGENCY	7	1550	25,949.91	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	318	972	81,071.95	2	2	15.90	144	323	16,547.69
DRUG CAPITATION	0	0	0.00	0	0	0.00	0	0	0.00
INDIAN HEALTH SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
FAMILY PLANNING SERVICES	1	1	97.56	0	0	0.00	16	22	2,129.33
IOWA PLAN PROGRAM	364	366	45,261.71	13	14	873.86	336	368	54,242.40
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	2	3	94.05	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	43	91	7,108.34	0	0	0.00	0	0	0.00
MEDICAL SUPPLIES	12	722	1,173.16	1	48	56.16	7	20	451.50
OTHER PRACTITIONER	29	174	4,273.36	0	0	0.00	9	11	511.37
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	33	6,471.67	0	0	0.00	18	22	3,603.82
OPTOMETRIST	11	12	793.73	1	2	38.55	6	8	666.02

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	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	16	537.69	0	0	0.00	10	28	1,094.54
PODIATRIC	2	3	191.81	0	0	0.00	1	1	32.68
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	2	440.59	3	4	121.34	1	2	7.88
RESIDENTIAL CARE FACILITY	0	0	0.00	5	145	1,344.09	0	0	0.00
MR WAIVER SERVICE	1	47	773.15	1	3	126.00	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	315	14436	305,572.16	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	348	348	154,318.21	3	3	706.35	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 *	353	23423	768,688.56	15	291	4,562.96	329	2722	170,870.02

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	STATE ONLY			FED CNTY - FED CNTY STATE			FEDERAL MEDICAID ONLY AGED		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
INPATIENT	31	175	269,135.14	158	634	315,721.07	0	0	0.00
OUTPATIENT	318	6959	182,270.55	2755	75184	476,450.61	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	30	18,108.60	14	238	35,033.94	0	0	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	9	197	17,783.33	0	0	0.00
INTER CARE MENTAL RETARDA	0	0	0.00	2081	62336	25267,816.31	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	0	0	0.00
HOME HEALTH	19	141	8,280.71	1166	59449	1369,297.48	0	0	0.00
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	526	1213	107,985.28	4341	15005	319,534.51	0	0	0.00
CLINIC SERVICES	131	186	26,169.11	333	364	44,594.46	0	0	0.00
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	76	357	7,055.42	491	701	8,938.37	0	0	0.00
HABILITATION SERVICES	7	34	1,936.60	33	790	30,079.69	0	0	0.00
REMEDIAL SERVICES	44	1728	26,347.80	129	3247	63,097.87	0	0	0.00
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	13	12	1,466.12	80	92	10,588.80	0	0	0.00
LOCAL EDUCATION AGENCY	3	291	5,493.99	273	58693	781,230.39	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	0	0	0.00	13	80	1,015.79	0	0	0.00
PRESCRIBED DRUGS	856	3942	221,139.04	6059	19527	1434,616.03	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	6	8	2,076.28	13	15	1,086.55	0	0	0.00
IOWA PLAN PROGRAM	1418	1495	152,476.01	10906	10982	729,904.50	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	1	1	22.10	37	55	1,966.74	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	1	1	2.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	6	11	931.00	625	1392	196,325.51	0	0	0.00
MEDICAL SUPPLIES	125	5294	18,240.65	2178	313032	517,892.78	0	0	0.00
OTHER PRACTITIONER	61	141	7,385.73	785	14786	369,553.69	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	102	121	27,869.84	1114	1249	126,921.76	0	0	0.00
OPTOMETRIST	62	75	5,966.80	510	580	26,783.84	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	60	156	5,692.61	327	594	9,097.67	0	0	0.00
PODIATRIC	21	33	2,800.81	585	867	18,853.07	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	13018	434,641.42	0	0	0.00
PSYCHIATRIC	4	5	199.95	521	774	31,241.34	0	0	0.00
RESIDENTIAL CARE FACILITY	0	0	0.00	7	170	1,302.62	0	0	0.00
MR WAIVER SERVICE	4	149	4,437.98	8652	618384	23223,014.93	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	3	159	4,014.06	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	161	2,648.90	0	0	0.00	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	3	174	1,839.86	147	7839	150,133.29	0	0	0.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	6	6	1,809.21	7534	7871	1927,555.66	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 *	1483	23057	1113,800.15	11699	1288146	57942,076.02	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	6266	35380	25992,030.65			
OUTPATIENT	0	0	0.00	58765	1144477	15651,565.94			
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	648	11633	2221,319.61			
INTERMEDIATE CARE FACILITY	0	0	0.00	12094	349169	33805,446.07			
INTER CARE MENTAL RETARDA	0	0	0.00	2095	62669	23960,825.29			
NURSING FAC FOR MENTAL ILL	0	0	0.00	35	1049	300,124.97			
HOME HEALTH	0	0	0.00	12007	305223	8776,877.82			
LEAD INSPECTION AGENCY	0	0	0.00	1	0	20.30			
PHYSICIAN	0	0	0.00	109173	325360	14987,921.88			
CLINIC SERVICES	0	0	0.00	17345	24821	3027,260.04			
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00			
LAB AND RADIOLOGICAL	0	0	0.00	18560	35330	760,635.04			
HABILITATION SERVICES	0	0	0.00	2875	76711	3985,957.76			
REMEDIAL SERVICES	0	0	0.00	8499	327026	5376,321.27			
REHAB SUPPORT SERVICES	0	0	0.00	1	126-	5,700.24-			
AMBULANCE SERVICES	0	0	0.00	1985	2180	240,086.16			
LOCAL EDUCATION AGENCY	0	0	0.00	904	193939	2189,278.87			

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	134	491	7,230.86			
PRESCRIBED DRUGS	0	0	0.00	112387	297409	17425,021.03			
DRUG CAPITATION	0	0	0.00	0	0	0.00			
INDIAN HEALTH SERVICES	0	0	0.00	43	85	21,949.00			
FAMILY PLANNING SERVICES	0	0	0.00	7490	8677	830,605.65			
IOWA PLAN PROGRAM	0	0	0.00	308223	331042	9899,884.28			
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	6999	7436	1045,724.94			
HMO SERVICES	0	0	0.00	0	0	0.00			
PACE SERVICES	0	0	0.00	42	44	127,586.00			
PATIENT MANAGEMENT	0	0	0.00	155727	155702	311,404.00			
HEALTH INS PREMIUM PAYMENT	0	0	0.00	4035	9938	586,669.41			
MEDICAL SUPPLIES	0	0	0.00	21857	1645998	3654,596.23			
OTHER PRACTITIONER	0	0	0.00	12148	60395	1810,285.25			
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	23078	27783	4133,227.44			
OPTOMETRIST	0	0	0.00	10233	12575	685,805.54			

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE

FEDERAL MEDICAID ONLY BLIND

TOTAL

RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
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CHIROPRACTIC	0	0	0.00	8618	17834	429,979.65			
PODIATRIC	0	0	0.00	4223	6778	199,337.31			
PHYSICAL DISABILITIES SVCS	0	0	0.00	723	27944	366,890.99			
BRAIN INJ WAIVER SERVICES	0	0	0.00	1042	52916	1723,248.95			
PSYCHIATRIC	0	0	0.00	3502	5812	205,107.41			
RESIDENTIAL CARE FACILITY	0	0	0.00	1398	39156	291,530.48			
MR WAIVER SERVICE	0	0	0.00	9928	702536	26599,706.09			
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	540	28071	560,091.00			
AIDS WAIVER SERVICES	0	0	0.00	48	4461	43,561.24			
ELDERLY WAIVER SERVICES	0	0	0.00	9777	448988	6125,528.19			
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	2151	108599	1806,471.49			
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00			
MEP SERVICES	0	0	0.00	9673	10092	2581,571.55			
UNASSIGNED	0	0	0.00	13	0	650,945.42			
* A L L C A T E G O R I E S *	0	0	0.00	369510	6905603	223393,930.83	0	0	0.00

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