

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	FEDERAL ONLY			REFUGEE TXXI			AGED		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
INPATIENT	1	3	2,289.39	0	0	0.00	590	2434	586,080.14
OUTPATIENT	213	3804	15,084.93	0	0	0.00	5148	82673	761,174.80
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	0	0	0.00
SKILLED NURSING FACILITY	0	0	0.00	0	0	0.00	211	3846	88,708.13
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	4728	144700	12631,309.91
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	4	124	21,703.81
HOME HEALTH	0	0	0.00	0	0	0.00	3069	62464	1977,191.14
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	104	189	17,590.11	0	0	0.00	7273	44721	455,839.75
CLINIC SERVICES	44	65	9,686.34	0	0	0.00	613	439	44,369.84
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	22	119	2,696.55	0	0	0.00	1042	244	3,067.87
HABILITATION SERVICES	0	0	0.00	0	0	0.00	54	1529	120,614.92
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	341	402	37,912.05
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	63	140	1,018.41	0	0	0.00	3796	7412	88,019.26
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	162	259	6,826.48	0	0	0.00	3	3	228.53
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	2	3	997.67	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	85	85	170.00	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	6	141.08	0	0	0.00	3422	227686	340,014.20
OTHER PRACTITIONER	6	6	382.13	0	0	0.00	444	2254	26,568.12
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	36	57	6,827.86	0	0	0.00	566	724	118,565.95
OPTOMETRIST	21	29	1,904.79	0	0	0.00	836	1398	31,160.04

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	FEDERAL ONLY			REFUGEE TXXI			AGED		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
CHIROPRACTIC	0	0	0.00	0	0	0.00	463	1279	9,187.57
PODIATRIC	0	0	0.00	0	0	0.00	948	1409	13,759.16
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	3,618.06
PSYCHIATRIC	0	0	0.00	0	0	0.00	197	372	11,567.40
RESIDENTIAL CARE FACILITY	0	0	0.00	0	0	0.00	302	10464	80,088.99
MR WAIVER SERVICE	0	0	0.00	0	0	0.00	80	5261	248,691.90
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	3816	171042	2585,010.82
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	104	107	26,196.44
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 *	310	4765	65,615.74	0	0	0.00	15399	773039	20310,648.80

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	2085	13227	10559,767.16	781	2612	4231,708.73
OUTPATIENT	0	0	0.00	30124	1278209	8206,830.14	31524	780617	6652,135.69
CHILD PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
CHILD DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
ADULT PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
ADULT DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
SKILLED NURSING FACILITY	0	0	0.00	205	5003	1971,237.57	1	6	3,028.38
INTERMEDIATE CARE FACILITY	0	0	0.00	617	18454	1979,193.37	0	0	0.00
INTER CARE MENTAL RETARDA	0	0	0.00	8	217	69,539.37	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	4577	93778	3280,988.38	76	1478	65,413.57
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	1	2	47.89	28666	146133	5215,060.65	19683	44006	3794,019.70
CLINIC SERVICES	0	0	0.00	4129	5398	728,043.03	3677	5440	783,326.91
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	0	0	0.00	4226	7992	134,049.49	3864	10935	278,807.64
HABILITATION SERVICES	0	0	0.00	2793	80015	3974,443.77	36	563	21,516.30
REMEDIAL SERVICES	0	0	0.00	870	27633	459,218.29	240	5680	83,789.70
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	0	0	0.00	1196	1428	168,518.03	383	392	54,150.72
LOCAL EDUCATION AGENCY	0	0	0.00	359	87529	1090,441.60	3	553	2,826.06

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	19	98	1,211.38	0	0	0.00
PRESCRIBED DRUGS	0	0	0.00	26853	130036	9534,678.12	23938	74240	3471,637.91
DRUG CAPITATION	0	0	0.00	0	0	0.00	0	0	0.00
INDIAN HEALTH SERVICES	0	0	0.00	1	1	268.00	2	2	536.00
FAMILY PLANNING SERVICES	0	0	0.00	154	174	11,876.07	7893	9775	877,906.97
IOWA PLAN PROGRAM	1	1	58.49	50848	52602	3887,581.26	41225	46033	1432,699.24
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	115	165	11,037.78	27	31	2,676.49
HMO SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PACE SERVICES	0	0	0.00	27	27	86,784.00	0	0	0.00
PATIENT MANAGEMENT	0	0	0.00	4	4	8.00	25021	25016	50,032.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	623	1223	119,497.89	189	385	13,287.91
MEDICAL SUPPLIES	0	0	0.00	10611	902492	2246,722.04	1189	34378	263,767.64
OTHER PRACTITIONER	0	0	0.00	3233	26133	573,403.41	2274	4214	263,854.82
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	0	0	0.00	4820	6338	1048,332.32	4033	5751	1085,772.63
OPTOMETRIST	0	0	0.00	2995	4197	205,409.22	2004	2467	184,516.33

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	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	2611	6990	103,686.62	2010	4877	171,066.01
PODIATRIC	0	0	0.00	1531	2710	96,163.44	259	337	42,358.60
PHYSICAL DISABILITIES SVCS	0	0	0.00	526	20184	280,894.90	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	325	15796	572,467.25	1	23	925.93
PSYCHIATRIC	0	0	0.00	2927	5639	176,253.29	48	118	8,412.24
RESIDENTIAL CARE FACILITY	0	0	0.00	1285	42242	338,507.48	0	0	0.00
MR WAIVER SERVICE	0	0	0.00	1018	69702	3008,217.86	1	0	360.16
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	31	1435	28,987.95	7	498	7,731.53
AIDS WAIVER SERVICES	0	0	0.00	15	1508	18,502.88	0	0	0.00
ELDERLY WAIVER SERVICES	0	0	0.00	30	1128	23,153.11	0	0	0.00
SICK & HANDICAPPED WAIVER SVCS	0	0	0.00	2001	104850	1756,123.80	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	1256	1409	347,440.55	10	10	4,195.12
UNASSIGNED	0	0	0.00	2	0	0.00	4	0	0.00
* A L L C A T E G O R I E S *	1	3	106.38	56784	3162099	62314,539.47	60620	1060437	23851,740.61

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	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	1488	1595,599.15	472	9278	2576,182.50	2194	11548	14239,950.10
OUTPATIENT	35918	389359	3485,710.29	9672	165545	1154,926.83	52562	839428	5710,251.36
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	2	185	110,548.86	2	0	5,347.50-
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	4	0	15,323.26
INTER CARE MENTAL RETARDA	0	0	0.00	0	0	0.00	1	0	1463,331.00-
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	0	0	0.00
HOME HEALTH	470	1914	65,967.79	106	452	26,678.66	857	4324	288,302.40
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	2	1	0.00
PHYSICIAN	27143	48889	2997,026.11	6052	11832	833,930.40	41629	86573	6180,725.64
CLINIC SERVICES	5018	6597	913,744.86	1334	1933	266,529.29	8278	12173	1485,064.15
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	1701	3787	58,844.60	538	1768	38,095.22	3639	10948	205,441.96
HABILITATION SERVICES	0	0	0.00	34	425	32,963.57	6	8	366.98
REMEDIAL SERVICES	2597	72747	1224,456.13	829	23874	363,376.20	2493	61925	987,315.81
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	1	0	2,796.87-
AMBULANCE SERVICES	190	191	27,502.69	94	102	14,353.94	321	338	57,571.16
LOCAL EDUCATION AGENCY	89	21312	149,420.28	22	4815	31,468.21	111	26574	196,535.77

## 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	29	99	1,315.37	6	10	141.69	26	108	1,507.49
PRESCRIBED DRUGS	22611	41571	2122,587.31	6050	14702	799,938.09	33835	63702	3142,660.03
DRUG CAPITATION	0	0	0.00	0	0	0.00	0	0	0.00
INDIAN HEALTH SERVICES	3	3	804.00	1	1	268.00	26	33	8,844.00
FAMILY PLANNING SERVICES	1065	1341	128,856.02	262	299	23,474.14	498	595	61,533.92
IOWA PLAN PROGRAM	70317	75516	749,591.10	15799	17382	362,750.29	101618	112680	1368,883.40
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	1908	2158	345,458.64	319	415	89,843.65	3020	3351	858,810.22
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	45373	45373	90,746.00	9509	9509	19,018.00	68883	68883	137,766.00
HEALTH INS PREMIUM PAYMENT	271	634	11,367.53	55	110	4,825.89	1942	4734	117,117.76
MEDICAL SUPPLIES	1023	16849	133,839.32	231	5245	40,800.85	1403	28909	238,628.58
OTHER PRACTITIONER	3386	9865	314,425.48	840	2088	80,130.17	5262	17178	565,575.67
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	5706	6841	901,553.17	1379	1747	287,202.81	8947	10686	1441,969.36
OPTOMETRIST	1989	2321	156,854.91	596	717	50,013.01	3010	3522	229,965.15

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	1049	1918	61,477.08	275	573	19,092.87	1832	3676	113,867.78
PODIATRIC	73	85	8,631.05	37	40	3,801.14	166	233	21,810.58
PHYSICAL DISABILITIES SVCS	0	0	0.00	0	0	0.00	0	0	0.00
BRAIN INJ WAIVER SERVICES	1	13	616.78	0	0	0.00	2	1	26,124.11
PSYCHIATRIC	11	12	1,234.74	18	58	3,690.45	42	62	4,189.49
RESIDENTIAL CARE FACILITY	0	0	0.00	0	0	0.00	1	0	0.50
MR WAIVER SERVICE	1	11	161.70	3	49	1,629.66	5	82	32,137.42-
CHILDRENS MENTAL HEALTH SVC	35	1900	41,041.43	90	4411	80,919.95	49	2758	52,109.75
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	112	4,661.71
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	41	41	17,472.82	94	98	39,534.35	51	51	21,481.77
UNASSIGNED	1	0	0.00	1	0	0.00	5	0	403,918.67
* A L L C A T E G O R I E S *	82983	752835	15606,306.35	18334	277663	7356,128.69	111618	1375196	36684,661.74

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	FOSTER - PRESUB - SUB ADOPTS			INTERMEDIATE CARE FACILITY			MEDICALLY NEEDY NO SPEND DN		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
INPATIENT	62	463	253,292.19	783	3637	1134,052.26	48	218	252,269.05
OUTPATIENT	3851	70347	479,171.64	6245	141235	1085,588.22	1424	34402	346,011.02
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	0	0	0.00
ADULT DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
SKILLED NURSING FACILITY	4	130	69,560.21	422	7721	29,696.52	5	71	15,655.00
INTERMEDIATE CARE FACILITY	0	0	0.00	6871	206219	21223,742.91	1	23	2,280.88
INTER CARE MENTAL RETARDA	4	119	52,340.54	4	37	13,060.14	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	14	414	78,947.28	0	0	0.00
HOME HEALTH	135	4221	134,472.15	4168	85814	3192,933.57	63	638	19,336.42
LEAD INSPECTION AGENCY	0	0	0.00	1	0	9.96	0	0	0.00
PHYSICIAN	2989	4933	273,231.67	7759	43728	663,815.46	949	2859	175,336.88
CLINIC SERVICES	516	697	88,393.65	517	467	45,305.48	163	220	29,862.69
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	276	918	14,508.97	1240	545	6,498.31	152	340	8,180.66
HABILITATION SERVICES	13	102	4,096.32	42	1149	48,632.86	23	572	33,416.20
REMEDIAL SERVICES	2629	170684	1707,065.04	7	96	1,387.40	6	269	4,686.54
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	35	35	12,743.69	541	732	69,645.60	20	26	3,132.43
LOCAL EDUCATION AGENCY	64	22189	223,994.89	19	4163	97,721.49	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	29	423.00	0	0	0.00	0	0	0.00
PRESCRIBED DRUGS	5373	15104	1261,339.79	10280	24949	486,210.50	1130	4097	213,590.62
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	3	4	1,072.00
FAMILY PLANNING SERVICES	41	51	8,211.54	1	0	16.04-	34	40	3,953.82
IOWA PLAN PROGRAM	10037	10264	1067,348.41	2308	2344	159,163.98	1548	1717	59,823.35
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	115	133	10,528.97	2	3	85.85	0	0	0.00
HMO SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PACE SERVICES	0	0	0.00	31	31	87,045.00	0	0	0.00
PATIENT MANAGEMENT	87	87	174.00	0	0	0.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	153	306	13,528.05	31	50	7,765.76	2	2	179.70
MEDICAL SUPPLIES	283	30853	87,037.84	4902	428280	650,202.00	175	9328	26,659.77
OTHER PRACTITIONER	596	2822	81,848.94	681	2937	71,881.34	105	188	13,265.05
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	1177	1428	191,434.74	982	1228	187,246.43	188	257	48,888.39
OPTOMETRIST	472	545	35,264.98	976	1466	38,851.78	101	136	7,778.20

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

	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	169	284	8,152.98	347	919	6,582.76	100	224	7,049.56
PODIATRIC	27	35	2,461.85	1474	2114	22,256.83	36	48	3,111.86
PHYSICAL DISABILITIES SVCS	0	0	0.00	218	8831	105,514.16	0	0	0.00
BRAIN INJ WAIVER SERVICES	35	1620	45,114.79	449	21512	803,063.34	0	0	0.00
PSYCHIATRIC	26	47	4,113.15	290	512	17,464.53	35	45	1,807.24
RESIDENTIAL CARE FACILITY	0	0	0.00	10	240	3,735.02	0	0	0.00
MR WAIVER SERVICE	209	8195	289,020.64	8	282	19,095.24	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	33	2733	29,486.71	0	0	0.00
ELDERLY WAIVER SERVICES	0	0	0.00	6288	296307	3898,091.42	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	35	2844	48,213.98	2	15	281.03	0	0	0.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	222	245	59,974.82	148	169	43,264.38	2	2	486.10
UNASSIGNED	2	0	0.00	0	0	0.00	0	0	0.00
* A L L C A T E G O R I E S *	9927	349730	6527,063.43	14712	1290879	34328,309.48	1910	55726	1277,833.43

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	219	1046	1389,592.24	64	663	205,721.69	5	29	98,810.21
OUTPATIENT	2083	56148	644,731.06	5425	70199	511,287.18	267	19811	200,683.23
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	16	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	43	581	39,095.46	59	109	1,846.95	5	25	2,877.44
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	995	4354	376,458.11	4361	7878	405,513.43	197	1073	211,261.29
CLINIC SERVICES	88	152	23,090.73	951	1207	156,438.84	22	25	4,282.26
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	67	179	5,356.65	226	727	12,211.01	35	104	2,253.03
HABILITATION SERVICES	8	37-	5,094.51-	0	0	0.00	0	0	0.00
REMEDIAL SERVICES	3	44	886.59	455	11503	187,971.12	0	0	0.00
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	60	62	11,292.18	28	27	4,078.87	3	3	417.40
LOCAL EDUCATION AGENCY	0	0	0.00	25	7132	52,819.61	0	0	0.00

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	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	383	1857	99,115.93	4592	8842	719,026.32	215	972	68,159.85
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	7	7	298.71	96	109	9,876.91	3	4	328.76
IOWA PLAN PROGRAM	0	0	0.00	14217	15400	170,206.23	248	250	26,176.70
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	85	93	9,772.77	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	10205	10205	20,410.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	9	21	717.93	0	0	0.00
MEDICAL SUPPLIES	101	7569	44,667.17	161	5704	29,486.86	27	961	9,425.48
OTHER PRACTITIONER	101	190	14,507.16	588	2871	58,548.65	22	36	2,484.86
FAMILY CENTERED PROGRAM	0	0	0.00	0	0	0.00	0	0	0.00
FAMILY PRESERVATION	0	0	0.00	0	0	0.00	0	0	0.00
TREATMENT FOSTER FAMILY CARE	0	0	0.00	0	0	0.00	0	0	0.00
GROUP TREATMENT THERAPY	0	0	0.00	0	0	0.00	0	0	0.00
DENTAL	62	101	18,396.07	1708	2052	312,829.02	20	29	6,254.36
OPTOMETRIST	36	46	2,962.81	671	790	52,735.00	14	20	1,466.46

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	39	93	3,084.01	361	695	23,398.54	10	27	918.82
PODIATRIC	18	24	3,576.46	36	47	5,113.97	5	16	3,230.86
PHYSICAL DISABILITIES SVCS	0	0	0.00	0	0	0.00	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	2	96	2,455.45	0	0	0.00
PSYCHIATRIC	51	122	7,065.42	6	42	2,233.80	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	102	1,319.27	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	7	790	10,962.04	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	1	7	53.97
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	4	6	1,530.73	9	9	3,137.43	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 *	1708	72560	2680,612.98	13530	147313	2970,118.89	260	23392	639,084.98

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	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	10	27,381.36	0	0	0.00	0	0	0.00
OUTPATIENT	14	972	12,692.41	0	0	0.00	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	1	0	511.00	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	17	24	9,399.41	0	0	0.00	0	0	0.00
CLINIC SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	0	0	0.00	0	0	0.00	0	0	0.00
HABILITATION SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
REMEDIAL SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	1	1	122.82	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	71	80	7,801.24	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 *	71	1087	57,908.24	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
INPATIENT	6	80	15,848.61	2	0	4,539.00	9	21	26,555.66
OUTPATIENT	187	4133	19,515.54	7	21	847.12	300	7134	40,066.32
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	3	16	520.20	1	2	0.00	1	2	10.80
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	143	250	11,262.86	7	26	678.62	168	308	20,317.49
CLINIC SERVICES	13	17	1,570.09	1	0	16.20	33	46	5,975.32
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	7	22	263.28	0	0	0.00	28	166	3,171.50
HABILITATION SERVICES	5	117	5,389.38	3	1	106.77	8	309	17,522.78
REMEDIAL SERVICES	177	4607	74,610.45	0	0	0.00	26	567	11,665.92
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	2	1	121.52-	0	0	0.00	5	6	653.08
LOCAL EDUCATION AGENCY	7	1650	18,863.43	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	345	1369	110,363.69	1	1	8.43	191	492	28,816.00
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	2	2	91.66	0	0	0.00	17	24	1,647.62
IOWA PLAN PROGRAM	383	397	48,033.02	6	6	407.05	404	433	63,815.15
MANAGED SUBSTANCE ABUSE	0	0	0.00	0	0	0.00	0	0	0.00
MENTAL HEALTH ACCESS PLAN	0	0	0.00	0	0	0.00	0	0	0.00
EPSDT SCREENING	2	2	85.25	0	0	0.00	1	1	33.55
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	4	4	8.00	0	0	0.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	46	96	6,593.23	0	0	0.00	1	2	56.76
MEDICAL SUPPLIES	23	1190	2,756.79	0	0	0.00	4	4	89.42
OTHER PRACTITIONER	36	630	6,059.38	0	0	0.00	19	26	1,328.88
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	44	52	4,356.40	1	1	95.63	26	31	4,605.39
OPTOMETRIST	22	24	1,199.60	1	2	31.98	18	21	1,421.81

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	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	7	14	398.45	0	0	0.00	8	17	526.12
PODIATRIC	2	2	7.06	0	0	0.00	1	1	294.39
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	1	24.69	3	24	233.90
RESIDENTIAL CARE FACILITY	0	0	0.00	1	41	1,079.26	0	0	0.00
MR WAIVER SERVICE	1	25	411.25	0	0	0.00	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	332	16021	335,474.28	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	28	420.00	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	343	346	153,278.91	0	0	0.00	0	0	0.00
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 *	340	31095	817,259.29	5	102	7,834.75	363	9635	228,807.86

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	212	236,246.84	206	1069	639,522.24	0	0	0.00
OUTPATIENT	916	27485	220,295.71	5302	181742	863,738.03	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	19,030.75	11	133	27,906.68	0	0	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	7	176	21,438.43	0	0	0.00
INTER CARE MENTAL RETARDA	0	0	0.00	2079	63475	25629,249.25	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	0	0	0.00
HOME HEALTH	20	125	8,363.58	1382	55236	1945,375.42	0	0	0.00
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	650	1757	141,350.21	5513	18866	472,902.92	0	0	0.00
CLINIC SERVICES	145	245	35,890.15	429	527	67,840.38	0	0	0.00
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	88	314	5,612.88	647	860	11,205.62	0	0	0.00
HABILITATION SERVICES	8	113	5,866.54	51	1764	70,084.77	0	0	0.00
REMEDIAL SERVICES	53	1558	15,373.60	135	2735	37,569.06	0	0	0.00
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	23	26	3,578.42	145	180	17,620.33	0	0	0.00
LOCAL EDUCATION AGENCY	3	531	10,646.52	417	117030	1562,803.45	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	5	13	74.85	0	0	0.00
PRESCRIBED DRUGS	964	4767	262,761.08	6600	24948	1910,685.52	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	6	6	918.77	15	16	603.63	0	0	0.00
IOWA PLAN PROGRAM	1442	1528	154,804.69	11005	11076	738,397.43	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	2	2	363.08	27	35	1,779.97	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	11	776.18	598	1160	121,571.80	0	0	0.00
MEDICAL SUPPLIES	151	9269	24,149.49	2770	395831	667,988.14	0	0	0.00
OTHER PRACTITIONER	90	333	15,704.21	891	13372	384,261.91	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	132	179	30,203.31	1712	2010	221,848.84	0	0	0.00
OPTOMETRIST	84	95	7,831.27	708	925	37,929.12	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	63	137	4,658.84	374	861	12,577.42	0	0	0.00
PODIATRIC	28	30	3,140.94	804	1111	26,903.80	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	276	13050	494,057.68	0	0	0.00
PSYCHIATRIC	5	27	1,630.72	584	961	35,774.94	0	0	0.00
RESIDENTIAL CARE FACILITY	0	0	0.00	12	318	2,050.63	0	0	0.00
MR WAIVER SERVICE	3	77	2,787.90	8836	572512	24343,756.07	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	2	141	2,702.41	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	173	2,983.31	1	1	1,117.00	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	3	90-	640.56	164	8226	147,710.66	0	0	0.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	7	8	2,571.44	8728	9829	2431,628.52	0	0	0.00
UNASSIGNED	0	0	0.00	1	0	0.00	0	0	0.00
* A L L C A T E G O R I E S *	1513	49090	1220,883.40	11669	1500050	62948,510.51	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	7854	48038	38075,408.52
OUTPATIENT	0	0	0.00	18	176	2,216.50	180608	4153440	30412,958.02
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	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	860	17142	2330,024.60
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	12185	369572	35873,799.76
INTER CARE MENTAL RETARDA	0	0	0.00	0	0	0.00	2095	63848	24300,858.30
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	18	538	100,651.09
HOME HEALTH	0	0	0.00	0	0	0.00	14933	311179	11049,373.93
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	3	1	9.96
PHYSICIAN	0	0	0.00	18	27	2,640.16	151829	468428	22258,408.76
CLINIC SERVICES	0	0	0.00	8	15	1,664.85	25789	35663	4691,095.06
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	0	0	0.00	1	3	94.98	17726	39971	790,360.22
HABILITATION SERVICES	0	0	0.00	0	0	0.00	3045	86630	4329,926.65
REMEDIAL SERVICES	0	0	0.00	3	188	4,137.04	9801	384110	5163,508.89
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	1	0	2,796.87-
AMBULANCE SERVICES	0	0	0.00	0	0	0.00	3377	3952	483,171.89
LOCAL EDUCATION AGENCY	0	0	0.00	0	0	0.00	1110	293478	3437,541.31

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

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	93	357	4,673.78
PRESCRIBED DRUGS	0	0	0.00	8	14	404.39	145048	419295	24328,822.49
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	37	46	12,328.00
FAMILY PLANNING SERVICES	0	0	0.00	1	2	236.01	10063	12445	1129,798.51
IOWA PLAN PROGRAM	0	0	0.00	71	92	1,024.36	320891	347983	10297,819.16
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	5605	6392	1331,473.89
HMO SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PACE SERVICES	0	0	0.00	0	0	0.00	58	58	173,829.00
PATIENT MANAGEMENT	0	0	0.00	28	28	56.00	159199	159194	318,388.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	0	0	0.00	3926	8734	417,286.39
MEDICAL SUPPLIES	0	0	0.00	0	0	0.00	26044	2104554	4806,376.67
OTHER PRACTITIONER	0	0	0.00	1	1	233.23	18464	85144	2474,463.41
FAMILY CENTERED PROGRAM	0	0	0.00	0	0	0.00	0	0	0.00
FAMILY PRESERVATION	0	0	0.00	0	0	0.00	0	0	0.00
TREATMENT FOSTER FAMILY CARE	0	0	0.00	0	0	0.00	0	0	0.00
GROUP TREATMENT THERAPY	0	0	0.00	0	0	0.00	0	0	0.00
DENTAL	0	0	0.00	10	16	3,398.78	31421	39528	5919,781.46
OPTOMETRIST	0	0	0.00	6	9	604.61	14520	18730	1047,901.07

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	9652	22584	545,725.43
PODIATRIC	0	0	0.00	0	0	0.00	5424	8242	256,621.99
PHYSICAL DISABILITIES SVCS	0	0	0.00	0	0	0.00	739	29015	386,409.06
BRAIN INJ WAIVER SERVICES	0	0	0.00	0	0	0.00	1060	52163	1948,443.39
PSYCHIATRIC	0	0	0.00	0	0	0.00	4230	8042	275,696.00
RESIDENTIAL CARE FACILITY	0	0	0.00	0	0	0.00	1605	53305	425,461.88
MR WAIVER SERVICE	0	0	0.00	0	0	0.00	10113	656298	27882,593.91
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	0	0	0.00	552	27954	559,929.34
AIDS WAIVER SERVICES	0	0	0.00	0	0	0.00	46	4241	47,989.59
ELDERLY WAIVER SERVICES	0	0	0.00	0	0	0.00	9917	468763	6515,017.37
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	0	0	0.00	2205	115880	1953,444.00
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	10987	12330	3152,193.38
UNASSIGNED	0	0	0.00	0	0	0.00	17	0	403,918.67
* A L L C A T E G O R I E S *	0	0	0.00	69	571	16,710.91	402126	937267	279910,685.93

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