

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	10	5,017.07	0	0	0.00	577	2332	634,741.65
OUTPATIENT	43	335	9,772.83	0	0	0.00	4398	101251	722,985.36
CHILD PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
CHILD DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
ADULT PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
ADULT DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
SKILLED NURSING FACILITY	0	0	0.00	0	0	0.00	210	3726	186,919.93
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	4895	130360	8716,361.65
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	7	143	42,005.08
HOME HEALTH	0	0	0.00	0	0	0.00	2853	62638	2132,131.24
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	87	155	13,224.56	0	0	0.00	6446	38326	527,821.34
CLINIC SERVICES	35	55	8,313.75	0	0	0.00	521	371	35,424.61
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	2	11	278.38	0	0	0.00	850	254	4,620.24
HABILITATION SERVICES	0	0	0.00	0	0	0.00	67	1741	120,778.68
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	324	381	35,156.97
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	44	110	2,978.19	0	0	0.00	3615	6846	84,917.29
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	149	170	4,148.51	0	0	0.00	5	5	330.98
MANAGED SUBSTANCE ABUSE	0	0	0.00	0	0	0.00	0	0	0.00
MENTAL HEALTH ACCESS PLAN	0	0	0.00	0	0	0.00	0	0	0.00
EPSDT SCREENING	1	1	37.00	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	94	94	188.00	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	3	305.56	0	0	0.00	3244	263685	397,969.71
OTHER PRACTITIONER	1	1	70.19	0	0	0.00	436	2281	24,587.77
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	27	53	4,929.73	0	0	0.00	464	589	93,518.10
OPTOMETRIST	6	7	409.74	0	0	0.00	607	1004	35,110.84

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	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	370	790	11,126.84
PODIATRIC	1	1	41.81	0	0	0.00	802	1353	23,865.27
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	48	4,450.80
PSYCHIATRIC	0	0	0.00	0	0	0.00	164	282	10,083.77
RESIDENTIAL CARE FACILITY	0	0	0.00	0	0	0.00	303	9602	55,240.31
ID WAIVER SERVICE	0	0	0.00	0	0	0.00	82	5396	255,257.23
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	3810	182198	2715,596.98
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	111	134	37,182.05
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 *	191	1006	49,715.32	0	0	0.00	15192	815736	16908,184.69

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	2044	11154	8965,616.59	765	2188	3624,965.16
OUTPATIENT	2	35	418.58	18012	465519	6537,405.73	10667	207099	4841,442.16
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	219	5086	1978,428.26	2	37	29,017.21
INTERMEDIATE CARE FACILITY	0	0	0.00	623	17222	1671,158.46	0	0	0.00
INTER CARE MENTAL RETARDA	0	0	0.00	6	206	65,453.70	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	4463	114351	3239,755.29	80	534	36,004.15
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	2	2	143.71	27017	137652	4997,544.41	18662	42297	3634,931.77
CLINIC SERVICES	0	0	0.00	3841	7503	1011,699.96	3768	5781	811,991.49
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	0	0	0.00	4172	9307	154,324.90	4799	13547	392,104.93
HABILITATION SERVICES	0	0	0.00	3052	82513	3877,132.12	39	612	27,913.31
REMEDIAL SERVICES	0	0	0.00	911	28172	484,066.95	269	5206	91,550.63
REHAB SUPPORT SERVICES	0	0	0.00	7	0	7,602.04-	0	0	0.00
AMBULANCE SERVICES	0	0	0.00	1146	1408	163,097.68	362	383	65,466.62
LOCAL EDUCATION AGENCY	0	0	0.00	655	119816	1818,451.28	7	1134	6,598.12

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	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	103	701	8,979.41	0	0	0.00
PRESCRIBED DRUGS	1	1	52.69	27379	134372	9790,407.44	24274	75838	3162,300.41
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	170	190	14,894.25	7780	9779	846,330.56
IOWA PLAN PROGRAM	2	2	118.93	51938	53210	3778,963.25	41228	45219	1356,909.39
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	178	215	10,315.89	68	84	5,115.57
HMO SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PACE SERVICES	0	0	0.00	25	25	76,388.50	0	0	0.00
PATIENT MANAGEMENT	0	0	0.00	0	0	0.00	25773	25774	51,548.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	654	1648	163,717.28	168	424	14,140.15
MEDICAL SUPPLIES	0	0	0.00	10408	1014539	2327,020.37	1226	34765	243,375.92
OTHER PRACTITIONER	0	0	0.00	3116	29243	634,095.91	2312	4644	280,179.73
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	4891	6421	1070,978.53	3945	5592	1056,644.14
OPTOMETRIST	0	0	0.00	2872	3930	213,035.26	2077	2527	179,794.77

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	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	2338	5520	105,333.10	2062	5078	171,996.83
PODIATRIC	0	0	0.00	1454	2774	100,356.61	251	340	37,464.26
PHYSICAL DISABILITIES SVCS	0	0	0.00	537	21204	260,963.42	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	335	17717	516,873.29	0	0	0.00
PSYCHIATRIC	0	0	0.00	2593	4458	162,203.67	31	39	3,456.11
RESIDENTIAL CARE FACILITY	0	0	0.00	1306	40340	260,953.07	1	20	0.00
ID WAIVER SERVICE	0	0	0.00	1019	66582	2888,813.35	2	507	7,589.38
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	27	1692	29,414.09	8	526	7,969.79
AIDS WAIVER SERVICES	0	0	0.00	16	1755	21,327.03	0	0	0.00
ELDERLY WAIVER SERVICES	0	0	0.00	29	1348	25,290.07	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	1992	102381	1652,488.04	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	1441	1690	499,710.34	14	14	6,022.23
UNASSIGNED	0	0	0.00	4	0	0.00	1	0	0.00
* A L L C A T E G O R I E S *	2	40	733.91	56665	2511864	59569,055.46	55610	489988	20992,822.79

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
INPATIENT	540	2791	2992,379.96	395	6402	2357,113.24	2480	13042	18323,409.32
OUTPATIENT	9280	100321	2415,319.99	2723	39349	780,837.31	15758	233954	5303,262.36
CHILD PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
CHILD DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
ADULT PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
ADULT DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
SKILLED NURSING FACILITY	0	0	0.00	0	0	0.00	3	49	3,407.63-
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	5	107	88,624.83-
INTER CARE MENTAL RETARDA	0	0	0.00	0	0	0.00	1	0	2920,017.00-
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	0	0	0.00
HOME HEALTH	753	3210	79,747.92	119	389	12,878.97	1289	5311	459,692.81
LEAD INSPECTION AGENCY	1	1	381.12	1	1	310.00	1	1	381.12
PHYSICIAN	23980	44717	2769,177.09	5481	11469	811,923.02	39747	87029	5963,828.68
CLINIC SERVICES	4884	6773	956,292.16	1270	1798	254,046.37	8908	13429	2273,326.89
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	4237	6486	113,947.77	929	2348	54,605.20	7749	17602	334,235.00
HABILITATION SERVICES	2	0	296.82-	23	582	28,427.50	10	53	4,345.64
REMEDIAL SERVICES	2782	78705	1351,190.53	817	24257	410,015.93	2659	74818	1270,865.30
REHAB SUPPORT SERVICES	0	0	0.00	1	0	2,282.48-	1	0	10,067.17-
AMBULANCE SERVICES	205	197	25,937.51	82	74	8,937.73	303	280	42,611.08
LOCAL EDUCATION AGENCY	162	30981	265,440.87	45	7206	63,442.58	209	40354	356,913.94

## 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	133	586	6,849.78	29	184	2,225.86	159	685	8,384.87
PRESCRIBED DRUGS	23644	43667	2217,438.78	6307	15109	694,985.26	37622	69415	2925,421.19
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	1023	1446	111,792.75	302	401	34,897.95	587	668	60,697.23
IOWA PLAN PROGRAM	70280	74635	714,694.68	16086	17321	337,889.40	105930	116459	1353,762.02
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	3128	3473	392,270.72	455	522	75,324.70	4831	5149	881,098.53
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	46450	46450	92,900.00	9985	9985	19,970.00	73766	73772	147,350.00
HEALTH INS PREMIUM PAYMENT	248	763	14,587.62	57	147	5,141.21	1770	5474	129,947.83
MEDICAL SUPPLIES	1426	21326	163,045.33	280	9493	45,844.96	1929	32778	244,894.82
OTHER PRACTITIONER	3238	12621	343,326.78	784	3959	88,615.46	5317	17524	552,001.65
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	6105	7253	898,828.46	1474	1847	303,197.42	9946	11973	1538,068.34
OPTOMETRIST	2065	2390	157,471.78	659	763	51,688.72	3300	3770	242,890.53



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	ADC - CHILD			CMAP			OTHER		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
CHIROPRACTIC	1049	2157	66,591.82	312	741	25,139.99	1835	3871	119,366.88
PODIATRIC	88	94	9,113.56	34	36	3,234.04	149	174	16,972.54
PHYSICAL DISABILITIES SVCS	0	0	0.00	0	0	0.00	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	1	51	1,076.67	4	173	2,588.70
PSYCHIATRIC	20	29	2,781.45	25	59	3,568.44	49	105	65,659.75
RESIDENTIAL CARE FACILITY	0	0	0.00	0	0	0.00	1	0	0.00
ID WAIVER SERVICE	1	2	31.80	0	0	0.00	4	28	203,922.29-
CHILDRENS MENTAL HEALTH SVC	33	1943	29,663.52	84	4197	68,710.51	47	2871	41,272.77
AIDS WAIVER SERVICES	0	0	0.00	0	0	0.00	1	0	1,650.00
ELDERLY WAIVER SERVICES	0	0	0.00	0	0	0.00	2	33	64,706.21-
ILL & HANDICAPPED WAIVER SVCS	1	52	2,129.40	0	0	0.00	1	0	1,948.31-
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	48	46	20,801.90	105	87	45,364.02	83	64	69,116.02-
UNASSIGNED	2	0	0.00	1	0	0.00	9	0	6837,012.78
* A L L C A T E G O R I E S *	78121	493115	16213,838.23	17551	158777	6587,129.98	114540	831015	46140,103.11

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	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	64	289	150,584.93	706	3129	932,867.54	48	329	439,596.97
OUTPATIENT	1086	17573	266,658.01	5341	131265	917,127.44	526	10471	259,790.97
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	5	148	72,589.07	436	7535	57,321.42	5	116	33,293.26
INTERMEDIATE CARE FACILITY	0	0	0.00	7071	188147	16852,449.18	2	33	4,348.87
INTER CARE MENTAL RETARDA	8	385	146,109.79	1	56	17,436.88	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	30	874	299,404.73	0	0	0.00
HOME HEALTH	136	6563	184,408.06	4097	88532	3080,110.79	49	788	28,897.14
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	2753	5473	275,568.96	7802	47462	674,598.98	913	2610	176,984.81
CLINIC SERVICES	524	707	86,911.42	469	382	57,123.00	152	227	34,205.24
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	430	1043	16,414.46	1184	514	5,748.10	165	440	9,138.53
HABILITATION SERVICES	13	140	7,190.24	57	750	26,458.45	23	473	30,328.51
REMEDIAL SERVICES	2558	155605	2084,906.80	8	192	4,009.62	11	367	4,241.36
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	34	37	5,143.53	545	730	73,912.07	29	34	4,551.36
LOCAL EDUCATION AGENCY	119	32805	386,503.82	30	5806	139,644.77	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	53	225	2,804.12	3	20	273.87	0	0	0.00
PRESCRIBED DRUGS	5673	15768	880,873.00	10347	26007	447,542.64	1176	4483	209,243.49
DRUG CAPITATION	0	0	0.00	0	0	0.00	0	0	0.00
INDIAN HEALTH SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
FAMILY PLANNING SERVICES	46	53	5,445.65	0	0	0.00	30	36	3,284.76
IOWA PLAN PROGRAM	9996	10172	1003,660.70	2287	2310	151,427.69	1554	1735	57,549.20
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	146	156	13,525.19	2	2	111.75	0	0	0.00
HMO SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PACE SERVICES	0	0	0.00	36	36	98,389.00	0	0	0.00
PATIENT MANAGEMENT	90	90	180.00	0	0	0.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	168	405	19,041.95	28	55	8,467.78	5	10	301.45
MEDICAL SUPPLIES	271	32279	97,006.50	5293	507493	745,044.52	166	9811	17,705.43
OTHER PRACTITIONER	632	7897	135,355.29	611	3095	63,966.81	119	268	17,318.14
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	1212	1423	176,820.37	948	1219	185,524.45	183	244	44,902.60
OPTOMETRIST	490	552	34,224.38	763	1103	42,229.03	121	148	9,734.56

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	163	358	9,928.23	278	605	7,014.88	100	206	6,389.15
PODIATRIC	28	37	4,136.60	1391	2043	45,383.19	40	54	4,677.75
PHYSICAL DISABILITIES SVCS	0	0	0.00	216	9079	109,245.84	0	0	0.00
BRAIN INJ WAIVER SERVICES	37	1387	32,959.73	432	19665	624,032.03	0	0	0.00
PSYCHIATRIC	28	60	5,121.98	240	432	14,714.72	34	83	2,632.42
RESIDENTIAL CARE FACILITY	0	0	0.00	5	96	424.28	0	0	0.00
ID WAIVER SERVICE	207	6919	242,362.22	7	136	3,587.03	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	34	3034	30,599.43	0	0	0.00
ELDERLY WAIVER SERVICES	0	0	0.00	6194	308503	4007,024.96	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	42	2553	40,655.40	2	18	245.94	0	0	0.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	246	306	90,350.34	161	195	56,879.50	5	3	1,158.70
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 *	10212	301408	6477,440.74	14935	1360520	29780,342.31	1899	32969	1400,274.67

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	237	1498	2271,401.81	49	375	168,279.28	6	25	51,668.87
OUTPATIENT	691	45508	699,078.76	1345	19861	419,342.71	121	3358	153,502.10
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	126	46,460.00	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	36	409	25,585.63	60	123	2,296.73	5	34	5,285.62
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	1012	4572	380,840.88	3666	5792	368,648.32	191	812	195,825.66
CLINIC SERVICES	81	118	17,285.68	902	1180	161,345.56	19	40	8,504.99
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	84	327	7,119.91	297	770	14,741.31	42	165	6,055.65
HABILITATION SERVICES	20	467	21,745.95	0	0	0.00	0	0	0.00
REMEDIAL SERVICES	0	0	0.00	470	12188	197,770.94	0	0	0.00
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	71	75	13,477.48	23	25	3,351.85	2	1	117.17
LOCAL EDUCATION AGENCY	0	0	0.00	45	9782	71,370.85	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	1	3	35.01	0	0	0.00
PRESCRIBED DRUGS	433	2164	101,671.98	4716	8824	574,505.31	223	1048	93,313.03
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	15	16	956.93	112	134	12,651.20	3	3	236.64
IOWA PLAN PROGRAM	0	0	0.00	14282	15526	164,648.42	253	248	25,044.62
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	149	155	10,752.71	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	10418	10418	20,836.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	17	44	2,010.75	0	0	0.00
MEDICAL SUPPLIES	102	7116	25,105.34	146	4622	23,100.94	31	1587	13,449.76
OTHER PRACTITIONER	96	204	15,557.51	548	2662	58,000.99	16	26	1,697.06
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	76	133	38,011.47	1969	2398	368,149.05	24	27	2,454.76
OPTOMETRIST	37	45	3,212.83	658	746	50,014.50	13	18	1,245.50

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	31	86	2,738.50	358	748	23,796.74	16	47	1,583.98
PODIATRIC	18	23	3,197.80	35	49	4,394.90	5	6	357.45
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	1,800.31	0	0	0.00
PSYCHIATRIC	61	190	10,755.39	9	9	1,033.83	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	12	399.45	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	8	843	12,030.71	0	0	0.00
AIDS WAIVER SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
ELDERLY WAIVER SERVICES	1	1	25.58	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	2	3	803.84	15	8	5,151.54	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 *	1193	63081	3685,033.27	14141	97405	2740,459.91	256	7445	560,342.86

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	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	5	18	21,974.30	0	0	0.00	0	0	0.00
OUTPATIENT	12	366	13,567.41	0	0	0.00	0	0	0.00
CHILD PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
CHILD DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
ADULT PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
ADULT DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
SKILLED NURSING FACILITY	0	0	0.00	0	0	0.00	0	0	0.00
INTERMEDIATE CARE FACILITY	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	12	6	1,818.47	0	0	0.00	0	0	0.00
CLINIC SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	0	0	0.00	0	0	0.00	0	0	0.00
HABILITATION SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
REMEDIAL SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	1	1	122.82	0	0	0.00	0	0	0.00
LOCAL EDUCATION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00



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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	OTHER ICARE ADULT 19-64			OTHER ICARE ADULT OB			OTHER ICARE CHRN DSH		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
EARLY ACCESS SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PRESCRIBED DRUGS	110	141	12,870.88	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	2	45	496.81	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	1	4	310.88	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	5	15	1,110.11	0	0	0.00	0	0	0.00
RESIDENTIAL CARE FACILITY	2	323	3,338.20	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 *	113	919	55,609.88	0	0	0.00	0	0	0.00

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	OTHER ICARE PMIC MHI 300%			OTHER ICARE MHI 300%			STATE ONLY		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
INPATIENT	6	259	44,132.53	0	0	0.00	4	5	8,365.69
OUTPATIENT	53	835	15,831.39	1	0	44.56-	106	1802	35,642.72
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	0	0	0.00	0	0	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	1	0	95.92-	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	13	417.13	0	0	0.00	0	0	0.00
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	137	197	8,602.21	1	1	21.68	171	372	26,105.72
CLINIC SERVICES	15	18	1,489.15	1	1	15.00	29	43	5,198.38
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	12	41	756.53	0	0	0.00	45	151	4,415.75
HABILITATION SERVICES	4	177	7,737.04	1	74	2,748.36	9	298	9,809.80
REMEDIAL SERVICES	244	7303	140,500.24	0	0	0.00	34	928	17,751.29
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	1	1	115.45	0	0	0.00	8	8	874.49
LOCAL EDUCATION AGENCY	25	5198	38,030.40	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	410	1595	110,628.46	0	0	0.00	207	502	24,326.88
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	93.79	0	0	0.00	18	21	1,500.58
IOWA PLAN PROGRAM	428	432	50,110.61	0	0	0.00	405	457	64,727.36
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	153.80	0	0	0.00	4	7	149.61
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	6	6	12.00	0	0	0.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	45	113	9,007.85	0	0	0.00	0	0	0.00
MEDICAL SUPPLIES	17	1783	2,271.10	0	0	0.00	6	1306	1,357.81
OTHER PRACTITIONER	33	2436	28,180.19	0	0	0.00	27	39	1,636.84
FAMILY CENTERED PROGRAM	0	0	0.00	0	0	0.00	0	0	0.00
FAMILY PRESERVATION	0	0	0.00	0	0	0.00	0	0	0.00
TREATMENT FOSTER FAMILY CARE	0	0	0.00	0	0	0.00	0	0	0.00
GROUP TREATMENT THERAPY	0	0	0.00	0	0	0.00	0	0	0.00
DENTAL	43	48	3,996.30	0	0	0.00	28	34	5,607.86
OPTOMETRIST	13	16	918.76	0	0	0.00	17	18	1,301.58

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	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	9	21	559.35	0	0	0.00	13	31	1,092.71
PODIATRIC	5	4	20.07	0	0	0.00	3	3	340.68
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	121.82	0	0	0.00	1	4	71.72
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	334	17427	294,222.68	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	42	614.46	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	415	397	179,223.93	0	0	0.00	1	3	642.18
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 *	398	38368	937,747.24	2	76	2,644.56	366	6032	210,919.65

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	30	128	288,899.82	168	772	480,430.05	0	0	0.00
OUTPATIENT	354	8279	205,822.27	3171	74728	689,144.43	0	0	0.00
CHILD PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
CHILD DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
ADULT PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
ADULT DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
SKILLED NURSING FACILITY	1	52	30,936.36	10	189	0.00	0	0	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	11	148	15,074.00	0	0	0.00
INTER CARE MENTAL RETARDA	0	0	0.00	2067	58851	23770,659.27	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	0	0	0.00
HOME HEALTH	23	220	15,796.43	1338	64624	1906,820.61	1	0	0.00
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	594	1659	153,821.83	5013	15222	453,484.32	0	0	0.00
CLINIC SERVICES	145	2514	43,510.90	448	581	71,819.66	0	0	0.00
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	95	339	5,665.73	633	943	11,838.73	0	0	0.00
HABILITATION SERVICES	6	70	2,662.19	61	1437	59,226.56	0	0	0.00
REMEDIAL SERVICES	61	1786	31,085.74	142	3751	84,178.55	0	0	0.00
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	21	18	2,483.49	119	130	14,554.30	0	0	0.00
LOCAL EDUCATION AGENCY	4	492	12,896.95	708	150808	2421,210.50	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	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	33	273	3,351.41	0	0	0.00
PRESCRIBED DRUGS	961	4747	253,798.25	6814	26146	1503,238.66	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	8	8	850.67	14	15	1,876.53	0	0	0.00
IOWA PLAN PROGRAM	1439	1503	146,569.52	11052	11136	716,641.62	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	4	4	77.83	39	47	2,431.37	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	1	1	2.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	6	12	817.68	616	1562	165,495.36	0	0	0.00
MEDICAL SUPPLIES	138	8829	30,879.17	2604	416948	737,744.85	0	0	0.00
OTHER PRACTITIONER	89	608	18,401.40	987	23841	559,240.14	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	119	160	35,363.90	1643	1919	212,454.29	0	0	0.00
OPTOMETRIST	83	102	7,431.96	668	831	39,867.58	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 UNITS OF  
 SERVED SERVICE

AMOUNT  
 PAID

RECIPS UNITS OF  
 SERVED SERVICE

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RECIPS UNITS OF  
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AMOUNT  
 PAID

CHIROPRACTIC	61	165	5,268.04	304	623	12,544.70	0	0	0.00
PODIATRIC	21	26	1,692.78	688	948	32,056.48	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	281	12840	429,443.61	0	0	0.00
PSYCHIATRIC	5	6	318.99	551	843	35,298.39	0	0	0.00
RESIDENTIAL CARE FACILITY	0	0	0.00	8	261	1,998.58	0	0	0.00
ID WAIVER SERVICE	3	112	3,394.08	8873	547775	22088,309.92	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	3	199	3,706.22	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	184	3,086.94	2	73	827.24	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	2	79	3,089.49	154	7771	141,627.50	0	0	0.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	7	8	3,156.04	9243	12090	3546,521.78	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 *	1488	32309	1311,484.67	11738	1438127	60209,412.99	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	2	2,197.66	8091	44748	41763,642.44
OUTPATIENT	0	0	0.00	9	30	1,718.38	72904	1461939	24288,626.35
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	883	17064	2431,557.88
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	12523	336017	27170,671.41
INTER CARE MENTAL RETARDA	0	0	0.00	0	0	0.00	2082	59498	21079,642.64
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	37	1017	341,409.81
HOME HEALTH	0	0	0.00	4	10	45.73	15164	347749	11209,874.25
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	3	3	1,072.24
PHYSICIAN	0	0	0.00	29	40	4,847.91	140970	445865	21439,764.33
CLINIC SERVICES	0	0	0.00	11	20	2,364.96	25767	41541	5840,869.17
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	0	0	0.00	4	6	102.71	25579	54294	1136,113.83
HABILITATION SERVICES	0	0	0.00	0	0	0.00	3302	89387	4226,207.53
REMEDIAL SERVICES	0	0	0.00	3	90	1,876.30	10501	393368	6174,010.18
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	9	0	19,951.69-
AMBULANCE SERVICES	0	0	0.00	0	0	0.00	3253	3783	459,911.60
LOCAL EDUCATION AGENCY	0	0	0.00	0	0	0.00	1995	404382	5580,504.08

## 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	499	2677	32,904.33
PRESCRIBED DRUGS	0	0	0.00	14	26	1,009.32	150954	436809	23091,523.15
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	1	2	223.28	10088	12773	1095,732.77
IOWA PLAN PROGRAM	0	0	0.00	105	120	1,187.65	326790	350660	9928,384.55
MANAGED SUBSTANCE ABUSE	0	0	0.00	0	0	0.00	0	0	0.00
MENTAL HEALTH ACCESS PLAN	0	0	0.00	0	0	0.00	0	0	0.00
EPSDT SCREENING	0	0	0.00	2	2	186.12	8985	9821	1391,550.79
HMO SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PACE SERVICES	0	0	0.00	0	0	0.00	61	61	174,777.50
PATIENT MANAGEMENT	0	0	0.00	61	61	122.00	166644	166651	333,108.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	1	1	87.34	3783	10658	532,764.25
MEDICAL SUPPLIES	0	0	0.00	0	0	0.00	26611	2368363	5116,122.09
OTHER PRACTITIONER	0	0	0.00	0	0	0.00	18212	111394	2822,728.67
FAMILY CENTERED PROGRAM	0	0	0.00	0	0	0.00	0	0	0.00
FAMILY PRESERVATION	0	0	0.00	0	0	0.00	0	0	0.00
TREATMENT FOSTER FAMILY CARE	0	0	0.00	0	0	0.00	0	0	0.00
GROUP TREATMENT THERAPY	0	0	0.00	0	0	0.00	0	0	0.00
DENTAL	0	0	0.00	14	22	2,804.88	32991	41355	6042,254.65
OPTOMETRIST	0	0	0.00	2	3	132.98	14421	17973	1070,715.30

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	9206	21047	570,471.74
PODIATRIC	0	0	0.00	0	0	0.00	4983	7969	287,616.67
PHYSICAL DISABILITIES SVCS	0	0	0.00	0	0	0.00	750	30283	370,209.26
BRAIN INJ WAIVER SERVICES	0	0	0.00	0	0	0.00	1054	51989	1613,225.14
PSYCHIATRIC	0	0	0.00	0	0	0.00	3802	6615	318,932.56
RESIDENTIAL CARE FACILITY	0	0	0.00	0	0	0.00	1620	50642	321,954.44
ID WAIVER SERVICE	0	0	0.00	0	0	0.00	10136	627469	25285,822.17
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	0	0	0.00	541	29698	486,990.29
AIDS WAIVER SERVICES	0	0	0.00	0	0	0.00	50	4789	53,576.46
ELDERLY WAIVER SERVICES	0	0	0.00	0	0	0.00	9799	492340	6687,145.56
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	0	0	0.00	2194	112896	1838,901.92
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	11673	15048	4423,852.37
UNASSIGNED	0	0	0.00	0	0	0.00	20	0	6837,012.78
* A L L C A T E G O R I E S *	0	0	0.00	114	435	18,907.22	394727	8680635	273852,203.46

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