

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

(BY CATEGORY OF SERVICE BY PROGRAM)

| CATEGORY OF SERVICE | FEDERAL ONLY | | | REFUGEE TXXI | | | AGED | | |
|----------------------------|---------------|------------------|-------------|---------------|------------------|-------------|---------------|------------------|--------------|
| | RECIPS SERVED | UNITS OF SERVICE | AMOUNT PAID | RECIPS SERVED | UNITS OF SERVICE | AMOUNT PAID | RECIPS SERVED | UNITS OF SERVICE | AMOUNT PAID |
| INPATIENT | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 467 | 2134 | 512,431.50 |
| OUTPATIENT | 80 | 906 | 8,281.70 | 0 | 0 | 0.00 | 3990 | 69205 | 590,578.00 |
| 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 | 178 | 2636 | 19,859.05 |
| INTERMEDIATE CARE FACILITY | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 4734 | 144406 | 12585,960.96 |
| 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 | 150 | 32,821.80 |
| HOME HEALTH | 1 | 13 | 1,122.55 | 0 | 0 | 0.00 | 2784 | 54640 | 1934,891.88 |
| LEAD INSPECTION AGENCY | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| PHYSICIAN | 57 | 102 | 8,928.35 | 0 | 0 | 0.00 | 6353 | 35364 | 466,033.91 |
| CLINIC SERVICES | 28 | 45 | 6,955.18 | 0 | 0 | 0.00 | 485 | 415 | 44,024.67 |
| MEP CASE MANAGEMENT | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| LAB AND RADIOLOGICAL | 12 | 22 | 362.17 | 0 | 0 | 0.00 | 866 | 222 | 3,084.77 |
| HABILITATION SERVICES | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 55 | 1637 | 107,127.65 |
| 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 | 132.73 | 0 | 0 | 0.00 | 282 | 352 | 34,695.62 |
| 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 | 43 | 79 | 2,686.16 | 0 | 0 | 0.00 | 2997 | 4966 | 69,989.61 |
| 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 | 131 | 152 | 3,798.65 | 0 | 0 | 0.00 | 4 | 4 | 243.61 |
| 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 | 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 | 88 | 88 | 176.00 | 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 | 5 | 13 | 1,116.77 | 0 | 0 | 0.00 | 2761 | 156280 | 248,975.02 |
| OTHER PRACTITIONER | 1 | 10 | 588.49 | 0 | 0 | 0.00 | 377 | 1088 | 18,386.85 |
| 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 | 19 | 26 | 4,606.95 | 0 | 0 | 0.00 | 486 | 595 | 77,529.46 |
| OPTOMETRIST | 3 | 4 | 304.56 | 0 | 0 | 0.00 | 671 | 1119 | 32,598.03 |

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 | 1 | 29.88 | 0 | 0 | 0.00 | 379 | 884 | 8,139.28 |
| PODIATRIC | 1 | 1 | 41.81 | 0 | 0 | 0.00 | 761 | 1233 | 18,139.92 |
| 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 | 67 | 4,292.35 |
| PSYCHIATRIC | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 164 | 285 | 8,249.96 |
| RESIDENTIAL CARE FACILITY | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 289 | 8591 | 64,574.13 |
| ID WAIVER SERVICE | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 76 | 5566 | 253,737.27 |
| 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 | 3685 | 168389 | 2317,016.51 |
| 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 | 89 | 92 | 24,361.03 |
| 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 * | 198 | 1463 | 39,131.95 | 0 | 0 | 0.00 | 14648 | 660320 | 19477,742.84 |

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 | 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 | 1699 | 9923 | 7461,995.87 | 602 | 1845 | 2950,567.75 |
| OUTPATIENT | 2 | 148 | 577.45 | 19485 | 528355 | 5805,029.66 | 14599 | 262449 | 3742,164.51 |
| 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 | 183 | 5075 | 2497,717.03 | 3 | 12 | 5,176.56 |
| INTERMEDIATE CARE FACILITY | 0 | 0 | 0.00 | 622 | 19099 | 2029,556.20 | 1 | 17 | 1,962.82 |
| INTER CARE MENTAL RETARDA | 0 | 0 | 0.00 | 19 | 251 | 93,698.07 | 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 | 4134 | 84830 | 3007,183.48 | 69 | 399 | 36,947.03 |
| LEAD INSPECTION AGENCY | 0 | 0 | 0.00 | 2 | 2 | 743.18 | 0 | 0 | 0.00 |
| PHYSICIAN | 2 | 2 | 99.32 | 25718 | 128577 | 4158,048.41 | 16708 | 34236 | 3010,385.09 |
| CLINIC SERVICES | 0 | 0 | 0.00 | 3752 | 4918 | 685,972.64 | 3481 | 4537 | 653,417.57 |
| MEP CASE MANAGEMENT | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| LAB AND RADIOLOGICAL | 0 | 0 | 0.00 | 3590 | 6802 | 103,503.92 | 3532 | 9513 | 249,232.90 |
| HABILITATION SERVICES | 0 | 0 | 0.00 | 2825 | 85473 | 4438,045.94 | 29 | 520 | 27,361.94 |
| REMEDIAL SERVICES | 0 | 0 | 0.00 | 864 | 27566 | 465,898.10 | 271 | 7010 | 112,778.94 |
| REHAB SUPPORT SERVICES | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| AMBULANCE SERVICES | 0 | 0 | 0.00 | 870 | 1107 | 114,299.40 | 208 | 211 | 25,001.70 |
| LOCAL EDUCATION AGENCY | 0 | 0 | 0.00 | 643 | 145515 | 1916,426.02 | 10 | 2527 | 20,264.78 |

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 | 73 | 294 | 3,263.58 | 0 | 0 | 0.00 |
| PRESCRIBED DRUGS | 0 | 0 | 0.00 | 25517 | 107594 | 7523,144.48 | 21863 | 60608 | 2567,122.75 |
| 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 | 138 | 151 | 14,426.88 | 5920 | 7098 | 636,489.09 |
| IOWA PLAN PROGRAM | 2 | 2 | 118.93 | 52182 | 54179 | 3854,145.47 | 42055 | 46643 | 1397,656.61 |
| 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 | 0 | 0 | 0.00 | 186 | 203 | 10,423.68 | 53 | 67 | 3,530.67 |
| HMO SERVICES | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| PACE SERVICES | 0 | 0 | 0.00 | 28 | 28 | 86,412.80 | 0 | 0 | 0.00 |
| PATIENT MANAGEMENT | 0 | 0 | 0.00 | 1 | 1 | 2.00 | 25731 | 25731 | 51,462.00 |
| HEALTH INS PREMIUM PAYMENT | 0 | 0 | 0.00 | 652 | 1462 | 170,718.36 | 146 | 331 | 12,456.10 |
| MEDICAL SUPPLIES | 0 | 0 | 0.00 | 9236 | 698451 | 1939,368.76 | 942 | 21327 | 161,492.51 |
| OTHER PRACTITIONER | 0 | 0 | 0.00 | 2779 | 51169 | 577,801.69 | 1896 | 5718 | 224,589.19 |
| 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 | 235.15 | 4268 | 5556 | 899,198.52 | 3536 | 4918 | 887,929.11 |
| OPTOMETRIST | 0 | 0 | 0.00 | 2546 | 3558 | 175,015.41 | 1694 | 2101 | 144,414.76 |

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 | 2290 | 5511 | 85,483.54 | 1798 | 4179 | 142,083.31 |
| PODIATRIC | 0 | 0 | 0.00 | 1310 | 2293 | 76,383.49 | 202 | 267 | 32,383.21 |
| PHYSICAL DISABILITIES SVCS | 0 | 0 | 0.00 | 525 | 20299 | 257,671.09 | 0 | 0 | 0.00 |
| BRAIN INJ WAIVER SERVICES | 0 | 0 | 0.00 | 326 | 16019 | 555,731.83 | 0 | 0 | 0.00 |
| PSYCHIATRIC | 0 | 0 | 0.00 | 2647 | 4615 | 150,403.02 | 30 | 85 | 4,656.10 |
| RESIDENTIAL CARE FACILITY | 0 | 0 | 0.00 | 1274 | 39154 | 315,869.61 | 0 | 0 | 0.00 |
| ID WAIVER SERVICE | 0 | 0 | 0.00 | 994 | 68753 | 2939,230.30 | 1 | 16 | 202.88 |
| CHILDRENS MENTAL HEALTH SVC | 0 | 0 | 0.00 | 26 | 1399 | 24,172.98 | 9 | 560 | 8,849.54 |
| AIDS WAIVER SERVICES | 0 | 0 | 0.00 | 14 | 1367 | 15,469.71 | 0 | 0 | 0.00 |
| ELDERLY WAIVER SERVICES | 0 | 0 | 0.00 | 32 | 1500 | 26,122.73 | 0 | 0 | 0.00 |
| ILL & HANDICAPPED WAIVER SVCS | 0 | 0 | 0.00 | 1964 | 93384 | 1499,593.30 | 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 | 1163 | 1193 | 322,473.76 | 11 | 10 | 4,502.40 |
| 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 * | 2 | 153 | 1,030.85 | 56474 | 2225626 | 54300,644.91 | 54028 | 502935 | 17115,081.82 |

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 | 370 | 1808 | 1940,829.17 | 324 | 6452 | 1668,823.80 | 1915 | 10453 | 11006,333.35 |
| OUTPATIENT | 13058 | 128485 | 1919,959.82 | 3741 | 56442 | 718,722.79 | 20560 | 280492 | 3076,308.61 |
| 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 | 5 | 83 | 11,849.90- |
| INTERMEDIATE CARE FACILITY | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 3 | 61 | 42,269.88 |
| INTER CARE MENTAL RETARDA | 0 | 0 | 0.00 | 1 | 0 | 145.22- | 1 | 0 | 286,350.00- |
| NURSING FAC FOR MENTAL ILL | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| HOME HEALTH | 422 | 1611 | 62,203.02 | 116 | 312 | 13,903.48 | 806 | 3753 | 377,945.45- |
| LEAD INSPECTION AGENCY | 10 | 11 | 4,045.62 | 0 | 0 | 0.00 | 2 | 5 | 1,905.60 |
| PHYSICIAN | 19337 | 33381 | 2181,055.45 | 4575 | 9976 | 636,132.62 | 32998 | 70258 | 4863,951.88 |
| CLINIC SERVICES | 4413 | 5022 | 718,523.27 | 1202 | 1404 | 201,018.95 | 7750 | 10175 | 1703,996.68 |
| MEP CASE MANAGEMENT | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| LAB AND RADIOLOGICAL | 1507 | 3015 | 50,725.02 | 553 | 1675 | 35,816.11 | 3465 | 10003 | 183,400.44 |
| HABILITATION SERVICES | 0 | 0 | 0.00 | 24 | 627 | 33,756.29 | 5 | 25 | 2,367.30 |
| REMEDIAL SERVICES | 2664 | 79820 | 1425,647.05 | 779 | 25132 | 423,894.86 | 2537 | 74028 | 1277,642.38 |
| REHAB SUPPORT SERVICES | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 1 | 0 | 6,067.17- |
| AMBULANCE SERVICES | 117 | 114 | 15,807.64 | 46 | 45 | 6,486.24 | 183 | 251 | 30,914.38 |
| LOCAL EDUCATION AGENCY | 176 | 42749 | 333,462.24 | 51 | 9775 | 78,001.82 | 218 | 36939 | 301,108.67 |

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 | 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 | 82 | 375 | 4,342.88 | 27 | 87 | 1,042.65 | 114 | 410 | 4,559.63 |
| PRESCRIBED DRUGS | 18448 | 32437 | 1679,858.66 | 5225 | 11849 | 663,859.55 | 28972 | 51301 | 2738,877.87 |
| 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 | 792 | 897 | 83,521.69 | 245 | 290 | 33,475.84 | 455 | 510 | 58,925.52 |
| IOWA PLAN PROGRAM | 71330 | 75907 | 726,509.97 | 16243 | 17728 | 348,537.12 | 108288 | 119958 | 1402,200.19 |
| 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 | 2703 | 2734 | 342,432.03 | 412 | 426 | 57,117.07 | 3613 | 3669 | 715,124.20 |
| 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 | 46476 | 46476 | 92,952.00 | 9927 | 9927 | 19,854.00 | 74420 | 74420 | 148,840.00 |
| HEALTH INS PREMIUM PAYMENT | 228 | 588 | 13,612.58 | 62 | 150 | 6,178.42 | 1688 | 4391 | 113,482.82 |
| MEDICAL SUPPLIES | 1026 | 13229 | 112,858.02 | 198 | 5177 | 33,395.88 | 1436 | 22780 | 160,425.27 |
| OTHER PRACTITIONER | 2577 | 21309 | 329,557.32 | 626 | 6150 | 81,416.91 | 4152 | 28606 | 508,591.49 |
| 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 | 5113 | 6020 | 742,789.94 | 1307 | 1656 | 233,412.41 | 8258 | 9854 | 1275,803.21 |
| OPTOMETRIST | 1774 | 2075 | 133,518.42 | 489 | 591 | 38,074.61 | 2807 | 3276 | 206,306.01 |

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 | 888 | 1669 | 51,672.62 | 268 | 636 | 21,830.26 | 1559 | 3052 | 92,758.22 |
| PODIATRIC | 92 | 115 | 11,805.50 | 36 | 43 | 5,450.75 | 139 | 167 | 17,318.87 |
| PHYSICAL DISABILITIES SVCS | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| BRAIN INJ WAIVER SERVICES | 0 | 0 | 0.00 | 1 | 3 | 716.82 | 1 | 0 | 1,844.22 |
| PSYCHIATRIC | 16 | 29 | 2,976.09 | 18 | 62 | 3,560.82 | 43 | 131 | 57,746.25 |
| RESIDENTIAL CARE FACILITY | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 1 | 0 | 4,464.18 |
| ID WAIVER SERVICE | 1 | 10 | 325.20 | 0 | 0 | 0.00 | 2 | 25 | 8,640.45- |
| CHILDRENS MENTAL HEALTH SVC | 33 | 2276 | 35,725.35 | 87 | 4660 | 76,364.39 | 51 | 3177 | 46,086.91 |
| 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 | 71 | 13,717.30- |
| SICK & HANDICAPPED WAIVER SVCS | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 3 | 53 | 5,344.84 |
| COUNTY OFFICE REIMBURSEMENT | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| MEP SERVICES | 35 | 35 | 15,619.29 | 77 | 77 | 32,750.90 | 49 | 48 | 79,307.67- |
| UNASSIGNED | 0 | 0 | 0.00 | 1 | 0 | 0.00 | 3 | 0 | 5379,326.56- |
| * A L L C A T E G O R I E S * | 77661 | 502197 | 13032,335.86 | 17541 | 171352 | 5473,450.14 | 114852 | 822425 | 23885,694.37 |

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

(BY CATEGORY OF SERVICE BY PROGRAM)

| CATEGORY OF SERVICE | FOSTER - PRESUB - SUB ADOPTS | | | INTERMEDIATE CARE FACILITY | | | MEDICALLY NEEDY NO SPEND DN | | |
|----------------------------|------------------------------|------------------|-------------|----------------------------|------------------|--------------|-----------------------------|------------------|-------------|
| | RECIPIS SERVED | UNITS OF SERVICE | AMOUNT PAID | RECIPIS SERVED | UNITS OF SERVICE | AMOUNT PAID | RECIPIS SERVED | UNITS OF SERVICE | AMOUNT PAID |
| INPATIENT | 41 | 359 | 234,906.32 | 621 | 2992 | 829,619.46 | 34 | 188 | 307,311.95 |
| OUTPATIENT | 1415 | 23362 | 281,836.91 | 4853 | 99172 | 785,651.14 | 700 | 13295 | 214,873.03 |
| 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 | 48 | 27,278.56 | 359 | 5311 | 78,925.73 | 2 | 40 | 16,027.00 |
| INTERMEDIATE CARE FACILITY | 0 | 0 | 0.00 | 6729 | 203880 | 21235,282.12 | 2 | 53 | 6,370.13 |
| INTER CARE MENTAL RETARDA | 15 | 249 | 107,925.54 | 9 | 48 | 35,831.90 | 0 | 0 | 0.00 |
| NURSING FAC FOR MENTAL ILL | 0 | 0 | 0.00 | 31 | 747 | 230,541.39 | 0 | 0 | 0.00 |
| HOME HEALTH | 79 | 4371 | 120,551.65 | 3821 | 76976 | 3003,020.86 | 39 | 333 | 10,064.62 |
| LEAD INSPECTION AGENCY | 2 | 4 | 1,486.36 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| PHYSICIAN | 2247 | 3555 | 203,273.61 | 7031 | 39229 | 569,168.52 | 851 | 2544 | 157,949.09 |
| CLINIC SERVICES | 531 | 698 | 89,457.13 | 475 | 458 | 72,632.13 | 142 | 172 | 23,428.78 |
| MEP CASE MANAGEMENT | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| LAB AND RADIOLOGICAL | 271 | 913 | 14,220.98 | 1063 | 458 | 5,510.16 | 152 | 321 | 7,210.43 |
| HABILITATION SERVICES | 12 | 153 | 8,221.41 | 38 | 957 | 43,216.63 | 25 | 600 | 44,797.41 |
| REMEDIAL SERVICES | 2271 | 149648 | 1763,005.07 | 4 | 84 | 1,637.20 | 12 | 241 | 3,174.93 |
| REHAB SUPPORT SERVICES | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| AMBULANCE SERVICES | 19 | 21 | 3,573.32 | 467 | 610 | 58,200.18 | 21 | 24 | 2,973.87 |
| LOCAL EDUCATION AGENCY | 123 | 27684 | 310,414.14 | 23 | 2888 | 80,024.00 | 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 | 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 | 44 | 161 | 1,946.27 | 2 | 23 | 240.24 | 0 | 0 | 0.00 |
| PRESCRIBED DRUGS | 4920 | 12401 | 1063,126.22 | 9621 | 21170 | 382,513.22 | 1051 | 3494 | 159,439.35 |
| 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 | 48 | 53 | 4,916.58 | 3 | 5 | 114.79 | 39 | 40 | 3,756.80 |
| IOWA PLAN PROGRAM | 10049 | 10431 | 1036,405.00 | 2299 | 2364 | 155,570.26 | 1615 | 1826 | 60,349.72 |
| 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 | 144 | 173 | 10,814.50 | 3 | 3 | 103.88 | 1 | 1 | 122.28 |
| HMO SERVICES | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| PACE SERVICES | 0 | 0 | 0.00 | 37 | 37 | 99,489.00 | 0 | 0 | 0.00 |
| PATIENT MANAGEMENT | 97 | 97 | 194.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| HEALTH INS PREMIUM PAYMENT | 162 | 364 | 17,921.32 | 27 | 55 | 10,907.05 | 7 | 12 | 1,145.70 |
| MEDICAL SUPPLIES | 221 | 23347 | 69,530.71 | 4436 | 330795 | 472,567.61 | 154 | 8191 | 17,189.91 |
| OTHER PRACTITIONER | 580 | 10815 | 132,657.57 | 488 | 2874 | 57,176.89 | 114 | 280 | 13,664.28 |
| 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 | 990 | 1176 | 143,272.73 | 961 | 1182 | 168,554.52 | 183 | 235 | 45,898.63 |
| OPTOMETRIST | 430 | 487 | 30,472.87 | 695 | 1076 | 32,819.42 | 92 | 115 | 6,915.46 |

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE

| | 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 | 140 | 250 | 7,458.95 | 270 | 1055 | 5,418.52 | 75 | 174 | 5,095.04 |
| PODIATRIC | 31 | 39 | 2,497.20 | 1171 | 2000 | 30,915.04 | 27 | 40 | 1,584.02 |
| PHYSICAL DISABILITIES SVCS | 0 | 0 | 0.00 | 219 | 8626 | 102,224.94 | 0 | 0 | 0.00 |
| BRAIN INJ WAIVER SERVICES | 32 | 1105 | 29,875.62 | 426 | 18485 | 646,985.51 | 0 | 0 | 0.00 |
| PSYCHIATRIC | 20 | 22 | 2,070.27 | 243 | 495 | 16,981.71 | 24 | 39 | 1,525.01 |
| RESIDENTIAL CARE FACILITY | 0 | 0 | 0.00 | 6 | 87 | 1,578.95 | 0 | 0 | 0.00 |
| ID WAIVER SERVICE | 210 | 7332 | 255,491.48 | 4 | 44 | 4,966.71 | 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 | 30 | 2681 | 29,533.18 | 0 | 0 | 0.00 |
| ELDERLY WAIVER SERVICES | 0 | 0 | 0.00 | 6005 | 290336 | 3646,413.44 | 0 | 0 | 0.00 |
| ILL & HANDICAPPED WAIVER SVCS | 39 | 2378 | 41,175.59 | 5 | 134 | 2,372.82 | 0 | 0 | 0.00 |
| COUNTY OFFICE REIMBURSEMENT | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| MEP SERVICES | 222 | 239 | 61,720.44 | 129 | 124 | 35,746.16 | 1 | 1 | 265.18 |
| 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 * | 10154 | 281839 | 6023,141.20 | 14518 | 1117461 | 32932,455.28 | 1940 | 32259 | 1111,132.62 |

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 | 171 | 796 | 1068,842.05 | 46 | 498 | 188,407.61 | 12 | 55 | 89,606.54 |
| OUTPATIENT | 793 | 28503 | 485,112.59 | 1776 | 23785 | 348,458.18 | 164 | 4742 | 105,026.16 |
| 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 | 2 | 120 | 66,565.00 | 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 | 33 | 439 | 31,460.43 | 38 | 117 | 2,450.72 | 3 | 27 | 3,189.08 |
| LEAD INSPECTION AGENCY | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| PHYSICIAN | 898 | 4350 | 300,057.56 | 3095 | 4676 | 284,559.29 | 174 | 736 | 134,580.85 |
| CLINIC SERVICES | 97 | 141 | 13,024.40 | 762 | 842 | 121,176.78 | 18 | 24 | 5,175.23 |
| MEP CASE MANAGEMENT | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| LAB AND RADIOLOGICAL | 63 | 278 | 4,630.92 | 183 | 541 | 9,454.22 | 35 | 83 | 1,568.73 |
| HABILITATION SERVICES | 9 | 396 | 27,008.09 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| REMEDIAL SERVICES | 1 | 24 | 226.56 | 421 | 13596 | 216,909.26 | 0 | 0 | 0.00 |
| REHAB SUPPORT SERVICES | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| AMBULANCE SERVICES | 44 | 48 | 9,266.48 | 14 | 14 | 1,643.16 | 0 | 0 | 0.00 |
| LOCAL EDUCATION AGENCY | 0 | 0 | 0.00 | 49 | 9222 | 67,565.49 | 0 | 0 | 0.00 |

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

(BY CATEGORY OF SERVICE BY PROGRAM)

| CATEGORY OF SERVICE | 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 | 17 | 178.84 | 0 | 0 | 0.00 |
| PRESCRIBED DRUGS | 365 | 1598 | 56,461.15 | 3906 | 7168 | 514,420.14 | 209 | 877 | 77,140.42 |
| DRUG CAPITATION | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| INDIAN HEALTH SERVICES | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| FAMILY PLANNING SERVICES | 7 | 7 | 277.23 | 90 | 110 | 9,820.70 | 0 | 0 | 0.00 |
| IOWA PLAN PROGRAM | 0 | 0 | 0.00 | 14403 | 15736 | 167,012.76 | 254 | 262 | 26,421.10 |
| 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 | 168 | 152 | 12,095.99 | 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 | 10316 | 10316 | 20,632.00 | 0 | 0 | 0.00 |
| HEALTH INS PREMIUM PAYMENT | 0 | 0 | 0.00 | 12 | 17 | 731.46 | 0 | 0 | 0.00 |
| MEDICAL SUPPLIES | 68 | 4194 | 15,399.69 | 106 | 2586 | 14,918.59 | 20 | 812 | 4,373.43 |
| OTHER PRACTITIONER | 100 | 194 | 12,096.38 | 441 | 2632 | 48,614.70 | 13 | 18 | 1,269.98 |
| 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 | 74 | 120 | 26,501.89 | 1546 | 1846 | 259,200.23 | 20 | 29 | 4,044.85 |
| OPTOMETRIST | 34 | 42 | 2,388.99 | 508 | 582 | 38,272.44 | 8 | 10 | 734.89 |

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 | 30 | 61 | 1,995.52 | 295 | 521 | 16,381.10 | 14 | 24 | 761.77 |
| PODIATRIC | 17 | 25 | 1,891.95 | 32 | 38 | 5,515.44 | 3 | 3 | 487.77 |
| PHYSICAL DISABILITIES SVCS | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| BRAIN INJ WAIVER SERVICES | 0 | 0 | 0.00 | 2 | 46 | 1,055.36 | 0 | 0 | 0.00 |
| PSYCHIATRIC | 46 | 84 | 3,876.36 | 11 | 19 | 1,085.12 | 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 | 8 | 157.03 | 0 | 0 | 0.00 |
| CHILDRENS MENTAL HEALTH SVC | 0 | 0 | 0.00 | 7 | 629 | 9,055.08 | 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 | 8 | 8 | 3,700.67 | 0 | 0 | 0.00 |
| UNASSIGNED | 1 | 0 | 0.00 | 2 | 0 | 0.00 | 0 | 0 | 0.00 |
| * A L L C A T E G O R I E S * | 1155 | 41420 | 2127,083.24 | 14113 | 95722 | 2363,472.36 | 251 | 7702 | 454,380.80 |

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 | 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 | 4 | 2 | 24,512.61 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| OUTPATIENT | 12 | 97 | 6,117.29 | 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 | 20 | 5,312.07 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| CLINIC SERVICES | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| MEP CASE MANAGEMENT | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| LAB AND RADIOLOGICAL | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| HABILITATION SERVICES | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| REMEDIAL SERVICES | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| REHAB SUPPORT SERVICES | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| AMBULANCE SERVICES | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| LOCAL EDUCATION AGENCY | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |

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

(BY CATEGORY OF SERVICE BY PROGRAM)

| CATEGORY OF SERVICE | OTHER ICARE ADULT 19-64 | | | OTHER ICARE ADULT OB | | | OTHER ICARE CHRN DSH | | |
|------------------------------|-------------------------|------------------|-------------|----------------------|------------------|-------------|----------------------|------------------|-------------|
| | RECIPS SERVED | UNITS OF SERVICE | AMOUNT PAID | RECIPS SERVED | UNITS OF SERVICE | AMOUNT PAID | RECIPS SERVED | UNITS OF SERVICE | AMOUNT PAID |
| EARLY ACCESS SERVICES | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| PRESCRIBED DRUGS | 88 | 101 | 9,041.19 | 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 | 2 | 2 | 87.26 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| MEDICAL SUPPLIES | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| OTHER PRACTITIONER | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| FAMILY CENTERED PROGRAM | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| FAMILY PRESERVATION | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| TREATMENT FOSTER FAMILY CARE | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| GROUP TREATMENT THERAPY | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| DENTAL | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| OPTOMETRIST | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |

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

(BY CATEGORY OF SERVICE BY PROGRAM)

| CATEGORY OF SERVICE | OTHER ICARE ADULT 19-64 | | | OTHER ICARE ADULT OB | | | OTHER ICARE CHRN DSH | | |
|-------------------------------|-------------------------|------------------|-------------|----------------------|------------------|-------------|----------------------|------------------|-------------|
| | RECIPS SERVED | UNITS OF SERVICE | AMOUNT PAID | RECIPS SERVED | UNITS OF SERVICE | AMOUNT PAID | RECIPS SERVED | UNITS OF SERVICE | AMOUNT PAID |
| CHIROPRACTIC | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| PODIATRIC | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| PHYSICAL DISABILITIES SVCS | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| BRAIN INJ WAIVER SERVICES | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| PSYCHIATRIC | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| RESIDENTIAL CARE FACILITY | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| 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 * | 90 | 222 | 45,070.42 | 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 | 3 | 103 | 15,732.75 | 0 | 0 | 0.00 | 3 | 4 | 4,816.32 |
| OUTPATIENT | 73 | 964 | 8,625.58 | 1 | 18 | 34.42- | 141 | 1682 | 24,888.33 |
| CHILD PART HOSP | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| CHILD DAY TREATMENT | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| ADULT PART HOSP | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| ADULT DAY TREATMENT | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| SKILLED NURSING FACILITY | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| INTERMEDIATE CARE FACILITY | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| INTER CARE MENTAL RETARDA | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| NURSING FAC FOR MENTAL ILL | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| HOME HEALTH | 3 | 12 | 338.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| LEAD INSPECTION AGENCY | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| PHYSICIAN | 107 | 166 | 8,476.38 | 0 | 0 | 0.00 | 153 | 286 | 22,568.09 |
| CLINIC SERVICES | 12 | 15 | 1,342.37 | 0 | 0 | 0.00 | 26 | 39 | 4,822.90 |
| MEP CASE MANAGEMENT | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| LAB AND RADIOLOGICAL | 12 | 50 | 583.16 | 0 | 0 | 0.00 | 26 | 90 | 2,093.26 |
| HABILITATION SERVICES | 4 | 152 | 6,951.13 | 0 | 0 | 0.00 | 6 | 307 | 14,408.04 |
| REMEDIAL SERVICES | 225 | 7102 | 136,090.59 | 0 | 0 | 0.00 | 39 | 804 | 22,647.14 |
| REHAB SUPPORT SERVICES | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| AMBULANCE SERVICES | 1 | 1 | 93.74 | 0 | 0 | 0.00 | 4 | 4 | 487.61 |
| LOCAL EDUCATION AGENCY | 30 | 8692 | 55,839.21 | 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 | 386 | 1334 | 109,274.65 | 0 | 0 | 0.00 | 162 | 372 | 21,471.74 |
| 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 | 129.58 | 0 | 0 | 0.00 | 14 | 14 | 1,710.12 |
| IOWA PLAN PROGRAM | 450 | 464 | 52,987.95 | 0 | 0 | 0.00 | 400 | 432 | 61,205.46 |
| MANAGED SUBSTANCE ABUSE | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| MENTAL HEALTH ACCESS PLAN | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| EPSDT SCREENING | 4 | 3 | 88.45 | 0 | 0 | 0.00 | 3 | 7 | 101.79 |
| HMO SERVICES | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| PACE SERVICES | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| PATIENT MANAGEMENT | 2 | 2 | 4.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| HEALTH INS PREMIUM PAYMENT | 45 | 98 | 7,157.66 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| MEDICAL SUPPLIES | 20 | 1817 | 1,704.30 | 0 | 0 | 0.00 | 4 | 204 | 468.78 |
| OTHER PRACTITIONER | 47 | 3811 | 30,550.28 | 0 | 0 | 0.00 | 17 | 25 | 789.06 |
| 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 | 34 | 37 | 2,787.45 | 0 | 0 | 0.00 | 23 | 30 | 3,737.45 |
| OPTOMETRIST | 21 | 26 | 1,553.97 | 0 | 0 | 0.00 | 16 | 21 | 1,366.89 |

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 | 14 | 227.60 | 0 | 0 | 0.00 | 13 | 25 | 783.65 |
| PODIATRIC | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 2 | 3 | 250.57 |
| PHYSICAL DISABILITIES SVCS | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| BRAIN INJ WAIVER SERVICES | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| PSYCHIATRIC | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 2 | 4 | 297.43 |
| 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 | 353 | 18879 | 343,881.61 | 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 | 10 | 146.30 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| COUNTY OFFICE REIMBURSEMENT | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| MEP SERVICES | 353 | 353 | 155,102.63 | 0 | 0 | 0.00 | 1 | 1 | 214.06 |
| 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 * | 430 | 44106 | 939,669.34 | 1 | 18 | 34.42- | 394 | 4354 | 189,128.69 |

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 | 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 | 26 | 134 | 205,338.32 | 180 | 779 | 486,813.91 | 0 | 0 | 0.00 |
| OUTPATIENT | 434 | 10737 | 162,682.77 | 3336 | 85544 | 558,743.13 | 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 | 3 | 37 | 23,276.07 | 5 | 55 | 2,337.50 | 0 | 0 | 0.00 |
| INTERMEDIATE CARE FACILITY | 0 | 0 | 0.00 | 5 | 37 | 4,170.17 | 0 | 0 | 0.00 |
| INTER CARE MENTAL RETARDA | 0 | 0 | 0.00 | 2167 | 62069 | 26928,900.97 | 0 | 0 | 0.00 |
| NURSING FAC FOR MENTAL ILL | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| HOME HEALTH | 19 | 195 | 8,235.32 | 1315 | 51742 | 1928,107.60 | 0 | 0 | 0.00 |
| LEAD INSPECTION AGENCY | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| PHYSICIAN | 542 | 1391 | 140,241.72 | 4663 | 16992 | 392,358.19 | 0 | 0 | 0.00 |
| CLINIC SERVICES | 151 | 1017 | 34,427.74 | 394 | 486 | 59,621.60 | 0 | 0 | 0.00 |
| MEP CASE MANAGEMENT | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| LAB AND RADIOLOGICAL | 57 | 177 | 3,366.69 | 564 | 763 | 10,328.98 | 0 | 0 | 0.00 |
| HABILITATION SERVICES | 7 | 80 | 4,284.45 | 52 | 1683 | 68,636.62 | 0 | 0 | 0.00 |
| REMEDIAL SERVICES | 34 | 2786 | 29,571.71 | 114 | 3443 | 63,724.04 | 0 | 0 | 0.00 |
| REHAB SUPPORT SERVICES | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| AMBULANCE SERVICES | 15 | 16 | 2,777.64 | 92 | 118 | 12,560.86 | 0 | 0 | 0.00 |
| LOCAL EDUCATION AGENCY | 5 | 788 | 16,344.62 | 626 | 162594 | 2598,406.85 | 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 | 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 | 4 | 51.00 | 20 | 213 | 2,136.51 | 0 | 0 | 0.00 |
| PRESCRIBED DRUGS | 899 | 3876 | 205,561.29 | 6315 | 20059 | 1443,448.94 | 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 | 4 | 4 | 1,174.02 | 50 | 52 | 2,340.66 | 0 | 0 | 0.00 |
| IOWA PLAN PROGRAM | 1444 | 1529 | 149,042.86 | 11088 | 11174 | 719,119.12 | 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 | 6 | 6 | 304.75 | 28 | 36 | 7,285.16 | 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 | 9 | 19 | 1,627.03 | 622 | 1383 | 178,009.63 | 0 | 0 | 0.00 |
| MEDICAL SUPPLIES | 109 | 5299 | 17,815.58 | 2220 | 312563 | 556,903.91 | 0 | 0 | 0.00 |
| OTHER PRACTITIONER | 60 | 480 | 11,615.72 | 836 | 33310 | 428,152.27 | 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 | 109 | 141 | 27,368.82 | 1431 | 1631 | 162,602.05 | 0 | 0 | 0.00 |
| OPTOMETRIST | 69 | 79 | 6,085.56 | 611 | 766 | 36,622.92 | 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 | 57 | 144 | 4,386.52 | 287 | 580 | 9,895.56 | 0 | 0 | 0.00 |
| PODIATRIC | 14 | 21 | 2,042.51 | 554 | 749 | 18,094.92 | 0 | 0 | 0.00 |
| PHYSICAL DISABILITIES SVCS | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| BRAIN INJ WAIVER SERVICES | 0 | 0 | 0.00 | 276 | 14097 | 475,488.57 | 0 | 0 | 0.00 |
| PSYCHIATRIC | 6 | 8 | 615.86 | 470 | 718 | 28,362.86 | 0 | 0 | 0.00 |
| RESIDENTIAL CARE FACILITY | 0 | 0 | 0.00 | 8 | 240 | 2,211.15 | 0 | 0 | 0.00 |
| ID WAIVER SERVICE | 5 | 159 | 4,899.91 | 8898 | 562186 | 24216,937.35 | 0 | 0 | 0.00 |
| CHILDRENS MENTAL HEALTH SVC | 2 | 81 | 1,994.48 | 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 | 2,848.20 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| ILL & HANDICAPPED WAIVER SVCS | 3 | 75 | 2,510.34 | 155 | 6488 | 141,256.00 | 0 | 0 | 0.00 |
| COUNTY OFFICE REIMBURSEMENT | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| MEP SERVICES | 6 | 6 | 1,818.48 | 8507 | 8622 | 2325,020.56 | 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 * | 1494 | 29466 | 1072,309.98 | 11867 | 1361173 | 63868,600.56 | 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 | 2 | 4 | 5,033.64 | 6487 | 38529 | 29001,922.92 |
| OUTPATIENT | 0 | 0 | 0.00 | 18 | 154 | 5,127.39 | 88067 | 1618537 | 18848,730.62 |
| 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 | 740 | 13321 | 2670,755.48 |
| INTERMEDIATE CARE FACILITY | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 12046 | 367553 | 35905,572.28 |
| INTER CARE MENTAL RETARDA | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 2187 | 62617 | 26879,861.26 |
| NURSING FAC FOR MENTAL ILL | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 36 | 897 | 263,363.19 |
| HOME HEALTH | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 13598 | 279770 | 9785,724.27 |
| LEAD INSPECTION AGENCY | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 16 | 22 | 8,180.76 |
| PHYSICIAN | 0 | 0 | 0.00 | 16 | 29 | 3,841.25 | 123688 | 385870 | 17547,021.65 |
| CLINIC SERVICES | 0 | 0 | 0.00 | 13 | 21 | 2,515.69 | 23523 | 30429 | 4441,533.71 |
| 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 | 15881 | 34926 | 685,092.86 |
| HABILITATION SERVICES | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 3063 | 92610 | 4826,182.90 |
| REMEDIAL SERVICES | 0 | 0 | 0.00 | 1 | 48 | 1,001.68 | 10029 | 391332 | 5943,849.51 |
| 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 | 2377 | 2937 | 318,914.57 |
| LOCAL EDUCATION AGENCY | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 1923 | 449373 | 5777,857.84 |

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 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 | 352 | 1584 | 17,761.60 |
| PRESCRIBED DRUGS | 0 | 0 | 0.00 | 16 | 20 | 610.22 | 129484 | 341304 | 19288,047.61 |
| 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 | 1 | 147.48 | 7796 | 9233 | 851,226.98 |
| IOWA PLAN PROGRAM | 0 | 0 | 0.00 | 116 | 139 | 2,075.33 | 331701 | 358930 | 10163,400.11 |
| 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 | 1 | 119.43 | 7302 | 7481 | 1159,663.88 |
| HMO SERVICES | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 0 | 0 | 0.00 |
| PACE SERVICES | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 65 | 65 | 185,901.80 |
| PATIENT MANAGEMENT | 0 | 0 | 0.00 | 58 | 58 | 116.00 | 167117 | 167117 | 334,234.00 |
| HEALTH INS PREMIUM PAYMENT | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 3662 | 8872 | 534,035.39 |
| MEDICAL SUPPLIES | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 22602 | 1607065 | 3828,504.74 |
| OTHER PRACTITIONER | 0 | 0 | 0.00 | 3 | 3 | 191.33 | 15022 | 168492 | 2477,710.40 |
| 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 | 12 | 14 | 1,293.85 | 28274 | 35067 | 4966,767.22 |
| OPTOMETRIST | 0 | 0 | 0.00 | 3 | 3 | 549.18 | 12455 | 15931 | 888,014.39 |

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE

| 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 | 8306 | 18780 | 454,401.34 |
| PODIATRIC | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 4364 | 7037 | 224,802.97 |
| PHYSICAL DISABILITIES SVCS | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 740 | 28925 | 359,896.03 |
| BRAIN INJ WAIVER SERVICES | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 1034 | 49822 | 1715,990.28 |
| PSYCHIATRIC | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 3724 | 6596 | 282,406.86 |
| RESIDENTIAL CARE FACILITY | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 1574 | 48072 | 388,698.02 |
| ID WAIVER SERVICE | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 10160 | 644099 | 27667,307.68 |
| CHILDRENS MENTAL HEALTH SVC | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 568 | 31661 | 546,130.34 |
| AIDS WAIVER SERVICES | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 43 | 4048 | 45,002.89 |
| ELDERLY WAIVER SERVICES | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 9516 | 460473 | 5978,683.58 |
| ILL & HANDICAPPED WAIVER SVCS | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 2165 | 102522 | 1692,399.19 |
| 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 | 10606 | 10809 | 2903,987.89 |
| UNASSIGNED | 0 | 0 | 0.00 | 0 | 0 | 0.00 | 15 | 0 | 5379,326.56- |
| * A L L C A T E G O R I E S * | 0 | 0 | 0.00 | 115 | 495 | 22,622.47 | 391926 | 7902708 | 244474,145.28 |

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