

## 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	410	1364	498,679.03
OUTPATIENT	39	351	14,377.82	0	0	0.00	3612	71953	510,076.47
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	169	1152	63,916.78
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	4629	141268	12438,990.43
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	183	36,257.27
HOME HEALTH	0	0	0.00	0	0	0.00	3414	167174	1794,063.64
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	84	894	13,805.45	0	0	0.00	6100	42565	354,908.99
CLINIC SERVICES	18	23	5,051.58	0	0	0.00	504	378	32,743.68
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	11	50	1,128.50	0	0	0.00	719	219	2,781.38
HABILITATION SERVICES	0	0	0.00	0	0	0.00	48	1207	90,604.91
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	271	319	32,885.14
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	42	86	2,174.53	0	0	0.00	2809	4672	65,476.81
DRUG CAPITATION	0	0	0.00	0	0	0.00	0	0	0.00
INDIAN HEALTH SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
FAMILY PLANNING SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
IOWA PLAN PROGRAM	125	152	4,041.44	0	0	0.00	11	8	621.80
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	83	83	166.00	0	0	0.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEDICAL SUPPLIES	4	33	525.87	0	0	0.00	2731	162263	266,555.63
OTHER PRACTITIONER	1	1	129.40	0	0	0.00	419	1527	22,223.82
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	26	38	4,357.28	0	0	0.00	446	547	92,114.59
OPTOMETRIST	0	0	0.00	0	0	0.00	660	1036	22,639.66

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	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	424	1015	7,364.75
PODIATRIC	0	0	0.00	0	0	0.00	609	940	9,343.50
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	3,604.59
PSYCHIATRIC	0	0	0.00	0	0	0.00	171	361	10,575.00
RESIDENTIAL CARE FACILITY	0	0	0.00	0	0	0.00	309	10831	79,283.81
MR WAIVER SERVICE	0	0	0.00	0	0	0.00	71	5058	210,517.81
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	3775	156533	2368,633.26
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	106	26,762.54
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 *	171	1711	45,757.87	0	0	0.00	15259	772731	19041,625.29

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	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	1575	9037	6775,889.49	652	1956	3272,654.82
OUTPATIENT	1	2	7.75	15328	374447	5255,534.57	8909	152170	3834,928.42
CHILD PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
CHILD DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
ADULT PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
ADULT DAY TREATMENT	0	0	0.00	1	40	694.59	0	0	0.00
SKILLED NURSING FACILITY	0	0	0.00	161	3462	1613,897.50	1	3	1,575.93
INTERMEDIATE CARE FACILITY	0	0	0.00	620	18807	2064,157.02	0	0	0.00
INTER CARE MENTAL RETARDA	0	0	0.00	8	293	83,612.05	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	3811	110147	2966,732.01	57	1715	47,767.03
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	0	0	0.00	24734	118969	3907,931.05	16181	32152	2823,636.63
CLINIC SERVICES	0	0	0.00	3167	4240	565,445.33	3077	4335	611,385.41
MEP CASE MANAGEMENT	0	0	0.00	2	0	1,714.26	0	0	0.00
LAB AND RADIOLOGICAL	0	0	0.00	3307	6126	105,578.98	3404	9010	253,864.15
HABILITATION SERVICES	0	0	0.00	2751	73168	3967,457.00	37	507	24,141.78
REMEDIAL SERVICES	0	0	0.00	720	21637	382,566.91	187	4506	77,453.06
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	0	0	0.00	970	1153	139,507.11	319	329	47,338.82
LOCAL EDUCATION AGENCY	0	0	0.00	241	48120	516,390.09	8	1447	10,195.49

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	BLIND			DISABLED			ADC - ADULT		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
EARLY ACCESS SERVICES	0	0	0.00	32	156	2,377.70	0	0	0.00
PRESCRIBED DRUGS	1	0	0.00	24759	104704	7975,473.73	21136	58848	2842,946.61
DRUG CAPITATION	0	0	0.00	0	0	0.00	1	0	8.52-
INDIAN HEALTH SERVICES	0	0	0.00	1	2	536.00	5	5	1,340.00
FAMILY PLANNING SERVICES	0	0	0.00	121	136	9,709.80	5308	6048	566,014.58
IOWA PLAN PROGRAM	2	2	90.16	52209	52477	3884,075.24	39627	44032	1372,421.33
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	144	184	9,860.54	54	58	5,225.40
HMO SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PACE SERVICES	0	0	0.00	21	21	68,269.00	0	0	0.00
PATIENT MANAGEMENT	0	0	0.00	0	0	0.00	24331	24327	48,654.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	633	1537	150,456.39	195	471	15,372.76
MEDICAL SUPPLIES	0	0	0.00	8953	637968	1772,386.50	999	26161	175,344.61
OTHER PRACTITIONER	0	0	0.00	2560	16279	419,622.10	1671	3026	198,277.54
FAMILY CENTERED PROGRAM	0	0	0.00	0	0	0.00	0	0	0.00
FAMILY PRESERVATION	0	0	0.00	0	0	0.00	0	0	0.00
TREATMENT FOSTER FAMILY CARE	0	0	0.00	0	0	0.00	0	0	0.00
GROUP TREATMENT THERAPY	0	0	0.00	0	0	0.00	0	0	0.00
DENTAL	0	0	0.00	3906	4980	822,093.65	3338	4615	862,930.33
OPTOMETRIST	0	0	0.00	2433	3249	161,315.72	1589	1882	144,742.58

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	2468	5636	84,279.44	1800	4071	140,577.92
PODIATRIC	0	0	0.00	1257	2367	75,523.77	205	277	31,512.64
PHYSICAL DISABILITIES SVCS	0	0	0.00	515	19972	292,211.91	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	312	15972	551,493.37	0	0	0.00
PSYCHIATRIC	0	0	0.00	2741	4906	154,219.63	34	53	3,620.80
RESIDENTIAL CARE FACILITY	0	0	0.00	1311	41308	338,284.76	0	0	0.00
MR WAIVER SERVICE	0	0	0.00	997	64432	2822,419.15	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	27	1226	24,743.35	6	311	5,805.97
AIDS WAIVER SERVICES	0	0	0.00	14	1733	18,563.45	0	0	0.00
ELDERLY WAIVER SERVICES	0	0	0.00	33	952	20,900.97	1	0	961.38
SICK & HANDICAPPED WAIVER SVCS	0	0	0.00	1949	96446	1592,106.27	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	1284	1370	348,550.43	8	8	3,736.78
UNASSIGNED	0	0	0.00	6	0	0.00	1	0	0.00
* A L L C A T E G O R I E S *	2	4	97.91	55368	1867659	49946,580.83	51087	382323	17424,418.25

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	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	340	2211	3113,198.86	382	6932	1723,240.96	1808	9079	7511,235.73
OUTPATIENT	7300	72975	1717,288.38	2217	30886	658,026.39	11914	171534	3452,136.05
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	3	42	23,913.12
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	4	30	6,043.77
INTER CARE MENTAL RETARDA	0	0	0.00	0	0	0.00	1	0	2857,590.00-
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	0	0	0.00
HOME HEALTH	520	2043	50,170.40	69	228	8,248.30	877	4987	246,697.24
LEAD INSPECTION AGENCY	1	1	381.12	0	0	0.00	1	1	350.00
PHYSICIAN	19574	31668	2132,039.35	4592	8848	596,967.53	30793	59023	4603,572.53
CLINIC SERVICES	3689	4808	643,635.67	1002	1416	186,296.51	6581	9825	1584,751.93
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	1211	2826	46,130.94	457	1468	32,718.09	2840	8893	176,127.36
HABILITATION SERVICES	0	0	0.00	27	465	35,268.09	7	120	9,292.35
REMEDIAL SERVICES	2094	58677	1083,073.59	643	18844	322,771.53	1908	51679	882,051.83
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	1	0	30,508.96-
AMBULANCE SERVICES	178	171	25,250.29	77	80	11,743.77	261	250	37,255.87
LOCAL EDUCATION AGENCY	74	11823	81,182.49	31	5759	45,820.97	76	9824	75,358.18

## 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	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	23	124	1,885.36	14	33	567.81	37	88	1,365.41
PRESCRIBED DRUGS	17901	31312	1635,017.59	4976	11675	665,346.61	26261	46372	2318,462.99
DRUG CAPITATION	0	0	0.00	0	0	0.00	0	0	0.00
INDIAN HEALTH SERVICES	4	5	1,340.00	6	7	1,876.00	23	28	7,504.00
FAMILY PLANNING SERVICES	773	872	79,144.20	185	220	20,584.78	370	420	43,596.38
IOWA PLAN PROGRAM	67573	72657	720,034.78	15234	16672	348,761.30	97541	108601	1320,080.47
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	2523	2680	347,033.40	391	433	63,663.64	3989	4143	821,149.29
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	44332	44332	88,664.00	9373	9373	18,746.00	67211	67210	134,420.00
HEALTH INS PREMIUM PAYMENT	287	774	16,027.01	60	152	5,905.18	1989	5824	146,800.16
MEDICAL SUPPLIES	803	12018	120,960.59	192	3543	31,134.92	1117	24842	168,926.23
OTHER PRACTITIONER	2167	4567	203,128.70	580	2019	74,349.33	3579	9103	385,160.12
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	5068	5949	835,443.23	1158	1454	238,147.85	7525	8840	1221,685.44
OPTOMETRIST	1870	2074	142,876.25	503	572	38,109.69	2745	3091	202,993.37



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	904	1527	48,642.33	274	580	19,980.84	1597	2956	89,286.98
PODIATRIC	79	91	10,081.48	25	28	2,307.62	125	151	14,234.67
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	12	12	1,620.51	16	26	2,422.57	58	94	60,475.13
RESIDENTIAL CARE FACILITY	0	0	0.00	0	0	0.00	1	0	0.00
MR WAIVER SERVICE	2	43	705.00	2	7	183.35	3	94	30,784.34
CHILDRENS MENTAL HEALTH SVC	38	1908	34,755.37	90	4503	78,904.17	45	2225	39,795.33
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	71	67,983.20
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	0	0	0.00	1	2	76.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	41	46	20,392.25	102	112	46,888.70	56	61	24,425.31
UNASSIGNED	1	0	0.00	0	0	0.00	2	0	1473,669.20
* A L L C A T E G O R I E S *	74767	368194	13200,103.14	16641	126366	5294,637.50	105629	609503	24231,992.34

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	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	44	428	188,329.50	534	2233	707,325.84	36	158	156,477.95
OUTPATIENT	854	15572	216,467.52	4456	108636	693,212.03	435	10467	243,058.53
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	18,600.00	398	3692	48,961.06	4	43	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	6837	206094	21379,007.91	2	66	4,607.03
INTER CARE MENTAL RETARDA	5	131	56,438.46	2	51	16,593.39	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	27	837	245,970.47	0	0	0.00
HOME HEALTH	61	5290	111,159.40	4892	204749	2604,563.93	36	506	11,034.89
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	2262	3790	199,860.02	6928	49311	453,741.17	803	2331	146,834.79
CLINIC SERVICES	418	576	70,109.15	431	335	32,485.64	132	179	22,296.97
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	213	694	12,589.44	1009	398	5,366.38	150	295	6,921.90
HABILITATION SERVICES	12	130	6,317.00	41	851	38,260.45	22	424	30,646.22
REMEDIAL SERVICES	2131	149815	1767,312.44	6	87	1,639.08	4	147	2,933.43
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	19	21	3,084.93	445	558	52,433.51	25	26	3,116.26
LOCAL EDUCATION AGENCY	39	5754	34,850.96	9	883	12,536.33	0	0	0.00

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	FOSTER - PRESUB - SUB ADOPTS			INTERMEDIATE CARE FACILITY			MEDICALLY NEEDY NO SPEND DN		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
EARLY ACCESS SERVICES	10	23	355.52	1	15	210.12	0	0	0.00
PRESCRIBED DRUGS	4676	11566	1034,016.91	9766	21288	407,547.24	984	3225	171,469.23
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	2	4	1,072.00
FAMILY PLANNING SERVICES	33	38	3,477.36	1	1	51.94	21	23	2,417.33
IOWA PLAN PROGRAM	10108	10246	1052,595.75	2438	1347	97,499.27	1483	1625	56,730.99
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	155	175	13,318.51	5	3	237.89	1	1	36.47
HMO SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PACE SERVICES	0	0	0.00	30	32	88,793.00	0	0	0.00
PATIENT MANAGEMENT	135	135	270.00	0	0	0.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	150	359	15,635.23	35	81	10,314.15	0	0	0.00
MEDICAL SUPPLIES	235	24146	69,081.70	4554	387470	590,443.67	154	7951	18,042.91
OTHER PRACTITIONER	444	2149	72,622.28	547	2339	48,866.85	88	246	11,032.58
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	990	1145	149,854.00	918	1112	180,300.05	157	215	36,455.16
OPTOMETRIST	482	519	35,730.45	742	1035	28,260.30	80	102	6,589.21

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	157	272	7,727.29	333	711	6,016.03	99	224	6,766.07
PODIATRIC	26	26	1,971.53	1060	1486	17,680.17	30	37	804.75
PHYSICAL DISABILITIES SVCS	0	0	0.00	218	9512	107,541.42	0	0	0.00
BRAIN INJ WAIVER SERVICES	36	1432	49,740.67	434	19322	684,083.17	0	0	0.00
PSYCHIATRIC	29	44	4,167.72	245	458	15,190.90	36	159	2,826.45
RESIDENTIAL CARE FACILITY	0	0	0.00	7	138	1,532.36	1	31	287.03
MR WAIVER SERVICE	206	9335	306,760.80	6	79	3,321.17	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	2952	30,132.60	0	0	0.00
ELDERLY WAIVER SERVICES	0	0	0.00	6418	280690	3761,486.85	1	1	70.00
ILL & HANDICAPPED WAIVER SVCS	37	2134	36,680.81	10	351	4,272.98	0	0	0.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	231	244	60,368.39	160	157	39,249.37	3	5	1,236.10
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 *	10073	246220	5599,493.74	15560	1309294	32415,128.69	1823	28491	943,764.25

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	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	174	992	978,741.92	70	575	170,434.07	8	56	79,670.76
OUTPATIENT	516	18371	394,965.74	1142	15672	328,926.80	112	2210	93,980.40
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	58	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	24	510	13,365.76	35	101	1,621.51	3	16	2,056.74
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	831	2829	159,789.86	3185	6109	322,205.05	165	804	160,604.56
CLINIC SERVICES	74	129	19,288.16	803	1040	133,142.12	19	25	4,536.69
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	58	212	1,794.88	237	614	14,499.87	28	65	5,303.61
HABILITATION SERVICES	6	77	4,293.05	0	0	0.00	0	0	0.00
REMEDIAL SERVICES	1	32	299.20	381	10226	187,241.74	0	0	0.00
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	52	57	7,993.11	26	26	4,367.04	2	1	39.48-
LOCAL EDUCATION AGENCY	0	0	0.00	12	1863	10,763.89	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	288	1144	48,808.30	3820	7031	606,019.75	203	816	65,641.50
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	10	12	1,308.16	77	89	8,239.81	0	0	0.00
IOWA PLAN PROGRAM	0	0	0.00	13756	14922	167,183.46	251	252	26,247.72
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	0.00	129	126	13,268.41	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	10218	10218	20,436.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	13	39	2,210.32	0	0	0.00
MEDICAL SUPPLIES	75	2191	112,031.30	112	3253	13,026.77	27	1467	9,632.72
OTHER PRACTITIONER	84	290	9,736.90	415	1098	41,208.78	19	45	2,432.84
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	57	79	16,607.31	1445	1709	295,011.31	21	29	4,317.71
OPTOMETRIST	27	36	2,231.31	626	704	46,341.89	12	15	1,210.85

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

	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	29	57	1,812.08	338	565	18,827.08	16	29	1,049.01
PODIATRIC	13	21	2,714.68	32	39	5,841.49	3	3	258.46
PHYSICAL DISABILITIES SVCS	0	0	0.00	0	0	0.00	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	2	52	3,576.26	0	0	0.00
PSYCHIATRIC	45	100	5,720.08	8	7	1,246.59	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	3	90	5,162.21	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	7	551	7,943.59	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	3	5	1,067.14	11	12	4,292.67	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 *	965	27203	1782,568.94	13956	76731	2433,038.48	253	5833	456,904.09

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	21	57,815.90	0	0	0.00	0	0	0.00
OUTPATIENT	10	179	44,776.85-	2	22	417.89	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	15	1,574.95	5	5	3,368.10	0	0	0.00
CLINIC SERVICES	0	0	0.00	1	2	328.50	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	3	141.18	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	79	88	8,896.05	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 *	77	303	23,510.05	6	32	4,255.67	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	1	2	3,672.58	1	3	1,068.00	5	8	25,837.10
OUTPATIENT	50	820	5,096.51	4	1736	364.83	63	1089	24,541.74
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	1	21	39.00	2	4	21.40
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	87	122	5,320.70	5	39	686.59	126	218	19,398.75
CLINIC SERVICES	14	27	2,844.03	0	0	0.00	17	22	3,039.60
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	3	14	213.39	0	0	0.00	25	87	2,141.89
HABILITATION SERVICES	1	28	1,294.72	3	8	390.46	8	62	5,539.95
REMEDIAL SERVICES	131	3410	66,839.81	0	0	0.00	26	440	10,212.60
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	1	1	78.20	0	0	0.00	7	8	1,192.41
LOCAL EDUCATION AGENCY	6	1176	7,708.53	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	306	1001	96,074.00	2	2	22.50	147	285	16,986.13
DRUG CAPITATION	0	0	0.00	0	0	0.00	0	0	0.00
INDIAN HEALTH SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
FAMILY PLANNING SERVICES	1	2	151.98	0	0	0.00	9	11	875.72
IOWA PLAN PROGRAM	372	374	46,224.65	16	15	963.82	397	416	61,347.81
MANAGED SUBSTANCE ABUSE	0	0	0.00	0	0	0.00	0	0	0.00
MENTAL HEALTH ACCESS PLAN	0	0	0.00	0	0	0.00	0	0	0.00
EPSDT SCREENING	4	5	398.40	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	1	1	2.00	0	0	0.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	42	108	7,603.89	0	0	0.00	0	0	0.00
MEDICAL SUPPLIES	11	551	740.65	2	215	239.61	6	6	466.79
OTHER PRACTITIONER	22	253	5,354.98	0	0	0.00	12	25	1,027.13
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	42	50	19,469.94	1	1	132.85	20	25	5,830.36
OPTOMETRIST	17	18	1,000.41	0	0	0.00	19	24	1,918.62

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	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	12	26	495.03	0	0	0.00	14	26	1,122.77
PODIATRIC	2	1	99.62	2	2	18.23	0	0	0.00
PHYSICAL DISABILITIES SVCS	0	0	0.00	0	0	0.00	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PSYCHIATRIC	0	0	0.00	1	3	115.96	1	3	27.04
RESIDENTIAL CARE FACILITY	0	0	0.00	2	5	278.38-	0	0	0.00
MR WAIVER SERVICE	1	17	279.65	0	0	0.00	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	314	15559	299,594.84	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	37	555.00	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	350	401	179,394.40	1	1-	222.41-	0	0	0.00
UNASSIGNED	0	0	0.00	0	0	0.00	0	0	0.00
* A L L C A T E G O R I E S *	362	24004	750,507.91	10	2049	3,541.06	372	2759	181,527.81

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	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	26	135	244,901.98	141	574	418,594.10	0	0	0.00
OUTPATIENT	312	5756	159,895.61	2620	63016	508,827.79	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	11	188	100.26	0	0	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	5	25	2,087.05	0	0	0.00
INTER CARE MENTAL RETARDA	0	0	0.00	2061	62449	25482,019.19	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	0	0	0.00
HOME HEALTH	15	171	7,323.49	1185	47714	1474,145.47	0	0	0.00
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	535	1175	111,058.75	4402	16080	336,164.12	0	0	0.00
CLINIC SERVICES	126	183	29,651.59	343	413	55,282.48	0	0	0.00
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	68	306	5,084.04	486	751	9,786.29	0	0	0.00
HABILITATION SERVICES	7	93	4,576.29	42	1459	56,727.12	0	0	0.00
REMEDIAL SERVICES	37	1969	23,105.92	106	2984	56,748.58	0	0	0.00
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	18	19	2,302.51	117	153	17,484.06	0	0	0.00
LOCAL EDUCATION AGENCY	1	47	398.19	226	45793	376,523.13	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	9	30	442.53	0	0	0.00
PRESCRIBED DRUGS	897	3835	225,286.22	6101	19867	1596,165.75	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	1	2	536.00	0	0	0.00
FAMILY PLANNING SERVICES	7	7	387.84	26	28	969.98	0	0	0.00
IOWA PLAN PROGRAM	1438	1493	151,978.23	11070	10989	735,718.70	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	254.96	33	43	2,425.78	0	0	0.00
HMO SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PACE SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PATIENT MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	5	12	754.52	622	1493	158,124.33	0	0	0.00
MEDICAL SUPPLIES	115	5877	16,228.03	2253	293591	556,928.25	0	0	0.00
OTHER PRACTITIONER	53	98	5,526.00	799	9807	334,500.21	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	105	145	32,397.31	1369	1557	158,891.17	0	0	0.00
OPTOMETRIST	76	85	6,941.15	546	681	29,228.80	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	62	151	4,782.19	350	673	10,155.92	0	0	0.00
PODIATRIC	19	27	2,613.88	563	737	17,920.65	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	277	12554	420,536.88	0	0	0.00
PSYCHIATRIC	4	5	359.04	506	785	27,401.14	0	0	0.00
RESIDENTIAL CARE FACILITY	0	0	0.00	15	522	3,436.30	0	0	0.00
MR WAIVER SERVICE	4	90	2,835.75	8675	569517	23460,811.01	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	3	148	3,225.41	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	249	4,184.14	1	2	1,187.00	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	2	77	964.92	162	8078	146,127.18	0	0	0.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	7	7	2,241.74	8850	9325	2320,521.72	0	0	0.00
UNASSIGNED	1	0	0.00	0	0	0.00	0	0	0.00
* A L L C A T E G O R I E S *	1483	22192	1067,971.92	11731	1181880	58776,518.94	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			LEGAL PERMANENT RESIDENT TXIX			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	0	0	0.00	6187	35764	25927,768.59
OUTPATIENT	0	0	0.00	4	58	3,274.41	59424	1117922	18070,628.80
CHILD PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
CHILD DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
ADULT PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
ADULT DAY TREATMENT	0	0	0.00	0	0	0.00	1	40	694.59
SKILLED NURSING FACILITY	0	0	0.00	0	0	0.00	745	8733	1805,331.87
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	12053	366290	35894,893.21
INTER CARE MENTAL RETARDA	0	0	0.00	0	0	0.00	2077	62924	22781,073.09
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	33	1020	282,227.74
HOME HEALTH	0	0	0.00	0	0	0.00	14736	545376	9339,010.21
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	2	2	731.12
PHYSICIAN	0	0	0.00	9	24	1,795.28	119540	376971	16355,264.22
CLINIC SERVICES	0	0	0.00	9	11	1,590.41	20243	27967	4003,905.45
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	2	0	1,714.26
LAB AND RADIOLOGICAL	0	0	0.00	1	9	114.89	14152	32040	682,287.16
HABILITATION SERVICES	0	0	0.00	0	0	0.00	2974	78599	4274,809.39
REMEDIAL SERVICES	0	0	0.00	0	0	0.00	8082	324453	4864,249.72
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	1	0	30,508.96
AMBULANCE SERVICES	0	0	0.00	0	0	0.00	2778	3172	385,993.55
LOCAL EDUCATION AGENCY	0	0	0.00	0	0	0.00	718	132489	1171,728.25

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	FEDERAL MEDICAID ONLY BLIND			LEGAL PERMANENT RESIDENT TXIX			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	0	0	0.00	123	469	7,204.45
PRESCRIBED DRUGS	0	0	0.00	4	4	64.58	123841	327821	19781,897.03
DRUG CAPITATION	0	0	0.00	0	0	0.00	1	0	8.52-
INDIAN HEALTH SERVICES	0	0	0.00	0	0	0.00	42	53	14,204.00
FAMILY PLANNING SERVICES	0	0	0.00	0	0	0.00	6928	7907	736,929.86
IOWA PLAN PROGRAM	0	0	0.00	39	72	732.63	311985	336352	10047,349.55
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	7412	7853	1276,872.69
HMO SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PACE SERVICES	0	0	0.00	0	0	0.00	51	53	157,062.00
PATIENT MANAGEMENT	0	0	0.00	6	6	12.00	155690	155685	311,370.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	0	0	0.00	4031	10850	529,203.94
MEDICAL SUPPLIES	0	0	0.00	1	1	16.00	21966	1593547	3922,712.75
OTHER PRACTITIONER	0	0	0.00	1	1	70.80	13379	52873	1835,270.36
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	9	9	1,041.10	26514	32499	4977,080.64
OPTOMETRIST	0	0	0.00	0	0	0.00	12402	15123	872,130.26

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	FEDERAL MEDICAID ONLY BLIND			LEGAL PERMANENT RESIDENT TXIX			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	0	0	0.00	8812	18519	448,885.73
PODIATRIC	0	0	0.00	0	0	0.00	4037	6233	192,927.14
PHYSICAL DISABILITIES SVCS	0	0	0.00	0	0	0.00	729	29484	399,753.33
BRAIN INJ WAIVER SERVICES	0	0	0.00	0	0	0.00	1035	49384	1713,034.94
PSYCHIATRIC	0	0	0.00	0	0	0.00	3891	7016	289,988.56
RESIDENTIAL CARE FACILITY	0	0	0.00	0	0	0.00	1637	52835	422,545.88
MR WAIVER SERVICE	0	0	0.00	0	0	0.00	9933	648762	26782,211.56
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	0	0	0.00	530	26431	494,768.03
AIDS WAIVER SERVICES	0	0	0.00	0	0	0.00	47	4685	48,696.05
ELDERLY WAIVER SERVICES	0	0	0.00	0	0	0.00	9883	438498	6225,406.80
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	0	0	0.00	2156	107125	1780,783.16
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	11168	11858	3078,905.13
UNASSIGNED	0	0	0.00	0	0	0.00	11	0	1473,669.20
* A L L C A T E G O R I E S *	0	0	0.00	32	195	8,712.10	375627	7055677	233632,656.78

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