

TITLE XIX REPORT OF EXPENDITURES
(BY CATEGORY OF SERVICE)
(FISCAL YTD TOTALS AS OF 07/31/10)

CATEGORY OF SERVICE	RECIPIENTS SERVED	NUMBER OF CLAIMS	UNITS OF SERVICE	TOTAL PAYMENT
INPATIENT	5,851	6,098	35,353	\$31,549,671.58
OUTPATIENT	60,737	88,439	1,167,862	\$18,299,344.84
CHILD PART HOSP	0	0	0	\$0.00
CHILD DAY TREATMENT	0	0	0	\$0.00
ADULT PART HOSP	0	0	0	\$0.00
ADULT DAY TREATMENT	1	1	25	\$406.25
SKILLED NURSING FACILITY	870	879	11,750	\$2,845,236.99
INTERMEDIATE CARE FACILITY	11,349	11,726	330,550	\$36,833,567.61
INTER CARE MENTAL RETARDA	1,767	1,774	51,875	\$17,150,841.77
NURSING FAC FOR MENTAL ILL	35	35	1,063	\$315,899.46
HOME HEALTH	12,631	15,361	269,032	\$8,537,214.89
LEAD INSPECTION AGENCY	3	2	2	\$915.95
PHYSICIAN	115,614	245,505	370,879	\$15,989,212.33
CLINIC SERVICES	18,489	25,032	23,930	\$3,381,405.83
MEP CASE MANAGEMENT	0	0	0	\$0.00
LAB AND RADIOLOGICAL	14,474	20,451	31,416	\$594,237.01
HABILITATION SERVICES	3,163	5,370	89,672	\$4,748,455.97
REMEDIAL SERVICES	10,784	15,463	376,707	\$5,699,077.03
REHAB SUPPORT SERVICES	2	0	0	\$557.20-
AMBULANCE SERVICES	2,011	2,400	2,333	\$245,231.88
LOCAL EDUCATION AGENCY	748	1,327	204,864	\$2,861,371.67
EARLY ACCESS SERVICES	306	1,113	2,021	\$23,688.29
PRESCRIBED DRUGS	119,980	352,669	315,216	\$17,585,078.49
DRUG CAPITATION	0	0	0	\$0.00
INDIAN HEALTH SERVICES	2	2	2	\$536.00
FAMILY PLANNING SERVICES	7,457	8,462	8,499	\$808,254.14
IOWA PLAN PROGRAM	360,271	387,436	387,133	\$11,330,259.34
MANAGED SUBSTANCE ABUSE	0	0	0	\$0.00
MENTAL HEALTH ACCESS PLAN	0	0	0	\$0.00
EPSDT SCREENING	5,615	6,326	6,315	\$1,032,692.43
HMO SERVICES	0	0	0	\$0.00
PACE SERVICES	72	72	72	\$210,209.80
PATIENT MANAGEMENT	170,891	170,889	170,889	\$341,744.40
HEALTH INS PREMIUM PAYMENT	3,582	8,755	8,755	\$566,605.78
MEDICAL SUPPLIES	22,275	36,309	1,616,757	\$3,730,688.56
OTHER PRACTITIONER	14,065	22,294	105,437	\$2,166,835.28
FAMILY CENTERED PROGRAM	0	0	0	\$0.00
FAMILY PRESERVATION	0	0	0	\$0.00
TREATMENT FOSTER FAMILY CARE	0	0	0	\$0.00
GROUP TREATMENT THERAPY	0	0	0	\$0.00
DENTAL	23,560	28,346	28,620	\$4,237,787.64
OPTOMETRIST	10,534	12,541	13,490	\$712,286.36
CHIROPRACTIC	8,546	15,280	18,968	\$434,723.41
PODIATRIC	4,621	5,514	7,201	\$205,859.98
PHYSICAL DISABILITIES SVCS	705	968	28,500	\$343,826.74
BRAIN INJ WAIVER SERVICES	1,045	2,143	51,395	\$1,798,941.93
PSYCHIATRIC	3,862	5,953	6,727	\$244,965.55
RESIDENTIAL CARE FACILITY	1,509	1,611	45,035	\$337,310.86
ID WAIVER SERVICE	10,167	19,414	704,644	\$27,579,406.39
CHILDRENS MENTAL HEALTH SVC	570	776	35,330	\$595,876.36

T I T L E X I X R E P O R T O F E X P E N D I T U R E S
 (BY CATEGORY OF SERVICE)
 (FISCAL YTD TOTALS AS OF 07/31/10)

CATEGORY OF SERVICE	RECIPIENTS SERVED	NUMBER OF CLAIMS	UNITS OF SERVICE	TOTAL PAYMENT
AIDS WAIVER SERVICES	43	77	3,844	\$35,414.56
ELDERLY WAIVER SERVICES	9,691	26,780	449,092	\$5,926,364.64
SICK & HANDICAPPED WAIVER SVCS	2,031	3,100	102,088	\$1,727,893.00
COUNTY OFFICE REIMBURSEMENT	0	0	0	\$0.00
MEP SERVICES	10,546	9,576	9,969	\$2,783,467.02
UNASSIGNED	18	0	0	\$34,110.06-
* A L L C A T E G O R I E S *	396,314	1,566,269	7,093,312	\$233,778,140.75
		*** END OF REPORT ***		