

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	1,126.22	0	0	0.00	584	2498	635,840.73
OUTPATIENT	50	426	7,976.58	0	0	0.00	4239	98499	734,929.93
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	200	2531	89,808.96
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	4660	141523	12575,904.86
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	220	59,127.98
HOME HEALTH	0	0	0.00	0	0	0.00	2685	52660	1971,530.28
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	62	121	9,703.66	0	0	0.00	5988	32298	534,774.27
CLINIC SERVICES	30	35	5,744.68	0	0	0.00	440	325	28,159.76
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	4	9	238.43	0	0	0.00	880	224	3,016.41
HABILITATION SERVICES	0	0	0.00	0	0	0.00	58	1655	128,300.85
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	2	260.00	0	0	0.00	331	399	42,331.85
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	51	108	3,207.39	0	0	0.00	3065	5168	63,396.99
DRUG CAPITATION	0	0	0.00	0	0	0.00	0	0	0.00
INDIAN HEALTH SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
FAMILY PLANNING SERVICES	1	1	60.26	0	0	0.00	1	1	10.36
IOWA PLAN PROGRAM	208	172	3,872.85	0	0	0.00	6	1	85.90
MANAGED SUBSTANCE ABUSE	0	0	0.00	0	0	0.00	0	0	0.00
MENTAL HEALTH ACCESS PLAN	0	0	0.00	0	0	0.00	0	0	0.00
EPSDT SCREENING	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	105	210.00	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	3	4	964.29	0	0	0.00	2846	201086	381,252.53
OTHER PRACTITIONER	3	3	191.68	0	0	0.00	445	1168	31,607.86
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	32	48	6,351.00	0	0	0.00	417	497	89,513.01
OPTOMETRIST	6	8	641.56	0	0	0.00	449	691	26,948.85

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	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	1	4	103.37	0	0	0.00	366	749	13,774.31
PODIATRIC	0	0	0.00	0	0	0.00	668	984	22,688.92
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	168	298	12,198.02
RESIDENTIAL CARE FACILITY	0	0	0.00	0	0	0.00	298	9928	80,371.42
ID WAIVER SERVICE	0	0	0.00	0	0	0.00	77	4620	240,001.89
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	3805	162453	2348,101.34
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	85	20,533.62
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 *	237	1049	40,651.97	0	0	0.00	14533	720612	20137,696.27

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	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	1906	11928	9073,672.55	592	2046	3396,454.21
OUTPATIENT	2	111	382.97	16605	448297	5979,250.70	9037	167144	4107,616.72
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	214	5065	2165,980.87	2	46	32,604.50
INTERMEDIATE CARE FACILITY	0	0	0.00	600	18342	1984,091.28	1	9	969.75
INTER CARE MENTAL RETARDA	0	0	0.00	6	175	68,130.19	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	4138	88576	2961,466.40	69	523	28,594.89
LEAD INSPECTION AGENCY	0	0	0.00	2	1	403.54	0	0	0.00
PHYSICIAN	2	4	253.29	24335	113100	4208,528.99	15908	32988	2889,871.41
CLINIC SERVICES	0	0	0.00	3163	4485	606,418.15	2968	4115	572,927.35
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	0	0	0.00	3624	7033	117,997.35	3622	10140	266,657.77
HABILITATION SERVICES	0	0	0.00	2752	81407	4343,234.64	30	415	23,399.36
REMEDIAL SERVICES	0	0	0.00	1039	26318	428,835.38	350	6094	98,416.53
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	1	0	0.00
AMBULANCE SERVICES	0	0	0.00	957	1169	143,108.78	286	302	40,563.70
LOCAL EDUCATION AGENCY	0	0	0.00	497	104991	1419,755.27	7	361	4,055.96-

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	123	867	10,591.95	0	0	0.00
PRESCRIBED DRUGS	1	10	381.99	25567	107371	8018,501.03	21499	59026	2646,924.18
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	109	204	7,652.80	5233	6032	551,723.96
IOWA PLAN PROGRAM	3	3	216.07	54034	53742	3538,052.91	47309	44542	1235,883.63
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	126	149	6,661.00	56	60	7,049.90
HMO SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PACE SERVICES	0	0	0.00	24	24	71,879.69	0	0	0.00
PATIENT MANAGEMENT	0	0	0.00	1	1	2.00	25749	25718	51,436.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	646	1375	137,196.01	166	365	12,507.55
MEDICAL SUPPLIES	1	2	259.68	8921	712716	1891,184.54	913	23759	162,262.10
OTHER PRACTITIONER	0	0	0.00	2870	35136	538,706.83	1803	3948	212,087.38
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	1	1	92.24	3937	5234	908,455.21	3450	4841	884,357.10
OPTOMETRIST	0	0	0.00	2157	2952	164,969.30	1622	1984	145,474.60

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	2127	4658	104,812.24	1740	3840	132,175.16
PODIATRIC	0	0	0.00	1144	2039	75,982.81	206	276	27,361.03
PHYSICAL DISABILITIES SVCS	0	0	0.00	517	20847	270,274.55	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	324	16256	550,419.12	0	0	0.00
PSYCHIATRIC	1	1	99.39	2573	4494	189,177.33	37	51	4,996.95
RESIDENTIAL CARE FACILITY	0	0	0.00	1258	41083	342,984.44	0	0	0.00
ID WAIVER SERVICE	0	0	0.00	977	63435	2862,351.40	2	3	362.37
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	24	1262	21,352.75	11	577	10,002.69
AIDS WAIVER SERVICES	0	0	0.00	16	1183	12,832.53	0	0	0.00
ELDERLY WAIVER SERVICES	0	0	0.00	26	1118	22,903.52	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	1936	93279	1529,968.35	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	1078	1173	292,309.95	12	12	5,093.29
UNASSIGNED	0	0	0.00	3	0	0.00	0	0	0.00
* A L L C A T E G O R I E S *	3	133	1,689.06	56717	2081485	55070,096.35	54995	399217	17543,718.12

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	364	2423	2359,029.41	364	7181	1937,285.09	1993	11773	12328,248.92
OUTPATIENT	7264	76257	1944,121.34	2228	38078	759,248.29	12596	192600	3904,771.83
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	3	26	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	4	44	602,452.02
INTER CARE MENTAL RETARDA	0	0	0.00	0	0	0.00	1	0	1429,035.00-
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	0	0	0.00
HOME HEALTH	574	2425	95,155.74	113	347	16,620.64	858	4044	106,210.74
LEAD INSPECTION AGENCY	7	9	3,430.08	1	1	90.00	7	9	2,847.84
PHYSICIAN	19919	34382	2134,220.55	4552	9479	616,208.00	32772	67514	4741,435.48
CLINIC SERVICES	3766	4898	683,221.22	1005	1379	185,044.94	6684	9479	1534,410.96
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	1694	3315	55,801.04	583	1776	37,752.71	3613	9805	188,376.97
HABILITATION SERVICES	0	0	0.00	16	371	23,999.15	3	32	2,427.38
REMEDIAL SERVICES	3209	69170	1252,847.12	984	20309	334,811.78	2938	63271	1078,929.53
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	1	0	3,369.89-
AMBULANCE SERVICES	184	174	25,761.12	75	76	10,324.00	257	295	40,331.76
LOCAL EDUCATION AGENCY	144	26165	208,296.77	42	8747	86,237.87	193	32986	307,400.33

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	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	155	733	8,806.95	32	186	2,276.52	174	878	10,463.14
PRESCRIBED DRUGS	20161	34859	1777,169.83	5351	11950	629,919.61	31241	54177	2555,008.50
DRUG CAPITATION	0	0	0.00	0	0	0.00	0	0	0.00
INDIAN HEALTH SERVICES	0	0	0.00	0	0	0.00	1	1	268.00
FAMILY PLANNING SERVICES	724	807	78,882.69	242	276	22,792.31	451	585	49,632.35
IOWA PLAN PROGRAM	79139	74038	652,371.90	18456	17014	311,924.83	119031	113805	1223,479.27
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	2263	2522	300,435.41	303	340	60,616.06	3455	3716	743,889.87
HMO SERVICES	1	1-	98.70-	0	0	0.00	2	5-	2,300.58-
PACE SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PATIENT MANAGEMENT	46292	46274	92,548.00	9924	9889	19,778.00	72867	72841	145,682.00
HEALTH INS PREMIUM PAYMENT	262	663	13,285.55	62	139	5,684.78	1797	4605	114,722.73
MEDICAL SUPPLIES	939	12701	141,253.22	174	6429	34,388.60	1284	28655	202,357.00
OTHER PRACTITIONER	2664	13019	291,275.55	649	4901	89,163.71	4202	15822	446,770.37
FAMILY CENTERED PROGRAM	0	0	0.00	0	0	0.00	0	0	0.00
FAMILY PRESERVATION	0	0	0.00	0	0	0.00	0	0	0.00
TREATMENT FOSTER FAMILY CARE	0	0	0.00	0	0	0.00	0	0	0.00
GROUP TREATMENT THERAPY	0	0	0.00	0	0	0.00	0	0	0.00
DENTAL	4549	5428	733,417.98	1103	1407	241,519.71	7110	8548	1225,919.56
OPTOMETRIST	1513	1765	119,241.57	501	601	42,382.58	2320	2685	174,869.73

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	766	1372	43,130.67	226	455	15,777.69	1385	2783	83,054.54
PODIATRIC	47	55	7,536.82	26	39	4,750.99	129	170	16,116.40
PHYSICAL DISABILITIES SVCS	0	0	0.00	0	0	0.00	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	1	55	1,144.23	2	108	2,444.74
PSYCHIATRIC	15	19	2,451.01	14	25	2,119.90	46	101	4,924.20
RESIDENTIAL CARE FACILITY	0	0	0.00	0	0	0.00	1	0	1,775.50
ID WAIVER SERVICE	0	0	0.00	0	0	0.00	4	131	99,349.97-
CHILDRENS MENTAL HEALTH SVC	33	1711	29,737.58	82	3842	62,630.66	44	2983	42,322.99
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	24	803.72
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	39	46	19,881.04	97	121	45,444.82	54	68	26,689.05
UNASSIGNED	0	0	0.00	0	0	0.00	4	0	1234,229.77-
* A L L C A T E G O R I E S *	81183	415229	13073,211.46	17988	145413	5599,937.47	113671	704559	29140,752.21

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	FOSTER - PRESUB - SUB ADOPTS			INTERMEDIATE CARE FACILITY			MEDICALLY NEEDY NO SPEND DN		
	RECIPES SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPES SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPES SERVED	UNITS OF SERVICE	AMOUNT PAID
INPATIENT	30	234	158,553.96	726	3563	931,355.67	44	238	271,066.69
OUTPATIENT	845	13349	209,425.35	5187	134673	850,332.78	486	9746	248,318.63
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	89	52,065.69	471	5688	50,084.40	3	22	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	6683	201089	21164,579.39	1	0	187.45
INTER CARE MENTAL RETARDA	5	173	96,739.77	0	0	0.00	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	29	2059	661,941.91	0	0	0.00
HOME HEALTH	126	3596	110,115.44	3800	69561	2801,243.68	53	649	16,433.24
LEAD INSPECTION AGENCY	1	2	762.24	0	0	0.00	0	0	0.00
PHYSICIAN	2267	3510	198,211.50	7183	38541	693,400.35	814	2631	142,111.58
CLINIC SERVICES	431	567	68,837.27	395	347	33,012.28	107	152	20,645.54
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	271	895	12,259.42	1155	468	6,246.63	141	336	7,244.44
HABILITATION SERVICES	10	107	6,592.22	37	682	31,631.77	18	461	23,321.56
REMEDIAL SERVICES	2473	150131	1664,164.20	10	197	3,877.19	13	276	3,827.69
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	18	13	2,124.41	438	556	62,502.48	22	22	2,693.73
LOCAL EDUCATION AGENCY	123	33546	337,920.40	18	1815	80,024.02	0	0	0.00

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	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	56	238	2,902.45	3	49	565.19	0	0	0.00
PRESCRIBED DRUGS	5088	12462	943,213.32	9366	20591	385,211.42	1016	3284	165,780.28
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	44	51	5,404.52	1	2	86.11	27	31	3,960.69
IOWA PLAN PROGRAM	10803	10571	950,518.05	2482	1243	77,107.55	1882	1626	50,363.50
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	113	129	5,488.36	1	1	3.15	1	1	39.19
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	72	72	144.00	0	0	0.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	153	299	13,496.08	29	55	7,865.69	5	10	1,173.81
MEDICAL SUPPLIES	231	27089	71,091.18	4518	375677	621,244.66	159	8432	40,393.26
OTHER PRACTITIONER	529	5538	94,922.29	607	1947	49,347.74	84	241	10,986.44
FAMILY CENTERED PROGRAM	0	0	0.00	0	0	0.00	0	0	0.00
FAMILY PRESERVATION	0	0	0.00	0	0	0.00	0	0	0.00
TREATMENT FOSTER FAMILY CARE	0	0	0.00	0	0	0.00	0	0	0.00
GROUP TREATMENT THERAPY	0	0	0.00	0	0	0.00	0	0	0.00
DENTAL	893	1069	146,308.06	712	865	123,535.15	186	264	42,573.86
OPTOMETRIST	379	433	28,059.53	511	738	28,961.75	78	94	7,309.85

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE

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	113	189	5,623.19	262	489	9,926.46	78	168	5,655.97
PODIATRIC	22	24	1,652.15	1240	1764	46,547.50	27	43	3,140.72
PHYSICAL DISABILITIES SVCS	0	0	0.00	207	8101	97,966.15	0	0	0.00
BRAIN INJ WAIVER SERVICES	36	1619	40,123.89	433	18487	665,076.16	0	0	0.00
PSYCHIATRIC	23	45	3,129.83	227	433	19,067.19	37	72	3,245.97
RESIDENTIAL CARE FACILITY	1	53	331.42	5	116	1,619.72	0	0	0.00
ID WAIVER SERVICE	214	8074	290,075.99	10	388	19,223.01	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	2388	25,919.14	0	0	0.00
ELDERLY WAIVER SERVICES	0	0	0.00	6157	276788	3614,284.51	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	44	2634	43,630.25	7	433	5,917.94	0	0	0.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	185	208	51,795.90	114	125	32,573.99	1	1	243.75
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 *	10090	277009	5615,682.33	14498	1169953	33295,331.73	1947	28800	1070,717.84

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	173	855	1200,004.89	44	653	196,450.77	7	16	42,477.38
OUTPATIENT	528	17112	402,637.64	997	13130	310,594.16	118	4879	180,755.81
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	53	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	30	467	36,523.92	42	98	1,885.00	3	30	2,927.91
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	837	4921	269,969.65	2930	4317	265,631.56	173	697	147,591.31
CLINIC SERVICES	71	79	11,187.11	648	800	103,348.15	13	17	3,647.43
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	49	152	2,384.41	202	549	10,672.61	30	57	7,236.45
HABILITATION SERVICES	11	874	71,582.91	0	0	0.00	0	0	0.00
REMEDIAL SERVICES	1	16	151.04	527	10684	175,425.35	0	0	0.00
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	53	52	8,037.48	21	21	3,184.11	1	1	124.25
LOCAL EDUCATION AGENCY	0	0	0.00	44	8130	66,469.81	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	2	8	98.28	0	0	0.00
PRESCRIBED DRUGS	322	1377	68,369.04	3872	6514	431,541.89	208	866	73,091.87
DRUG CAPITATION	0	0	0.00	0	0	0.00	0	0	0.00
INDIAN HEALTH SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
FAMILY PLANNING SERVICES	8	8	284.01	75	82	8,718.55	1	1	494.39
IOWA PLAN PROGRAM	0	0	0.00	16506	15004	147,238.02	259	254	24,638.70
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	2	2	966.59	75	79	6,439.31	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	10333	10331	20,662.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	18	39	1,911.91	0	0	0.00
MEDICAL SUPPLIES	85	3794	26,203.55	113	3380	19,744.10	30	851	5,147.62
OTHER PRACTITIONER	73	136	10,932.61	420	2394	44,591.84	14	21	2,000.45
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	56	77	11,469.78	1489	1783	277,577.78	22	28	4,167.27
OPTOMETRIST	26	36	2,115.17	460	527	34,231.21	9	11	704.42

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	19	38	1,214.19	286	487	15,677.09	14	28	895.82
PODIATRIC	15	30	1,792.53	26	28	3,892.11	3	4	557.45
PHYSICAL DISABILITIES SVCS	0	0	0.00	0	0	0.00	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	2	108	2,233.53	0	0	0.00
PSYCHIATRIC	58	217	12,328.47	10	17	836.63	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	1	2	51.67	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	8	566	8,039.60	0	0	0.00
AIDS WAIVER SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
ELDERLY WAIVER SERVICES	1	1	34.08	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	11	16	5,534.55	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	30297	2138,189.07	13869	79747	2162,681.59	255	7761	496,458.53

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	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	3	10	24,639.79	0	0	0.00	0	0	0.00
OUTPATIENT	9	32	3,553.55	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	17	19	9,510.37	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	0	116.81	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	81	89	8,628.72	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	1	2	184.00	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	2	0	563.86	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	2	107.06	0	0	0.00	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	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 *	81	154	47,304.16	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	5	99	17,416.76	0	0	0.00	5	15	18,610.96
OUTPATIENT	34	317	7,817.73	1	8	0.00	91	1971	30,686.93
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	2	22	962.65	1	1	24.60	0	0	0.00
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	104	153	7,113.82	10	32	435.00	142	241	23,156.35
CLINIC SERVICES	8	10	1,895.39	0	0	0.00	28	45	4,988.19
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	9	40	379.54	0	0	0.00	28	95	2,635.36
HABILITATION SERVICES	4	127	5,872.48	1	0	0.00	7	308	15,892.12
REMEDIAL SERVICES	219	5553	108,150.01	0	0	0.00	32	818	16,025.67
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	3	3	526.25	0	0	0.00	3	3	478.11
LOCAL EDUCATION AGENCY	17	4292	28,963.57	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	366	1195	82,888.91	0	0	0.00	160	351	20,321.46
DRUG CAPITATION	0	0	0.00	0	0	0.00	0	0	0.00
INDIAN HEALTH SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
FAMILY PLANNING SERVICES	1	1	0.00	0	0	0.00	10	13	977.21
IOWA PLAN PROGRAM	434	431	45,861.64	0	0	0.00	455	397	51,457.92
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	6	303.08	0	0	0.00	1	1	33.12
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	7	7	14.00	0	0	0.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	44	90	7,661.86	0	0	0.00	1	1	28.38
MEDICAL SUPPLIES	8	615	630.55	0	0	0.00	2	4	129.35
OTHER PRACTITIONER	32	1248	14,589.17	0	0	0.00	13	16	1,269.66
FAMILY CENTERED PROGRAM	0	0	0.00	0	0	0.00	0	0	0.00
FAMILY PRESERVATION	0	0	0.00	0	0	0.00	0	0	0.00
TREATMENT FOSTER FAMILY CARE	0	0	0.00	0	0	0.00	0	0	0.00
GROUP TREATMENT THERAPY	0	0	0.00	0	0	0.00	0	0	0.00
DENTAL	42	48	4,783.58	0	0	0.00	24	33	5,123.73
OPTOMETRIST	14	16	851.14	0	0	0.00	15	18	1,477.98

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 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	8	15	394.12	0	0	0.00	10	16	613.83
PODIATRIC	2	7	1,475.59	0	0	0.00	1	1	106.61
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	368.84	0	0	0.00	1	3	53.79
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	324	16759	287,157.80	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	24	351.12	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	360	401	173,363.23	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 *	345	31482	799,792.83	1	41	459.60	391	4350	194,066.73

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	23	101	216,006.95	165	754	385,123.89	0	0	0.00
OUTPATIENT	257	6024	150,649.34	2811	66614	531,128.70	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	42	23,174.04	14	250	12,852.53	0	0	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	12	331	35,341.96	0	0	0.00
INTER CARE MENTAL RETARDA	0	0	0.00	1835	64709	26779,736.17	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	0	0	0.00
HOME HEALTH	16	154	11,339.87	1296	46478	1740,947.67	0	0	0.00
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	499	1212	118,773.47	4494	16187	423,478.28	0	0	0.00
CLINIC SERVICES	126	705	30,455.02	304	410	53,200.98	0	0	0.00
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	78	280	5,483.03	492	726	9,750.65	0	0	0.00
HABILITATION SERVICES	6	108	4,490.56	55	1679	76,419.20	0	0	0.00
REMEDIAL SERVICES	54	1926	23,237.10	152	2925	51,195.94	0	0	0.00
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	14	15	2,403.36	98	110	12,614.91	0	0	0.00
LOCAL EDUCATION AGENCY	4	868	7,840.01	502	125003	1726,942.09	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	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	1	2	21.60	40	267	3,262.86	0	0	0.00
PRESCRIBED DRUGS	898	3936	206,980.93	6403	20536	1430,913.27	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	2	3	156.24	11	12	609.57	0	0	0.00
IOWA PLAN PROGRAM	1548	1490	134,476.13	11215	11057	657,940.34	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	95.94	19	24	1,177.49	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	805.78	610	1264	135,043.24	0	0	0.00
MEDICAL SUPPLIES	123	6445	23,397.90	2300	314820	567,014.32	0	0	0.00
OTHER PRACTITIONER	64	297	10,243.28	828	14835	323,241.68	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	95	135	28,145.96	1287	1534	156,643.00	0	0	0.00
OPTOMETRIST	58	68	6,296.63	535	685	33,727.93	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	59	125	4,243.43	307	613	14,069.03	0	0	0.00
PODIATRIC	15	29	3,191.42	590	755	24,168.93	0	0	0.00
PHYSICAL DISABILITIES SVCS	0	0	0.00	0	0	0.00	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	277	12297	436,424.92	0	0	0.00
PSYCHIATRIC	9	19	1,106.38	469	739	34,506.23	0	0	0.00
RESIDENTIAL CARE FACILITY	0	0	0.00	12	245	2,598.49	0	0	0.00
ID WAIVER SERVICE	3	108	3,569.81	8819	526746	23101,221.66	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	3	167	3,637.50	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	177	2,911.50	2	63	524.22	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	2	21	1,802.84	150	6563	128,197.71	0	0	0.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	6	8	2,412.32	7261	7799	1901,248.38	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 *	1483	24478	1027,348.34	11735	1247030	60791,266.24	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	1	1	2,165.28	6994	44391	33195,530.12
OUTPATIENT	0	0	0.00	15	78	3,077.51	62909	1289345	20367,276.49
CHILD PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
CHILD DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
ADULT PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
ADULT DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
SKILLED NURSING FACILITY	0	0	0.00	0	0	0.00	898	13812	2426,570.99
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	11901	361338	36363,526.71
INTER CARE MENTAL RETARDA	0	0	0.00	0	0	0.00	1847	65057	25515,571.13
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	34	2279	721,069.89
HOME HEALTH	0	0	0.00	1	4	15.91	13731	269635	9901,998.58
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	17	22	7,533.70
PHYSICIAN	0	0	0.00	18	28	3,775.54	121110	362375	17438,154.43
CLINIC SERVICES	0	0	0.00	12	18	2,463.04	20053	27866	3949,607.46
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	0	0	0.00	3	3	85.26	16402	35903	734,218.48
HABILITATION SERVICES	0	0	0.00	0	0	0.00	2992	88226	4757,164.20
REMEDIAL SERVICES	0	0	0.00	3	188	3,923.88	10945	357876	5243,818.41
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	2	0	3,369.89
AMBULANCE SERVICES	0	0	0.00	0	0	0.00	2747	3213	397,487.11
LOCAL EDUCATION AGENCY	0	0	0.00	0	0	0.00	1572	346904	4265,794.18

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	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	551	3228	38,988.94
PRESCRIBED DRUGS	0	0	0.00	16	24	613.60	133006	343894	19512,064.23
DRUG CAPITATION	0	0	0.00	0	0	0.00	0	0	0.00
INDIAN HEALTH SERVICES	0	0	0.00	0	0	0.00	1	1	268.00
FAMILY PLANNING SERVICES	0	0	0.00	1	2	83.62	6932	8112	731,529.64
IOWA PLAN PROGRAM	0	0	0.00	110	126	1,176.37	349956	345516	9106,665.58
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	2	2	125.77	6408	7034	1133,324.24
HMO SERVICES	0	0	0.00	0	0	0.00	3	6-	2,399.28-
PACE SERVICES	0	0	0.00	0	0	0.00	58	58	164,928.69
PATIENT MANAGEMENT	0	0	0.00	55	55	110.00	165395	165293	330,586.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	0	0	0.00	3799	8916	451,383.37
MEDICAL SUPPLIES	0	0	0.00	0	0	0.00	22297	1726461	4189,102.45
OTHER PRACTITIONER	0	0	0.00	0	0	0.00	15174	100670	2171,928.54
FAMILY CENTERED PROGRAM	0	0	0.00	0	0	0.00	0	0	0.00
FAMILY PRESERVATION	0	0	0.00	0	0	0.00	0	0	0.00
TREATMENT FOSTER FAMILY CARE	0	0	0.00	0	0	0.00	0	0	0.00
GROUP TREATMENT THERAPY	0	0	0.00	0	0	0.00	0	0	0.00
DENTAL	0	0	0.00	6	10	1,849.07	25299	31850	4892,366.91
OPTOMETRIST	0	0	0.00	0	0	0.00	10635	13312	818,263.80

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	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	7708	16030	451,144.54
PODIATRIC	0	0	0.00	1	1	83.29	4147	6249	241,045.27
PHYSICAL DISABILITIES SVCS	0	0	0.00	0	0	0.00	720	28948	368,240.70
BRAIN INJ WAIVER SERVICES	0	0	0.00	0	0	0.00	1048	48981	1701,351.96
PSYCHIATRIC	0	0	0.00	0	0	0.00	3677	6539	290,717.19
RESIDENTIAL CARE FACILITY	0	0	0.00	0	0	0.00	1567	51425	429,680.99
ID WAIVER SERVICE	0	0	0.00	0	0	0.00	10061	603507	26417,507.83
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	0	0	0.00	527	27867	464,881.57
AIDS WAIVER SERVICES	0	0	0.00	0	0	0.00	47	3571	38,751.67
ELDERLY WAIVER SERVICES	0	0	0.00	0	0	0.00	9796	440624	5989,562.89
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	0	0	0.00	2139	102954	1709,868.21
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	9288	10063	2577,123.89
UNASSIGNED	0	0	0.00	0	0	0.00	9	0	1234,229.77-
* A L L C A T E G O R I E S *	0	0	0.00	104	540	19,548.14	395114	7369339	248266,600.04

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