

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	1843	451,344.05
OUTPATIENT	45	551	14,404.51	0	0	0.00	3876	75247	515,397.88
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	164	2533	77,484.58
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	4692	139231	12050,852.97
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	5	122	26,196.52
HOME HEALTH	0	0	0.00	0	0	0.00	2610	49242	1861,673.58
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	96	182	16,218.47	0	0	0.00	5893	30519	317,609.69
CLINIC SERVICES	25	32	6,130.57	0	0	0.00	446	307	27,117.41
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	19	73	1,542.29	0	0	0.00	755	162	2,097.66
HABILITATION SERVICES	0	0	0.00	0	0	0.00	48	1275	79,948.72
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	2	3	376.73	0	0	0.00	278	331	30,949.21
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	48	120	2,358.65	0	0	0.00	2888	5036	60,754.29
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	208	5,324.95	0	0	0.00	4	4	366.69
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	2	76.80	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	1	1	2,507.00
PATIENT MANAGEMENT	108	108	216.00	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	4	693.48	0	0	0.00	2854	179645	287,953.55
OTHER PRACTITIONER	2	5	395.41	0	0	0.00	372	966	18,102.71
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	44	6,095.75	0	0	0.00	359	428	74,984.45
OPTOMETRIST	8	8	533.74	0	0	0.00	539	845	18,933.39

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	410	1171	6,050.83
PODIATRIC	0	0	0.00	0	0	0.00	582	943	9,282.88
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	49	3,437.97
PSYCHIATRIC	0	0	0.00	0	0	0.00	199	328	10,197.35
RESIDENTIAL CARE FACILITY	0	0	0.00	0	0	0.00	295	8997	63,466.43
MR WAIVER SERVICE	0	0	0.00	0	0	0.00	76	4972	235,598.38
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	3882	158083	2399,628.24
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	96	108	27,363.94
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 *	208	1340	54,367.35	0	0	0.00	14512	662388	18659,300.37

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	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	1591	9495	7222,653.52	610	1817	2868,291.13
OUTPATIENT	1	2	13.34	15389	370527	5442,752.99	8539	154284	3661,003.75
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	186	4972	2181,471.85	0	0	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	628	18461	2049,176.98	0	0	0.00
INTER CARE MENTAL RETARDA	0	0	0.00	9	223	80,250.47	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	3822	80952	2484,946.50	57	572	40,540.98
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	1	1	4.34	23937	106657	3708,773.75	15517	31127	2739,598.82
CLINIC SERVICES	0	0	0.00	3120	4070	542,230.49	2754	3635	513,702.40
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	0	0	0.00	3175	6074	98,219.24	3340	8522	233,497.26
HABILITATION SERVICES	0	0	0.00	2650	72473	3678,232.82	30	695	37,053.05
REMEDIAL SERVICES	0	0	0.00	891	26091	459,366.45	283	5611	106,916.60
REHAB SUPPORT SERVICES	0	0	0.00	1	0	451.06	0	0	0.00
AMBULANCE SERVICES	0	0	0.00	857	1062	120,143.82	230	231	30,224.63
LOCAL EDUCATION AGENCY	0	0	0.00	458	78855	1224,551.90	3	261	1,220.81

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	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	16	122	1,627.52	0	0	0.00
PRESCRIBED DRUGS	1	1	4.77	24928	105357	8044,281.74	20576	56205	2584,686.53
DRUG CAPITATION	0	0	0.00	0	0	0.00	0	0	0.00
INDIAN HEALTH SERVICES	0	0	0.00	2	2	536.00	0	0	0.00
FAMILY PLANNING SERVICES	0	0	0.00	97	108	10,416.25	4690	5542	473,421.59
IOWA PLAN PROGRAM	1	1	58.49	50930	52346	3867,045.21	40845	44656	1393,958.32
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	122	170	6,897.20	45	49	2,927.10
HMO SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PACE SERVICES	0	0	0.00	26	28	86,404.50	0	0	0.00
PATIENT MANAGEMENT	0	0	0.00	1	1	2.00	25506	25526	51,052.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	655	1759	178,775.42	202	495	15,820.72
MEDICAL SUPPLIES	0	0	0.00	9313	731916	1791,449.98	969	24662	155,485.86
OTHER PRACTITIONER	0	0	0.00	2463	29482	505,362.51	1761	3704	211,925.06
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	1	1	130.77	3649	4585	790,783.26	3147	4245	844,418.40
OPTOMETRIST	1	1	114.44	2248	2972	141,609.05	1362	1665	117,306.33

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	1	1	3.43	2236	5138	75,831.28	1708	3784	125,968.36
PODIATRIC	0	0	0.00	1027	2171	62,368.26	219	308	38,161.07
PHYSICAL DISABILITIES SVCS	0	0	0.00	523	19672	260,310.58	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	309	13436	480,416.65	0	0	0.00
PSYCHIATRIC	0	0	0.00	2638	4302	141,027.99	31	39	3,793.54
RESIDENTIAL CARE FACILITY	0	0	0.00	1243	34987	272,396.85	0	0	0.00
MR WAIVER SERVICE	0	0	0.00	975	58663	2743,247.06	1	0	507.00
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	30	1541	26,830.55	8	555	8,562.13
AIDS WAIVER SERVICES	0	0	0.00	12	1118	12,707.17	0	0	0.00
ELDERLY WAIVER SERVICES	0	0	0.00	40	1401	29,997.90	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	1876	88007	1534,711.31	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	1144	1223	307,801.90	10	11	4,669.04
UNASSIGNED	0	0	0.00	3	0	0.00	5	0	0.00
* A L L C A T E G O R I E S *	2	8	329.58	55337	1940419	50666,059.98	51546	378201	16263,698.48

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	295	1696	1920,497.42	321	6041	1835,770.50	1698	8830	14471,763.11
OUTPATIENT	7234	65884	1847,281.13	2106	30664	639,450.90	11956	158102	3287,313.60
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	4	15	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	2	15	1,883.25
INTER CARE MENTAL RETARDA	0	0	0.00	0	0	0.00	1	0	2899,117.00-
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	0	0	0.00
HOME HEALTH	628	1976	69,353.29	122	399	18,108.78	1060	3836	206,251.32
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	19371	31270	1944,893.72	4527	8140	605,538.98	31744	60904	4340,725.61
CLINIC SERVICES	3526	4244	569,731.58	949	1272	166,585.86	6269	8466	1285,908.18
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	1303	2643	43,636.93	441	1306	29,664.05	2997	8762	167,234.23
HABILITATION SERVICES	1	0	186.48	21	271	21,216.45	4	102	4,983.65
REMEDIAL SERVICES	2541	67832	1219,739.40	785	21270	356,489.03	2352	57281	998,536.67
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	1	0	3,369.89-
AMBULANCE SERVICES	117	115	16,634.08	66	69	9,651.60	213	219	35,687.09
LOCAL EDUCATION AGENCY	110	21470	170,324.54	32	8013	66,683.92	129	24690	192,754.36

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	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	20	72	1,459.30	1	3	38.70	29	134	2,047.57
PRESCRIBED DRUGS	17549	29815	1581,286.95	4856	10904	571,358.68	26598	45259	2303,190.97
DRUG CAPITATION	0	0	0.00	0	0	0.00	0	0	0.00
INDIAN HEALTH SERVICES	2	2	536.00	1	1	268.00	33	34	9,112.00
FAMILY PLANNING SERVICES	678	860	66,902.03	196	319	21,685.93	360	394	41,279.24
IOWA PLAN PROGRAM	69864	74161	737,948.26	15789	17147	349,494.77	102517	111760	1347,642.46
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	2096	2389	279,914.31	363	423	63,869.12	3298	3606	685,673.73
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	46110	46140	92,280.00	9703	9705	19,410.00	70761	70778	141,556.00
HEALTH INS PREMIUM PAYMENT	288	868	18,770.38	56	147	5,662.57	1961	6135	156,716.67
MEDICAL SUPPLIES	748	14170	95,271.54	191	4965	31,774.85	1050	27100	146,219.34
OTHER PRACTITIONER	2271	9932	224,025.36	535	1983	59,040.49	3659	12932	371,401.71
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	4317	5082	776,641.41	1091	1368	258,353.15	6717	7836	1170,601.75
OPTOMETRIST	1579	1815	114,965.70	472	555	37,059.50	2353	2692	172,494.74

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	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	806	1423	44,162.14	257	504	18,285.60	1540	2970	88,756.10
PODIATRIC	59	70	8,773.98	23	29	3,743.68	117	142	12,309.65
PHYSICAL DISABILITIES SVCS	0	0	0.00	0	0	0.00	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	1	2	466.94	1	4	315.79
PSYCHIATRIC	13	14	1,153.89	14	72	4,999.47	43	61	7,309.37
RESIDENTIAL CARE FACILITY	0	0	0.00	1	211	1,900.88	2	22	151.64
MR WAIVER SERVICE	0	0	0.00	0	0	0.00	5	8	8,387.59-
CHILDRENS MENTAL HEALTH SVC	38	2233	42,055.33	80	4372	76,603.49	43	2577	46,473.31
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	3	32	54.34-
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	0	0	0.00	2	146	3,693.76
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	43	42	18,258.31	85	89	37,296.73	52	53	23,272.53
UNASSIGNED	3	2-	0.00	1	0	0.00	4	0	566,686.39
* A L L C A T E G O R I E S *	76517	386216	11906,683.46	17084	130244	5310,472.62	109283	625897	29379,016.97

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	28	221	152,976.28	566	2770	724,810.57	33	170	75,524.67
OUTPATIENT	796	11327	214,792.40	4785	109279	687,410.22	449	9044	214,938.68
CHILD PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
CHILD DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
ADULT PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
ADULT DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
SKILLED NURSING FACILITY	3	118	63,487.35	325	5404	44,435.33	3	34	15,150.00
INTERMEDIATE CARE FACILITY	0	0	0.00	6823	201728	20888,773.09	1	90	10,420.73
INTER CARE MENTAL RETARDA	6	228	87,299.08	2	1-	339.88-	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	27	873	257,372.89	0	0	0.00
HOME HEALTH	103	4084	136,907.02	3731	69783	3129,310.89	53	497	21,475.80
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	2217	3306	176,444.68	6718	34787	422,182.52	749	2063	86,762.56
CLINIC SERVICES	381	471	58,253.90	398	316	27,138.49	115	134	19,145.09
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	214	724	11,430.97	1006	392	4,864.37	126	292	6,720.32
HABILITATION SERVICES	13	77	4,726.73	39	993	42,758.39	19	394	21,435.78
REMEDIAL SERVICES	2492	148809	1780,643.61	7	122	2,062.30	8	166	4,404.22
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	24	24	3,908.74	422	549	45,451.22	18	19	2,518.75
LOCAL EDUCATION AGENCY	101	26815	294,052.51	21	2335	56,932.65	0	0	0.00

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	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	9	16	236.16	1	21	249.69	0	0	0.00
PRESCRIBED DRUGS	4791	12021	931,847.20	9675	21090	385,415.68	996	3337	165,946.38
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	2	536.00
FAMILY PLANNING SERVICES	27	33	3,480.92	0	0	0.00	18	20	1,300.42
IOWA PLAN PROGRAM	10013	10293	1064,893.90	2295	2346	159,389.27	1565	1733	59,773.05
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	151	160	6,762.49	3	3	116.07	0	0	0.00
HMO SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PACE SERVICES	0	0	0.00	32	31	87,613.00	0	0	0.00
PATIENT MANAGEMENT	84	84	168.00	0	0	0.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	170	455	19,979.90	31	75	10,408.77	3	5	218.70
MEDICAL SUPPLIES	244	29402	85,301.13	4678	405557	555,436.70	153	6294	16,508.83
OTHER PRACTITIONER	481	4319	80,174.64	536	1825	33,502.60	104	246	13,086.80
FAMILY CENTERED PROGRAM	0	0	0.00	0	0	0.00	0	0	0.00
FAMILY PRESERVATION	0	0	0.00	0	0	0.00	0	0	0.00
TREATMENT FOSTER FAMILY CARE	0	0	0.00	0	0	0.00	0	0	0.00
GROUP TREATMENT THERAPY	0	0	0.00	0	0	0.00	0	0	0.00
DENTAL	782	915	128,277.25	772	935	142,849.29	157	200	35,520.77
OPTOMETRIST	410	463	29,510.85	696	934	23,796.59	87	113	6,187.29

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

	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	123	191	5,643.29	290	625	4,620.46	69	133	4,219.47
PODIATRIC	20	28	2,225.56	987	1991	21,014.45	30	230	2,705.34
PHYSICAL DISABILITIES SVCS	0	0	0.00	221	8949	115,370.32	0	0	0.00
BRAIN INJ WAIVER SERVICES	35	1203	33,897.76	426	17665	625,975.29	0	0	0.00
PSYCHIATRIC	22	33	3,105.09	257	420	13,306.94	28	37	1,409.12
RESIDENTIAL CARE FACILITY	0	0	0.00	7	169	2,409.54	0	0	0.00
MR WAIVER SERVICE	191	5504	228,121.00	5	67	5,323.47	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	2860	30,412.99	0	0	0.00
ELDERLY WAIVER SERVICES	0	0	0.00	6212	271412	3725,486.32	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	34	1831	36,816.00	4	42	797.45	0	0	0.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	204	218	54,533.51	144	159	39,989.26	2	3	722.20
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 *	10178	263373	5699,897.92	14567	1166506	32316,647.20	1868	25256	786,630.97

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	146	617	880,558.62	39	365	141,402.93	4	12	22,214.33
OUTPATIENT	530	15098	453,539.44	1005	14955	338,847.76	106	4175	134,518.08
CHILD PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
CHILD DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
ADULT PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
ADULT DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
SKILLED NURSING FACILITY	3	64	13,677.00	0	0	0.00	1	5	6,221.80
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	23	305	18,088.75	71	114	1,787.14	3	58	6,965.65
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	792	3714	185,003.43	2895	4095	241,545.83	167	709	146,378.26
CLINIC SERVICES	73	134	21,579.43	583	701	90,639.72	14	20	2,876.76
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	46	162	3,627.91	182	478	9,526.94	23	60	2,453.02
HABILITATION SERVICES	8	216	7,718.66	0	0	0.00	0	0	0.00
REMEDIAL SERVICES	1	32	318.08	425	11772	210,979.61	0	0	0.00
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	45	50	7,781.58	22	22	3,235.35	5	5	451.38
LOCAL EDUCATION AGENCY	0	0	0.00	32	3909	34,744.50	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	322	1453	48,466.60	3428	6096	460,688.88	204	760	61,657.99
DRUG CAPITATION	0	0	0.00	0	0	0.00	0	0	0.00
INDIAN HEALTH SERVICES	1	3	626.05	0	0	0.00	0	0	0.00
FAMILY PLANNING SERVICES	7	7	277.80	77	83	9,377.01	1	1	78.96
IOWA PLAN PROGRAM	0	0	0.00	14090	14944	164,991.46	246	246	25,854.97
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	71	73	2,658.39	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	10244	10244	20,488.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	13	35	1,871.22	0	0	0.00
MEDICAL SUPPLIES	70	4564	22,021.70	108	4599	16,575.37	20	646	3,753.87
OTHER PRACTITIONER	89	213	13,404.33	403	3174	50,846.25	21	48	3,330.41
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	54	76	24,576.43	1317	1550	254,052.51	23	27	7,493.46
OPTOMETRIST	22	25	1,382.48	505	592	39,483.38	11	11	898.75

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	18	32	1,021.19	279	476	15,127.54	8	32	1,059.44
PODIATRIC	9	13	944.94	25	30	3,535.45	4	5	257.07
PHYSICAL DISABILITIES SVCS	0	0	0.00	0	0	0.00	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	2	15	548.75	0	0	0.00
PSYCHIATRIC	34	71	4,200.93	4	5	564.92	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	1	2	51.70	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	7	668	9,574.61	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	9	9	3,396.92	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 *	988	26849	1708,815.35	14021	79006	2126,542.14	257	6820	426,464.20

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	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	1	1	8,745.10	0	0	0.00	0	0	0.00
OUTPATIENT	5	186	1,872.10	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	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	16	44	3,627.65	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	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	45	45	3,987.89	0	0	0.00	0	0	0.00
DRUG CAPITATION	0	0	0.00	0	0	0.00	0	0	0.00
INDIAN HEALTH SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
FAMILY PLANNING SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
IOWA PLAN PROGRAM	0	0	0.00	0	0	0.00	0	0	0.00
MANAGED SUBSTANCE ABUSE	0	0	0.00	0	0	0.00	0	0	0.00
MENTAL HEALTH ACCESS PLAN	0	0	0.00	0	0	0.00	0	0	0.00
EPSDT SCREENING	0	0	0.00	0	0	0.00	0	0	0.00
HMO SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PACE SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PATIENT MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEDICAL SUPPLIES	0	0	0.00	0	0	0.00	0	0	0.00
OTHER PRACTITIONER	0	0	0.00	0	0	0.00	0	0	0.00
FAMILY CENTERED PROGRAM	0	0	0.00	0	0	0.00	0	0	0.00
FAMILY PRESERVATION	0	0	0.00	0	0	0.00	0	0	0.00
TREATMENT FOSTER FAMILY CARE	0	0	0.00	0	0	0.00	0	0	0.00
GROUP TREATMENT THERAPY	0	0	0.00	0	0	0.00	0	0	0.00
DENTAL	0	0	0.00	0	0	0.00	0	0	0.00
OPTOMETRIST	0	0	0.00	0	0	0.00	0	0	0.00

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	OTHER ICARE ADULT 19-64			OTHER ICARE ADULT OB			OTHER ICARE CHRN DSH		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
CHIROPRACTIC	0	0	0.00	0	0	0.00	0	0	0.00
PODIATRIC	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICAL DISABILITIES SVCS	0	0	0.00	0	0	0.00	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PSYCHIATRIC	1	11	603.21	0	0	0.00	0	0	0.00
RESIDENTIAL CARE FACILITY	1	31	801.35	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	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 *	49	318	19,637.30	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	8	218	37,281.20	0	0	0.00	6	18	21,669.86
OUTPATIENT	34	353	4,638.85	5	87	408.80	71	1586	28,435.47
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	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	4	59	2,402.57	0	0	0.00	0	0	0.00
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	106	153	5,841.99	3	2	65.20	133	589	25,733.12
CLINIC SERVICES	12	13	1,181.92	0	0	0.00	29	36	5,069.31
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	6	32	290.12	0	0	0.00	17	37	1,206.22
HABILITATION SERVICES	2	44	2,034.56	0	0	0.00	6	286	13,039.07
REMEDIAL SERVICES	152	4715	85,138.78	0	0	0.00	26	685	14,852.05
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	1	1	0.00	0	0	0.00	4	4	326.94
LOCAL EDUCATION AGENCY	15	3063	26,699.82	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	330	1093	90,134.28	0	0	0.00	153	342	15,115.25
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	14	16	1,593.27
IOWA PLAN PROGRAM	386	391	46,729.34	0	0	0.00	383	395	58,217.74
MANAGED SUBSTANCE ABUSE	0	0	0.00	0	0	0.00	0	0	0.00
MENTAL HEALTH ACCESS PLAN	0	0	0.00	0	0	0.00	0	0	0.00
EPSDT SCREENING	5	7	201.66	0	0	0.00	2	1	27.59
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	2	2	4.00	0	0	0.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	46	118	7,964.61	0	0	0.00	1	2	56.76
MEDICAL SUPPLIES	16	937	2,687.08	0	0	0.00	5	34	306.89
OTHER PRACTITIONER	29	3675	21,287.31	0	0	0.00	18	22	1,903.94
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	33	37	9,035.78	0	0	0.00	16	18	1,360.84
OPTOMETRIST	20	23	1,276.83	0	0	0.00	9	13	1,022.22

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 UNITS OF
 SERVED SERVICE

AMOUNT
 PAID

RECIPS UNITS OF
 SERVED SERVICE

AMOUNT
 PAID

RECIPS UNITS OF
 SERVED SERVICE

AMOUNT
 PAID

CHIROPRACTIC	10	14	372.28	0	0	0.00	11	25	910.45
PODIATRIC	3	4	321.05	0	0	0.00	1	1	26.04
PHYSICAL DISABILITIES SVCS	0	0	0.00	0	0	0.00	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PSYCHIATRIC	2	3	189.12	1	1	29.05	1	2	7.88
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	1	9	273.33
CHILDRENS MENTAL HEALTH SVC	314	14753	287,427.19	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	353	360	159,576.79	0	0	0.00	1	1	241.16
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 *	365	30068	792,717.13	3	90	503.05	358	4122	191,395.40

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	19	207	296,272.26	151	813	554,705.13	0	0	0.00
OUTPATIENT	285	5822	110,599.88	2648	61416	525,558.28	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	2	10	3,249.44	11	104	1,950.17	0	0	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	6	118	14,474.55	0	0	0.00
INTER CARE MENTAL RETARDA	0	0	0.00	2068	72022	33656,967.59	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	0	0	0.00
HOME HEALTH	20	162	10,593.37	1246	42948	1476,747.59	0	0	0.00
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	525	1160	91,011.37	4456	12245	311,250.27	0	0	0.00
CLINIC SERVICES	104	137	19,594.67	300	404	46,476.72	0	0	0.00
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	73	259	4,745.38	479	662	8,524.87	0	0	0.00
HABILITATION SERVICES	5	107	4,826.90	52	1736	74,898.05	0	0	0.00
REMEDIAL SERVICES	46	1903	28,073.89	121	3259	59,813.22	0	0	0.00
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	16	20	3,073.56	110	132	14,044.55	0	0	0.00
LOCAL EDUCATION AGENCY	2	280	3,959.84	521	112739	1755,600.26	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	11	97	1,252.29	0	0	0.00
PRESCRIBED DRUGS	869	3877	205,639.08	6202	19978	1357,980.32	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	3	3	337.40	10	15	839.62	0	0	0.00
IOWA PLAN PROGRAM	1430	1504	153,225.33	10981	11044	737,126.32	0	0	0.00
MANAGED SUBSTANCE ABUSE	0	0	0.00	0	0	0.00	0	0	0.00
MENTAL HEALTH ACCESS PLAN	0	0	0.00	0	0	0.00	0	0	0.00
EPSDT SCREENING	3	3	85.86	25	32	1,244.69	0	0	0.00
HMO SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PACE SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PATIENT MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	6	13	1,015.08	622	1645	195,926.74	0	0	0.00
MEDICAL SUPPLIES	134	8058	31,404.10	2359	332525	535,322.52	0	0	0.00
OTHER PRACTITIONER	54	216	9,168.20	779	25125	440,884.59	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	85	111	22,360.26	1190	1357	157,337.52	0	0	0.00
OPTOMETRIST	62	68	5,952.59	488	583	25,439.31	0	0	0.00

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	STATE ONLY			FED CNTY - FED CNTY STATE			FEDERAL MEDICAID ONLY AGED		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
CHIROPRACTIC	58	107	3,327.97	302	571	8,549.84	0	0	0.00
PODIATRIC	13	14	905.87	469	701	16,469.12	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	273	12554	437,100.19	0	0	0.00
PSYCHIATRIC	6	15	1,223.69	479	682	20,891.92	0	0	0.00
RESIDENTIAL CARE FACILITY	0	0	0.00	15	362	3,446.00	0	0	0.00
MR WAIVER SERVICE	3	67	2,526.65	8659	495246	22498,717.89	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	3	167	3,967.59	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	224	3,223.06	2	27	406.35	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	3	122	3,001.73	149	6802	144,534.86	0	0	0.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	6	6	2,043.42	8186	8847	2196,139.66	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 *	1481	24642	1025,408.44	11822	1226793	67281,157.00	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 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	5907	35134	31686,480.68
OUTPATIENT	0	0	0.00	13	83	1,570.82	59415	1088672	18124,748.88
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	698	13259	2407,127.52
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	12110	359643	35015,581.57
INTER CARE MENTAL RETARDA	0	0	0.00	0	0	0.00	2084	72472	30925,060.26
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	32	995	283,569.41
HOME HEALTH	0	0	0.00	0	0	0.00	13444	254987	9485,153.23
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	0	0	0.00	15	18	1,300.26	118116	331685	15370,510.52
CLINIC SERVICES	0	0	0.00	7	8	945.89	18986	24400	3404,308.39
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	0	0	0.00	1	2	43.96	14109	30642	629,325.74
HABILITATION SERVICES	0	0	0.00	0	0	0.00	2879	78669	3993,059.31
REMEDIAL SERVICES	0	0	0.00	3	168	3,601.68	9544	349716	5330,935.59
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	2	0	2,918.83-
AMBULANCE SERVICES	0	0	0.00	0	0	0.00	2422	2856	324,459.23
LOCAL EDUCATION AGENCY	0	0	0.00	0	0	0.00	1415	282430	3827,525.11

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	86	465	6,911.23
PRESCRIBED DRUGS	0	0	0.00	7	10	362.19	123001	322799	18875,164.32
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	42	46	12,150.05
FAMILY PLANNING SERVICES	0	0	0.00	0	0	0.00	6169	7401	630,990.44
IOWA PLAN PROGRAM	0	0	0.00	84	103	1,062.27	321074	343282	10173,102.80
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	1	1	19.36	6168	6919	1050,474.37
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	60	176,524.50
PATIENT MANAGEMENT	0	0	0.00	45	45	90.00	162558	162633	325,266.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	0	0	0.00	4054	11752	613,187.54
MEDICAL SUPPLIES	0	0	0.00	0	0	0.00	22533	1775078	3778,166.79
OTHER PRACTITIONER	0	0	0.00	3	5	233.71	13493	97872	2058,076.03
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	7	11	3,011.86	23663	28826	4707,884.91
OPTOMETRIST	0	0	0.00	1	1	53.86	10865	13379	738,021.04

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 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	8067	17197	403,909.67
PODIATRIC	0	0	0.00	0	0	0.00	3576	6680	183,044.41
PHYSICAL DISABILITIES SVCS	0	0	0.00	0	0	0.00	738	28621	375,680.90
BRAIN INJ WAIVER SERVICES	0	0	0.00	0	0	0.00	1019	44928	1582,159.34
PSYCHIATRIC	0	0	0.00	0	0	0.00	3760	6096	214,013.48
RESIDENTIAL CARE FACILITY	0	0	0.00	0	0	0.00	1555	44779	344,572.69
MR WAIVER SERVICE	0	0	0.00	0	0	0.00	9885	564538	25704,964.89
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	0	0	0.00	523	26866	501,494.20
AIDS WAIVER SERVICES	0	0	0.00	0	0	0.00	45	3978	43,120.16
ELDERLY WAIVER SERVICES	0	0	0.00	0	0	0.00	9971	431179	6158,687.53
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	0	0	0.00	2064	96950	1723,555.11
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	10331	11129	2875,305.37
UNASSIGNED	0	0	0.00	0	0	0.00	20	2-	566,686.39
* A L L C A T E G O R I E S *	0	0	0.00	85	455	12,295.86	380531	6979011	244628,040.77

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