

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	1	5,492.84	0	0	0.00	498	2064	545,673.30
OUTPATIENT	21	279	1,783.92	0	0	0.00	4551	115570	617,111.76
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	701	2733	63,812.34
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	5857	149111	17501,579.88
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	3	93	16,164.87
HOME HEALTH	0	0	0.00	0	0	0.00	3325	161846	2668,024.35
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	36	54	4,352.31	0	0	0.00	6043	35168	393,215.45
CLINIC SERVICES	19	30	4,346.14	0	0	0.00	625	381	42,962.35
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	1	5	44.31	0	0	0.00	814	208	2,421.46
HABILITATION SERVICES	0	0	0.00	0	0	0.00	61	1656	75,020.58
REMEDIAL SERVICES	0	0	0.00	0	0	0.00	1	28	264.32
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	276	317	30,283.92
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	22	59	3,843.95	0	0	0.00	2758	4742	73,242.08
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	1	1	28.05-
IOWA PLAN PROGRAM	81	97	2,339.66	0	0	0.00	10	10	676.12
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	43.60	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	50	50	100.00	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	2717	158802	234,875.93
OTHER PRACTITIONER	1	1	89.82	0	0	0.00	361	1008	14,351.96
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	8	9	1,990.39	0	0	0.00	378	448	73,211.14
OPTOMETRIST	2	3	212.02	0	0	0.00	565	869	22,179.08

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 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	371	814	6,082.49
PODIATRIC	0	0	0.00	0	0	0.00	697	1064	12,338.90
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	91	4,188.13
PSYCHIATRIC	0	0	0.00	0	0	0.00	155	272	7,239.70
RESIDENTIAL CARE FACILITY	0	0	0.00	0	0	0.00	281	9497	69,831.95
ID WAIVER SERVICE	0	0	0.00	0	0	0.00	75	5010	239,833.37
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	3900	177769	2589,444.93
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	101	123	31,207.35
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 *	112	589	24,638.96	0	0	0.00	15882	829695	25335,209.66

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	1601	9010	6412,482.99	600	1739	2852,777.43
OUTPATIENT	1	8	0.00	16318	404037	5344,220.00	9040	164806	4121,371.04
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	506	4832	2363,562.02	9	12	15,909.38
INTERMEDIATE CARE FACILITY	0	0	0.00	802	19107	2607,588.35	5	18	2,518.57
INTER CARE MENTAL RETARDA	0	0	0.00	8	185	61,962.22	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	4082	94024	2722,453.17	50	424	31,089.24
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	1	2	17.89	23904	111984	3546,373.09	16006	33115	2673,181.59
CLINIC SERVICES	0	0	0.00	3582	4808	625,390.82	2837	3781	557,598.00
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	0	0	0.00	3439	6095	97,138.55	3223	8556	231,647.73
HABILITATION SERVICES	0	0	0.00	2967	77734	4002,118.85	34	463	25,877.86
REMEDIAL SERVICES	0	0	0.00	934	25244	361,192.07	395	7581	93,094.41
REHAB SUPPORT SERVICES	0	0	0.00	1	0	540.36-	0	0	0.00
AMBULANCE SERVICES	0	0	0.00	792	900	96,362.47	195	191	26,528.48
LOCAL EDUCATION AGENCY	0	0	0.00	744	173769	2510,448.06	18	2498	18,171.52

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	120	842	10,363.86	2	15	201.68
PRESCRIBED DRUGS	0	0	0.00	25245	104958	7619,079.27	21350	57828	2493,719.88
DRUG CAPITATION	0	0	0.00	0	0	0.00	0	0	0.00
INDIAN HEALTH SERVICES	0	0	0.00	1	3	804.00	2	2	536.00
FAMILY PLANNING SERVICES	0	0	0.00	109	128	8,383.08	5370	6365	573,991.39
IOWA PLAN PROGRAM	2	2	118.93	52050	53389	3800,043.68	41834	45630	1375,319.09
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	137	150	6,627.35	47	50	2,681.96
HMO SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PACE SERVICES	0	0	0.00	30	30	91,969.80	0	0	0.00
PATIENT MANAGEMENT	0	0	0.00	6	6	12.00	26227	26229	52,458.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	646	1652	171,057.97	142	348	11,488.50
MEDICAL SUPPLIES	1	1	14.17	9258	690864	1708,388.37	961	22511	173,569.57
OTHER PRACTITIONER	0	0	0.00	2848	57098	723,026.04	1841	4950	200,954.73
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	1	1	582.19	3828	4788	811,585.28	3117	4133	786,051.20
OPTOMETRIST	0	0	0.00	2303	3161	148,111.44	1327	1576	112,757.98

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	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	2221	4978	82,163.91	1750	3704	124,367.79
PODIATRIC	0	0	0.00	1175	1971	72,899.65	216	280	32,570.71
PHYSICAL DISABILITIES SVCS	0	0	0.00	521	20317	266,802.32	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	331	19623	605,635.90	0	0	0.00
PSYCHIATRIC	1	1	20.77	2265	3771	120,900.50	34	64	4,423.80
RESIDENTIAL CARE FACILITY	0	0	0.00	1291	40456	333,792.84	0	0	0.00
ID WAIVER SERVICE	0	0	0.00	974	65535	2847,844.31	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	31	1513	26,847.54	10	666	10,654.59
AIDS WAIVER SERVICES	0	0	0.00	13	1021	12,285.77	0	0	0.00
ELDERLY WAIVER SERVICES	0	0	0.00	38	1683	26,769.22	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	1867	88872	1488,128.76	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	1231	1398	373,894.38	11	12	5,443.99
UNASSIGNED	0	0	0.00	3	0	0.00	1	0	0.00
* A L L C A T E G O R I E S *	2	15	753.95	56814	2099936	52108,169.54	53234	397547	16610,956.11

## 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	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	267	1482	1587,288.85	395	5360	1560,627.63	1765	11091	10572,067.84
OUTPATIENT	7503	69620	1757,480.13	2198	28982	633,863.12	12689	167736	3363,316.27
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	0	0.00	1	31	476.00	16	52	2,318.69
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	11	25	56,913.78-
INTER CARE MENTAL RETARDA	0	0	0.00	1	31	9,658.36	1	0	1502,386.00-
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	0	0	0.00
HOME HEALTH	389	1880	61,406.45	61	190	6,823.58	814	3888	176,506.26
LEAD INSPECTION AGENCY	1	1	381.12	2	2	731.12	4	5	1,824.30
PHYSICIAN	17999	29070	1892,856.92	4377	7567	569,221.22	30875	60790	4531,789.72
CLINIC SERVICES	3074	3731	565,084.27	896	1159	169,754.23	6179	8197	1092,177.33
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	1667	3011	51,110.33	566	1676	34,651.19	3579	9791	181,634.15
HABILITATION SERVICES	0	0	0.00	24	422	20,228.75	9	93	1,972.68
REMEDIAL SERVICES	3077	73656	1131,731.14	896	24282	396,371.93	3051	73297	1117,510.74
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	1	0	3,369.89-
AMBULANCE SERVICES	88	86	12,894.45	52	51	7,163.42	171	170	25,677.22
LOCAL EDUCATION AGENCY	234	47483	403,088.30	49	9381	67,611.75	251	60937	568,456.89

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	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	167	768	9,604.07	43	252	3,356.63	175	834	10,450.40
PRESCRIBED DRUGS	16331	27105	1288,701.94	4927	10765	528,942.53	26479	43542	1924,135.56
DRUG CAPITATION	0	0	0.00	0	0	0.00	0	0	0.00
INDIAN HEALTH SERVICES	0	0	0.00	1	0	0.00	6	5	1,340.00
FAMILY PLANNING SERVICES	711	811	76,198.66	219	236	21,023.72	453	496	52,510.18
IOWA PLAN PROGRAM	71031	75051	717,542.48	16278	17413	342,249.30	107756	117125	1360,401.35
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	2521	2856	299,343.64	353	396	57,409.28	3922	4279	656,029.60
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	47142	47146	94,292.00	10061	10066	20,132.00	76067	76087	152,174.00
HEALTH INS PREMIUM PAYMENT	206	549	12,812.16	60	170	5,726.43	1665	5115	127,432.71
MEDICAL SUPPLIES	881	14080	89,172.17	162	6283	19,186.91	1246	22808	156,228.87
OTHER PRACTITIONER	2517	30427	386,503.07	631	11150	111,320.96	4165	28733	513,741.30
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	4422	5093	680,735.04	1097	1272	185,978.30	7323	8345	1045,623.30
OPTOMETRIST	1236	1408	89,229.09	398	464	29,861.87	2248	2513	154,025.60



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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	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	917	1665	51,813.84	273	544	18,433.61	1534	3096	93,368.54
PODIATRIC	84	96	10,687.83	32	39	3,185.24	133	159	16,670.06
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	2	2	577.42
PSYCHIATRIC	22	30	3,016.40	17	35	2,892.21	33	63	17,501.98
RESIDENTIAL CARE FACILITY	0	0	0.00	1	27	759.78	1	0	0.00
ID WAIVER SERVICE	1	1	14.33	0	0	0.00	4	33	15,765.45-
CHILDRENS MENTAL HEALTH SVC	33	2201	32,073.17	91	4295	69,770.13	51	3678	51,697.56
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	5	111	22,305.67
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	1	40	695.20	0	0	0.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	41	47	20,120.86	94	117	49,495.53	54	64	27,800.00
UNASSIGNED	0	0	0.00	1	0	0.00	7	0	171,453.49-
* A L L C A T E G O R I E S *	77857	439354	11325,182.71	17600	142698	4947,601.93	115652	713160	26269,377.58

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	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	35	240	120,551.06	570	2768	816,288.86	36	257	311,552.80
OUTPATIENT	777	14005	218,756.01	5714	182694	797,317.80	491	10390	232,589.82
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	143	59,243.13	1313	6309	88,972.41	8	37-	21,688.11-
INTERMEDIATE CARE FACILITY	0	0	0.00	8274	188156	26103,077.63	4	0	96.24
INTER CARE MENTAL RETARDA	8	262	111,257.99	0	0	0.00	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	16	496	103,388.65	0	0	0.00
HOME HEALTH	54	5824	154,948.68	4416	185150	2722,852.06	46	437	12,568.50
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	2133	3347	189,533.14	6402	33763	446,847.05	794	2016	132,218.99
CLINIC SERVICES	386	493	63,273.23	476	316	40,252.71	116	165	21,803.75
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	261	733	10,830.10	1045	350	3,963.53	136	266	6,246.82
HABILITATION SERVICES	19	230	21,625.74	38	799	35,048.24	23	452	15,449.26
REMEDIAL SERVICES	2303	139675	1522,359.84	7	83	147.21	13	155	2,183.02
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	11	9	802.02	488	591	56,022.81	11	16	2,277.26
LOCAL EDUCATION AGENCY	173	46910	581,791.26	34	5636	216,182.63	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	54	349	4,697.48	3	39	429.61	0	0	0.00
PRESCRIBED DRUGS	4812	11687	806,837.44	9583	20596	365,426.33	1001	3176	155,751.09
DRUG CAPITATION	0	0	0.00	0	0	0.00	0	0	0.00
INDIAN HEALTH SERVICES	0	0	0.00	0	0	0.00	1	1	268.00
FAMILY PLANNING SERVICES	41	47	5,886.51	0	0	0.00	33	40	2,997.57
IOWA PLAN PROGRAM	10176	10461	1041,103.41	2266	2333	153,372.61	1652	1826	61,691.65
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	152	175	9,113.94	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	39	39	104,829.00	0	0	0.00
PATIENT MANAGEMENT	107	107	214.00	0	0	0.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	165	404	19,439.48	24	51	7,903.40	7	18	731.18
MEDICAL SUPPLIES	227	28845	89,918.61	4503	334283	492,710.35	138	6873	17,163.51
OTHER PRACTITIONER	522	13171	155,518.99	555	2752	61,325.16	101	215	9,443.03
FAMILY CENTERED PROGRAM	0	0	0.00	0	0	0.00	0	0	0.00
FAMILY PRESERVATION	0	0	0.00	0	0	0.00	0	0	0.00
TREATMENT FOSTER FAMILY CARE	0	0	0.00	0	0	0.00	0	0	0.00
GROUP TREATMENT THERAPY	0	0	0.00	0	0	0.00	0	0	0.00
DENTAL	892	986	128,919.36	860	1025	160,936.70	156	189	28,268.21
OPTOMETRIST	397	447	25,138.17	728	1013	29,615.19	63	78	4,428.11

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		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
CHIROPRACTIC	152	279	8,503.43	249	502	3,626.87	76	172	5,199.32
PODIATRIC	26	29	2,539.49	940	1545	18,467.54	24	30	2,637.89
PHYSICAL DISABILITIES SVCS	0	0	0.00	217	8434	127,602.64	0	0	0.00
BRAIN INJ WAIVER SERVICES	31	1872	47,323.36	430	19564	739,192.79	0	0	0.00
PSYCHIATRIC	20	34	2,898.51	217	371	11,614.75	25	33	1,138.95
RESIDENTIAL CARE FACILITY	0	0	0.00	4	64	1,181.83	0	0	0.00
ID WAIVER SERVICE	206	7260	261,872.69	7	285	14,848.14	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	27	2694	29,353.95	0	0	0.00
ELDERLY WAIVER SERVICES	0	0	0.00	6191	295635	4006,733.37	2	52	965.00
ILL & HANDICAPPED WAIVER SVCS	38	3092	49,595.89	2	142	1,504.40	0	0	0.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	210	228	60,398.85	130	137	38,230.01	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 *	10313	291344	5774,891.81	15335	1298615	37799,266.23	1911	26820	1005,981.86

## 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	MEDICALLY NEEDY WI SPEND DN			OTHER TXXI			OTHER BREAST CERVICAL CANCER		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
INPATIENT	173	967	1184,868.35	35	474	168,486.31	9	36	46,170.64
OUTPATIENT	569	21979	514,392.12	1079	14735	333,165.51	104	3923	105,608.98
CHILD PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
CHILD DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
ADULT PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
ADULT DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
SKILLED NURSING FACILITY	6	33	48.81	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	26	251	20,658.82	28	58	792.71	2	21	2,654.76
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	819	5334	281,559.88	2667	3752	233,398.92	169	720	153,343.67
CLINIC SERVICES	87	180	26,806.75	531	639	84,775.66	16	18	4,075.78
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	39	182	2,824.67	151	429	8,002.54	24	74	7,645.05
HABILITATION SERVICES	8	310	19,946.44	0	0	0.00	0	0	0.00
REMEDIAL SERVICES	2	18	32.26-	514	13059	207,238.55	0	0	0.00
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	32	36	5,215.35	10	8	1,177.27	0	0	0.00
LOCAL EDUCATION AGENCY	0	0	0.00	65	12171	111,565.22	0	0	0.00

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	MEDICALLY NEEDY WI SPEND DN			OTHER TXXI			OTHER BREAST CERVICAL CANCER		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
EARLY ACCESS SERVICES	0	0	0.00	2	6	83.34	0	0	0.00
PRESCRIBED DRUGS	321	1709	68,602.97	3408	5907	406,578.19	205	841	74,038.65
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	282.14	95	103	10,611.90	1	2	95.74
IOWA PLAN PROGRAM	0	0	0.00	14287	15271	162,135.86	250	251	25,304.27
MANAGED SUBSTANCE ABUSE	0	0	0.00	0	0	0.00	0	0	0.00
MENTAL HEALTH ACCESS PLAN	0	0	0.00	0	0	0.00	0	0	0.00
EPSDT SCREENING	0	0	0.00	126	130	14,240.57	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	10345	10347	20,694.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	10	19	867.68	0	0	0.00
MEDICAL SUPPLIES	72	4874	25,759.92	86	2600	10,489.87	27	634	4,442.54
OTHER PRACTITIONER	86	138	12,137.55	395	2533	48,672.01	22	40	3,652.09
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	64	82	18,546.45	1382	1551	228,490.46	25	41	11,984.86
OPTOMETRIST	34	38	2,370.39	471	551	34,120.81	10	12	1,002.72

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	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	24	68	2,023.11	295	522	16,494.06	18	37	1,200.37
PODIATRIC	13	16	1,332.26	30	34	3,754.05	2	3	189.02
PHYSICAL DISABILITIES SVCS	0	0	0.00	0	0	0.00	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	2	42	1,645.36	0	0	0.00
PSYCHIATRIC	65	180	9,379.39	7	12	1,447.87	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	12	151.92	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	5	444	6,476.59	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	5	5	2,154.77	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 *	1000	36399	2196,723.11	14194	85414	2117,712.00	253	6653	441,409.14

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	OTHER ICARE ADULT 19-64			OTHER ICARE ADULT OB			OTHER ICARE CHRN DSH		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
INPATIENT	3	9	8,766.04	0	0	0.00	0	0	0.00
OUTPATIENT	11	263	4,201.64	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	13	29	2,167.61	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	70	70	5,881.59	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	2	111.75	0	0	0.00	0	0	0.00
FAMILY CENTERED PROGRAM	0	0	0.00	0	0	0.00	0	0	0.00
FAMILY PRESERVATION	0	0	0.00	0	0	0.00	0	0	0.00
TREATMENT FOSTER FAMILY CARE	0	0	0.00	0	0	0.00	0	0	0.00
GROUP TREATMENT THERAPY	0	0	0.00	0	0	0.00	0	0	0.00
DENTAL	1	2	172.73	0	0	0.00	0	0	0.00
OPTOMETRIST	1	0	258.79-	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	4	37	2,070.80	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 *	73	412	23,113.37	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	11	193	34,435.96	0	0	0.00	7	18	21,299.67
OUTPATIENT	40	846	8,159.79	4	156	263.10	86	1399	24,390.60
CHILD PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
CHILD DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
ADULT PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
ADULT DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
SKILLED NURSING FACILITY	0	0	0.00	0	0	0.00	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	1	23	331.20	0	0	0.00	1	2	177.60
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	114	163	6,310.80	0	0	0.00	129	237	17,336.05
CLINIC SERVICES	15	15	1,684.87	0	0	0.00	28	48	5,897.34
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	11	46	369.72	0	0	0.00	38	267	3,506.76
HABILITATION SERVICES	4	57	1,956.75	0	0	0.00	9	388	18,632.65
REMEDIAL SERVICES	204	5553	95,450.39	0	0	0.00	28	457	9,782.86
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	1	1	74.30	0	0	0.00	4	2	70.14
LOCAL EDUCATION AGENCY	38	12902	101,450.49	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	371	1228	75,405.17	0	0	0.00	155	355	17,936.31
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	159.56	0	0	0.00	11	15	1,362.05
IOWA PLAN PROGRAM	458	459	53,207.67	0	0	0.00	377	421	59,613.76
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	173.78	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	1	1	2.00	0	0	0.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	48	117	9,586.35	0	0	0.00	0	0	0.00
MEDICAL SUPPLIES	21	1556	2,314.46	0	0	0.00	3	202	181.50
OTHER PRACTITIONER	45	7330	45,108.40	0	0	0.00	16	28	1,662.44
FAMILY CENTERED PROGRAM	0	0	0.00	0	0	0.00	0	0	0.00
FAMILY PRESERVATION	0	0	0.00	0	0	0.00	0	0	0.00
TREATMENT FOSTER FAMILY CARE	0	0	0.00	0	0	0.00	0	0	0.00
GROUP TREATMENT THERAPY	0	0	0.00	0	0	0.00	0	0	0.00
DENTAL	35	41	3,033.16	0	0	0.00	23	33	6,187.60
OPTOMETRIST	20	23	1,095.12	0	0	0.00	9	13	858.74

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	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	10	12	408.64	0	0	0.00	15	43	1,575.95
PODIATRIC	3	3	63.22	0	0	0.00	1	1	6.10
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	6	315.63
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	379	21349	344,397.43	0	0	0.00	0	0	0.00
AIDS WAIVER SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
ELDERLY WAIVER SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	1	14	204.82	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	414	455	200,457.84	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 *	434	52394	985,841.89	2	156	263.10	364	3935	190,653.47

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	196	105,615.70	146	719	444,742.45	0	0	0.00
OUTPATIENT	296	5632	147,096.68	2729	65879	532,471.56	0	0	0.00
CHILD PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
CHILD DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
ADULT PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
ADULT DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
SKILLED NURSING FACILITY	2	31	18,915.89	39	143	320.47-	0	0	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	23	78	13,033.66	0	0	0.00
INTER CARE MENTAL RETARDA	0	0	0.00	2070	62621	25727,989.52	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	0	0	0.00
HOME HEALTH	17	132	8,310.29	1314	48664	1364,948.49	0	0	0.00
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	526	1253	100,871.08	4160	12787	319,883.10	0	0	0.00
CLINIC SERVICES	114	166	22,623.54	336	419	59,287.37	0	0	0.00
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	73	217	4,058.56	490	743	9,568.58	0	0	0.00
HABILITATION SERVICES	5	32	1,845.85	49	2043	91,230.04	0	0	0.00
REMEDIAL SERVICES	43	1873	21,964.50	122	2939	41,159.22	0	0	0.00
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	13	13	1,428.38	94	131	13,152.89	0	0	0.00
LOCAL EDUCATION AGENCY	7	2069	22,084.47	761	236043	3656,897.58	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 SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
EARLY ACCESS SERVICES	1	1	10.80	29	241	2,697.90	0	0	0.00
PRESCRIBED DRUGS	872	3688	191,707.40	6259	19923	1270,450.69	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	6	6	440.45	16	19	2,158.32	0	0	0.00
IOWA PLAN PROGRAM	1440	1514	147,943.49	11112	11169	719,197.71	0	0	0.00
MANAGED SUBSTANCE ABUSE	0	0	0.00	0	0	0.00	0	0	0.00
MENTAL HEALTH ACCESS PLAN	0	0	0.00	0	0	0.00	0	0	0.00
EPSDT SCREENING	2	2	146.61	22	22	1,194.84	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	8	19	1,267.72	620	1573	176,110.57	0	0	0.00
MEDICAL SUPPLIES	102	5279	26,084.87	2260	306311	542,647.85	0	0	0.00
OTHER PRACTITIONER	63	192	8,214.25	923	47355	595,932.29	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	107	126	32,621.80	1238	1429	147,099.20	0	0	0.00
OPTOMETRIST	59	75	5,871.37	556	670	29,190.17	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	53	83	2,711.94	290	562	9,562.94	0	0	0.00
PODIATRIC	21	25	1,393.84	513	665	16,847.98	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	285	13019	489,312.48	0	0	0.00
PSYCHIATRIC	3	6	212.44	412	695	23,982.80	0	0	0.00
RESIDENTIAL CARE FACILITY	0	0	0.00	12	231	1,766.22	0	0	0.00
ID WAIVER SERVICE	4	132	2,887.94	8850	549958	23790,957.91	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	2	58	1,350.22	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	5	260	4,295.03	1	32	605.11	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	2	44	2,178.43	146	6710	139,123.75	0	0	0.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	4	4	1,207.11	8648	9481	2512,686.40	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 *	1490	23128	885,360.65	11947	1403274	62745,569.12	0	0	0.00



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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	FEDERAL MEDICAID ONLY BLIND			LEGAL PERMANENT RESIDENT TXIX			TOTAL		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
INPATIENT	0	0	0.00	0	0	0.00	6138	36624	26799,188.72
OUTPATIENT	0	0	0.00	11	124	1,819.54	63612	1273063	18759,379.39
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	2493	14282	2591,250.09
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	14503	356495	46170,980.55
INTER CARE MENTAL RETARDA	0	0	0.00	0	0	0.00	2085	63099	24408,482.09
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	19	589	119,553.52
HOME HEALTH	0	0	0.00	2	3	15.30	14469	502817	9954,561.46
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	6	8	2,936.54
PHYSICIAN	0	0	0.00	22	26	1,293.01	115706	341177	15495,771.49
CLINIC SERVICES	0	0	0.00	13	15	1,674.67	19233	24561	3389,468.81
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	0	0	0.00	1	1	16.47	15486	32650	655,680.52
HABILITATION SERVICES	0	0	0.00	0	0	0.00	3219	84679	4330,953.69
REMEDIAL SERVICES	0	0	0.00	5	1065	16,273.24	11011	368965	5016,691.18
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	2	0	3,910.25-
AMBULANCE SERVICES	0	0	0.00	0	0	0.00	2230	2522	278,990.10
LOCAL EDUCATION AGENCY	0	0	0.00	0	0	0.00	2333	609799	8257,748.17

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	562	3347	41,895.77
PRESCRIBED DRUGS	0	0	0.00	18	33	608.95	122740	318212	17370,889.99
DRUG CAPITATION	0	0	0.00	0	0	0.00	0	0	0.00
INDIAN HEALTH SERVICES	0	0	0.00	0	0	0.00	11	11	2,948.00
FAMILY PLANNING SERVICES	0	0	0.00	1	1	50.78	7057	8275	756,124.00
IOWA PLAN PROGRAM	0	0	0.00	132	152	2,169.41	330638	352574	10024,430.45
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	7269	8067	1047,005.17
HMO SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PACE SERVICES	0	0	0.00	0	0	0.00	69	69	196,798.80
PATIENT MANAGEMENT	0	0	0.00	76	76	152.00	170079	170115	340,230.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	0	0	0.00	3601	10035	544,424.15
MEDICAL SUPPLIES	0	0	0.00	1	6	1,819.49	22259	1606812	3594,968.96
OTHER PRACTITIONER	0	0	0.00	2	2	76.97	14972	207125	2891,842.81
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	15	17	1,912.93	24903	29611	4353,930.30
OPTOMETRIST	0	0	0.00	1	1	50.09	10413	12915	689,859.17

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	1	4	156.60	8205	17085	427,693.41
PODIATRIC	0	0	0.00	0	0	0.00	3895	5960	195,583.78
PHYSICAL DISABILITIES SVCS	0	0	0.00	0	0	0.00	737	28751	394,404.96
BRAIN INJ WAIVER SERVICES	0	0	0.00	0	0	0.00	1049	54213	1887,875.44
PSYCHIATRIC	0	0	0.00	0	0	0.00	3267	5610	209,056.50
RESIDENTIAL CARE FACILITY	0	0	0.00	0	0	0.00	1588	50275	407,332.62
ID WAIVER SERVICE	0	0	0.00	0	0	0.00	10084	628226	27142,645.16
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	0	0	0.00	601	34204	543,267.23
AIDS WAIVER SERVICES	0	0	0.00	0	0	0.00	40	3715	41,639.72
ELDERLY WAIVER SERVICES	0	0	0.00	0	0	0.00	9913	475542	6651,118.33
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	0	0	0.00	2055	98914	1681,431.25
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	10926	12071	3323,097.09
UNASSIGNED	0	0	0.00	0	0	0.00	14	0	171,453.49-
* A L L C A T E G O R I E S *	0	0	0.00	139	1526	28,089.45	394608	7853064	250816,765.64

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