

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	2	13	12,642.22	0	0	0.00	502	1955	503,778.56
OUTPATIENT	12	137	2,378.35	0	0	0.00	4006	88286	606,960.87
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	229	2423	45,772.27
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	4450	128660	12931,477.39
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	152	41,146.98
HOME HEALTH	0	0	0.00	0	0	0.00	2635	65949	1959,479.22
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	32	59	4,801.20	0	0	0.00	6604	42176	430,225.44
CLINIC SERVICES	14	19	3,337.17	0	0	0.00	511	325	36,480.47
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	3	42	349.00	0	0	0.00	832	213	2,960.58
HABILITATION SERVICES	0	0	0.00	0	0	0.00	60	1796	110,896.64
REMEDIAL SERVICES	0	0	0.00	0	0	0.00	1	42	396.48
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	1	0	17.80
AMBULANCE SERVICES	1	1	72.14	0	0	0.00	272	327	32,292.40
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	18	48	1,279.12	0	0	0.00	2909	5036	71,885.03
DRUG CAPITATION	0	0	0.00	0	0	0.00	0	0	0.00
INDIAN HEALTH SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
FAMILY PLANNING SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
IOWA PLAN PROGRAM	51	52	1,310.80	0	0	0.00	5436	5431	134,435.54
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	48.00	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	36	36	72.00	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	2851	165156	304,908.16
OTHER PRACTITIONER	1	1	36.38	0	0	0.00	395	1361	21,448.80
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	13	14	1,868.74	0	0	0.00	427	523	83,813.38
OPTOMETRIST	4	5	385.14	0	0	0.00	652	1066	27,756.33

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	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	426	1113	8,242.81
PODIATRIC	0	0	0.00	0	0	0.00	834	1341	15,368.98
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	95	4,212.78
PSYCHIATRIC	0	0	0.00	0	0	0.00	177	308	8,847.32
RESIDENTIAL CARE FACILITY	0	0	0.00	0	0	0.00	272	7899	55,731.28
ID WAIVER SERVICE	0	0	0.00	0	0	0.00	73	5420	218,101.98
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	3801	167271	2360,605.82
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	112	95	18,464.63
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 *	85	428	28,580.26	0	0	0.00	16459	694419	20035,707.94

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	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	1555	9158	7277,047.86	581	1937	3008,913.89
OUTPATIENT	0	0	0.00	16089	410076	5335,749.46	9000	161215	3927,558.12
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	196	4851	2609,813.67	1	3	4,237.23
INTERMEDIATE CARE FACILITY	0	0	0.00	574	16927	2001,833.84	0	0	0.00
INTER CARE MENTAL RETARDA	0	0	0.00	6	95	31,997.45	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	3867	74407	2415,617.42	53	297	21,235.48
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	1	7	103.22	25207	128549	3860,671.61	15949	30496	2797,556.63
CLINIC SERVICES	0	0	0.00	3186	4043	588,165.19	2853	3878	566,117.64
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	0	0	0.00	3619	6406	98,478.34	2860	7835	203,481.35
HABILITATION SERVICES	0	0	0.00	2911	82647	4375,694.85	25	396	21,015.97
REMEDIAL SERVICES	0	0	0.00	903	25610	464,943.65	364	8713	137,677.18
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	0	0	0.00	762	890	88,205.47	155	162	20,022.34
LOCAL EDUCATION AGENCY	0	0	0.00	257	69211	1073,712.24	1	198	1,407.78

## 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	61	492	5,878.58	2	15	164.76
PRESCRIBED DRUGS	0	0	0.00	25041	104320	7500,670.97	21452	58904	2536,264.26
DRUG CAPITATION	0	0	0.00	0	0	0.00	0	0	0.00
INDIAN HEALTH SERVICES	0	0	0.00	1	1	268.00	1	1	268.00
FAMILY PLANNING SERVICES	0	0	0.00	124	136	13,481.71	5670	6453	604,122.68
IOWA PLAN PROGRAM	2	2	118.93	52534	54193	3848,803.23	42576	47134	1414,121.29
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	139	199	7,895.67	39	51	1,371.72
HMO SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PACE SERVICES	0	0	0.00	33	33	103,808.80	0	0	0.00
PATIENT MANAGEMENT	0	0	0.00	4	4	8.00	26289	26289	52,578.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	647	1477	178,179.21	137	299	13,800.58
MEDICAL SUPPLIES	1	5	69.99	9319	690018	1770,124.08	938	21193	164,101.77
OTHER PRACTITIONER	0	0	0.00	2701	32221	486,789.41	1949	3397	223,356.38
FAMILY CENTERED PROGRAM	0	0	0.00	0	0	0.00	0	0	0.00
FAMILY PRESERVATION	0	0	0.00	0	0	0.00	0	0	0.00
TREATMENT FOSTER FAMILY CARE	0	0	0.00	0	0	0.00	0	0	0.00
GROUP TREATMENT THERAPY	0	0	0.00	0	0	0.00	0	0	0.00
DENTAL	0	0	0.00	3533	4488	801,343.93	2893	3838	737,807.39
OPTOMETRIST	0	0	0.00	2324	3293	149,166.45	1361	1664	120,808.70

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	2430	6163	85,388.18	1738	3901	129,884.73
PODIATRIC	0	0	0.00	1262	2102	70,956.04	213	267	30,800.25
PHYSICAL DISABILITIES SVCS	0	0	0.00	501	19822	258,876.45	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	334	17355	580,718.67	1	0	45.98
PSYCHIATRIC	0	0	0.00	2730	4865	151,692.77	41	68	5,697.49
RESIDENTIAL CARE FACILITY	0	0	0.00	1220	36638	277,765.92	0	0	0.00
ID WAIVER SERVICE	0	0	0.00	960	68978	2692,173.20	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	27	2218	34,032.64	9	641	9,558.97
AIDS WAIVER SERVICES	0	0	0.00	14	1150	6,698.38	0	0	0.00
ELDERLY WAIVER SERVICES	0	0	0.00	35	1405	23,136.79	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	1831	90456	1481,745.98	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	1427	1176	322,468.36	14	10	5,378.58
UNASSIGNED	0	0	0.00	2	0	0.00	5	0	0.00
* A L L C A T E G O R I E S *	2	14	292.14	57047	1976073	51074,002.47	53733	389255	16759,355.14

## 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	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	272	1341	1414,160.11	286	5511	1512,183.09	1713	10095	14332,679.59
OUTPATIENT	6916	62444	1806,511.87	2121	31638	665,254.60	12210	157409	3283,564.98
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	1	0	1,034.07	2	16	7,281.70	2	62	44,217.60
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	4	47	118,626.36-
INTER CARE MENTAL RETARDA	0	0	0.00	0	0	0.00	1	0	1456,459.00-
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	0	0	0.00
HOME HEALTH	424	1500	49,071.39	64	247	9,890.47	734	2966	209,446.55-
LEAD INSPECTION AGENCY	0	0	0.00	1	1	350.00	2	1	565.95
PHYSICIAN	16816	26834	1815,731.10	4222	9005	603,970.75	29603	63248	4571,551.52
CLINIC SERVICES	2915	3524	543,414.71	902	1134	165,746.76	6231	8759	1165,310.90
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	1306	2669	44,716.85	453	1415	27,703.32	3189	9666	163,867.92
HABILITATION SERVICES	0	0	0.00	22	489	28,253.38	7	66	10,219.61-
REMEDIAL SERVICES	2903	75392	1436,400.76	862	22898	416,388.12	2809	74278	1345,181.03
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	1	0	575.00-
AMBULANCE SERVICES	69	71	9,897.16	39	43	5,401.17	116	114	17,883.39
LOCAL EDUCATION AGENCY	60	18061	172,549.57	17	3992	25,294.52	77	22351	231,262.45

## 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	98	495	5,651.54	18	107	1,333.46	95	556	6,299.69
PRESCRIBED DRUGS	15506	25535	1352,112.18	4900	10714	543,871.57	24856	41378	1912,264.27
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	799	935	85,382.49	253	275	29,162.16	431	473	52,558.45
IOWA PLAN PROGRAM	71804	76734	732,317.88	16483	17936	356,001.83	108943	120710	1910,582.90
MANAGED SUBSTANCE ABUSE	0	0	0.00	0	0	0.00	0	0	0.00
MENTAL HEALTH ACCESS PLAN	0	0	0.00	0	0	0.00	0	0	0.00
EPSDT SCREENING	1862	2114	270,395.26	277	337	50,607.12	3073	3339	685,954.65
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	47322	47322	94,644.00	10114	10114	20,228.00	76481	76480	152,960.00
HEALTH INS PREMIUM PAYMENT	217	479	15,060.07	57	142	5,103.66	1625	4380	113,378.55
MEDICAL SUPPLIES	800	10431	92,147.26	153	3942	21,609.34	1069	19638	143,537.91
OTHER PRACTITIONER	2245	11667	282,938.16	562	3010	72,073.70	3867	28314	501,845.06
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	4170	4886	643,176.33	1034	1259	194,464.89	7052	8269	1047,553.88
OPTOMETRIST	1333	1503	99,790.39	398	478	31,514.36	2126	2419	148,458.86



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	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	913	1562	48,292.24	275	619	21,072.95	1563	3067	90,336.08
PODIATRIC	65	80	8,437.38	22	28	3,492.44	147	177	14,520.65
PHYSICAL DISABILITIES SVCS	0	0	0.00	0	0	0.00	1	0	21,036.54-
BRAIN INJ WAIVER SERVICES	0	0	0.00	0	0	0.00	2	1	175.02-
PSYCHIATRIC	31	44	4,385.71	11	15	1,760.07	29	51	20,084.17
RESIDENTIAL CARE FACILITY	0	0	0.00	1	29	261.20	3	7	397.50
ID WAIVER SERVICE	1	3	49.14	1	48	444.48	2	11	12,533.98-
CHILDRENS MENTAL HEALTH SVC	30	2200	33,614.06	87	4991	81,544.94	47	3788	57,656.33
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	6	125	76,307.45-
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	0	0	0.00	3	85	1,346.19
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	52	36	18,614.39	124	105	48,083.10	70	55	25,920.80
UNASSIGNED	1	0	0.00	1	0	0.00	8	0	34,110.06-
* A L L C A T E G O R I E S *	78206	377862	11080,496.07	17790	130538	4950,347.15	116183	662385	30102,251.70

## 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
INPATIENT	30	372	144,569.09	535	2353	738,401.46	34	203	234,968.61
OUTPATIENT	805	12832	213,240.93	4863	118324	658,383.15	457	20505	254,238.17
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	64,368.71	430	4110	43,411.12	3	67	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	6343	184826	22008,127.31	1	43	5,604.77
INTER CARE MENTAL RETARDA	8	223	75,565.29	0	0	0.00	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	30	911	274,752.48	0	0	0.00
HOME HEALTH	61	3844	89,713.30	3636	78569	2593,736.00	41	754	11,587.19
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	2094	3308	189,170.77	7027	38341	483,227.80	812	2090	146,728.19
CLINIC SERVICES	345	421	59,350.08	394	268	35,940.96	119	148	21,605.18
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	247	721	11,211.26	1064	515	5,383.75	131	231	8,475.13
HABILITATION SERVICES	15	425	28,357.05	40	977	44,326.43	26	287	39,819.65
REMEDIAL SERVICES	2476	145222	1436,718.66	5	82	1,487.39	9	247	3,512.92
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	10	12	2,047.35	423	520	44,713.42	14	17	2,216.83
LOCAL EDUCATION AGENCY	70	19047	253,117.34	7	520	43,340.94	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	28	137	1,517.38	1	2	25.80	0	0	0.00
PRESCRIBED DRUGS	4650	11574	885,153.44	9609	20808	384,740.47	1004	3175	144,267.23
DRUG CAPITATION	0	0	0.00	0	0	0.00	0	0	0.00
INDIAN HEALTH SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
FAMILY PLANNING SERVICES	50	61	6,948.55	1	1	32.68	24	28	3,842.84
IOWA PLAN PROGRAM	10201	10255	1025,328.26	22373	22389	650,444.28	1930	2084	66,166.39
MANAGED SUBSTANCE ABUSE	0	0	0.00	0	0	0.00	0	0	0.00
MENTAL HEALTH ACCESS PLAN	0	0	0.00	0	0	0.00	0	0	0.00
EPSDT SCREENING	113	143	7,242.11	2	2	29.25	2	2	23.84
HMO SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PACE SERVICES	0	0	0.00	39	39	106,401.00	0	0	0.00
PATIENT MANAGEMENT	82	82	164.00	1	0	33.60-	0	0	0.00
HEALTH INS PREMIUM PAYMENT	156	327	16,935.44	24	49	9,963.92	8	18	837.73
MEDICAL SUPPLIES	259	24970	69,303.32	4439	336800	549,564.50	146	5141	14,497.30
OTHER PRACTITIONER	447	8362	126,506.08	536	2307	48,729.95	110	262	10,673.53
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	896	1035	123,354.30	802	987	155,410.90	131	177	32,296.85
OPTOMETRIST	373	419	24,652.67	785	1158	31,187.32	64	82	4,674.38

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	161	380	10,298.94	278	613	4,684.73	74	155	4,029.06
PODIATRIC	26	31	3,212.00	1287	2055	25,122.98	25	39	1,568.49
PHYSICAL DISABILITIES SVCS	0	0	0.00	206	8678	105,986.83	0	0	0.00
BRAIN INJ WAIVER SERVICES	33	1660	48,420.70	430	19080	688,595.59	0	0	0.00
PSYCHIATRIC	27	49	4,161.66	249	417	12,588.38	30	44	2,001.72
RESIDENTIAL CARE FACILITY	0	0	0.00	4	119	772.23	0	0	0.00
ID WAIVER SERVICE	215	10112	331,406.73	5	247	13,617.29	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	29	2694	28,716.18	0	0	0.00
ELDERLY WAIVER SERVICES	0	0	0.00	6027	280040	3614,933.41	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	46	3681	76,142.51	2	51	5,396.33	0	0	0.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	256	232	62,515.91	153	136	34,378.75	2	1	256.49
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 *	10419	259968	5390,693.83	14685	1128988	33446,521.38	2024	35800	1013,892.49

## 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	157	1112	1432,553.06	26	361	94,386.15	6	19	38,843.43
OUTPATIENT	488	14382	405,596.56	941	10822	295,960.24	110	5034	148,360.58
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	1	25	406.25	0	0	0.00	0	0	0.00
SKILLED NURSING FACILITY	2	43	0.00	0	0	0.00	0	0	0.00
INTERMEDIATE CARE FACILITY	1	4	531.96	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	24	278	22,726.56	24	55	1,434.23	2	29	9,065.73
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	794	3327	244,031.18	2527	3584	228,490.54	168	668	129,925.94
CLINIC SERVICES	78	156	22,609.09	530	627	87,751.88	18	21	3,919.37
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	52	132	2,717.78	131	381	7,047.51	31	81	2,273.45
HABILITATION SERVICES	8	58	5,148.65	0	0	0.00	0	0	0.00
REMEDIAL SERVICES	3	116	1,036.46	491	12913	226,955.40	0	0	0.00
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	27	27	4,045.75	12	12	2,042.71	0	0	0.00
LOCAL EDUCATION AGENCY	0	0	0.00	10	4149	27,356.71	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	2	23.34	0	0	0.00
PRESCRIBED DRUGS	341	1582	90,015.93	3338	5777	407,772.16	209	843	71,273.99
DRUG CAPITATION	0	0	0.00	0	0	0.00	0	0	0.00
INDIAN HEALTH SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
FAMILY PLANNING SERVICES	6	8	523.54	86	96	10,128.64	0	0	0.00
IOWA PLAN PROGRAM	0	0	0.00	14410	15719	165,647.89	255	256	25,766.98
MANAGED SUBSTANCE ABUSE	0	0	0.00	0	0	0.00	0	0	0.00
MENTAL HEALTH ACCESS PLAN	0	0	0.00	0	0	0.00	0	0	0.00
EPSDT SCREENING	0	0	0.00	92	89	7,390.55	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	10487	10487	20,974.00	0	0	0.00
HEALTH INS PREMIUM PAYMENT	0	0	0.00	21	49	1,711.01	0	0	0.00
MEDICAL SUPPLIES	84	2713	16,057.47	82	1928	17,765.19	27	504	2,871.96
OTHER PRACTITIONER	89	191	12,021.80	380	1241	41,190.07	12	14	1,157.32
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	58	75	19,361.10	1335	1549	220,255.53	24	36	7,857.87
OPTOMETRIST	28	39	2,489.06	393	453	28,943.13	14	21	1,757.19

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	69	1,848.69	291	486	14,959.56	13	18	572.66
PODIATRIC	17	28	3,369.84	29	35	2,998.67	4	5	1,134.16
PHYSICAL DISABILITIES SVCS	0	0	0.00	0	0	0.00	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	2	57	2,005.68	0	0	0.00
PSYCHIATRIC	52	146	8,029.84	7	8	812.36	1	1	55.51
RESIDENTIAL CARE FACILITY	1	30	263.20	0	0	0.00	0	0	0.00
ID WAIVER SERVICE	0	0	0.00	2	23	515.02	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	8	591	9,822.66	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	3	1	283.73	10	9	4,676.77	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 *	953	24542	2295,667.50	14238	71503	1929,017.60	255	7550	444,836.14

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	0	0	0.00	0	0	0.00	0	0	0.00
OUTPATIENT	12	128	2,510.31	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	1	1	53.80	0	0	0.00	0	0	0.00
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	16	23	3,283.95-	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	58	66	5,066.53	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	896.96	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	3	0	886.14-	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	2	6	321.20	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	1	0	0.00	0	0	0.00	0	0	0.00
* A L L C A T E G O R I E S *	60	226	4,678.71	0	0	0.00	0	0	0.00

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	OTHER ICARE PMIC MHI 300%			OTHER ICARE MHI 300%			STATE ONLY		
	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID	RECIPS SERVED	UNITS OF SERVICE	AMOUNT PAID
INPATIENT	6	119	20,544.66	0	0	0.00	11	27	30,177.33
OUTPATIENT	43	566	6,621.17	0	0	0.00	85	1838	34,755.56
CHILD PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
CHILD DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
ADULT PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
ADULT DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
SKILLED NURSING FACILITY	0	0	0.00	0	0	0.00	0	0	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	0	0	0.00
INTER CARE MENTAL RETARDA	0	0	0.00	0	0	0.00	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	0	0	0.00
HOME HEALTH	2	13	439.73	0	0	0.00	0	0	0.00
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	97	154	5,650.23	0	0	0.00	140	785	30,878.12
CLINIC SERVICES	15	18	2,223.27	0	0	0.00	30	35	5,543.93
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	9	52	823.63	0	0	0.00	23	131	2,028.71
HABILITATION SERVICES	3	134	6,192.59	2	0	16.49-	7	330	18,418.63
REMEDIAL SERVICES	221	5265	123,591.74	0	0	0.00	27	601	12,326.19
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	2	2	287.06
LOCAL EDUCATION AGENCY	23	12920	83,438.15	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	361	1230	89,134.91	0	0	0.00	164	373	16,759.36
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	10	11	767.68
IOWA PLAN PROGRAM	441	442	51,482.92	0	0	0.00	376	404	57,263.80
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	3	3	111.40	0	0	0.00	3	9	174.64
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	50	105	10,181.12	0	0	0.00	1	2	59.24
MEDICAL SUPPLIES	14	906	1,894.73	0	0	0.00	5	204	887.60
OTHER PRACTITIONER	27	326	8,878.48	0	0	0.00	20	33	1,631.90
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	37	39	4,067.01	0	0	0.00	26	30	5,229.58
OPTOMETRIST	17	20	1,019.56	0	0	0.00	11	13	1,146.33

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

(BY CATEGORY OF SERVICE BY PROGRAM)

CATEGORY OF SERVICE	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	7	14	218.70	0	0	0.00	13	31	1,056.02
PODIATRIC	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICAL DISABILITIES SVCS	0	0	0.00	0	0	0.00	0	0	0.00
BRAIN INJ WAIVER SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PSYCHIATRIC	1	1	121.82	0	0	0.00	1	3	53.79
RESIDENTIAL CARE FACILITY	0	0	0.00	0	0	0.00	0	0	0.00
ID WAIVER SERVICE	0	0	0.00	0	0	0.00	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	363	20898	369,544.43	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	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	434	384	169,608.12	1	0	36.38-	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 *	419	43609	955,788.37	0	0	52.87-	365	4862	219,445.47

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	150	311,901.72	125	627	441,920.75	0	0	0.00
OUTPATIENT	317	8596	155,851.73	2665	63453	487,338.83	0	0	0.00
CHILD PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
CHILD DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
ADULT PART HOSP	0	0	0.00	0	0	0.00	0	0	0.00
ADULT DAY TREATMENT	0	0	0.00	0	0	0.00	0	0	0.00
SKILLED NURSING FACILITY	1	30	18,305.70	9	114	6,794.92	0	0	0.00
INTERMEDIATE CARE FACILITY	0	0	0.00	3	43	4,618.70	0	0	0.00
INTER CARE MENTAL RETARDA	0	0	0.00	1756	51557	18499,738.03	0	0	0.00
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	0	0	0.00
HOME HEALTH	17	201	7,394.12	1128	39922	1555,216.80	0	0	0.00
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	0	0	0.00
PHYSICIAN	504	1243	109,443.52	4577	16965	339,287.33	0	0	0.00
CLINIC SERVICES	101	144	21,427.43	344	393	50,320.45	0	0	0.00
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	70	220	3,396.80	515	702	9,298.11	0	0	0.00
HABILITATION SERVICES	4	54	1,892.81	58	2013	78,675.42	0	0	0.00
REMEDIAL SERVICES	47	1969	23,545.67	131	3161	64,832.80	0	0	0.00
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
AMBULANCE SERVICES	8	9	1,183.92	105	126	14,920.77	0	0	0.00
LOCAL EDUCATION AGENCY	3	661	5,370.00	235	53754	944,521.97	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	2	23	361.50	17	192	2,432.24	0	0	0.00
PRESCRIBED DRUGS	875	3853	196,507.66	6192	19979	1375,207.51	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	378.49	12	13	792.74	0	0	0.00
IOWA PLAN PROGRAM	1492	1594	152,911.87	11562	11655	735,718.20	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	1	1	101.62	16	23	1,273.35	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	7	10	787.64	632	1418	200,607.61	0	0	0.00
MEDICAL SUPPLIES	130	4870	17,285.26	2329	328338	544,062.72	0	0	0.00
OTHER PRACTITIONER	59	129	5,491.75	760	12593	320,785.46	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	87	107	15,024.41	1109	1294	142,894.16	0	0	0.00
OPTOMETRIST	64	84	5,465.40	603	772	33,932.42	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	48	77	2,337.86	340	694	11,380.20	0	0	0.00
PODIATRIC	20	35	3,829.47	689	978	21,048.63	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	275	13147	475,117.55	0	0	0.00
PSYCHIATRIC	5	10	393.86	476	691	23,957.88	0	0	0.00
RESIDENTIAL CARE FACILITY	0	0	0.00	12	313	2,119.53	0	0	0.00
ID WAIVER SERVICE	3	114	2,809.96	8938	619688	24332,822.57	0	0	0.00
CHILDRENS MENTAL HEALTH SVC	1	3	102.33	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	6	212	3,281.98	2	39	714.09	0	0	0.00
ILL & HANDICAPPED WAIVER SVCS	2	171	3,744.34	150	7644	159,517.65	0	0	0.00
COUNTY OFFICE REIMBURSEMENT	0	0	0.00	0	0	0.00	0	0	0.00
MEP SERVICES	8	6	1,056.42	8316	7723	2071,797.35	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 *	1513	24582	1071,585.24	11739	1260024	52953,666.74	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	5851	35353	31549,671.58
OUTPATIENT	0	0	0.00	10	177	8,509.36	60737	1167862	18299,344.84
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	1	25	406.25
SKILLED NURSING FACILITY	0	0	0.00	0	0	0.00	870	11750	2845,236.99
INTERMEDIATE CARE FACILITY	0	0	0.00	0	0	0.00	11349	330550	36833,567.61
INTER CARE MENTAL RETARDA	0	0	0.00	0	0	0.00	1767	51875	17150,841.77
NURSING FAC FOR MENTAL ILL	0	0	0.00	0	0	0.00	35	1063	315,899.46
HOME HEALTH	0	0	0.00	0	0	0.00	12631	269032	8537,214.89
LEAD INSPECTION AGENCY	0	0	0.00	0	0	0.00	3	2	915.95
PHYSICIAN	0	0	0.00	13	17	1,051.19	115614	370879	15989,212.33
CLINIC SERVICES	0	0	0.00	14	17	2,141.35	18489	23930	3381,405.83
MEP CASE MANAGEMENT	0	0	0.00	0	0	0.00	0	0	0.00
LAB AND RADIOLOGICAL	0	0	0.00	1	4	23.52	14474	31416	594,237.01
HABILITATION SERVICES	0	0	0.00	0	0	0.00	3163	89672	4748,455.97
REMEDIAL SERVICES	0	0	0.00	4	198	4,082.58	10784	376707	5699,077.03
REHAB SUPPORT SERVICES	0	0	0.00	0	0	0.00	2	0	557.20
AMBULANCE SERVICES	0	0	0.00	0	0	0.00	2011	2333	245,231.88
LOCAL EDUCATION AGENCY	0	0	0.00	0	0	0.00	748	204864	2861,371.67

## 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	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	306	2021	23,688.29
PRESCRIBED DRUGS	0	0	0.00	17	21	831.90	119980	315216	17585,078.49
DRUG CAPITATION	0	0	0.00	0	0	0.00	0	0	0.00
INDIAN HEALTH SERVICES	0	0	0.00	0	0	0.00	2	2	536.00
FAMILY PLANNING SERVICES	0	0	0.00	3	3	131.49	7457	8499	808,254.14
IOWA PLAN PROGRAM	0	0	0.00	137	143	1,836.35	360271	387133	11330,259.34
MANAGED SUBSTANCE ABUSE	0	0	0.00	0	0	0.00	0	0	0.00
MENTAL HEALTH ACCESS PLAN	0	0	0.00	0	0	0.00	0	0	0.00
EPSDT SCREENING	0	0	0.00	2	2	73.25	5615	6315	1032,692.43
HMO SERVICES	0	0	0.00	0	0	0.00	0	0	0.00
PACE SERVICES	0	0	0.00	0	0	0.00	72	72	210,209.80
PATIENT MANAGEMENT	0	0	0.00	75	75	150.00	170891	170889	341,744.40
HEALTH INS PREMIUM PAYMENT	0	0	0.00	0	0	0.00	3582	8755	566,605.78
MEDICAL SUPPLIES	0	0	0.00	0	0	0.00	22275	1616757	3730,688.56
OTHER PRACTITIONER	0	0	0.00	4	6	384.09	14065	105437	2166,835.28
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	0	0	0.00	11	14	2,007.39	23560	28620	4237,787.64
OPTOMETRIST	0	0	0.00	1	1	24.81	10534	13490	712,286.36

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	6	120.00	8546	18968	434,723.41
PODIATRIC	0	0	0.00	0	0	0.00	4621	7201	205,859.98
PHYSICAL DISABILITIES SVCS	0	0	0.00	0	0	0.00	705	28500	343,826.74
BRAIN INJ WAIVER SERVICES	0	0	0.00	0	0	0.00	1045	51395	1798,941.93
PSYCHIATRIC	0	0	0.00	0	0	0.00	3862	6727	244,965.55
RESIDENTIAL CARE FACILITY	0	0	0.00	0	0	0.00	1509	45035	337,310.86
ID WAIVER SERVICE	0	0	0.00	0	0	0.00	10167	704644	27579,406.39
CHILDRENS MENTAL HEALTH SVC	0	0	0.00	0	0	0.00	570	35330	595,876.36
AIDS WAIVER SERVICES	0	0	0.00	0	0	0.00	43	3844	35,414.56
ELDERLY WAIVER SERVICES	0	0	0.00	0	0	0.00	9691	449092	5926,364.64
ILL & HANDICAPPED WAIVER SVCS	0	0	0.00	0	0	0.00	2031	102088	1727,893.00
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	10546	9969	2783,467.02
UNASSIGNED	0	0	0.00	0	0	0.00	18	0	34,110.06-
* A L L C A T E G O R I E S *	0	0	0.00	139	684	21,367.28	396314	7093312	233778,140.75

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