

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	4	4,179.90	0	0	0.00	311	1115	388,555.40
OUTPATIENT	44	306	13,966.16	0	0	0.00	3443	105718	295,578.77
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	589	1081	77,383.60
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	6002	150228	21497,840.13
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	93	16,164.09
HOME HEALTH	0	0	0.00	0	0	0.00	2722	95611	1483,194.26
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	71	102	11,851.08	0	0	0.00	5555	30992	331,946.48
CLINIC SERVICES	27	30	4,502.59	0	0	0.00	420	304	25,881.80
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	9	41	705.89	0	0	0.00	676	182	2,574.35
HABILITATION SERVICES	0	0	0.00	0	0	0.00	52	2026	108,465.07
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	135.04	0	0	0.00	245	291	26,803.36
LOCAL EDUCATION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	FEDERAL ONLY			REFUGEE TXXI			AGED		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
EARLY ACCESS SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PRESCRIBED DRUGS	46	96	3,777.44	0	0	0.00	2895	4922	62,322.54
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	164	201	5,130.12	0	0	0.00	5	5	478.24
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	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	107	109	218.00	0	0	0.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEDICAL SUPPLIES	1	1	10.18	0	0	0.00	2763	159960	240,024.00
OTHER PRACTITIONER	4	9	912.77	0	0	0.00	315	964	14,275.47
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	23	38	3,899.82	0	0	0.00	327	389	66,980.42
OPTOMETRIST	3	3	164.11	0	0	0.00	479	717	17,117.40

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	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	372	896	9,494.90
PODIATRIC	1	2	228.28	0	0	0.00	683	1122	12,606.17
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	51	3,485.37
PSYCHIATRIC	0	0	0.00	0	0	0.00	152	239	8,134.79
RESIDENTIAL CARE FACILITY	0	0	0.00	0	0	0.00	280	9300	69,249.42
ID WAIVER SERVICE	0	0	0.00	0	0	0.00	77	4762	237,172.70
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	3774	153920	2218,551.05
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	82	92	22,811.26
UNASSIGNED	0	0	0.00	0	0	0.00	2	0	0.00
* A L L C A T E G O R I E S *	216	943	49,681.38	0	0	0.00	15273	724980	27237,091.04

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	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	1264	7864	7033,481.21	616	1601	2170,415.70
OUTPATIENT	1	17	221.40	11895	294011	4155,722.21	8125	140870	3473,795.11
CHILD PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
CHILD DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
ADULT PART HOSP	0	0	0.00	1	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	345	2390	1305,210.67	3	9	10,140.36
INTERMEDIATE CARE FACILITY	0	0	0.00	839	18145	2766,243.88	2	0	50.32
INTER CARE MENTAL RETARDA	0	0	0.00	6	161	57,757.97	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	3509	76338	2463,689.30	71	621	47,026.14
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	1	3	229.70	22782	105174	3269,303.98	14367	26842	2243,051.38
CLINIC SERVICES	1	1	137.72	2738	4241	458,890.24	2585	3507	475,156.93
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	0	0	0.00	2735	5533	90,944.09	2582	7437	176,254.49
HABILITATION SERVICES	0	0	0.00	2625	73010	3667,872.19	29	640	34,419.14
REMEDIAL SERVICES	0	0	0.00	849	26320	445,701.93	321	6398	75,266.49
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	0	0	0.00	794	923	103,850.62	239	245	33,118.06
LOCAL EDUCATION AGENCY	0	0	0.00	356	72250	917,337.46	3	414	2,110.72

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	36	294	3,421.12	0	0	0.00
PRESCRIBED DRUGS	0	0	0.00	24504	102169	7632,147.13	20125	54731	2496,377.32
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	2	2	536.00
FAMILY PLANNING SERVICES	0	0	0.00	102	118	10,057.06	4814	5605	472,033.21
IOWA PLAN PROGRAM	1	2	211.30	51542	53190	3925,896.12	41262	45441	1422,633.85
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	141	172	8,287.53	46	51	4,215.62
HMO SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PACE SERVICES	0	0	0.00	26	26	80,738.50	0	0	0.00
PATIENT MANAGEMENT	0	0	0.00	0	0	0.00	25703	25830	51,660.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	637	1357	150,407.98	175	370	13,576.24
MEDICAL SUPPLIES	1	5	534.80	8659	625131	1510,656.16	792	18058	125,776.14
OTHER PRACTITIONER	0	0	0.00	2212	20603	384,052.53	1585	2748	166,563.65
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	198.67	2840	3420	563,129.96	2565	3287	607,864.44
OPTOMETRIST	1	1	155.31	1863	2488	120,185.83	1258	1529	109,194.68

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	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	2128	5066	77,231.09	1394	2790	95,877.33
PODIATRIC	0	0	0.00	1147	2016	60,708.75	181	224	21,629.32
PHYSICAL DISABILITIES SVCS	0	0	0.00	496	19512	259,019.46	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	319	14747	558,717.65	1	10	423.65
PSYCHIATRIC	0	0	0.00	2370	4046	144,346.89	29	44	2,099.90
RESIDENTIAL CARE FACILITY	0	0	0.00	1211	39573	332,862.11	0	0	0.00
ID WAIVER SERVICE	0	0	0.00	969	63875	2626,516.57	1	0	0.00
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	29	1569	28,584.28	7	390	6,708.62
AIDS WAIVER SERVICES	0	0	0.00	13	794	9,187.69	0	0	0.00
ELDERLY WAIVER SERVICES	0	0	0.00	35	1390	25,590.86	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	1946	91081	1506,689.02	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	1024	1166	283,211.89	8	8	3,510.00
UNASSIGNED	0	0	0.00	4	0	0.00	2	0	0.00
* A L L C A T E G O R I E S *	3	30	1,688.90	55524	1740163	47037,651.93	51301	349702	14341,484.81

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	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	302	2099	2456,952.83	326	5634	1521,893.46	1661	8456	9014,906.48
OUTPATIENT	6247	61690	1517,473.27	2027	32531	621,153.18	11100	154559	2408,928.99
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	9	11	424.80
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	6	0	1,652.90
INTER CARE MENTAL RETARDA	0	0	0.00	0	0	0.00	1	0	30,607.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	0	0	0.00
HOME HEALTH	471	1407	40,054.09	100	287	11,706.01	857	2753	535.68-
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	16818	27175	1683,019.80	4114	8168	522,226.60	28072	56579	3770,991.97
CLINIC SERVICES	2952	3633	509,418.94	867	1181	153,837.76	5886	8198	924,655.10
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	944	2226	30,498.73	374	1262	23,504.86	2448	7474	135,366.05
HABILITATION SERVICES	0	0	0.00	17	265	12,481.95	2	10	1,604.89
REMEDIAL SERVICES	2495	67614	1214,720.88	766	21795	372,816.36	2309	61259	1075,781.34
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	1	0	6,067.17-
AMBULANCE SERVICES	100	92	13,999.99	75	76	13,386.15	180	172	26,154.83
LOCAL EDUCATION AGENCY	98	29872	231,931.61	29	9808	81,873.16	112	25279	214,887.36

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	54	153	1,768.23	10	39	430.32	47	217	2,532.58
PRESCRIBED DRUGS	16110	27443	1577,888.20	4577	10332	595,928.71	24663	42881	2399,636.50
DRUG CAPITATION	0	0	0.00	0	0	0.00	0	0	0.00
INDIAN HEALTH SERVICES	4	4	1,072.00	0	0	0.00	23	29	7,772.00
FAMILY PLANNING SERVICES	721	803	67,934.59	181	294	19,383.19	403	440	36,890.30
IOWA PLAN PROGRAM	70388	75140	747,535.56	16035	17518	362,481.94	104464	115240	2396,867.61
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	2385	2674	330,077.14	319	361	58,750.07	3793	4125	681,860.06
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	46130	46326	92,652.00	9874	9908	19,816.00	72080	72411	144,822.00
HEALTH INS PREMIUM PAYMENT	280	697	15,749.70	54	120	4,207.06	1862	4731	123,160.67
MEDICAL SUPPLIES	705	11965	91,520.64	162	3503	25,722.42	1004	24334	200,893.69
OTHER PRACTITIONER	1999	8166	223,383.79	542	2728	58,402.54	3593	15448	390,085.20
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	3416	3895	546,711.36	944	1123	172,321.44	5585	6411	969,106.10
OPTOMETRIST	1303	1447	92,873.93	404	474	31,982.28	1942	2152	136,875.79

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	675	1122	34,799.39	211	422	14,362.28	1227	2178	64,819.19
PODIATRIC	63	74	8,015.79	24	32	3,234.10	98	124	9,781.95
PHYSICAL DISABILITIES SVCS	0	0	0.00	0	0	0.00	1	0	21,103.54
BRAIN INJ WAIVER SERVICES	0	0	0.00	0	0	0.00	2	1	5,813.32-
PSYCHIATRIC	11	21	1,976.39	12	18	1,562.46	43	60	4,937.98
RESIDENTIAL CARE FACILITY	0	0	0.00	1	0	727.03	1	0	0.00
ID WAIVER SERVICE	0	0	0.00	0	0	0.00	6	90	36,010.45-
CHILDRENS MENTAL HEALTH SVC	36	1862	35,211.31	80	4120	65,182.16	49	3007	50,301.00
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	4	33	78,534.58
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	0	0	0.00	1	0	1,575.92-
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	34	34	14,279.25	82	92	34,262.64	47	52	19,186.52
UNASSIGNED	0	0	0.00	0	0	0.00	1	0	383,212.49
* A L L C A T E G O R I E S *	76445	377634	11581,519.41	17155	132091	4803,636.13	110429	618714	25678,338.92

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	FOSTER - PRESUB - SUB ADOPTS			INTERMEDIATE CARE FACILITY			MEDICALLY NEEDY NO SPEND DN		
	RECIPES SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPES SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPES SERVED	UNITS OF SERVICE	AMOUNT PAID
INPATIENT	38	261	153,566.00	375	1645	468,012.67	47	220	281,153.57
OUTPATIENT	735	12502	215,643.77	5035	281030	368,875.64	388	7050	156,433.11
CHILD PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
CHILD DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
ADULT PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
ADULT DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
SKILLED NURSING FACILITY	1	31	18,199.48	1223	3485	40,450.58	12	21	15,655.00
INTERMEDIATE CARE FACILITY	0	0	0.00	8906	188370	31101,782.33	8	42	4,932.57
INTER CARE MENTAL RETARDA	4	103	37,605.32	0	0	0.00	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	16	393	75,965.56	0	0	0.00
HOME HEALTH	100	4349	126,789.06	3829	125934	2442,431.46	45	580	19,755.42
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	1901	2753	149,229.16	6780	34407	474,304.80	716	2225	111,951.33
CLINIC SERVICES	360	456	52,717.56	361	417	15,491.73	115	133	18,328.22
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	204	810	13,056.74	889	383	4,980.87	92	222	4,226.01
HABILITATION SERVICES	11	148	10,397.09	33	707	30,923.54	20	314	19,561.33
REMEDIAL SERVICES	2608	145681	1715,271.69	7	108	1,717.44	10	254	5,092.80
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	16	16	2,320.97	390	500	44,749.55	20	21	2,550.42
LOCAL EDUCATION AGENCY	96	24740	225,261.15	11	714	29,645.09	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	25	122	1,539.97	0	0	0.00	0	0	0.00
PRESCRIBED DRUGS	4533	11311	1086,400.85	9437	20495	370,955.08	975	3202	156,048.23
DRUG CAPITATION	0	0	0.00	0	0	0.00	0	0	0.00
INDIAN HEALTH SERVICES	1	1	268.00	0	0	0.00	1	1	268.00
FAMILY PLANNING SERVICES	30	33	3,369.43	0	0	0.00	13	13	788.34
IOWA PLAN PROGRAM	9889	10272	1066,591.54	2309	2354	159,559.28	1552	1725	60,406.17
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	142	156	10,675.04	2	2	33.67	0	0	0.00
HMO SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PACE SERVICES	0	0	0.00	34	34	93,049.00	0	0	0.00
PATIENT MANAGEMENT	74	74	148.00	0	0	0.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	156	321	16,512.25	34	57	10,509.72	3	4	205.98
MEDICAL SUPPLIES	212	22133	51,806.54	4524	339859	543,997.84	135	6627	24,586.31
OTHER PRACTITIONER	458	4732	88,609.67	444	1894	44,369.17	80	130	7,475.38
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	680	763	110,415.19	547	618	94,594.87	110	145	24,226.00
OPTOMETRIST	301	327	19,324.21	521	722	20,611.54	62	90	4,504.53

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	108	140	4,366.14	286	608	8,035.57	65	124	3,601.13
PODIATRIC	15	17	683.69	1157	1624	26,618.72	25	32	1,343.72
PHYSICAL DISABILITIES SVCS	0	0	0.00	204	8675	103,170.63	0	0	0.00
BRAIN INJ WAIVER SERVICES	38	1460	51,019.57	429	17851	666,686.32	0	0	0.00
PSYCHIATRIC	19	26	3,104.52	251	448	17,225.42	25	33	1,020.70
RESIDENTIAL CARE FACILITY	3	33	594.62	5	122	635.90	0	0	0.00
ID WAIVER SERVICE	196	6540	258,789.41	4	47	3,065.66	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	32	2989	30,864.56	0	0	0.00
ELDERLY WAIVER SERVICES	0	0	0.00	6174	268548	3593,085.06	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	40	2449	43,872.53	9	304	3,682.67	0	0	0.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	176	207	48,859.72	112	125	31,962.09	1	1	243.75
UNASSIGNED	0	0	0.00	5	0	48.60	0	0	0.00
* A L L C A T E G O R I E S *	10239	252967	5587,008.88	15460	1304635	40922,092.63	1841	23209	924,358.02

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	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	158	952	1293,416.06	46	431	178,857.12	4	49	138,713.11
OUTPATIENT	438	13846	373,156.09	878	10003	300,279.94	91	1818	82,887.68
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	6	56	15,791.62	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	29	432	23,466.51	45	85	854.84	3	27	2,767.23
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	733	4173	203,683.34	2434	2803	200,240.50	164	631	156,163.30
CLINIC SERVICES	53	124	16,979.52	479	571	74,657.35	14	16	2,907.49
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	41	119	2,008.18	162	432	7,190.63	23	72	1,292.97
HABILITATION SERVICES	7	274	11,735.53	0	0	0.00	0	0	0.00
REMEDIAL SERVICES	1	24	226.56	409	11512	197,161.32	0	0	0.00
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	33	42	6,708.78	18	17	2,045.19	1	1	137.21
LOCAL EDUCATION AGENCY	0	0	0.00	27	6705	56,021.48	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	251	953	56,835.21	3289	5758	393,513.85	205	812	58,289.74
DRUG CAPITATION	0	0	0.00	0	0	0.00	0	0	0.00
INDIAN HEALTH SERVICES	1	3	804.00	0	0	0.00	0	0	0.00
FAMILY PLANNING SERVICES	0	0	0.00	76	84	7,268.63	1	1	131.24
IOWA PLAN PROGRAM	0	0	0.00	14309	15378	170,455.64	248	253	26,587.97
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	2	4	132.84	111	113	7,054.20	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	10303	10343	20,686.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	10	19	1,018.31	0	0	0.00
MEDICAL SUPPLIES	60	3172	15,372.16	94	3752	10,370.95	17	586	5,588.62
OTHER PRACTITIONER	53	92	5,996.82	342	1366	37,234.04	17	23	1,414.61
FAMILY CENTERED PROGRAM	0	0	0.00	0	0	0.00	0	0	0.00
FAMILY PRESERVATION	0	0	0.00	0	0	0.00	0	0	0.00
TREATMENT FOSTER FAMILY CARE	0	0	0.00	0	0	0.00	0	0	0.00
GROUP TREATMENT THERAPY	0	0	0.00	0	0	0.00	0	0	0.00
DENTAL	44	63	16,334.78	1221	1374	231,486.10	13	14	1,618.08
OPTOMETRIST	15	19	820.38	416	464	29,467.50	6	7	497.93

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	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	17	32	874.60	224	359	11,448.78	9	48	1,520.16
PODIATRIC	9	33	495.57	25	28	4,050.40	2	1	23.65
PHYSICAL DISABILITIES SVCS	0	0	0.00	0	0	0.00	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	2	45	1,907.59	0	0	0.00
PSYCHIATRIC	39	84	4,663.07	3	3	487.07	0	0	0.00
RESIDENTIAL CARE FACILITY	0	0	0.00	0	0	0.00	0	0	0.00
ID WAIVER SERVICE	0	0	0.00	2	22	514.11	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	8	491	6,610.00	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	1	1	237.51	11	14	4,074.16	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 *	919	24498	2049,739.13	14044	72172	1954,955.70	253	4359	480,540.99

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	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	0	2,934.85-	0	0	0.00	0	0	0.00
OUTPATIENT	13	269	9,444.45	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	14	27	4,766.86	0	0	0.00	0	0	0.00
CLINIC SERVICES	1	1	103.49	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	61	64	6,307.30	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	1	1	38.50	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	1	0	77.19	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	5	200.71	0	0	0.00	0	0	0.00
RESIDENTIAL CARE FACILITY	1	188	1,926.00	0	0	0.00	0	0	0.00
ID 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 *	64	555	19,929.65	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	10	54	7,669.46	1	0	801.00	4	11	10,981.33
OUTPATIENT	43	523	9,981.59	0	0	0.00	87	1781	26,393.41
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	2	4	562.50	0	0	0.00
INTER CARE MENTAL RETARDA	0	0	0.00	0	0	0.00	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	0	0	0.00
HOME HEALTH	1	6	216.00	1	30	105.56	0	0	0.00
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	89	121	5,682.00	0	0	0.00	139	237	20,857.99
CLINIC SERVICES	14	20	1,821.41	1	0	25.20	24	40	4,251.06
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	4	18	137.42	0	0	0.00	20	45	1,200.97
HABILITATION SERVICES	2	36	1,664.64	0	0	0.00	4	243	11,288.15
REMEDIAL SERVICES	190	5164	101,013.09	0	0	0.00	36	674	13,486.35
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	5	5	579.62
LOCAL EDUCATION AGENCY	16	7079	60,532.09	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	327	1072	91,294.45	0	0	0.00	156	351	23,046.67
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	15	16	1,689.08
IOWA PLAN PROGRAM	391	402	48,826.27	0	0	0.00	410	467	68,805.31
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	6	7	372.72	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	5	5	10.00	0	0	0.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	45	98	6,594.59	0	0	0.00	1	2	56.76
MEDICAL SUPPLIES	14	1055	996.21	0	0	0.00	2	4	196.47
OTHER PRACTITIONER	24	356	5,078.34	0	0	0.00	15	17	2,468.31
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	40	44	13,230.82	0	0	0.00	22	31	6,215.58
OPTOMETRIST	18	18	1,046.34	0	0	0.00	14	18	1,294.32

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	OTHER ICARE PMIC MHI 300%			OTHER ICARE MHI 300%			STATE ONLY		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
CHIROPRACTIC	11	35	703.20	0	0	0.00	12	30	1,068.39
PODIATRIC	1	2	335.54	0	0	0.00	1	1	93.55
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	1	128.24	0	0	0.00	2	2	568.83
RESIDENTIAL CARE FACILITY	0	0	0.00	0	0	0.00	0	0	0.00
ID WAIVER SERVICE	0	0	0.00	0	0	0.00	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	329	16022	296,595.27	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	14	210.00	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	330	332	142,298.71	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 *	361	32484	796,438.40	1	34	1,494.26	364	3975	194,542.15

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	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	106	161,444.61	119	692	432,890.91	0	0	0.00
OUTPATIENT	265	6589	137,942.82	1995	45191	347,931.98	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	40	122	2,444.44	0	0	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	39	82	13,407.63	0	0	0.00
INTER CARE MENTAL RETARDA	0	0	0.00	1760	52571	18605,619.08	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	0	0	0.00
HOME HEALTH	17	144	1,998.33	1131	39264	1429,780.91	0	0	0.00
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	472	1039	76,999.08	4119	14864	312,903.67	0	0	0.00
CLINIC SERVICES	92	136	19,602.07	308	399	48,857.70	0	0	0.00
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	50	140	2,857.77	414	493	6,323.08	0	0	0.00
HABILITATION SERVICES	5	116	5,279.16	50	1600	73,848.54	0	0	0.00
REMEDIAL SERVICES	51	1718	20,908.93	125	3367	60,063.72	0	0	0.00
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	10	10	1,832.81	86	105	11,238.70	0	0	0.00
LOCAL EDUCATION AGENCY	3	77	7,499.86	393	71016	1204,082.89	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	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	16	108	1,220.07	0	0	0.00
PRESCRIBED DRUGS	847	3619	200,508.47	6076	19080	1460,316.43	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	1	268.00	0	0	0.00
FAMILY PLANNING SERVICES	4	4	344.20	7	7	337.45	0	0	0.00
IOWA PLAN PROGRAM	1434	1501	152,890.10	11008	11085	739,128.08	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	70.02	36	41	1,773.94	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	15	805.78	608	1287	160,038.09	0	0	0.00
MEDICAL SUPPLIES	99	4659	16,950.52	2168	279017	458,413.26	0	0	0.00
OTHER PRACTITIONER	58	199	10,435.00	749	11776	277,432.20	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	76	93	15,569.69	920	1024	96,393.63	0	0	0.00
OPTOMETRIST	50	57	4,051.41	480	604	24,121.84	0	0	0.00

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	STATE ONLY			FED CNTY - FED CNTY STATE			FEDERAL MEDICAID ONLY AGED		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
CHIROPRACTIC	44	91	2,952.16	286	545	8,709.60	0	0	0.00
PODIATRIC	11	12	554.72	549	785	15,686.58	0	0	0.00
PHYSICAL DISABILITIES SVCS	0	0	0.00	0	0	0.00	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	271	12691	455,135.42	0	0	0.00
PSYCHIATRIC	5	7	549.96	461	694	28,047.84	0	0	0.00
RESIDENTIAL CARE FACILITY	0	0	0.00	10	197	2,599.83	0	0	0.00
ID WAIVER SERVICE	2	10	931.16	8683	526410	21795,438.87	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	3	38	820.42	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	2,864.99	2	29	393.94	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	2	9	1,672.88	162	7436	166,539.65	0	0	0.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	6	7	1,994.34	7060	8053	1940,789.13	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 *	1496	20572	850,331.26	11748	1110636	50182,177.10	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	5262	31194	25714,955.97
OUTPATIENT	0	0	0.00	10	59	1,537.64	52399	1170363	14517,347.21
CHILD PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
CHILD DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
ADULT PART HOSP	0	0	0.00	0	0	0.00	1	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	2097	7206	1485,700.55
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	15157	356871	55386,472.26
INTER CARE MENTAL RETARDA	0	0	0.00	0	0	0.00	1770	52835	18731,589.37
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	21	486	92,129.65
HOME HEALTH	0	0	0.00	3	15	68.92	12793	347883	8093,368.36
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	0	0	0.00	13	21	1,044.06	107729	318336	13550,447.08
CLINIC SERVICES	0	0	0.00	3	3	338.17	17182	22577	2808,562.05
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	0	0	0.00	2	2	67.59	11606	26891	503,190.69
HABILITATION SERVICES	0	0	0.00	0	0	0.00	2852	79389	3989,541.22
REMEDIAL SERVICES	0	0	0.00	3	108	2,254.68	9764	351996	5301,483.58
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	1	0	6,067.17-
AMBULANCE SERVICES	0	0	0.00	0	0	0.00	2207	2517	289,611.30
LOCAL EDUCATION AGENCY	0	0	0.00	0	0	0.00	1135	247954	3031,182.87

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE

	FEDERAL MEDICAID ONLY BLIND			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	181	933	10,912.29
PRESCRIBED DRUGS	0	0	0.00	7	11	245.79	117871	309302	18671,839.91
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	33	41	10,988.00
FAMILY PLANNING SERVICES	0	0	0.00	1	1	45.06	6354	7419	620,271.78
IOWA PLAN PROGRAM	0	0	0.00	90	110	1,162.28	324870	350284	11355,647.38
MANAGED SUBSTANCE ABUSE	0	0	0.00	0	0	0.00	0	0	0.00
MENTAL HEALTH ACCESS PLAN	0	0	0.00	0	0	0.00	0	0	0.00
EPSDT SCREENING	0	0	0.00	0	0	0.00	6974	7709	1103,302.85
HMO SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PACE SERVICES	0	0	0.00	0	0	0.00	60	60	173,787.50
PATIENT MANAGEMENT	0	0	0.00	48	48	96.00	164315	165054	330,108.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	0	0	0.00	3872	9079	502,881.63
MEDICAL SUPPLIES	0	0	0.00	0	0	0.00	21022	1503821	3323,416.91
OTHER PRACTITIONER	0	0	0.00	2	2	1,820.00	12396	71253	1720,009.49
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	6	6	561.34	19321	22739	3540,935.48
OPTOMETRIST	0	0	0.00	0	0	0.00	9129	11137	614,289.33

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	FEDERAL 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	7018	14486	339,863.91
PODIATRIC	0	0	0.00	0	0	0.00	3978	6129	166,090.50
PHYSICAL DISABILITIES SVCS	0	0	0.00	0	0	0.00	701	28187	383,293.63
BRAIN INJ WAIVER SERVICES	0	0	0.00	0	0	0.00	1032	46856	1731,562.25
PSYCHIATRIC	0	0	0.00	0	0	0.00	3401	5731	219,054.77
RESIDENTIAL CARE FACILITY	0	0	0.00	0	0	0.00	1502	49413	408,594.91
ID WAIVER SERVICE	0	0	0.00	0	0	0.00	9919	601756	24886,418.03
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	0	0	0.00	539	27499	490,013.06
AIDS WAIVER SERVICES	0	0	0.00	0	0	0.00	45	3783	40,052.25
ELDERLY WAIVER SERVICES	0	0	0.00	0	0	0.00	9759	424093	5919,020.48
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	0	0	0.00	2157	101293	1721,090.83
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	8961	10184	2547,720.97
UNASSIGNED	0	0	0.00	0	0	0.00	16	0	383,261.09
* A L L C A T E G O R I E S *	0	0	0.00	89	386	9,241.53	383225	6794739	234703,942.22

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