

August 25, 2016

The Honorable Andy Biggs, President
Arizona State Senate
1700 West Washington
Phoenix, AZ 85007

The Honorable David M. Gowan Sr., Speaker
Arizona House of Representatives
1700 West Washington
Phoenix, AZ 85007

SUBJECT: FY 2017 Appropriation Status Report for the Period Ended July 31, 2016

Dear President Biggs and Speaker Gowan:

Pursuant to A.R.S. §'s 36-2920 and 36-2994, enclosed is the Arizona Health Care Cost Containment System's (AHCCCS) Appropriation Status Report (ASR) for the period ended July 31, 2016.

Status Summary – AHCCCS is in the process of finalizing its Fiscal Year 2018 budget request, including an update of Fiscal Year 2017 for submission to the Governor's Office of Strategic Planning and Budgeting pursuant to A.R.S. § 35-113. Therefore, for purposes of this report, projected annual expenditures equal the appropriations.

Enrollment Update – July 2016 enrollment is 1,854,126 members, a 4,548 member increase over the prior month. Enrollment for August 2015 increased to 1,869,747 members, a 15,621 member increase.

Major August changes by eligibility category include: 1931 for Families and Children/SOBRA – increase of 9,923; Supplemental Security Income – increase of 233; Prop 204 Restoration - increase of 4,185; Adult Expansion - decrease of 251; Medicare Cost Sharing – increase of 772; and Emergency Services - increase of 709.

Tobacco Funds Revenue Update – Tobacco tax collections through July 2016 are \$2.6 million more than the AHCCCS monthly projected flows. AHCCCS will continue to monitor the tobacco funds revenue collections to determine any impact on the FY 2017 appropriations.

If you have any questions about this report, please do not hesitate to call me at (602) 417-4111 or Jeffery Tegen at (602) 417-4705.

The Honorable Andy Biggs
The Honorable David M. Gowan, Sr.
August 25, 2016
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Sincerely,

A handwritten signature in black ink, appearing to read "T. J. Betlach". The signature is written in a cursive style with a large, sweeping flourish at the end.

Thomas J. Betlach
Director

Enclosure

cc: The Honorable Douglas A. Ducey, Governor
The Honorable Don Shooter, Chairman, Senate Appropriations Committee
The Honorable Justin Olson, Chairman, House Appropriations Committee
The Honorable Nancy Barto, Chairman, Senate Health and Human Services Committee
The Honorable Heather Carter, Chairman, House Health Committee
Lorenzo Romero, Director, Governor's Office of Strategic Planning and Budgeting
Richard Stavneak, Director, Joint Legislative Budget Committee



Appropriation Status Report (ASR)

Fiscal Year 2017

Through July 31, 2016

Prepared by: Division of Business and Finance

Appropriation Status Report

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Appropriation Status Report

Appropriated Sources and
Uses of Funds

ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM
FY 2017 APPROPRIATION STATUS REPORT
For the Period Ending July 31, 2016
SUMMARY OF APPROPRIATED EXPENDITURES

	(A)	(B)	(A) - (B)	PROJECTED	ANNUALIZED
ANNUAL APPROPRIATION	EXPENDITURE PLAN YTD	EXPENDITURES YTD	VARIANCE YTD	ANNUAL EXPENDITURES	VARIANCE
APPROPRIATIONS:					
ADMINISTRATION					
AHCCCS Operating Lump Sum	\$ 91,439,300	\$ 4,525,323	\$ 4,525,323	\$ 91,439,300	\$ -
AHCCCS Prop 204 Administration	6,832,800	983,975	983,975	6,832,800	-
DES Eligibility	54,874,500	2,862,926	2,862,926	54,874,500	-
DES Prop 204 Eligibility	38,358,700	1,682,371	1,682,371	38,358,700	-
BHS Prop 204 Administration	5,832,000	-	-	5,832,000	-
TOTAL ADMINISTRATION	<u>197,337,300</u>	<u>10,054,595</u>	<u>10,054,595</u>	<u>197,337,300</u>	<u>-</u>
Traditional Medicaid Services	3,836,187,500	320,485,538	320,485,538	3,836,187,500	-
Proposition 204 Services	2,877,688,100	229,420,578	229,420,578	2,877,688,100	-
ACA Adult Expansion	462,284,600	36,169,987	36,169,987	462,284,600	-
Children's Rehabilitative Services	275,375,700	22,162,270	22,162,270	275,375,700	-
KidsCare Services	1,955,000	136,608	136,608	1,955,000	-
ALTCS Services	1,422,354,600	106,969,572	106,969,572	1,422,354,600	-
Disproportionate Share Payments	5,087,100	-	-	5,087,100	-
Rural Hospitals	22,650,000	-	-	22,650,000	-
Voluntary Political Subdivision Programs	319,888,600	4,483	4,483	319,888,600	-
Behavioral Health Traditional Medicaid Services	960,228,100	72,580,831	72,580,831	960,228,100	-
Behavioral Health Proposition 204 Services	612,844,800	45,763,441	45,763,441	612,844,800	-
Behavioral Health ACA Adult Expansion	77,702,300	5,487,433	5,487,433	77,702,300	-
Behavioral Health CMDP	208,027,400	16,314,004	16,314,004	208,027,400	-
Non Medicaid Seriously Mentally Ill Services	78,846,900	-	-	78,846,900	-
Supported Housing	5,324,800	-	-	5,324,800	-
Crisis Services	16,391,300	-	-	16,391,300	-
TOTAL PROGRAMMATIC	<u>11,182,836,800</u>	<u>855,494,744</u>	<u>855,494,744</u>	<u>11,182,836,800</u>	<u>-</u>
TOTAL EXPENDITURES	<u>\$ 11,380,174,100</u>	<u>\$ 865,549,339</u>	<u>\$ 865,549,339</u>	<u>\$ 11,380,174,100</u>	<u>\$ -</u>

ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM
FY 2017 APPROPRIATION STATUS REPORT
For the Period Ending July 31, 2016
APPROPRIATED EXPENDITURES BY FUNDING SOURCE

	(A) ANNUAL EXPENDITURE PLAN YTD	(B) EXPENDITURES YTD	(A) - (B) VARIANCE YTD	PROJECTED ANNUAL EXPENDITURES	ANNUALIZED VARIANCE
STATE - GENERAL FUND					
Administrative Expenditures	\$ 55,236,700	\$ 2,776,577	\$ -	\$ 55,236,700	\$ -
Proposition 204 - Administrative Expenditures	19,466,600	689,899	-	19,466,600	-
BHS Prop 204 Administration	1,777,800	-	-	1,777,800	-
Programmatic Expenditures					
Traditional Medicaid Services	783,058,800	85,470,923	-	783,058,800	-
Proposition 204 Services	100,000,000	31,348,264	-	100,000,000	-
Children's Rehabilitative Services	84,937,900	6,160,921	-	84,937,900	-
KidsCare Services	-	(15,957)	-	-	-
ALTCs Services	167,841,100	26,905,915	-	167,841,100	-
DSH and Rural Hospitals	7,239,300	-	-	7,239,300	-
Behavioral Health Traditional Medicaid Services	259,356,900	22,920,194	-	259,356,900	-
Behavioral Health Proposition 204 Services	109,250,500	8,099,247	-	109,250,500	-
Behavioral Health ACA Adult Expansion	831,900	-	-	831,900	-
Behavioral Health CMDP	63,770,500	5,058,476	-	63,770,500	-
Non Medicaid Seriously Mentally Ill Services	78,846,900	-	-	78,846,900	-
Supported Housing	5,324,800	-	-	5,324,800	-
Crisis Services	14,141,100	-	-	14,141,100	-
TOTAL GF EXPENDITURES	1,751,080,800	189,414,458	-	1,751,080,800	-
FEDERAL					
Administrative Expenditures	90,879,100	4,608,885	-	90,879,100	-
Proposition 204 - Administrative Expenditures	22,161,600	1,976,447	-	22,161,600	-
BHS Prop 204 Administration	4,054,200	-	-	4,054,200	-
Programmatic Expenditures					
Traditional Medicaid Services	2,558,500,000	230,854,669	-	2,558,500,000	-
Proposition 204 Services	2,375,352,300	198,072,313	-	2,375,352,300	-
ACA Adult Expansion	456,023,100	36,169,987	-	456,023,100	-
Children's Rehabilitative Services	190,437,800	16,001,350	-	190,437,800	-
KidsCare Services	1,585,000	152,565	-	1,585,000	-
ALTCs Services and Nursing Facility Assessment	953,302,500	70,520,753	-	953,302,500	-
DSH and Rural Hospitals	20,497,800	-	-	20,497,800	-
Behavioral Health Traditional Medicaid Services	665,305,400	49,660,637	-	665,305,400	-
Behavioral Health Proposition 204 Services	503,594,300	37,664,193	-	503,594,300	-
Behavioral Health ACA Adult Expansion	76,870,400	5,487,433	-	76,870,400	-
Behavioral Health CMDP	144,256,900	11,255,528	-	144,256,900	-
Voluntary Political Subdivision Programs - See Note 5	151,245,700	-	-	151,245,700	-
TOTAL FEDERAL EXPENDITURES	8,214,066,100	662,424,759	-	8,214,066,100	-
COUNTY					
Administrative Expenditures Proposition 204 - BNCF	3,563,300	-	-	3,563,300	-
Programmatic Expenditures					
Traditional Medicaid Services Acute Care	49,687,700	4,140,642	-	49,687,700	-
ALTCs Services	249,980,000	9,427,901	-	249,980,000	-
TOTAL COUNTY EXPENDITURES	303,231,000	13,568,543	-	303,231,000	-

ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM
FY 2017 APPROPRIATION STATUS REPORT
For the Period Ending July 31, 2016
APPROPRIATED EXPENDITURES BY FUNDING SOURCE

	(A) ANNUAL EXPENDITURE PLAN YTD	(B) EXPENDITURES YTD	(A) - (B) VARIANCE YTD	PROJECTED ANNUAL EXPENDITURES	ANNUALIZED VARIANCE
TOBACCO FUNDS					
Programmatic Expenditures					
Traditional Medicaid Services - Medically Needy	37,432,400	-	-	37,432,400	-
Behavioral Health Traditional Medicaid Services - Medically Needy	35,565,800	-	-	35,565,800	-
Proposition 204 Services - Emergency Health Services	18,747,200	-	-	18,747,200	-
Proposition 204 Services - Proposition 204 Protection	37,521,000	-	-	37,521,000	-
Proposition 204 Services - ATLSF	100,000,000	-	-	100,000,000	-
TOTAL TOBACCO EXPENDITURES	229,266,400	-	-	229,266,400	-
OTHER					
Administrative Expenditures					
Prescription Drug Rebate Program	198,000	2,787	2,787	198,000	-
Programmatic Expenditures					
Acute Care - Prescription Drug Rebate Program State Match	106,139,500	-	-	106,139,500	-
Acute Care - Prescription Drug Rebate Program Federal Authority	301,143,200	-	-	301,143,200	-
Long Term Care - Prescription Drug Rebate Program State Match	7,441,300	-	-	7,441,300	-
Long Term Care - Prescription Drug Rebate Program Federal Authority	21,600,300	-	-	21,600,300	-
Proposition 204 Services - Hospital Assessment	246,067,600	-	-	246,067,600	-
ACA Adult Expansion - Hospital Assessment	6,261,500	-	-	6,261,500	-
Traditional Medicaid Services - TPL	194,700	14,774	14,774	194,700	-
ALTCS Services - TPL	-	115,004	115,004	-	-
ALTCS Services - Nursing Facility Assessment	22,189,400	-	-	22,189,400	-
KidsCare Services Premiums	370,000	-	-	370,000	-
Freedom to Work Premiums	31,200	4,531	4,531	31,200	-
Crisis Services - Substance Abuse Services Fund	2,250,200	-	-	2,250,200	-
Voluntary Political Subdivision Programs - See Note 5	168,642,900	4,483	4,483	168,642,900	-
TOTAL OTHER EXPENDITURES	882,529,800	141,578	141,578	882,529,800	-
TOTAL					
Administrative Expenditures	197,337,300	10,054,595	10,054,595	197,337,300	-
Acute Care	9,760,482,200	748,525,172	748,525,172	9,760,482,200	-
Long Term Care	1,422,354,600	106,969,573	106,969,573	1,422,354,600	-
TOTAL EXPENDITURES	\$ 11,380,174,100	\$ 865,549,339	\$ 865,549,339	\$ 11,380,174,100	\$ -

ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM
FY 2017 APPROPRIATION STATUS REPORT
APPROPRIATED REVENUE AND OTHER COLLECTIONS RECEIVED DETAIL SCHEDULE
For the Period Ending July 31, 2016

	BUDGET	BUDGET YTD	RECEIPTS YTD
GENERAL FUND:			
Traditional Medicaid Services & Administrative	\$ 930,472,700	\$ 94,408,421	\$ 122,387,090
Proposition 204 Services & Administrative	119,466,600	32,038,163	40,137,410
KidsCare Services	-	(15,957)	(15,957)
ALTCS Services	167,841,100	26,905,915	26,905,915
Behavioral Health Traditional Medicaid Services	533,300,400	36,077,917	-
TOTAL	<u>1,751,080,800</u>	<u>189,414,458</u>	<u>189,414,458</u>
FEDERAL:			
Acute & Administrative	5,865,097,400	487,683,650	578,165,096
KidsCare Services	1,585,000	152,565	210,447
ALTCS Services	953,302,500	70,520,753	70,520,753
Behavioral Health Traditional Medicaid Services	1,394,081,200	104,067,791	93,686,160
TOTAL	<u>8,214,066,100</u>	<u>662,424,759</u>	<u>742,582,456</u>
COUNTY:			
Acute & Administrative	53,251,000	4,140,642	2,064,091
ALTCS Services	249,980,000	9,427,901	-
TOTAL	<u>303,231,000</u>	<u>13,568,543</u>	<u>2,064,091</u>
TOBACCO FUNDS:			
Traditional Medicaid Services	72,998,200	-	-
Proposition 204 Services	156,268,200	-	-
TOTAL	<u>229,266,400</u>	<u>-</u>	<u>-</u>
OTHER:			
Administrative	198,000	2,787	2,787
Acute Care - Prescription Drug Rebate Program	407,282,700	-	-
Long Term Care - Prescription Drug Rebate Program	29,041,600	-	-
Hospital Assessment	252,329,100	-	7,398,713
ALTCS - Nursing Facility Assessment	22,189,400	-	-
Acute TPL - Note 1	194,700	14,774	14,774
LTC TPL - Note 1	-	115,004	115,004
KidsCare TPL - Note 1	-	-	(2)
Member Premiums - CHIP	370,000	-	20,056
Member Premiums - Freedom to Work	31,200	4,531	4,531
Behavioral Health Traditional Medicaid Services	2,250,200	-	-
Voluntary Political Subdivision - State Match	168,642,900	4,483	4,483
TOTAL	<u>882,529,800</u>	<u>141,578</u>	<u>7,560,346</u>
TOTAL REVENUE	<u>\$ 11,380,174,100</u>	<u>\$ 865,549,339</u>	<u>\$ 941,621,351</u>

Appropriation Status Report

Footnotes

ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM
FY 2017 APPROPRIATION STATUS REPORT
For the Period Ending July 31, 2016

Note 1: Third Party Liability Collections:

Gross Collections:

	July 2016	July 2015	July 1, 2015 July 31, 2016	July 1, 2014 July 31, 2015
Acute	\$ 206,866	\$ 483,245	\$ 206,866	\$ 483,245
LTC	489,327	111,261	489,327	111,261
KidsCare	-	737	-	737
Total TPL Collections	<u>\$ 696,193</u>	<u>\$ 595,243</u>	<u>\$ 696,193</u>	<u>\$ 595,243</u>

AHCCCS Net Collections (Net of Federal Share):

Expenditure Offsets:

Acute	\$ 14,774	\$ 51,455	\$ 14,774	\$ 51,455
LTC	115,004	23,379	115,004	23,379
KidsCare	(2)	114	(2)	114
Total Expenditure Offsets	<u>\$ 129,776</u>	<u>\$ 74,948</u>	<u>\$ 129,776</u>	<u>\$ 74,948</u>

FY 17 Total

Note 2: Authorized Positions

1,141.2

Actual Positions as of July 31, 2016

1,012.0

ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM
FY 2017 APPROPRIATION STATUS REPORT
For the Period Ending July 31, 2016

Note 3: Intergovernmental Service Agreement - State of Hawaii:

Beginning Balance July 1, 2016	\$	1,933,160
Revenues		-
Transfers-In		-
Total Revenues		-
Expenditures		67,479
Transfers-out		-
Total Expenditures		67,479
Ending Balance July 31, 2016	\$	1,865,680

Of the \$1,865,680 ending balance, \$672,670 represents restricted cash for prepaid expenses from the State of Hawaii for the projected expenditures through July 2016.

Note 4: Summary of HHS Office of Inspector General Questioned Costs.

Schedule of Outstanding Liabilities
As of July 31, 2016

Description	Amount	Type
School Based Claiming Medicaid Administrative Costs	18,941,355	HHS-OIG & AHCCCS Self Reported
School Based Claiming Direct Services Costs	19,923,489	HHS-OIG
	38,864,844	

ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM
FY 2017 APPROPRIATION STATUS REPORT
For the Period Ending July 31, 2016

Note 5: Summary of Voluntary Political Subdivision Contribution Expenditures.

	As of July 31, 2016 Expenditures		
	State Match	Federal	Total
DSH Voluntary	\$ 4,483	\$ -	\$ 4,483
GME Voluntary	-	-	-
Safety Net Care Pool	-	-	-
Total Voluntary Political Subdivision Program Expenditures	\$ 4,483	\$ -	\$ 4,483



Appropriation Status Report

Caseload and Expenditures
by Rate Code

ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM

EXPENDITURE SUMMARY

For the Period Ending July 31, 2016

	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
TITLE XIX TRADITIONAL													
CAPITATION - ACUTE	278,655,778	0	0	0	0	0	0	0	0	0	0	0	278,655,778
CAPITATION - LTC	190,311,536	0	0	0	0	0	0	0	0	0	0	0	190,311,536
MENTAL HEALTH - CHILD	26,813,238	0	0	0	0	0	0	0	0	0	0	0	26,813,238
MENTAL HEALTH - ADULT	698,830	0	0	0	0	0	0	0	0	0	0	0	698,830
MENTAL HEALTH - GENERAL	12,634,372	0	0	0	0	0	0	0	0	0	0	0	12,634,372
MENTAL HEALTH - CMDP	16,373,946	0	0	0	0	0	0	0	0	0	0	0	16,373,946
CHILDREN'S REHAB SERVICES	5,498,579	0	0	0	0	0	0	0	0	0	0	0	5,498,579
FEE FOR SERVICE - ACUTE	43,169,220	0	0	0	0	0	0	0	0	0	0	0	43,169,220
FFS - PRIOR QUARTER COVERAGE	399,183	0	0	0	0	0	0	0	0	0	0	0	399,183
EMERGENCY SERVICES - FEDERAL	4,723,538	0	0	0	0	0	0	0	0	0	0	0	4,723,538
FFS MEDICAID IN PUBLIC SCHOOLS	334,212	0	0	0	0	0	0	0	0	0	0	0	334,212
INPATIENT INMATES FFS	125,819	0	0	0	0	0	0	0	0	0	0	0	125,819
QMB - FEE FOR SERVICE	400,115	0	0	0	0	0	0	0	0	0	0	0	400,115
MOHAVE COUNTY INMATES FFS	31	0	0	0	0	0	0	0	0	0	0	0	31
PIMA COUNTY INMATES FFS	1,278	0	0	0	0	0	0	0	0	0	0	0	1,278
MARICOPA CTY INMATES FFS	22,177	0	0	0	0	0	0	0	0	0	0	0	22,177
PINAL COUNTY INMATES FFS	4,630	0	0	0	0	0	0	0	0	0	0	0	4,630
FEE FOR SERVICE - LTC	9,673,620	0	0	0	0	0	0	0	0	0	0	0	9,673,620
LFFS - PRIOR QUARTER COVERAGE	25,539	0	0	0	0	0	0	0	0	0	0	0	25,539
LFFS MEDICAID IN PUBLIC SCHOOLS	828,652	0	0	0	0	0	0	0	0	0	0	0	828,652
REINSURANCE - ACUTE	10,931,804	0	0	0	0	0	0	0	0	0	0	0	10,931,804
REINSURANCE - LTC	4,967,043	0	0	0	0	0	0	0	0	0	0	0	4,967,043
SMIB - ACUTE	13,288,395	0	0	0	0	0	0	0	0	0	0	0	13,288,395
HIB - ACUTE	361,563	0	0	0	0	0	0	0	0	0	0	0	361,563
Q1	2,222,029	0	0	0	0	0	0	0	0	0	0	0	2,222,029
SMIB - LTC	3,328,913	0	0	0	0	0	0	0	0	0	0	0	3,328,913
HIB - LTC	283,717	0	0	0	0	0	0	0	0	0	0	0	283,717
SUBTOTAL	626,077,757	0	0	0	0	0	0	0	0	0	0	0	626,077,757

ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM

EXPENDITURE SUMMARY

For the Period Ending July 31, 2016

	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
TITLE XIX PROP 204													
CAPITATION - ACUTE	212,953,625	0	0	0	0	0	0	0	0	0	0	0	212,953,625
MENTAL HEALTH - CHILD	9,369	0	0	0	0	0	0	0	0	0	0	0	9,369
MENTAL HEALTH - ADULT	1,251,199	0	0	0	0	0	0	0	0	0	0	0	1,251,199
MENTAL HEALTH - GENERAL	22,620,819	0	0	0	0	0	0	0	0	0	0	0	22,620,819
MENTAL HEALTH - CMDP	938	0	0	0	0	0	0	0	0	0	0	0	938
CHILDREN'S REHAB SERVICES	24,810	0	0	0	0	0	0	0	0	0	0	0	24,810
FEE FOR SERVICE - ACUTE	30,892,242	0	0	0	0	0	0	0	0	0	0	0	30,892,242
FFS - PRIOR QUARTER COVERAGE	626,645	0	0	0	0	0	0	0	0	0	0	0	626,645
EMERGENCY SERVICES - FEDERAL	2,005,165	0	0	0	0	0	0	0	0	0	0	0	2,005,165
FFS MEDICAID IN PUBLIC SCHOOLS	935	0	0	0	0	0	0	0	0	0	0	0	935
INPATIENT INMATES FFS	802,511	0	0	0	0	0	0	0	0	0	0	0	802,511
MOHAVE COUNTY INMATES FFS	962	0	0	0	0	0	0	0	0	0	0	0	962
PINAL COUNTY INMATES FFS	12,241	0	0	0	0	0	0	0	0	0	0	0	12,241
PIMA COUNTY INMATES FFS	17,640	0	0	0	0	0	0	0	0	0	0	0	17,640
MARICOPA CTY INMATES FFS	136,056	0	0	0	0	0	0	0	0	0	0	0	136,056
GRAHAM COUNTY INMATES FFS	5,378	0	0	0	0	0	0	0	0	0	0	0	5,378
COCONINO COUNTY INMATES FFS	3,420	0	0	0	0	0	0	0	0	0	0	0	3,420
REINSURANCE - ACUTE	3,834,787	0	0	0	0	0	0	0	0	0	0	0	3,834,787
SMIB - ACUTE	5,139,071	0	0	0	0	0	0	0	0	0	0	0	5,139,071
HIB - ACUTE	5,630	0	0	0	0	0	0	0	0	0	0	0	5,630
SUBTOTAL	280,343,442	0	0	0	0	0	0	0	0	0	0	0	280,343,442

ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM

EXPENDITURE SUMMARY

For the Period Ending July 31, 2016

	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
TITLE XIX ACA ADULT EXPANSION													
CAPITATION - ACUTE	32,527,702	0	0	0	0	0	0	0	0	0	0	0	32,527,702
MENTAL HEALTH - CHILD	115	0	0	0	0	0	0	0	0	0	0	0	115
MENTAL HEALTH - ADULT	229,129	0	0	0	0	0	0	0	0	0	0	0	229,129
MENTAL HEALTH - GENERAL	4,142,494	0	0	0	0	0	0	0	0	0	0	0	4,142,494
CHILDREN'S REHAB SERVICES	1,431	0	0	0	0	0	0	0	0	0	0	0	1,431
FEE FOR SERVICE - ACUTE	2,287,256	0	0	0	0	0	0	0	0	0	0	0	2,287,256
FFS - PRIOR QUARTER COVERAGE	202,656	0	0	0	0	0	0	0	0	0	0	0	202,656
EMERGENCY SERVICES - FEDERAL	3,157,734	0	0	0	0	0	0	0	0	0	0	0	3,157,734
INPATIENT INMATES FFS	47,079	0	0	0	0	0	0	0	0	0	0	0	47,079
REINSURANCE - ACUTE	394,053	0	0	0	0	0	0	0	0	0	0	0	394,053
SMIB - ACUTE	487	0	0	0	0	0	0	0	0	0	0	0	487
SUBTOTAL	42,990,136	0	0	0	0	0	0	0	0	0	0	0	42,990,136
TOTAL TITLE XIX	949,411,335	0	0	0	0	0	0	0	0	0	0	0	949,411,335
TITLE XXI KIDSCARE													
KidsCare - CAPITATION	105,825	0	0	0	0	0	0	0	0	0	0	0	105,825
KidsCare - MENTAL HEALTH	20,728	0	0	0	0	0	0	0	0	0	0	0	20,728
KidsCare - REINSURANCE	82,674	0	0	0	0	0	0	0	0	0	0	0	82,674
TOTAL TITLE XXI	209,226	0	0	0	0	0	0	0	0	0	0	0	209,226
GRAND TOTAL	949,620,561	0	0	0	0	0	0	0	0	0	0	0	949,620,561

ACUTE CAPITATION - AMOUNTS

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1004	TANF 14-20 MALE WITH	330.49	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	330.49
1005	TANF 14-20 FEMALE WI	4,171.93	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,171.93
1006	TANF 21-44 MALE WITH	46,322.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	46,322.50
1007	TANF 21-44 FEMALE WI	95,394.39	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	95,394.39
1008	TANF 45-64 M & F WIT	142,836.05	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	142,836.05
1009	TANF 65+ M & F WITH	49,195.35	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	49,195.35
100F	TANF 21-44 MALE WITH	2,174.21	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,174.21
100G	TANF 21-44 FEMALE WI	979.52	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	979.52
100H	TANF 44-64 M & F WIT	2,819.97	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,819.97
100J	TANF 65+ M & F WITH	1,265.56	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,265.56
1011	TANF <1 M & F NON-ME	5,979,797.90	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,979,797.90
1012	TANF 01-05 M & F NON	1,982,751.29	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,982,751.29
1013	TANF 06-13 M & F NON	3,400,616.72	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,400,616.72
1014	TANF 14-20 MALE NON-	1,438,649.82	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,438,649.82
1015	TANF 14-20 FEMALE N	2,947,635.53	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,947,635.53
1016	TANF 21-44 MALE NON-	4,500,694.58	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,500,694.58
1017	TANF 21-44 FEMALE N	21,599,593.38	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	21,599,593.38
1018	TANF 45-64 M & F NON	9,002,157.42	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,002,157.42
1019	TANF 65+ M & F NON-M	34,981.92	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	34,981.92
101A	TANF <1 M & F NON-M	1,374,906.97	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,374,906.97
101B	TANF 01-05 M & F NON	37,377.77	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	37,377.77
101C	TANF 06-13 M & F NON	31,887.35	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	31,887.35
101D	TANF 14-20 MALE NON-	40,214.75	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	40,214.75
101E	TANF 14-20 FEMALE N	75,894.61	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	75,894.61
101F	TANF 21-44 MALE NON-	332,694.14	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	332,694.14
101G	TANF 21-44 FEMALE N	1,014,213.65	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,014,213.65
101H	TANF 44-64 M & F NON	352,715.91	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	352,715.91
101J	TANF 65+ N & F NON-M	2,006.75	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,006.75
1026	TANF 21-44 MALE WITH	9,851.45	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,851.45
1027	TANF 21-44 FEMALE WI	37,746.13	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	37,746.13
1028	TANF 45-64 M & F WIT	39,714.64	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	39,714.64
1029	TANF 65+ M & F WITH	11,125.03	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	11,125.03
102F	TANF 21-44 MALE WITH	586.66	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	586.66
2100	SSI AGED WITH MEDIC	842,955.42	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	842,955.42
210Z	SSI AGED WITH MEDIC	28,411.56	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	28,411.56
2110	SSI AGED NON-MEDICA	4,812,760.61	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,812,760.61

ACUTE CAPITATION - AMOUNTS

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RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
211Z	SSI AGED NON-MEDICA P	127,183.08	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	127,183.08
2120	SSI AGED WITH QMB	5,230,861.87	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,230,861.87
212Z	SSI AGED WITH QMB P	4,349.89	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,349.89
2200	SSI DISABLED WITH M F	2,492,441.51	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,492,441.51
220Z	SSI DISABLED WITH M F	17,675.35	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	17,675.35
2210	SSI DISABLED NON-ME D	58,494,437.05	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	58,494,437.05
221Z	SSI DISABLED NON-ME D	433,439.79	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	433,439.79
2220	SSI DISABLED WITH Q M	15,152,983.36	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	15,152,983.36
222Z	SSI DISABLED WITH Q M	3,347.64	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,347.64
2300	SSI BLIND WITH MEDIC A	6,019.11	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,019.11
2310	SSI BLIND NON-MEDIC A	416,766.24	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	416,766.24
231Z	SSI BLIND NON-MEDIC A	8,216.96	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8,216.96
2320	SSI BLIND WITH QMB	48,973.62	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	48,973.62
4302	SOBRA CHILD 01-05 M	335.78	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	335.78
4303	SOBRA CHILD 06-13 M	1,544.93	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,544.93
4304	SOBRA CHILD 14-20 MA	453.68	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	453.68
4305	SOBRA CHILD 14-20 FE	2,687.14	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,687.14
430C	SOBRA CHILD 06-13 M	19.65	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	19.65
4311	SOBRA CHILD <1 M & F	19,199,383.74	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	19,199,383.74
4312	SOBRA CHILD 01-05 M	23,848,737.73	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	23,848,737.73
4313	SOBRA CHILD 06-13 M	29,886,460.52	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	29,886,460.52
4314	SOBRA CHILD 14-20 MA	9,328,457.36	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,328,457.36
4315	SOBRA CHILD 14-20 FE	14,077,063.28	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	14,077,063.28
431A	SOBRA CHILD < 1 M & F	1,177,252.46	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,177,252.46
431B	SOBRA CHILD 01-05 M	566,517.45	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	566,517.45
431C	SOBRA CHILD 6-13 M & F	721,463.46	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	721,463.46
431D	SOBRA CHILD 14-20 MA	521,496.21	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	521,496.21
431E	SOBRA CHILD 14-20 FE	561,544.85	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	561,544.85
4322	SOBRA CHILD 01-05 M	230.53	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	230.53
5007	SOBRA PREG 21-44 FE M	29,492.39	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	29,492.39
5008	SOBRA PREG 45-64 FE M	4,151.82	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,151.82
500G	SOBRA PREG 21-44 FE M	621.37	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	621.37
500H	SOBRA PREG 45-64 FE M	242.26	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	242.26
5013	SOBRA PREG 09-13 FE M	1,407.36	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,407.36
5015	SOBRA PREG 14-20 FE M	1,116,187.80	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,116,187.80
5017	SOBRA PREG 21-44 FE M	5,647,435.21	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,647,435.21

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RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
5018	SOBRA PREG 45-64 FE M	29,549.66	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	29,549.66
501C	SOBRA PREG 09-13 FE M	33.46	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	33.46
501E	SOBRA PREG 14-20 FE M	137,111.91	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	137,111.91
501G	SOBRA PREG 21-44 FE M	501,169.31	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	501,169.31
501H	SOBRA PREG 45-64 FE M	2,476.09	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,476.09
5027	SOBRA PREG 21-44 FE M	13,528.33	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	13,528.33
5028	SOBRA PREG 45-64 FE M	2,212.75	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,212.75
502G	SOBRA PREG 21-44 FE M	163.64	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	163.64
SUBTOTAL:		250,093,559.53	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	250,093,559.53
9910	TANF & SOBRA CHILDR F	1,823,715.69	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,823,715.69
9920	SSI W/MEDICARE KICK	37,798.01	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	37,798.01
9921	SSI W/O MEDICARE KIC	190,093.86	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	190,093.86
9950	S.O.B.R.A. KICK PAYM	13,033,453.67	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	13,033,453.67
SUBTOTAL:		15,085,061.23	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	15,085,061.23
3100	TRANSPLANT OPTION 1	49.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	49.50
SUBTOTAL:		49.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	49.50
1106	TANF EXPANDED 21-44	282,644.01	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	282,644.01
1107	TANF EXPANDED 21-44	858,361.36	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	858,361.36
1108	TANF EXPANDED 45-64	1,613,497.29	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,613,497.29
1109	TANF EXPANDED 65+ M2	484,476.89	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	484,476.89
110F	TANF EXPANDED 21-44	8,177.12	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8,177.12
110G	TANF EXPANDED 21-44	9,142.58	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,142.58
110H	TANF EXPANDED 45-64	33,794.96	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	33,794.96
110J	TANF EXPANDED 65+ M2	9,199.74	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,199.74
1111	TANF EXPANDED <1 M R,F	557.66	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	557.66
1112	TANF EXPANDED 01-05	4,050.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,050.10
1113	TANF EXPANDED 06-13	16,864.25	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	16,864.25
1114	TANF EXPANDED 14-20	95,489.34	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	95,489.34
1115	TANF EXPANDED 14-20	534,805.44	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	534,805.44
1116	TANF EXPANDED 21-44	5,053,008.48	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,053,008.48
1117	TANF EXPANDED 21-44	18,426,686.32	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	18,426,686.32
1118	TANF EXPANDED 45-64	11,268,281.74	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	11,268,281.74
1119	TANF EXPANDED 65+ M2	36,120.95	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	36,120.95
111A	TANF EXPANDED <1 M R,F	1,927.54	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,927.54
111B	TANF EXPANDED 01-05	8.90	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8.90

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111C	TANF EXPANDED 06-13	281.75	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	281.75
111D	TANF EXPANDED 14-20	10,758.18	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	10,758.18
111E	TANF EXPANDED 14-20	27,269.64	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	27,269.64
111F	TANF EXPANDED 21-44	307,744.28	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	307,744.28
111G	TANF EXPANDED 21-44	731,144.87	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	731,144.87
111H	TANF EXPANDED 45-64	466,357.73	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	466,357.73
111J	TANF EXPANDED 65+	8,779.85	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8,779.85
1126	TANF EXPANDED 21-44	153,790.27	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	153,790.27
1127	TANF EXPANDED 21-44	446,215.59	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	446,215.59
1128	TANF EXPANDED 45-64	504,237.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	504,237.50
1129	TANF EXPANDED 65+	168,961.75	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	168,961.75
112F	TANF EXPANDED 21-44	1,973.32	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,973.32
112G	TANF EXPANDED 21-44	1,409.59	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,409.59
112H	TANF EXPANDED 45-64	6,149.15	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,149.15
112J	TANF EXPANDED 65+	2,268.02	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,268.02
2400	SSI AGED EXPANDED	79,751.62	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	79,751.62
240Z	SSI AGED EXPANDED	18,469.11	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	18,469.11
2410	SSI AGED EXPANDED	113,134.36	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	113,134.36
241Z	SSI AGED EXPANDED	5,881.63	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,881.63
2420	SSI AGED EXPANDED	3,821,442.08	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,821,442.08
242Z	SSI AGED EXPANDED	8,856.22	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8,856.22
2500	SSI BLIND EXPANDED	140.23	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	140.23
2520	SSI BLIND EXPANDED	270.25	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	270.25
2600	SSI DISABLED EXPAND	254,582.86	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	254,582.86
260Z	SSI DISABLED EXPAND	10,892.09	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	10,892.09
2610	SSI DISABLED EXPAND	1,833,932.47	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,833,932.47
261Z	SSI DISABLED EXPAND	33,726.08	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	33,726.08
2620	SSI DISABLED EXPAND	8,960,995.29	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8,960,995.29
262Z	SSI DISABLED EXPAND	3,880.96	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,880.96
SUBTOTAL:		56,720,391.41	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	56,720,391.41
9911	SB PAYMENT FOR TAN	1,240,641.58	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,240,641.58
9922	SB PAYMENT FOR SSI	18,874.52	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	18,874.52
SUBTOTAL:		1,259,516.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,259,516.10
3506	ADULT 40-100% MALE 2	-1,357.37	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-1,357.37
3507	ADULT 40-100% FEMAL	655.96	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	655.96

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3508	ADULT 40-100% M&F 45	26,030.20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	26,030.20
3509	ADULT 40-100% M&F 65	5,034.18	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,034.18
350F	ADULT 40-100% MALE 2	780.79	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	780.79
350G	ADULT 40-100% FEMAL	321.93	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	321.93
350H	ADULT 40-100% M&F 45	6,378.29	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,378.29
350J	ADULT 40-100% M&F 65	1,172.03	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,172.03
3514	ADULT 40-100% MALE 1	2,409,491.88	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,409,491.88
3515	ADULT 40-100% FEMAL	2,652,207.33	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,652,207.33
3516	ADULT 40-100% MALE 2	9,091,685.89	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,091,685.89
3517	ADULT 40-100% FEMAL	7,488,728.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,488,728.50
3518	ADULT 40-100% M&F 45	18,275,289.94	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	18,275,289.94
3519	ADULT 40-100% M&F 65	9,481.02	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,481.02
351D	ADULT 40-100% MALE 1	230,773.61	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	230,773.61
351E	ADULT 40-100% FEMAL	202,837.35	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	202,837.35
351F	ADULT 40-100% MALE 2	854,550.14	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	854,550.14
351G	ADULT 40-100% FEMAL	641,841.39	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	641,841.39
351H	ADULT 40-100% M&F 45	1,495,397.19	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,495,397.19
351J	ADULT 40-100% M&F 65	15,371.19	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	15,371.19
3526	ADULT 40-100% MALE 2	938.25	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	938.25
3527	ADULT 40-100% FEMAL	489.55	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	489.55
3528	ADULT 40-100% M&F 45	6,566.58	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,566.58
3529	ADULT 40-100% M&F 65	59.89	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	59.89
352J	ADULT 40-100% M&F 65	1,264.42	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,264.42
3706	ADULT <40% EXP MALE	13,532.14	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	13,532.14
3707	ADULT <40% EXP FEM	8,594.39	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8,594.39
3708	ADULT <40% EXP M&F	52,776.27	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	52,776.27
3709	ADULT <40% EXP M&F	1,670.61	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,670.61
370F	ADULT <40% EXP MALE	23.96	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	23.96
370G	ADULT <40% EXP FEM	5,014.07	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,014.07
370H	ADULT <40% EXP M&F	41,292.32	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	41,292.32
3714	ADULT <40% EXP MALE	5,588,252.13	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,588,252.13
3715	ADULT <40% EXP FEM	4,892,572.32	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,892,572.32
3716	ADULT <40% EXP MALE	30,620,225.72	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	30,620,225.72
3717	ADULT <40% EXP FEM	18,697,678.92	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	18,697,678.92
3718	ADULT <40% EXP M&F	37,997,636.85	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	37,997,636.85
3719	ADULT <40% EXP M&F	24,175.96	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	24,175.96

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371D	ADULT <40% EXP MALE	527,076.34	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	527,076.34
371E	ADULT <40% EXP FEM	415,699.52	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	415,699.52
371F	ADULT <40% EXP MALE	4,933,492.46	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,933,492.46
371G	ADULT <40% EXP FEM	2,488,666.27	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,488,666.27
371H	ADULT <40% EXP M&F	4,347,109.87	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,347,109.87
3726	ADULT <40% EXP MALE	3,446.36	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,446.36
3727	ADULT <40% EXP FEM	1,623.77	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,623.77
3728	ADULT <40% EXP M&F	7,151.55	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,151.55
3729	ADULT <40% EXP M&F	475.74	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	475.74
372F	ADULT <40% EXP MALE	1,504.22	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,504.22
372G	ADULT <40% EXP FEM	675.81	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	675.81
372H	ADULT <40% EXP M&F	1,005.63	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,005.63
SUBTOTAL:		154,087,363.33	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	154,087,363.33
9935	BIRTH SUPP PAYMENT	287,840.28	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	287,840.28
9937	BIRTH SUPP PAYMENT	598,513.41	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	598,513.41
SUBTOTAL:		886,353.69	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	886,353.69
3906	NEWLY ELIGIBLE MALE	4,896.46	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,896.46
3907	NEWLY ELIGIBLE FEMA	2,726.25	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,726.25
3908	NEWLY ELIGIBLE M&F	37,160.26	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	37,160.26
3909	NEWLY ELIGIBLE M&F	2,216.27	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,216.27
390G	NEWLY ELIGIBLE FEMA	1,662.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,662.50
390H	NEWLY ELIGIBLE M&F	4,162.37	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,162.37
390J	NEWLY ELIGIBLE M&F	11.02	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	11.02
3914	NEWLY ELIGIBLE MALE	993,353.20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	993,353.20
3915	NEWLY ELIGIBLE FEMA	1,183,692.34	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,183,692.34
3916	NEWLY ELIGIBLE MALE	7,130,854.84	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,130,854.84
3917	NEWLY ELIGIBLE FEMA	10,276,450.45	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	10,276,450.45
3918	NEWLY ELIGIBLE M&F	10,565,542.96	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	10,565,542.96
3919	NEWLY ELIGIBLE M&F	5,613.74	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,613.74
391D	NEWLY ELIGIBLE MALE	53,561.17	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	53,561.17
391E	NEWLY ELIGIBLE FEMA	73,185.98	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	73,185.98
391F	NEWLY ELIGIBLE MALE	544,427.88	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	544,427.88
391G	NEWLY ELIGIBLE FEMA	645,279.14	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	645,279.14
391H	NEWLY ELIGIBLE M&F	535,632.09	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	535,632.09
3926	NEWLY ELIGIBLE MALE	384.04	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	384.04

ACUTE CAPITATION - AMOUNTS

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RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
3928	NEWLY ELIGIBLE M&F 4	1,094.45	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,094.45
SUBTOTAL:		32,061,907.41	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	32,061,907.41
9939	BIRTH SUPP PAYMENT	465,794.15	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	465,794.15
SUBTOTAL:		465,794.15	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	465,794.15
4412	SOBRA 100-133% M&F 4	1,928.16	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,928.16
4413	SOBRA 100-133% M&F 6	5,874,723.53	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,874,723.53
4414	SOBRA 100-133% MALE 4	1,999,246.85	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,999,246.85
4415	SOBRA 100-133% FEMA 4	3,005,921.37	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,005,921.37
441B	SOBRA 100-133% M&F 4	445.44	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	445.44
441C	SOBRA 100-133% M&F 6	164,704.59	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	164,704.59
441D	SOBRA 100-133% MALE 4	86,665.55	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	86,665.55
441E	SOBRA 100-133% FEMA 4	139,238.73	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	139,238.73
SUBTOTAL:		11,272,874.22	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	11,272,874.22
9944	BIRTH SUPP PAYMENT 6	35,856.55	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	35,856.55
SUBTOTAL:		35,856.55	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	35,856.55
4517	BC PATIENT FEMALE 2 4	5,396.74	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,396.74
4518	BC PATIENT FEMALE 4 6	75,925.22	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	75,925.22
451G	BC PATIENT FEMALE 2 4	163.19	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	163.19
451H	BC PATIENT FEMALE 4 6	851.62	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	851.62
4617	CC PATIENT FEMALE 2 4	5,421.52	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,421.52
4618	CC PATIENT FEMALE 4 6	3,628.71	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,628.71
SUBTOTAL:		91,387.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	91,387.00
8600	SSI BLIND FREEDOM/W Q	1,497.85	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,497.85
8700	SSI DISABLED FREEDO M	1,599,503.27	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,599,503.27
870Z	SSI DISABLED FREEDO M	5,284.74	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,284.74
8710	SSI DISABLED FREEDO M	290,544.03	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	290,544.03
871Z	SSI DISABLED FREEDO M	20,843.53	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	20,843.53
8720	SSI DISABLED FREEDO M	159,107.87	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	159,107.87
872Z	SSI DISABLED FREEDO M	208.68	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	208.68
SUBTOTAL:		2,076,989.97	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,076,989.97
TOTAL:		524,137,104.09	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	524,137,104.09

ACUTE CAPITATION - MEMBER MONTHS

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RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1004	TANF 14-20 MALE WITH	2.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2.00
1005	TANF 14-20 FEMALE WI	4.99	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4.99
1006	TANF 21-44 MALE WITH	105.64	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	105.64
1007	TANF 21-44 FEMALE WI	181.79	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	181.79
1008	TANF 45-64 M & F WIT	268.21	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	268.21
1009	TANF 65+ M & F WITH	116.75	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	116.75
100F	TANF 21-44 MALE WITH	12.95	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12.95
100G	TANF 21-44 FEMALE WI	5.05	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5.05
100H	TANF 44-64 M & F WIT	9.51	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9.51
100J	TANF 65+ M & F WITH	4.22	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4.22
1011	TANF <1 M & F NON-ME	12,190.91	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12,190.91
1012	TANF 01-05 M & F NON	15,922.62	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	15,922.62
1013	TANF 06-13 M & F NON	26,685.75	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	26,685.75
1014	TANF 14-20 MALE NON-	7,849.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,849.50
1015	TANF 14-20 FEMALE N	10,947.41	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	10,947.41
1016	TANF 21-44 MALE NON-	25,794.90	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	25,794.90
1017	TANF 21-44 FEMALE N	78,741.67	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	78,741.67
1018	TANF 45-64 M & F NON	20,054.80	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	20,054.80
1019	TANF 65+ M & F NON-M	82.44	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	82.44
101A	TANF < 1 M & F NON-M	1,368.89	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,368.89
101B	TANF 01-05 M & F NON	682.65	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	682.65
101C	TANF 06-13 M & F NON	588.07	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	588.07
101D	TANF 14-20 MALE NON-	275.74	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	275.74
101E	TANF 14-20 FEMALE N	392.46	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	392.46
101F	TANF 21-44 MALE NON-	2,233.16	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,233.16
101G	TANF 21-44 FEMALE N	5,212.42	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,212.42
101H	TANF 44-64 M & F NON	1,044.93	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,044.93
101J	TANF 65+ N & F NON-M	7.16	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7.16
1026	TANF 21-44 MALE WITH	40.21	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	40.21
1027	TANF 21-44 FEMALE WI	55.59	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	55.59
1028	TANF 45-64 M & F WIT	75.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	75.00
1029	TANF 65+ M & F WITH	27.20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	27.20
102F	TANF 21-44 MALE WITH	3.38	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3.38
2100	SSI AGED WITH MEDIC	4,687.07	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,687.07
210Z	SSI AGED WITH MEDIC	401.49	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	401.49
2110	SSI AGED NON-MEDICA	5,548.22	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,548.22

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211Z	SSI AGED NON-MEDICA P	216.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	216.60
2120	SSI AGED WITH QMB	27,168.47	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	27,168.47
212Z	SSI AGED WITH QMB P	67.03	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	67.03
2200	SSI DISABLED WITH M F	5,051.73	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,051.73
220Z	SSI DISABLED WITH M F	259.75	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	259.75
2210	SSI DISABLED NON-ME D	56,419.86	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	56,419.86
221Z	SSI DISABLED NON-ME D	759.89	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	759.89
2220	SSI DISABLED WITH Q M	27,588.74	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	27,588.74
222Z	SSI DISABLED WITH Q M	50.54	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	50.54
2300	SSI BLIND WITH MEDIC A	27.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	27.00
2310	SSI BLIND NON-MEDIC A	461.02	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	461.02
231Z	SSI BLIND NON-MEDIC A	14.08	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	14.08
2320	SSI BLIND WITH QMB	208.99	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	208.99
4302	SOBRA CHILD 01-05 M	3.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3.00
4303	SOBRA CHILD 06-13 M	6.70	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6.70
4304	SOBRA CHILD 14-20 MA	3.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3.00
4305	SOBRA CHILD 14-20 FE	6.38	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6.38
430C	SOBRA CHILD 06-13 M	0.06	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.06
4311	SOBRA CHILD <1 M & F	39,790.63	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	39,790.63
4312	SOBRA CHILD 01-05 M	188,466.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	188,466.60
4313	SOBRA CHILD 06-13 M	233,049.16	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	233,049.16
4314	SOBRA CHILD 14-20 MA	54,382.11	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	54,382.11
4315	SOBRA CHILD 14-20 FE	54,106.61	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	54,106.61
431A	SOBRA CHILD < 1 M & F	1,208.09	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,208.09
431B	SOBRA CHILD 01-05 M	9,938.87	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,938.87
431C	SOBRA CHILD 6-13 M & F	12,342.03	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12,342.03
431D	SOBRA CHILD 14-20 MA	3,383.27	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,383.27
431E	SOBRA CHILD 14-20 FE	2,833.78	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,833.78
4322	SOBRA CHILD 01-05 M	2.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2.00
5007	SOBRA PREG 21-44 FE M	54.43	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	54.43
5008	SOBRA PREG 45-64 FE M	5.32	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5.32
500G	SOBRA PREG 21-44 FE M	3.19	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3.19
500H	SOBRA PREG 45-64 FE M	0.67	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.67
5013	SOBRA PREG 09-13 FE M	6.16	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6.16
5015	SOBRA PREG 14-20 FE M	4,337.46	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,337.46
5017	SOBRA PREG 21-44 FE M	21,665.43	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	21,665.43

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5018	SOBRA PREG 45-64 FE M	69.37	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	69.37
501C	SOBRA PREG 09-13 FE M	0.61	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.61
501E	SOBRA PREG 14-20 FE M	704.07	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	704.07
501G	SOBRA PREG 21-44 FE M	2,575.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,575.10
501H	SOBRA PREG 45-64 FE M	6.61	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6.61
5027	SOBRA PREG 21-44 FE M	22.12	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	22.12
5028	SOBRA PREG 45-64 FE M	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
502G	SOBRA PREG 21-44 FE M	0.87	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.87
SUBTOTAL:		968,893.15	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	968,893.15
9910	TANF & SOBRA CHILDR F	296.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	296.00
9920	SSI W/MEDICARE KICK	6.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6.00
9921	SSI W/O MEDICARE KIC	31.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	31.00
9950	S.O.B.R.A. KICK PAYM	2,139.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,139.00
SUBTOTAL:		2,472.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,472.00
3100	TRANSPLANT OPTION 1	3.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3.00
SUBTOTAL:		3.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3.00
1106	TANF EXPANDED 21-44	788.67	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	788.67
1107	TANF EXPANDED 21-44	1,546.66	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,546.66
1108	TANF EXPANDED 45-64	2,802.54	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,802.54
1109	TANF EXPANDED 65+ M2	1,093.73	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,093.73
110F	TANF EXPANDED 21-44	55.35	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	55.35
110G	TANF EXPANDED 21-44	45.79	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	45.79
110H	TANF EXPANDED 45-64	104.82	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	104.82
110J	TANF EXPANDED 65+ M2	27.91	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	27.91
1111	TANF EXPANDED <1 M R,F	1.22	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.22
1112	TANF EXPANDED 01-05	29.83	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	29.83
1113	TANF EXPANDED 06-13	131.04	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	131.04
1114	TANF EXPANDED 14-20	576.14	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	576.14
1115	TANF EXPANDED 14-20	2,070.37	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,070.37
1116	TANF EXPANDED 21-44	30,546.64	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	30,546.64
1117	TANF EXPANDED 21-44	70,413.69	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	70,413.69
1118	TANF EXPANDED 45-64	26,030.37	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	26,030.37
1119	TANF EXPANDED 65+ M2	83.66	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	83.66
111A	TANF EXPANDED <1 M R,F	1.77	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.77
111B	TANF EXPANDED 01-05	0.16	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.16

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111C	TANF EXPANDED 06-13	5.16	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5.16
111D	TANF EXPANDED 14-20	70.26	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	70.26
111E	TANF EXPANDED 14-20	140.45	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	140.45
111F	TANF EXPANDED 21-44	2,076.01	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,076.01
111G	TANF EXPANDED 21-44	3,752.64	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,752.64
111H	TANF EXPANDED 45-64	1,397.05	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,397.05
111J	TANF EXPANDED 65+	27.62	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	27.62
1126	TANF EXPANDED 21-44	306.62	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	306.62
1127	TANF EXPANDED 21-44	702.41	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	702.41
1128	TANF EXPANDED 45-64	861.34	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	861.34
1129	TANF EXPANDED 65+	379.94	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	379.94
112F	TANF EXPANDED 21-44	13.19	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	13.19
112G	TANF EXPANDED 21-44	7.14	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7.14
112H	TANF EXPANDED 45-64	18.32	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	18.32
112J	TANF EXPANDED 65+	7.02	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7.02
2400	SSI AGED EXPANDED	426.73	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	426.73
240Z	SSI AGED EXPANDED	259.45	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	259.45
2410	SSI AGED EXPANDED	126.95	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	126.95
241Z	SSI AGED EXPANDED	10.56	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	10.56
2420	SSI AGED EXPANDED	17,593.09	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	17,593.09
242Z	SSI AGED EXPANDED	124.19	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	124.19
2500	SSI BLIND EXPANDED	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
2520	SSI BLIND EXPANDED	2.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2.00
2600	SSI DISABLED EXPAND	492.88	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	492.88
260Z	SSI DISABLED EXPAND	161.06	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	161.06
2610	SSI DISABLED EXPAND	1,749.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,749.60
261Z	SSI DISABLED EXPAND	60.98	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	60.98
2620	SSI DISABLED EXPAND	14,973.36	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	14,973.36
262Z	SSI DISABLED EXPAND	57.37	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	57.37
SUBTOTAL:		182,154.75	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	182,154.75
9911	SB PAYMENT FOR TAN	203.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	203.00
9922	SB PAYMENT FOR SSI	3.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3.00
SUBTOTAL:		206.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	206.00
3506	ADULT 40-100% MALE 2	1.05	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.05
3507	ADULT 40-100% FEMAL	1.41	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.41

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3508	ADULT 40-100% M&F 45	48.19	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	48.19
3509	ADULT 40-100% M&F 65	11.70	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	11.70
350F	ADULT 40-100% MALE 2	1.38	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.38
350G	ADULT 40-100% FEMAL	0.58	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.58
350H	ADULT 40-100% M&F 45	10.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	10.10
350J	ADULT 40-100% M&F 65	1.64	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.64
3514	ADULT 40-100% MALE 1	5,324.62	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,324.62
3515	ADULT 40-100% FEMAL	5,844.28	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,844.28
3516	ADULT 40-100% MALE 2	19,365.79	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	19,365.79
3517	ADULT 40-100% FEMAL	15,852.90	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	15,852.90
3518	ADULT 40-100% M&F 45	39,856.53	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	39,856.53
3519	ADULT 40-100% M&F 65	21.41	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	21.41
351D	ADULT 40-100% MALE 1	347.75	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	347.75
351E	ADULT 40-100% FEMAL	318.47	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	318.47
351F	ADULT 40-100% MALE 2	1,280.29	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,280.29
351G	ADULT 40-100% FEMAL	965.22	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	965.22
351H	ADULT 40-100% M&F 45	2,235.88	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,235.88
351J	ADULT 40-100% M&F 65	22.58	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	22.58
3526	ADULT 40-100% MALE 2	2.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2.00
3527	ADULT 40-100% FEMAL	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
3528	ADULT 40-100% M&F 45	7.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7.00
3529	ADULT 40-100% M&F 65	0.12	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.12
352J	ADULT 40-100% M&F 65	1.87	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.87
3706	ADULT <40% EXP MALE	15.41	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	15.41
3707	ADULT <40% EXP FEM	9.61	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9.61
3708	ADULT <40% EXP M&F	79.34	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	79.34
3709	ADULT <40% EXP M&F	3.99	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3.99
370F	ADULT <40% EXP MALE	0.03	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.03
370G	ADULT <40% EXP FEM	7.40	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7.40
370H	ADULT <40% EXP M&F	62.90	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	62.90
3714	ADULT <40% EXP MALE	12,053.30	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12,053.30
3715	ADULT <40% EXP FEM	10,566.05	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	10,566.05
3716	ADULT <40% EXP MALE	60,788.30	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	60,788.30
3717	ADULT <40% EXP FEM	36,217.95	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	36,217.95
3718	ADULT <40% EXP M&F	76,027.85	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	76,027.85
3719	ADULT <40% EXP M&F	46.67	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	46.67

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371D	ADULT <40% EXP MALE	785.47	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	785.47
371E	ADULT <40% EXP FEM	622.58	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	622.58
371F	ADULT <40% EXP MALE	7,431.73	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,431.73
371G	ADULT <40% EXP FEM	3,715.62	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,715.62
371H	ADULT <40% EXP M&F	6,450.75	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,450.75
3726	ADULT <40% EXP MALE	3.77	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3.77
3727	ADULT <40% EXP FEM	1.77	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.77
3728	ADULT <40% EXP M&F	10.87	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	10.87
3729	ADULT <40% EXP M&F	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
372F	ADULT <40% EXP MALE	2.22	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2.22
372G	ADULT <40% EXP FEM	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
372H	ADULT <40% EXP M&F	1.64	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.64
SUBTOTAL:		306,430.98	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	306,430.98
9935	BIRTH SUPP PAYMENT	47.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	47.00
9937	BIRTH SUPP PAYMENT	97.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	97.00
SUBTOTAL:		144.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	144.00
3906	NEWLY ELIGIBLE MALE	9.99	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9.99
3907	NEWLY ELIGIBLE FEM	7.24	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7.24
3908	NEWLY ELIGIBLE M&F	76.38	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	76.38
3909	NEWLY ELIGIBLE M&F	6.16	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6.16
390G	NEWLY ELIGIBLE FEM	4.73	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4.73
390H	NEWLY ELIGIBLE M&F	12.91	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12.91
390J	NEWLY ELIGIBLE M&F	0.03	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.03
3914	NEWLY ELIGIBLE MALE	2,581.12	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,581.12
3915	NEWLY ELIGIBLE FEM	3,107.33	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,107.33
3916	NEWLY ELIGIBLE MALE	18,434.91	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	18,434.91
3917	NEWLY ELIGIBLE FEM	26,612.98	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	26,612.98
3918	NEWLY ELIGIBLE M&F	27,106.66	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	27,106.66
3919	NEWLY ELIGIBLE M&F	15.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	15.00
391D	NEWLY ELIGIBLE MALE	158.25	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	158.25
391E	NEWLY ELIGIBLE FEM	222.94	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	222.94
391F	NEWLY ELIGIBLE MALE	1,637.68	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,637.68
391G	NEWLY ELIGIBLE FEM	1,958.63	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,958.63
391H	NEWLY ELIGIBLE M&F	1,626.88	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,626.88
3926	NEWLY ELIGIBLE MALE	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00

ACUTE CAPITATION - MEMBER MONTHS

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
3928	NEWLY ELIGIBLE M&F 4	3.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3.00
SUBTOTAL:		83,583.82	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	83,583.82
9939	BIRTH SUPP PAYMENT M	76.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	76.00
SUBTOTAL:		76.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	76.00
4412	SOBRA 100-133% M&F 4	17.33	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	17.33
4413	SOBRA 100-133% M&F 6	47,099.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	47,099.00
4414	SOBRA 100-133% MALE 4	11,874.13	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	11,874.13
4415	SOBRA 100-133% FEMA 4	11,579.89	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	11,579.89
441B	SOBRA 100-133% M&F 4	7.64	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7.64
441C	SOBRA 100-133% M&F 6	3,053.61	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,053.61
441D	SOBRA 100-133% MALE 4	587.39	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	587.39
441E	SOBRA 100-133% FEMA 4	714.29	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	714.29
SUBTOTAL:		74,933.28	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	74,933.28
9944	BIRTH SUPP PAYMENT 6	6.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6.00
SUBTOTAL:		6.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6.00
4517	BC PATIENT FEMALE 2 4	21.16	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	21.16
4518	BC PATIENT FEMALE 4 6	172.08	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	172.08
451G	BC PATIENT FEMALE 2 4	0.83	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.83
451H	BC PATIENT FEMALE 4 6	2.08	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2.08
4617	CC PATIENT FEMALE 2 4	14.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	14.00
4618	CC PATIENT FEMALE 4 6	8.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8.00
SUBTOTAL:		218.15	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	218.15
8600	SSI BLIND FREEDOM/W Q	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
8700	SSI DISABLED FREEDO M	1,752.66	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,752.66
870Z	SSI DISABLED FREEDO M	76.88	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	76.88
8710	SSI DISABLED FREEDO M	276.22	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	276.22
871Z	SSI DISABLED FREEDO M	35.37	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	35.37
8720	SSI DISABLED FREEDO M	214.51	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	214.51
872Z	SSI DISABLED FREEDO M	3.47	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3.47
SUBTOTAL:		2,360.11	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,360.11
TOTAL:		1,621,481.24	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,621,481.24

LONG TERM CARE CAPITATION - AMOUNTS

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1000	TANF WITH MEDICARE	38,448.73	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	38,448.73
1010	TANF NON-MEDICARE	2,400,462.36	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,400,462.36
1020	TANF WITH QMB	7,060.26	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,060.26
2100	SSI AGED WITH MEDIC A	30,800,680.32	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	30,800,680.32
210Z	SSI AGED WITH MEDIC A	542,994.93	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	542,994.93
2110	SSI AGED NON-MEDICA D	2,859,005.72	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,859,005.72
211Z	SSI AGED NON-MEDICA D	4,608.65	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,608.65
2120	SSI AGED WITH QMB	19,171,298.49	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	19,171,298.49
212Z	SSI AGED WITH QMB P D	8,706.14	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8,706.14
2200	SSI DISABLED WITH M F	14,979,902.29	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	14,979,902.29
220Z	SSI DISABLED WITH M F	45,197.99	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	45,197.99
2210	SSI DISABLED NON-ME D	96,668,522.76	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	96,668,522.76
221Z	SSI DISABLED NON-ME D	23,471.98	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	23,471.98
2220	SSI DISABLED WITH Q M	21,848,759.06	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	21,848,759.06
222Z	SSI DISABLED WITH Q M	717.28	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	717.28
2300	SSI BLIND WITH MEDIC A	66,335.96	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	66,335.96
2310	SSI BLIND NON-MEDIC A	486,146.90	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	486,146.90
2320	SSI BLIND WITH QMB	137,707.06	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	137,707.06
232Z	SSI BLIND WITH QMB P M	2,187.82	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,187.82
SUBTOTAL:		190,092,214.70	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	190,092,214.70
8700	SSI DISABLED FREEDO M	83,704.76	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	83,704.76
8710	SSI DISABLED FREEDO M	118,450.47	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	118,450.47
8720	SSI DISABLED FREEDO M	17,165.70	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	17,165.70
SUBTOTAL:		219,320.93	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	219,320.93
TOTAL:		190,311,535.63	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	190,311,535.63

LONG TERM CARE MEMBER MONTHS

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1000	TANF WITH MEDICARE	11.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	11.00
1010	TANF NON-MEDICARE	675.51	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	675.51
1020	TANF WITH QMB	2.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2.00
2100	SSI AGED WITH MEDIC A	11,265.25	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	11,265.25
210Z	SSI AGED WITH MEDIC A	564.29	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	564.29
2110	SSI AGED NON-MEDICA D	596.81	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	596.81
211Z	SSI AGED NON-MEDICA D	5.47	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5.47
2120	SSI AGED WITH QMB	7,455.45	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,455.45
212Z	SSI AGED WITH QMB P D	8.97	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8.97
2200	SSI DISABLED WITH M F	4,856.19	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,856.19
220Z	SSI DISABLED WITH M F	48.42	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	48.42
2210	SSI DISABLED NON-ME D	26,357.77	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	26,357.77
221Z	SSI DISABLED NON-ME D	24.77	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	24.77
2220	SSI DISABLED WITH Q M	6,861.39	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,861.39
222Z	SSI DISABLED WITH Q M	0.77	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.77
2300	SSI BLIND WITH MEDIC A	20.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	20.00
2310	SSI BLIND NON-MEDIC A	136.44	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	136.44
2320	SSI BLIND WITH QMB	43.31	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	43.31
232Z	SSI BLIND WITH QMB P M	2.87	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2.87
SUBTOTAL:		58,936.68	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	58,936.68
8700	SSI DISABLED FREEDO M	26.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	26.00
8710	SSI DISABLED FREEDO M	24.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	24.00
8720	SSI DISABLED FREEDO M	6.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6.00
SUBTOTAL:		56.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	56.00
TOTAL:		58,992.68	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	58,992.68

MENTAL HEALTH CAPITATION AMOUNTS - CHILDREN

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1010	TANF NON-MEDICARE	2,521,354.40	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,521,354.40
2120	SSI AGED WITH QMB	38.24	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	38.24
2210	SSI DISABLED NON-ME	392,648.32	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	392,648.32
2220	SSI DISABLED WITH Q	382.40	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	382.40
2310	SSI BLIND NON-MEDIC	1,950.24	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,950.24
4300	SOBRA CHILD WITH ME	497.12	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	497.12
4310	SOBRA CHILD NON-ME	21,318,149.92	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	21,318,149.92
4320	SOBRA CHILD WITH Q	76.48	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	76.48
5010	SOBRA PREGNANT WO	21,988.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	21,988.00
SUBTOTAL:		24,257,085.12	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	24,257,085.12
1110	TANF EXPANDED FOR	9,215.84	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,215.84
2610	SSI DISABLED EXPAND	76.48	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	76.48
SUBTOTAL:		9,292.32	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,292.32
3710	AHC CARE EXPANDED	76.48	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	76.48
SUBTOTAL:		76.48	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	76.48
3910	NEWLY ELIGIBLE FOR	114.72	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	114.72
SUBTOTAL:		114.72	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	114.72
4410	SOBRA 100-133% FOR	2,556,152.80	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,556,152.80
SUBTOTAL:		2,556,152.80	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,556,152.80
TOTAL:		26,822,721.44	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	26,822,721.44

MENTAL HEALTH CAPITATION MEMBER MONTHS - CHILDREN

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1010	TANF NON-MEDICARE	65,935.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	65,935.00
2120	SSI AGED WITH QMB	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
2210	SSI DISABLED NON-ME	10,268.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	10,268.00
2220	SSI DISABLED WITH Q	10.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	10.00
2310	SSI BLIND NON-MEDIC	51.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	51.00
4300	SOBRA CHILD WITH ME	13.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	13.00
4310	SOBRA CHILD NON-ME	557,483.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	557,483.00
4320	SOBRA CHILD WITH Q	2.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2.00
5010	SOBRA PREGNANT WO	575.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	575.00
SUBTOTAL:		634,338.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	634,338.00
1110	TANF EXPANDED FOR	241.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	241.00
2610	SSI DISABLED EXPAND	2.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2.00
SUBTOTAL:		243.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	243.00
3710	AHC CARE EXPANDED	2.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2.00
SUBTOTAL:		2.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2.00
3910	NEWLY ELIGIBLE FOR	3.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3.00
SUBTOTAL:		3.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3.00
4410	SOBRA 100-133% FOR	66,845.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	66,845.00
SUBTOTAL:		66,845.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	66,845.00
TOTAL:		701,431.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	701,431.00

MENTAL HEALTH CAPITATION AMOUNTS - ADULT

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1000	TANF WITH MEDICARE	113.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	113.10
1010	TANF NON-MEDICARE	411,385.30	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	411,385.30
1020	TANF WITH QMB	52.20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	52.20
2100	SSI AGED WITH MEDIC A	991.80	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	991.80
2110	SSI AGED NON-MEDICA P	15,457.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	15,457.00
2120	SSI AGED WITH QMB	5,646.30	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,646.30
2200	SSI DISABLED WITH M F	2,644.80	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,644.80
2210	SSI DISABLED NON-ME D	109,805.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	109,805.60
2220	SSI DISABLED WITH Q M	8,552.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8,552.10
2300	SSI BLIND WITH MEDIC	14.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	14.50
2310	SSI BLIND NON-MEDIC A	1,261.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,261.50
2320	SSI BLIND WITH QMB	110.20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	110.20
4310	SOBRA CHILD NON-ME DI	53,426.70	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	53,426.70
5000	SOBRA PREGNANT WO MAN	8.70	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8.70
5010	SOBRA PREGNANT WO MAN	75,663.90	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	75,663.90
5020	SOBRA PREGNANT WO MAN	11.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	11.60
SUBTOTAL:		685,145.30	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	685,145.30
1100	TANF EXPANDED FPR FI	1,177.40	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,177.40
1110	TANF EXPANDED FOR FI	390,325.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	390,325.50
1120	TANF EXPANDED FOR FI	437.90	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	437.90
2400	SSI AGED EXPANDED M/I	78.30	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	78.30
2410	SSI AGED EXPANDED NO	371.20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	371.20
2420	SSI AGED EXPANDED M/I	2,978.30	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,978.30
2600	SSI DISABLED EXPAND F	84.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	84.10
2610	SSI DISABLED EXPAND F	4,196.30	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,196.30
2620	SSI DISABLED EXPAND F	1,861.80	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,861.80
SUBTOTAL:		401,510.80	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	401,510.80
3500	ADULT 40-100% FOR FI	8.70	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8.70
3510	ADULT 40-100% FOR FI	253,993.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	253,993.60
3700	ADULT <40% EXP FOR F	26.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	26.10
3710	AHC CARE EXPANDED FO	595,660.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	595,660.00
SUBTOTAL:		849,688.40	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	849,688.40
3900	NEWLY ELIGIBLE FOR F	11.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	11.60
3910	NEWLY ELIGIBLE FOR F	229,117.40	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	229,117.40

MENTAL HEALTH CAPITATION AMOUNTS - ADULT

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
SUBTOTAL:		229,129.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	229,129.00
4410	SOBRA 100-133% FOR F	12,359.80	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12,359.80
SUBTOTAL:		12,359.80	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12,359.80
4510	BC PATIENT FOR FINA M	559.70	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	559.70
4610	CC PATIENT FOR FINA M	63.80	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	63.80
SUBTOTAL:		623.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	623.50
8700	SSI DISABLED FREEDO M	63.80	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	63.80
8710	SSI DISABLED FREEDO M	629.30	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	629.30
8720	SSI DISABLED FREEDO M	8.70	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8.70
SUBTOTAL:		701.80	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	701.80
TOTAL:		2,179,158.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,179,158.60

MENTAL HEALTH CAPITATION MEMBER MONTHS - ADULT

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1000	TANF WITH MEDICARE	39.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	39.00
1010	TANF NON-MEDICARE	141,857.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	141,857.00
1020	TANF WITH QMB	18.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	18.00
2100	SSI AGED WITH MEDIC A	342.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	342.00
2110	SSI AGED NON-MEDICA P	5,330.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,330.00
2120	SSI AGED WITH QMB	1,947.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,947.00
2200	SSI DISABLED WITH M F	912.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	912.00
2210	SSI DISABLED NON-ME D	37,864.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	37,864.00
2220	SSI DISABLED WITH Q M	2,949.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,949.00
2300	SSI BLIND WITH MEDIC	5.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5.00
2310	SSI BLIND NON-MEDIC A	435.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	435.00
2320	SSI BLIND WITH QMB	38.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	38.00
4310	SOBRA CHILD NON-ME DI	18,423.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	18,423.00
5000	SOBRA PREGNANT WO MAN	3.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3.00
5010	SOBRA PREGNANT WO MAN	26,091.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	26,091.00
5020	SOBRA PREGNANT WO MAN	4.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4.00
SUBTOTAL:		236,257.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	236,257.00
1100	TANF EXPANDED FPR FI	406.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	406.00
1110	TANF EXPANDED FOR FI	134,595.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	134,595.00
1120	TANF EXPANDED FOR FI	151.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	151.00
2400	SSI AGED EXPANDED MI	27.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	27.00
2410	SSI AGED EXPANDED NO	128.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	128.00
2420	SSI AGED EXPANDED MI	1,027.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,027.00
2600	SSI DISABLED EXPAND F	29.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	29.00
2610	SSI DISABLED EXPAND F	1,447.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,447.00
2620	SSI DISABLED EXPAND F	642.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	642.00
SUBTOTAL:		138,452.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	138,452.00
3500	ADULT 40-100% FOR FI	3.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3.00
3510	ADULT 40-100% FOR FI	87,584.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	87,584.00
3700	ADULT <40% EXP FOR F	9.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9.00
3710	AHC CARE EXPANDED FO	205,400.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	205,400.00
SUBTOTAL:		292,996.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	292,996.00
3900	NEWLY ELIGIBLE FOR F	4.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4.00
3910	NEWLY ELIGIBLE FOR F	79,006.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	79,006.00

MENTAL HEALTH CAPITATION MEMBER MONTHS - ADULT

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
SUBTOTAL:		79,010.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	79,010.00
4410	SOBRA 100-133% FOR F	4,262.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,262.00
SUBTOTAL:		4,262.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,262.00
4510	BC PATIENT FOR FINA M	193.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	193.00
4610	CC PATIENT FOR FINA M	22.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	22.00
SUBTOTAL:		215.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	215.00
8700	SSI DISABLED FREEDO M	22.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	22.00
8710	SSI DISABLED FREEDO M	217.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	217.00
8720	SSI DISABLED FREEDO M	3.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3.00
SUBTOTAL:		242.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	242.00
TOTAL:		751,434.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	751,434.00

MENTAL HEALTH CAPITATION AMOUNTS - GENERAL

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1000	TANF WITH MEDICARE	2,044.77	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,044.77
1010	TANF NON-MEDICARE	7,437,562.51	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,437,562.51
1020	TANF WITH QMB	943.74	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	943.74
2100	SSI AGED WITH MEDICARE	17,931.06	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	17,931.06
2110	SSI AGED NON-MEDICARE	279,451.90	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	279,451.90
2120	SSI AGED WITH QMB	102,081.21	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	102,081.21
2200	SSI DISABLED WITH MEDICARE	47,816.16	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	47,816.16
2210	SSI DISABLED NON-MEDICARE	1,985,209.52	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,985,209.52
2220	SSI DISABLED WITH QMB	154,616.07	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	154,616.07
2300	SSI BLIND WITH MEDICARE	262.15	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	262.15
2310	SSI BLIND NON-MEDICARE	22,807.05	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	22,807.05
2320	SSI BLIND WITH QMB	1,992.34	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,992.34
4310	SOBRA CHILD NON-MEDICARE	965,917.89	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	965,917.89
5000	SOBRA PREGNANT WOMEN	157.29	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	157.29
5010	SOBRA PREGNANT WOMEN	1,367,951.13	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,367,951.13
5020	SOBRA PREGNANT WOMEN	209.72	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	209.72
SUBTOTAL:		12,386,954.51	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12,386,954.51
1100	TANF EXPANDED FOR FAMILIES	21,286.58	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	21,286.58
1110	TANF EXPANDED FOR FAMILIES	7,056,815.85	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,056,815.85
1120	TANF EXPANDED FOR FAMILIES	7,916.93	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,916.93
2400	SSI AGED EXPANDED FOR FAMILIES	1,415.61	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,415.61
2410	SSI AGED EXPANDED FOR FAMILIES	6,711.04	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,711.04
2420	SSI AGED EXPANDED FOR FAMILIES	53,845.61	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	53,845.61
2600	SSI DISABLED EXPANDED FOR FAMILIES	1,520.47	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,520.47
2610	SSI DISABLED EXPANDED FOR FAMILIES	75,866.21	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	75,866.21
2620	SSI DISABLED EXPANDED FOR FAMILIES	33,660.06	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	33,660.06
SUBTOTAL:		7,259,038.36	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,259,038.36
3500	ADULT 40-100% FOR FAMILIES	157.29	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	157.29
3510	ADULT 40-100% FOR FAMILIES	4,592,029.12	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,592,029.12
3700	ADULT <40% EXP FOR FAMILIES	471.87	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	471.87
3710	AHC CARE EXPANDED FOR FAMILIES	10,769,122.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	10,769,122.00
SUBTOTAL:		15,361,780.28	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	15,361,780.28
3900	NEWLY ELIGIBLE FOR FAMILIES	209.72	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	209.72
3910	NEWLY ELIGIBLE FOR FAMILIES	4,142,284.58	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,142,284.58

MENTAL HEALTH CAPITATION AMOUNTS - GENERAL

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
SUBTOTAL:		4,142,494.30	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,142,494.30
4410	SOBRA 100-133% FOR F	223,456.66	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	223,456.66
SUBTOTAL:		223,456.66	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	223,456.66
4510	BC PATIENT FOR FINA M	10,118.99	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	10,118.99
4610	CC PATIENT FOR FINA M	1,153.46	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,153.46
SUBTOTAL:		11,272.45	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	11,272.45
8700	SSI DISABLED FREEDO M	1,153.46	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,153.46
8710	SSI DISABLED FREEDO M	11,377.31	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	11,377.31
8720	SSI DISABLED FREEDO M	157.29	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	157.29
SUBTOTAL:		12,688.06	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12,688.06
TOTAL:		39,397,684.62	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	39,397,684.62

MENTAL HEALTH CAPITATION MEMBER MONTHS - GENERAL

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1000	TANF WITH MEDICARE	39.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	39.00
1010	TANF NON-MEDICARE	141,857.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	141,857.00
1020	TANF WITH QMB	18.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	18.00
2100	SSI AGED WITH MEDIC A	342.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	342.00
2110	SSI AGED NON-MEDICA P	5,330.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,330.00
2120	SSI AGED WITH QMB	1,947.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,947.00
2200	SSI DISABLED WITH M F	912.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	912.00
2210	SSI DISABLED NON-ME D	37,864.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	37,864.00
2220	SSI DISABLED WITH Q M	2,949.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,949.00
2300	SSI BLIND WITH MEDIC A	5.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5.00
2310	SSI BLIND NON-MEDIC A	435.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	435.00
2320	SSI BLIND WITH QMB	38.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	38.00
4310	SOBRA CHILD NON-ME DI	18,423.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	18,423.00
5000	SOBRA PREGNANT WO MAN	3.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3.00
5010	SOBRA PREGNANT WO MAN	26,091.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	26,091.00
5020	SOBRA PREGNANT WO MAN	4.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4.00
SUBTOTAL:		236,257.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	236,257.00
1100	TANF EXPANDED FPR FI	406.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	406.00
1110	TANF EXPANDED FOR FI	134,595.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	134,595.00
1120	TANF EXPANDED FOR FI	151.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	151.00
2400	SSI AGED EXPANDED M/I	27.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	27.00
2410	SSI AGED EXPANDED NO	128.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	128.00
2420	SSI AGED EXPANDED M/I	1,027.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,027.00
2600	SSI DISABLED EXPAND F	29.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	29.00
2610	SSI DISABLED EXPAND F	1,447.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,447.00
2620	SSI DISABLED EXPAND F	642.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	642.00
SUBTOTAL:		138,452.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	138,452.00
3500	ADULT 40-100% FOR FI	3.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3.00
3510	ADULT 40-100% FOR FI	87,584.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	87,584.00
3700	ADULT <40% EXP FOR F	9.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9.00
3710	AHC CARE EXPANDED FO	205,400.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	205,400.00
SUBTOTAL:		292,996.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	292,996.00
3900	NEWLY ELIGIBLE FOR F	4.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4.00
3910	NEWLY ELIGIBLE FOR F	79,006.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	79,006.00

MENTAL HEALTH CAPITATION MEMBER MONTHS - GENERAL

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
SUBTOTAL:		79,010.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	79,010.00
4410	SOBRA 100-133% FOR F	4,262.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,262.00
SUBTOTAL:		4,262.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,262.00
4510	BC PATIENT FOR FINA M	193.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	193.00
4610	CC PATIENT FOR FINA M	22.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	22.00
SUBTOTAL:		215.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	215.00
8700	SSI DISABLED FREEDO M	22.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	22.00
8710	SSI DISABLED FREEDO M	217.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	217.00
8720	SSI DISABLED FREEDO M	3.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3.00
SUBTOTAL:		242.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	242.00
TOTAL:		751,434.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	751,434.00

MENTAL HEALTH CAPITATION AMOUNTS - CMDP

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1010	TANF NON-MEDICARE	504,708.56	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	504,708.56
2210	SSI DISABLED NON-ME	315,208.32	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	315,208.32
2310	SSI BLIND NON-MEDIC	938.12	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	938.12
4310	SOBRA CHILD NON-ME	15,501,494.88	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	15,501,494.88
5010	SOBRA PREGNANT WO	13,133.68	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	13,133.68
SUBTOTAL:		16,335,483.56	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	16,335,483.56
3710	AHC CARE EXPANDED	938.12	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	938.12
SUBTOTAL:		938.12	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	938.12
4410	SOBRA 100-133% FOR	38,462.92	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	38,462.92
SUBTOTAL:		38,462.92	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	38,462.92
TOTAL:		16,374,884.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	16,374,884.60

MENTAL HEALTH CAPITATION MEMBER MONTHS - CMDP

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1010	TANF NON-MEDICARE	538.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	538.00
2210	SSI DISABLED NON-ME	336.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	336.00
2310	SSI BLIND NON-MEDIC	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
4310	SOBRA CHILD NON-ME	16,524.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	16,524.00
5010	SOBRA PREGNANT WO	14.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	14.00
SUBTOTAL:		17,413.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	17,413.00
3710	AHC CARE EXPANDED	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
SUBTOTAL:		1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
4410	SOBRA 100-133% FOR	41.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	41.00
SUBTOTAL:		41.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	41.00
TOTAL:		17,455.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	17,455.00

CHILDREN'S REHABILITATIVE SERVICES - CAPITATION AMOUNTS

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1000	TANF WITH MEDICARE	3,020.80	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,020.80
1010	TANF NON-MEDICARE	191,820.80	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	191,820.80
1011	TANF <1 M & F NON-ME	4,850.24	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,850.24
1012	TANF 01-05 M & F NON	5,406.40	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,406.40
1013	TANF 06-13 M & F NON	8,427.20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8,427.20
1014	TANF 14-20 MALE NON-	4,174.08	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,174.08
1015	TANF 14-20 FEMALE N	6,281.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,281.60
1017	TANF 21-44 FEMALE N	1,431.36	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,431.36
2200	SSI DISABLED WITH M	26,909.12	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	26,909.12
2210	SSI DISABLED NON-ME	4,555,037.44	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,555,037.44
2220	SSI DISABLED WITH Q	60,934.08	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	60,934.08
2300	SSI BLIND WITH MEDIC	755.20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	755.20
2310	SSI BLIND NON-MEDIC	44,041.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	44,041.60
4311	SOBRA CHILD <1 M & F	25,957.76	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	25,957.76
4312	SOBRA CHILD 01-05 M	201,787.20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	201,787.20
4313	SOBRA CHILD 06-13 M	231,286.72	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	231,286.72
4314	SOBRA CHILD 14-20 MA	56,885.76	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	56,885.76
4315	SOBRA CHILD 14-20 FE	54,503.04	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	54,503.04
5015	SOBRA PREG 14-20 FE	1,232.32	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,232.32
SUBTOTAL:		5,484,742.72	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,484,742.72
1115	TANF EXPANDED 14-20	477.12	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	477.12
SUBTOTAL:		477.12	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	477.12
3514	ADULT 40-100% MALE 1	1,908.48	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,908.48
3515	ADULT 40-100% FEMAL	1,431.36	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,431.36
3517	ADULT 40-100% FEMAL	477.12	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	477.12
3714	ADULT <40% EXP MALE	9,542.40	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,542.40
3715	ADULT <40% EXP FEM	8,588.16	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8,588.16
3716	ADULT <40% EXP MALE	1,908.48	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,908.48
3717	ADULT <40% EXP FEM	477.12	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	477.12
SUBTOTAL:		24,333.12	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	24,333.12
3914	NEWLY ELIGIBLE MALE	954.24	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	954.24
3915	NEWLY ELIGIBLE FEMA	477.12	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	477.12
SUBTOTAL:		1,431.36	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,431.36
4413	SOBRA 100-133% M&F	8,588.16	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8,588.16

CHILDREN'S REHABILITATIVE SERVICES - CAPITATION AMOUNTS

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
4414	SOBRA 100-133% MALE	2,862.72	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,862.72
4415	SOBRA 100-133% FEMA	2,385.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,385.60
SUBTOTAL:		13,836.48	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	13,836.48
TOTAL:		5,524,820.80	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,524,820.80

CHILDREN'S REHABILITATIVE SERVICES - CAPITATION MEMBER MONTHS

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1000	TANF WITH MEDICARE	4.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4.00
1010	TANF NON-MEDICARE	254.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	254.00
1011	TANF <1 M & F NON-ME	9.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9.00
1012	TANF 01-05 M & F NON	9.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9.00
1013	TANF 06-13 M & F NON	13.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	13.00
1014	TANF 14-20 MALE NON-	7.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7.00
1015	TANF 14-20 FEMALE N	12.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12.00
1017	TANF 21-44 FEMALE N	3.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3.00
2200	SSI DISABLED WITH M	36.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	36.00
2210	SSI DISABLED NON-ME	6,198.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,198.00
2220	SSI DISABLED WITH Q	84.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	84.00
2300	SSI BLIND WITH MEDIC	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
2310	SSI BLIND NON-MEDIC	62.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	62.00
4311	SOBRA CHILD <1 M & F	41.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	41.00
4312	SOBRA CHILD 01-05 M	339.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	339.00
4313	SOBRA CHILD 06-13 M	395.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	395.00
4314	SOBRA CHILD 14-20 MA	93.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	93.00
4315	SOBRA CHILD 14-20 FE	95.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	95.00
5015	SOBRA PREG 14-20 FE	2.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2.00
SUBTOTAL:		7,657.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,657.00
1115	TANF EXPANDED 14-20	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
SUBTOTAL:		1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
3514	ADULT 40-100% MALE 1	4.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4.00
3515	ADULT 40-100% FEMAL	3.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3.00
3517	ADULT 40-100% FEMAL	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
3714	ADULT <40% EXP MALE	20.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	20.00
3715	ADULT <40% EXP FEM	18.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	18.00
3716	ADULT <40% EXP MALE	4.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4.00
3717	ADULT <40% EXP FEM	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
SUBTOTAL:		51.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	51.00
3914	NEWLY ELIGIBLE MALE	2.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2.00
3915	NEWLY ELIGIBLE FEMA	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
SUBTOTAL:		3.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3.00
4413	SOBRA 100-133% M&F	18.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	18.00

CHILDREN'S REHABILITATIVE SERVICES - CAPITATION MEMBER MONTHS

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
4414	SOBRA 100-133% MALE	6.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6.00
4415	SOBRA 100-133% FEMA	5.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5.00
SUBTOTAL:		29.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	29.00
TOTAL:		7,741.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,741.00

ACUTE FEE FOR SERVICE - EXCLUDING EMERGENCY SERVICES

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1006	TANF 21-44 MALE WITH	848.42	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	848.42
1007	TANF 21-44 FEMALE WI	11,505.38	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	11,505.38
1008	TANF 45-64 M & F WIT	8,643.75	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8,643.75
1009	TANF 65+ M & F WITH	2,022.37	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,022.37
1011	TANF <1 M & F NON-ME	997,028.06	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	997,028.06
1012	TANF 01-05 M & F NON	369,557.78	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	369,557.78
1013	TANF 06-13 M & F NON	342,021.90	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	342,021.90
1014	TANF 14-20 MALE NON-	88,902.93	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	88,902.93
1015	TANF 14-20 FEMALE N	219,214.37	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	219,214.37
1016	TANF 21-44 MALE NON-	1,794,520.91	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,794,520.91
1017	TANF 21-44 FEMALE N	6,277,129.24	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,277,129.24
1018	TANF 45-64 M & F NON	2,332,798.20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,332,798.20
1019	TANF 65+ M & F NON-M	1,488.83	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,488.83
1026	TANF 21-44 MALE WITH	1,000.95	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,000.95
1027	TANF 21-44 FEMALE WI	3,449.27	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,449.27
1028	TANF 45-64 M & F WIT	8,935.11	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8,935.11
1029	TANF 65+ M & F WITH	111.13	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	111.13
2100	SSI AGED WITH MEDIC	190,983.36	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	190,983.36
2110	SSI AGED NON-MEDICA	92,974.35	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	92,974.35
2120	SSI AGED WITH QMB	469,076.56	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	469,076.56
2200	SSI DISABLED WITH M	358,598.07	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	358,598.07
2210	SSI DISABLED NON-ME	8,751,971.22	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8,751,971.22
2220	SSI DISABLED WITH Q	1,192,013.12	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,192,013.12
2300	SSI BLIND WITH MEDIC	457.17	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	457.17
2310	SSI BLIND NON-MEDIC	86,051.54	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	86,051.54
2320	SSI BLIND WITH QMB	17,562.15	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	17,562.15
4303	SOBRA CHILD 06-13 M	441.34	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	441.34
4311	SOBRA CHILD <1 M & F	2,788,917.87	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,788,917.87
4312	SOBRA CHILD 01-05 M	3,898,361.36	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,898,361.36
4313	SOBRA CHILD 06-13 M	5,970,382.14	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,970,382.14
4314	SOBRA CHILD 14-20 MA	1,683,601.36	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,683,601.36
4315	SOBRA CHILD 14-20 FE	1,620,045.30	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,620,045.30
5007	SOBRA PREG 21-44 FE	865.69	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	865.69
5013	SOBRA PREG 09-13 FE	8,701.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8,701.00
5015	SOBRA PREG 14-20 FE	398,992.68	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	398,992.68
5017	SOBRA PREG 21-44 FE	2,430,613.48	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,430,613.48

ACUTE FEE FOR SERVICE - EXCLUDING EMERGENCY SERVICES

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
5018	SOBRA PREG 45-64 FE M	4,602.26	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,602.26
5027	SOBRA PREG 21-44 FE M	922.96	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	922.96
5028	SOBRA PREG 45-64 FE M	408.02	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	408.02
SUBTOTAL:		42,425,721.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	42,425,721.60
3100	TRANSPLANT OPTION 1	1,856.12	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,856.12
SUBTOTAL:		1,856.12	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,856.12
1106	TANF EXPANDED 21-44	19,712.79	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	19,712.79
1107	TANF EXPANDED 21-44	45,224.17	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	45,224.17
1108	TANF EXPANDED 45-64	109,148.53	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	109,148.53
1109	TANF EXPANDED 65+ M&F	43,849.18	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	43,849.18
1112	TANF EXPANDED 01-05	1,472.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,472.00
1113	TANF EXPANDED 06-13	1,086.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,086.00
1114	TANF EXPANDED 14-20	12,675.95	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12,675.95
1115	TANF EXPANDED 14-20	32,925.35	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	32,925.35
1116	TANF EXPANDED 21-44	603,641.33	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	603,641.33
1117	TANF EXPANDED 21-44	2,107,615.33	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,107,615.33
1118	TANF EXPANDED 45-64	1,515,661.76	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,515,661.76
1119	TANF EXPANDED 65+ M&F	3,568.96	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,568.96
1126	TANF EXPANDED 21-44	11,749.81	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	11,749.81
1127	TANF EXPANDED 21-44	5,757.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,757.10
1128	TANF EXPANDED 45-64	33,496.13	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	33,496.13
1129	TANF EXPANDED 65+ M&F	17,343.41	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	17,343.41
2400	SSI AGED EXPANDED M&F	17,207.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	17,207.10
2410	SSI AGED EXPANDED M&F	9,549.32	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,549.32
2420	SSI AGED EXPANDED M&F	300,798.06	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	300,798.06
2600	SSI DISABLED EXPAND F	32,108.52	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	32,108.52
2610	SSI DISABLED EXPAND F	170,711.55	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	170,711.55
2620	SSI DISABLED EXPAND F	338,045.21	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	338,045.21
SUBTOTAL:		5,433,347.56	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,433,347.56
3400	MED ELIGIBILITY W/ M	-128.19	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-128.19
3608	AHC CARE/MI M&F 45-6	-10.16	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-10.16
SUBTOTAL:		-138.35	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-138.35
3508	ADULT 40-100% M&F 45	6,729.48	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,729.48
3509	ADULT 40-100% M&F 65	2,149.75	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,149.75

ACUTE FEE FOR SERVICE - EXCLUDING EMERGENCY SERVICES

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
3514	ADULT 40-100% MALE 1	47,992.72	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	47,992.72
3515	ADULT 40-100% FEMAL	74,897.97	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	74,897.97
3516	ADULT 40-100% MALE 2	875,338.76	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	875,338.76
3517	ADULT 40-100% FEMAL	688,506.80	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	688,506.80
3518	ADULT 40-100% M&F 45	2,164,182.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,164,182.50
3519	ADULT 40-100% M&F 65	23,988.25	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	23,988.25
3526	ADULT 40-100% MALE 2	217.07	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	217.07
3706	ADULT <40% EXP MALE	8.65	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8.65
3707	ADULT <40% EXP FEM	112.61	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	112.61
3708	ADULT <40% EXP M&F	10,869.67	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	10,869.67
3709	ADULT <40% EXP M&F	1,326.41	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,326.41
3714	ADULT <40% EXP MALE	396,349.39	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	396,349.39
3715	ADULT <40% EXP FEM	466,712.02	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	466,712.02
3716	ADULT <40% EXP MALE	7,380,948.41	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,380,948.41
3717	ADULT <40% EXP FEM	3,864,032.81	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,864,032.81
3718	ADULT <40% EXP M&F	9,449,700.09	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,449,700.09
3719	ADULT <40% EXP M&F	4,389.51	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,389.51
3728	ADULT <40% EXP M&F	579.64	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	579.64
SUBTOTAL:		25,459,032.51	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	25,459,032.51
3906	NEWLY ELIGIBLE MALE	600.38	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	600.38
3908	NEWLY ELIGIBLE M&F	9,346.79	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,346.79
3909	NEWLY ELIGIBLE M&F	491.18	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	491.18
3914	NEWLY ELIGIBLE MALE	22,978.31	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	22,978.31
3915	NEWLY ELIGIBLE FEMA	41,330.26	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	41,330.26
3916	NEWLY ELIGIBLE MALE	331,242.92	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	331,242.92
3917	NEWLY ELIGIBLE FEMA	773,121.13	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	773,121.13
3918	NEWLY ELIGIBLE M&F	1,108,114.13	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,108,114.13
3928	NEWLY ELIGIBLE M&F	30.62	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	30.62
SUBTOTAL:		2,287,255.72	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,287,255.72
4413	SOBRA 100-133% M&F	435,953.97	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	435,953.97
4414	SOBRA 100-133% MALE	112,763.49	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	112,763.49
4415	SOBRA 100-133% FEMA	173,477.21	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	173,477.21
SUBTOTAL:		722,194.67	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	722,194.67
4517	BC PATIENT FEMALE 2	368.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	368.00
4518	BC PATIENT FEMALE 4	5,535.42	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,535.42

ACUTE FEE FOR SERVICE - EXCLUDING EMERGENCY SERVICES

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
4618	CC PATIENT FEMALE 4 C	368.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	368.00
SUBTOTAL:		6,271.42	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,271.42
8700	SSI DISABLED FREEDO M	11,347.92	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	11,347.92
8710	SSI DISABLED FREEDO M	1,104.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,104.00
8720	SSI DISABLED FREEDO M	724.25	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	724.25
SUBTOTAL:		13,176.17	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	13,176.17
TOTAL:		76,348,717.42	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	76,348,717.42

ACUTE FEE FOR SERVICE - PRIOR QUARTER COVERAGE - EXC. ES

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1006	TANF 21-44 MALE WITH	24.86	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	24.86
1007	TANF 21-44 FEMALE WI	95.75	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	95.75
1008	TANF 45-64 M & F WIT	3,001.23	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,001.23
1009	TANF 65+ M & F WITH	100.93	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	100.93
1011	TANF <1 M & F NON-ME	17,325.66	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	17,325.66
1012	TANF 01-05 M & F NON	401.51	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	401.51
1013	TANF 06-13 M & F NON	1,152.31	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,152.31
1014	TANF 14-20 MALE NON-	714.39	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	714.39
1015	TANF 14-20 FEMALE N	3,433.47	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,433.47
1016	TANF 21-44 MALE NON-	22,396.21	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	22,396.21
1017	TANF 21-44 FEMALE N	52,737.24	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	52,737.24
1018	TANF 45-64 M & F NON	18,073.82	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	18,073.82
2100	SSI AGED WITH MEDIC	15,695.91	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	15,695.91
2110	SSI AGED NON-MEDICA	28,335.40	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	28,335.40
2200	SSI DISABLED WITH M	2,033.62	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,033.62
2210	SSI DISABLED NON-ME	16,753.15	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	16,753.15
4311	SOBRA CHILD <1 M & F	10,799.03	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	10,799.03
4312	SOBRA CHILD 01-05 M	36,145.25	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	36,145.25
4313	SOBRA CHILD 06-13 M	35,978.68	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	35,978.68
4314	SOBRA CHILD 14-20 MA	18,930.52	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	18,930.52
4315	SOBRA CHILD 14-20 FE	12,023.48	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12,023.48
5007	SOBRA PREG 21-44 FE	214.11	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	214.11
5015	SOBRA PREG 14-20 FE	15,014.16	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	15,014.16
5017	SOBRA PREG 21-44 FE	74,107.54	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	74,107.54
SUBTOTAL:		385,488.23	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	385,488.23
1107	TANF EXPANDED 21-44	48.90	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	48.90
1108	TANF EXPANDED 45-64	802.19	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	802.19
1115	TANF EXPANDED 14-20	1,031.42	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,031.42
1116	TANF EXPANDED 21-44	20,881.24	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	20,881.24
1117	TANF EXPANDED 21-44	25,519.01	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	25,519.01
1118	TANF EXPANDED 45-64	10,025.87	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	10,025.87
1119	TANF EXPANDED 65+	55.48	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	55.48
1129	TANF EXPANDED 65+	131.86	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	131.86
2400	SSI AGED EXPANDED	9,438.04	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,438.04
2410	SSI AGED EXPANDED	6,357.74	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,357.74

ACUTE FEE FOR SERVICE - PRIOR QUARTER COVERAGE - EXC. ES

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
2420	SSI AGED EXPANDED WU	801.02	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	801.02
2600	SSI DISABLED EXPAND F	4,162.15	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,162.15
2610	SSI DISABLED EXPAND F	2,877.20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,877.20
2620	SSI DISABLED EXPAND F	-21.51	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-21.51
SUBTOTAL:		82,110.61	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	82,110.61
3506	ADULT 40-100% MALE 2	2,064.92	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,064.92
3508	ADULT 40-100% M&F 45	52.59	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	52.59
3514	ADULT 40-100% MALE 1	3,554.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,554.50
3515	ADULT 40-100% FEMAL F	2,903.14	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,903.14
3516	ADULT 40-100% MALE 2	32,131.34	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	32,131.34
3517	ADULT 40-100% FEMAL F	12,275.90	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12,275.90
3518	ADULT 40-100% M&F 45	62,497.32	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	62,497.32
3708	ADULT <40% EXP M&F A	606.80	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	606.80
3714	ADULT <40% EXP MALE	24,159.76	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	24,159.76
3715	ADULT <40% EXP FEM A1	14,883.92	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	14,883.92
3716	ADULT <40% EXP MALE	142,010.48	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	142,010.48
3717	ADULT <40% EXP FEM A1	76,836.42	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	76,836.42
3718	ADULT <40% EXP M&F A	169,251.34	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	169,251.34
3726	ADULT <40% EXP MALE	1,305.57	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,305.57
SUBTOTAL:		544,534.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	544,534.00
3907	NEWLY ELIGIBLE FEMA	110.07	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	110.07
3908	NEWLY ELIGIBLE M&F A	1,522.55	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,522.55
3914	NEWLY ELIGIBLE MALE	5,721.11	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,721.11
3915	NEWLY ELIGIBLE FEMA J	8,643.80	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8,643.80
3916	NEWLY ELIGIBLE MALE	70,300.31	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	70,300.31
3917	NEWLY ELIGIBLE FEMA J	24,423.42	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	24,423.42
3918	NEWLY ELIGIBLE M&F A	91,934.27	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	91,934.27
SUBTOTAL:		202,655.53	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	202,655.53
4413	SOBRA 100-133% M&F S	9,276.43	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,276.43
4414	SOBRA 100-133% MALE	1,598.02	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,598.02
4415	SOBRA 100-133% FEMA J	1,645.47	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,645.47
SUBTOTAL:		12,519.92	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12,519.92
4518	BC PATIENT FEMALE 4 S	78.61	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	78.61
SUBTOTAL:		78.61	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	78.61

ACUTE FEE FOR SERVICE - PRIOR QUARTER COVERAGE - EXC. ES

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
8700	SSI DISABLED FREEDO M	30.54	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	30.54
8710	SSI DISABLED FREEDO M	1,065.70	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,065.70
SUBTOTAL:		1,096.24	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,096.24
TOTAL:		1,228,483.14	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,228,483.14

FEDERAL EMERGENCY SERVICES

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1011	TANF <1 M & F NON-ME	3,451.27	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,451.27
1012	TANF 01-05 M & F NON	25,128.76	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	25,128.76
1013	TANF 06-13 M & F NON	51,155.97	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	51,155.97
1014	TANF 14-20 MALE NON-	93,392.20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	93,392.20
1015	TANF 14-20 FEMALE N	365,886.79	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	365,886.79
1016	TANF 21-44 MALE NON-	126,645.84	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	126,645.84
1017	TANF 21-44 FEMALE N	2,509,465.83	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,509,465.83
1018	TANF 45-64 M & F NON	232,788.56	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	232,788.56
1019	TANF 65+ M & F NON-M	4,738.82	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,738.82
2100	SSI AGED WITH MEDIC	12,916.57	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12,916.57
2110	SSI AGED NON-MEDICA	869,141.79	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	869,141.79
2120	SSI AGED WITH QMB	4,041.12	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,041.12
2200	SSI DISABLED WITH M	2,921.27	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,921.27
2210	SSI DISABLED NON-ME	420,657.34	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	420,657.34
2220	SSI DISABLED WITH Q	1,206.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,206.10
SUBTOTAL:		4,723,538.23	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,723,538.23
1106	TANF EXPANDED 21-44	20.66	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	20.66
1114	TANF EXPANDED 14-20	1,720.99	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,720.99
1115	TANF EXPANDED 14-20	9,350.19	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,350.19
1116	TANF EXPANDED 21-44	501,857.98	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	501,857.98
1117	TANF EXPANDED 21-44	921,767.34	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	921,767.34
1118	TANF EXPANDED 45-64	507,285.08	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	507,285.08
1119	TANF EXPANDED 65+	4,824.90	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,824.90
2400	SSI AGED EXPANDED	2,199.44	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,199.44
2410	SSI AGED EXPANDED	17,674.75	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	17,674.75
2420	SSI AGED EXPANDED	62.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	62.60
2610	SSI DISABLED EXPAND	37,953.48	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	37,953.48
SUBTOTAL:		2,004,717.41	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,004,717.41
3716	ADULT <40% EXP MALE	302.98	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	302.98
3718	ADULT <40% EXP M&F	144.99	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	144.99
SUBTOTAL:		447.97	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	447.97
3906	NEWLY ELIGIBLE MALE	3,658.03	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,658.03
3907	NEWLY ELIGIBLE FEMA	186.74	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	186.74
3908	NEWLY ELIGIBLE M&F	190.37	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	190.37
3909	NEWLY ELIGIBLE M&F	4,641.95	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,641.95

FEDERAL EMERGENCY SERVICES

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
3914	NEWLY ELIGIBLE MALE	-32,353.35	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-32,353.35
3915	NEWLY ELIGIBLE FEMA	47,067.82	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	47,067.82
3916	NEWLY ELIGIBLE MALE	715,851.62	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	715,851.62
3917	NEWLY ELIGIBLE FEMA	458,763.46	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	458,763.46
3918	NEWLY ELIGIBLE M&F	1,954,928.55	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,954,928.55
3919	NEWLY ELIGIBLE M&F	4,798.84	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,798.84
SUBTOTAL:		3,157,734.03	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,157,734.03
TOTAL:		9,886,437.64	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,886,437.64

QMB - FEE FOR SERVICE

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
8020	QMB ONLY	400,102.86	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	400,102.86
8040	SLMB	4.16	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4.16
8050	Q11	7.67	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7.67
SUBTOTAL:		400,114.69	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	400,114.69
TOTAL:		400,114.69	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	400,114.69

INPATIENT INMATES FEE FOR SERVICE

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1016	TANF 21-44 MALE NON-	176.98	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	176.98
2100	SSI AGED WITH MEDIC	62,636.18	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	62,636.18
2110	SSI AGED NON-MEDICA	55,431.46	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	55,431.46
2120	SSI AGED WITH QMB	3,240.08	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,240.08
2210	SSI DISABLED NON-ME	1,073.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,073.60
5017	SOBRA PREG 21-44 FE	3,260.38	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,260.38
SUBTOTAL:		125,818.68	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	125,818.68
1128	TANF EXPANDED 45-64	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2620	SSI DISABLED EXPAND	804.92	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	804.92
SUBTOTAL:		804.92	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	804.92
3706	ADULT <40% EXP MALE	26,019.36	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	26,019.36
3707	ADULT <40% EXP FEM	271.09	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	271.09
3708	ADULT <40% EXP M&F	11,908.65	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	11,908.65
3714	ADULT <40% EXP MALE	353.70	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	353.70
3716	ADULT <40% EXP MALE	218,117.82	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	218,117.82
3717	ADULT <40% EXP FEM	52,156.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	52,156.60
3718	ADULT <40% EXP M&F	353,809.36	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	353,809.36
3728	ADULT <40% EXP M&F	139,069.59	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	139,069.59
SUBTOTAL:		801,706.17	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	801,706.17
3916	NEWLY ELIGIBLE MALE	15,999.84	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	15,999.84
3917	NEWLY ELIGIBLE FEMA	5,137.82	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,137.82
3918	NEWLY ELIGIBLE M&F	25,941.69	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	25,941.69
SUBTOTAL:		47,079.35	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	47,079.35
TOTAL:		975,409.12	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	975,409.12

COCONINO COUNTY INMATES FEE FOR SERVICE

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
3717	ADULT <40% EXP FEM AL	3,420.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,420.00
SUBTOTAL:		3,420.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,420.00
TOTAL:		3,420.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,420.00

GRAHAM COUNTY INMATES FEE FOR SERVICE

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
3716	ADULT <40% EXP MALE	5,377.79	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,377.79
SUBTOTAL:		5,377.79	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,377.79
TOTAL:		5,377.79	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,377.79

MARICOPA COUNTY INMATES FEE FOR SERVICE

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1014	TANF 14-20 MALE NON-	136.74	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	136.74
1016	TANF 21-44 MALE NON-	5,818.72	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,818.72
1017	TANF 21-44 FEMALE N	1,082.48	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,082.48
2100	SSI AGED WITH MEDIC A	7,942.52	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,942.52
2200	SSI DISABLED WITH M F	1,309.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,309.60
2210	SSI DISABLED NON-ME D	1,618.81	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,618.81
2220	SSI DISABLED WITH Q M	4,268.62	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,268.62
SUBTOTAL:		22,177.49	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	22,177.49
1116	TANF EXPANDED 21-44	9,365.91	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,365.91
1128	TANF EXPANDED 45-64	30,975.78	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	30,975.78
2420	SSI AGED EXPANDED WU	17,181.68	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	17,181.68
2600	SSI DISABLED EXPAND F	173.98	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	173.98
SUBTOTAL:		57,697.35	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	57,697.35
3516	ADULT 40-100% MALE 2	337.40	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	337.40
3716	ADULT <40% EXP MALE	54,620.68	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	54,620.68
3717	ADULT <40% EXP FEM AI	10,385.03	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	10,385.03
3718	ADULT <40% EXP M&F A	13,015.34	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	13,015.34
SUBTOTAL:		78,358.45	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	78,358.45
TOTAL:		158,233.29	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	158,233.29

MOHAVE COUNTY INMATES FEE FOR SERVICE

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
2210	SSI DISABLED NON-ME D	30.82	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	30.82
SUBTOTAL:		30.82	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	30.82
3716	ADULT <40% EXP MALE	962.05	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	962.05
SUBTOTAL:		962.05	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	962.05
TOTAL:		992.87	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	992.87

PIMA COUNTY INMATES FEE FOR SERVICE

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
2210	SSI DISABLED NON-ME D	807.17	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	807.17
5015	SOBRA PREG 14-20 FE M	470.90	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	470.90
SUBTOTAL:		1,278.07	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,278.07
3517	ADULT 40-100% FEMAL F	114.90	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	114.90
3716	ADULT <40% EXP MALE	290.46	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	290.46
3717	ADULT <40% EXP FEM AI	3,587.31	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,587.31
3718	ADULT <40% EXP M&F AI	13,647.51	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	13,647.51
SUBTOTAL:		17,640.18	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	17,640.18
TOTAL:		18,918.25	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	18,918.25

PINAL COUNTY INMATES FEE FOR SERVICE

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
2100	SSI AGED WITH MEDIC A	245.38	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	245.38
2200	SSI DISABLED WITH M E	581.70	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	581.70
2220	SSI DISABLED WITH Q M	3,803.40	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,803.40
SUBTOTAL:		4,630.48	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,630.48
1128	TANF EXPANDED 45-64	2,660.70	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,660.70
SUBTOTAL:		2,660.70	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,660.70
3717	ADULT <40% EXP FEM A1	8.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8.00
3718	ADULT <40% EXP M&F A	9,572.42	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,572.42
SUBTOTAL:		9,580.42	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,580.42
TOTAL:		16,871.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	16,871.60

LONG TERM CARE FEE FOR SERVICE - EPD AND DES DD

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
2100	SSI AGED WITH MEDIC A	2,307,947.16	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,307,947.16
2110	SSI AGED NON-MEDICA D	149,727.64	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	149,727.64
2120	SSI AGED WITH QMB	3,195,618.68	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,195,618.68
2200	SSI DISABLED WITH M E	537,954.02	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	537,954.02
2210	SSI DISABLED NON-ME D	2,694,953.74	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,694,953.74
2220	SSI DISABLED WITH Q M	764,491.97	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	764,491.97
2310	SSI BLIND NON-MEDIC A	12,301.04	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12,301.04
2320	SSI BLIND WITH QMB	7,206.96	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,206.96
SUBTOTAL:		9,670,201.21	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,670,201.21
8710	SSI DISABLED FREEDO M	653.30	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	653.30
8720	SSI DISABLED FREEDO M	2,765.43	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,765.43
SUBTOTAL:		3,418.73	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,418.73
TOTAL:		9,673,619.94	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,673,619.94

LTC FEE FOR SERVICE - PRIOR QUARTER COVERAGE - EXC. ES

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
2100	SSI AGED WITH MEDIC A	6,319.24	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,319.24
2110	SSI AGED NON-MEDICA B	200.76	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	200.76
2120	SSI AGED WITH QMB	3,279.02	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,279.02
2200	SSI DISABLED WITH M E	4,355.69	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,355.69
2210	SSI DISABLED NON-ME D	11,384.31	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	11,384.31
SUBTOTAL:		25,539.02	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	25,539.02
TOTAL:		25,539.02	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	25,539.02

ACUTE FEE FOR SERVICE MEDICAID IN PUBLIC SCHOOLS

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1012	TANF 01-05 M & F NON	10,026.35	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	10,026.35
1013	TANF 06-13 M & F NON	26,843.26	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	26,843.26
1014	TANF 14-20 MALE NON-	2,429.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,429.50
1015	TANF 14-20 FEMALE N	2,174.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,174.10
2200	SSI DISABLED WITH M	157.34	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	157.34
2210	SSI DISABLED NON-ME	136,113.36	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	136,113.36
2220	SSI DISABLED WITH Q	800.49	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	800.49
2310	SSI BLIND NON-MEDIC	919.88	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	919.88
4305	SOBRA CHILD 14-20 FE	35.62	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	35.62
4312	SOBRA CHILD 01-05 M	28,343.38	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	28,343.38
4313	SOBRA CHILD 06-13 M	91,660.37	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	91,660.37
4314	SOBRA CHILD 14-20 MA	6,894.69	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,894.69
4315	SOBRA CHILD 14-20 FE	2,364.62	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,364.62
SUBTOTAL:		308,762.96	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	308,762.96
1113	TANF EXPANDED 06-13	83.28	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	83.28
SUBTOTAL:		83.28	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	83.28
3514	ADULT 40-100% MALE 1	159.17	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	159.17
3515	ADULT 40-100% FEMAL	201.78	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	201.78
3714	ADULT <40% EXP MALE	449.14	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	449.14
3715	ADULT <40% EXP FEM	41.40	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	41.40
SUBTOTAL:		851.49	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	851.49
4413	SOBRA 100-133% M&F	22,760.62	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	22,760.62
4414	SOBRA 100-133% MALE	1,982.14	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,982.14
4415	SOBRA 100-133% FEM	706.11	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	706.11
SUBTOTAL:		25,448.87	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	25,448.87
TOTAL:		335,146.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	335,146.60

LONG TERM CARE FEE FOR SERVICE MEDICAID IN PUBLIC SCHOOLS

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1000	TANF WITH MEDICARE	395.88	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	395.88
1010	TANF NON-MEDICARE	22,308.73	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	22,308.73
2200	SSI DISABLED WITH M	3,546.21	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,546.21
2210	SSI DISABLED NON-ME D	797,548.98	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	797,548.98
2220	SSI DISABLED WITH Q	1,060.22	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,060.22
2310	SSI BLIND NON-MEDIC M A	3,791.67	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,791.67
SUBTOTAL:		828,651.69	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	828,651.69
TOTAL:		828,651.69	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	828,651.69

ACUTE REINSURANCE

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1011	TANF <1 M & F NON-ME	644,528.57	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	644,528.57
1012	TANF 01-05 M & F NON	-5,098.78	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-5,098.78
1013	TANF 06-13 M & F NON	127,321.76	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	127,321.76
1014	TANF 14-20 MALE NON-	13,740.97	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	13,740.97
1015	TANF 14-20 FEMALE N	23,666.42	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	23,666.42
1016	TANF 21-44 MALE NON-	217,616.39	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	217,616.39
1017	TANF 21-44 FEMALE N	181,478.43	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	181,478.43
1018	TANF 45-64 M & F NON	234,755.06	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	234,755.06
1019	TANF 65+ M & F NON-M	4,019.06	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,019.06
2100	SSI AGED WITH MEDIC	15,498.24	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	15,498.24
2110	SSI AGED NON-MEDICA	388,018.03	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	388,018.03
2200	SSI DISABLED WITH M	14,893.21	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	14,893.21
2210	SSI DISABLED NON-ME	5,781,423.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,781,423.00
2310	SSI BLIND NON-MEDIC	3,144.63	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,144.63
4311	SOBRA CHILD <1 M & F	1,395,628.58	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,395,628.58
4312	SOBRA CHILD 01-05 M	441,100.37	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	441,100.37
4313	SOBRA CHILD 06-13 M	263,996.88	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	263,996.88
4314	SOBRA CHILD 14-20 MA	173,423.73	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	173,423.73
4315	SOBRA CHILD 14-20 FE	82,494.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	82,494.00
5015	SOBRA PREG 14-20 FE	79,849.94	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	79,849.94
5017	SOBRA PREG 21-44 FE	25,268.07	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	25,268.07
SUBTOTAL:		10,106,766.56	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	10,106,766.56
1116	TANF EXPANDED 21-44	109,137.12	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	109,137.12
1117	TANF EXPANDED 21-44	367,821.25	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	367,821.25
1118	TANF EXPANDED 45-64	118,336.16	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	118,336.16
2600	SSI DISABLED EXPAND	850.89	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	850.89
2610	SSI DISABLED EXPAND	22,124.40	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	22,124.40
SUBTOTAL:		618,269.82	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	618,269.82
3508	ADULT 40-100% M&F 45	13,424.53	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	13,424.53
3514	ADULT 40-100% MALE 1	83,948.35	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	83,948.35
3515	ADULT 40-100% FEMAL	342.52	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	342.52
3516	ADULT 40-100% MALE 2	208,376.34	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	208,376.34
3517	ADULT 40-100% FEMAL	73,314.67	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	73,314.67
3518	ADULT 40-100% M&F 45	449,226.40	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	449,226.40
3708	ADULT <40% EXP M&F	199,395.77	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	199,395.77

ACUTE REINSURANCE

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
3714	ADULT <40% EXP MALE	46,933.03	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	46,933.03
3715	ADULT <40% EXP FEM A1	27,464.33	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	27,464.33
3716	ADULT <40% EXP MALE	610,923.36	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	610,923.36
3717	ADULT <40% EXP FEM A1	452,359.25	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	452,359.25
3718	ADULT <40% EXP M&F A4	1,050,808.24	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,050,808.24
SUBTOTAL:		3,216,516.79	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,216,516.79
3914	NEWLY ELIGIBLE MALE	531.22	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	531.22
3916	NEWLY ELIGIBLE MALE	151,847.06	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	151,847.06
3917	NEWLY ELIGIBLE FEMA	54,472.48	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	54,472.48
3918	NEWLY ELIGIBLE M&F A4	187,202.54	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	187,202.54
SUBTOTAL:		394,053.30	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	394,053.30
4413	SOBRA 100-133% M&F	200,439.17	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	200,439.17
4414	SOBRA 100-133% MALE	584,170.49	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	584,170.49
4415	SOBRA 100-133% FEMA	37,792.99	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	37,792.99
SUBTOTAL:		822,402.65	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	822,402.65
8710	SSI DISABLED FREEDO M4	2,634.47	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,634.47
SUBTOTAL:		2,634.47	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,634.47
TOTAL:		15,160,643.59	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	15,160,643.59

LONG TERM CARE REINSURANCE

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1010	TANF NON-MEDICARE	2,240.29	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,240.29
2100	SSI AGED WITH MEDIC A	427,508.23	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	427,508.23
2110	SSI AGED NON-MEDICA A	109,126.94	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	109,126.94
2200	SSI DISABLED WITH M P	922,846.90	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	922,846.90
2210	SSI DISABLED NON-ME D	3,499,917.78	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,499,917.78
2300	SSI BLIND WITH MEDIC	0.57	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.57
2310	SSI BLIND NON-MEDIC A	5,402.76	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,402.76
SUBTOTAL:		4,967,043.47	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,967,043.47
TOTAL:		4,967,043.47	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,967,043.47

ACUTE SMIB

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1000	TANF WITH MEDICARE	83,282.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	83,282.60
1010	TANF NON-MEDICARE	609.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	609.00
1020	TANF WITH QMB	24,116.40	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	24,116.40
2100	SSI AGED WITH MEDIC A	103,567.30	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	103,567.30
2110	SSI AGED NON-MEDICA D	493,790.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	493,790.60
2120	SSI AGED WITH QMB	3,316,283.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,316,283.10
2200	SSI DISABLED WITH M C	270,428.30	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	270,428.30
2210	SSI DISABLED NON-ME D	391,130.70	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	391,130.70
2220	SSI DISABLED WITH Q M	3,666,577.20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,666,577.20
2300	SSI BLIND WITH MEDIC A	243.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	243.60
2310	SSI BLIND NON-MEDIC A	3,288.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,288.60
2320	SSI BLIND WITH QMB	29,962.80	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	29,962.80
4300	SOBRA CHILD WITH ME D	121.80	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	121.80
4320	SOBRA CHILD WITH Q M	243.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	243.60
5000	SOBRA PREGNANT WO MAN	243.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	243.60
5020	SOBRA PREGNANT WO MAN	3,897.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,897.60
8000	SMIB ONLY NOT ELIGIB	-487.20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-487.20
8020	QMB ONLY	732,938.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	732,938.50
8040	SLMB	4,230,330.90	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,230,330.90
8888	SMIB ONLY NOT ELIGIB	-149,049.20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-149,049.20
9999	SMIB ONLY NOT ELIGIB	60,444.40	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	60,444.40
SUBTOTAL:		13,261,964.20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	13,261,964.20
1100	TANF EXPANDED FPR E	670,306.70	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	670,306.70
1110	TANF EXPANDED FOR E	730.80	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	730.80
1120	TANF EXPANDED FOR E	277,849.30	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	277,849.30
2400	SSI AGED EXPANDED WU	-974.40	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-974.40
2410	SSI AGED EXPANDED N/O	121.80	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	121.80
2420	SSI AGED EXPANDED M/L	2,270,888.70	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,270,888.70
2520	SSI BLIND EXPANDED M	121.80	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	121.80
2600	SSI DISABLED EXPAND E	-487.20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-487.20
2620	SSI DISABLED EXPAND E	1,918,198.80	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,918,198.80
SUBTOTAL:		5,136,756.30	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,136,756.30
3520	ADULT 40-100% FOR FI	974.40	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	974.40
3720	AHC CARE EXPANDED E/O	1,339.80	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,339.80
SUBTOTAL:		2,314.20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,314.20

ACUTE SMIB

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
3920	NEWLY ELIGIBLE FOR F	487.20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	487.20
SUBTOTAL:		487.20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	487.20
8720	SSI DISABLED FREEDO M	26,430.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	26,430.60
SUBTOTAL:		26,430.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	26,430.60
TOTAL:		18,427,952.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	18,427,952.50

ACUTE HIB

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
2100	SSI AGED WITH MEDIC A	-1,233.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-1,233.00
2120	SSI AGED WITH QMB	236,959.20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	236,959.20
2220	SSI DISABLED WITH Q	125,651.90	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	125,651.90
2320	SSI BLIND WITH QMB	411.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	411.00
8020	QMB ONLY	2,918.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,918.00
9999	SMIB ONLY NOT ELIGIB	-3,144.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-3,144.00
SUBTOTAL:		361,563.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	361,563.10
1120	TANF EXPANDED FOR FL	1,130.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,130.00
2420	SSI AGED EXPANDED WI	4,500.40	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,500.40
SUBTOTAL:		5,630.40	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,630.40
TOTAL:		367,193.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	367,193.50

Q1

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
8050	Q11	2,231,414.30	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,231,414.30
9999	SMIB ONLY NOT ELIGIB	-9,385.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-9,385.60
SUBTOTAL:		2,222,028.70	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,222,028.70
TOTAL:		2,222,028.70	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,222,028.70

LTC SMIB

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1000	TANF WITH MEDICARE	1,339.80	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,339.80
1020	TANF WITH QMB	243.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	243.60
2100	SSI AGED WITH MEDIC	996,521.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	996,521.00
2110	SSI AGED NON-MEDICA	185,014.20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	185,014.20
2120	SSI AGED WITH QMB	904,419.20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	904,419.20
2200	SSI DISABLED WITH M	379,691.30	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	379,691.30
2210	SSI DISABLED NON-ME	18,635.40	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	18,635.40
2220	SSI DISABLED WITH Q	835,984.20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	835,984.20
2300	SSI BLIND WITH MEDIC	852.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	852.60
2310	SSI BLIND NON-MEDIC	365.40	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	365.40
2320	SSI BLIND WITH QMB	5,237.40	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,237.40
SUBTOTAL:		3,328,304.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,328,304.10
8720	SSI DISABLED FREEDO	609.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	609.00
SUBTOTAL:		609.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	609.00
TOTAL:		3,328,913.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,328,913.10

LTC HIB

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
2100	SSI AGED WITH MEDIC A	411.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	411.00
2120	SSI AGED WITH QMB	268,654.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	268,654.00
2220	SSI DISABLED WITH Q M	14,652.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	14,652.00
SUBTOTAL:		283,717.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	283,717.00
TOTAL:		283,717.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	283,717.00

ACUTE FEE FOR SERVICE - IHS FACILITY SERVICES ONLY - EXCLUDING EMERGENCY SERVICES

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1006	TANF 21-44 MALE WITH	-679.32	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-679.32
1007	TANF 21-44 FEMALE WI	4,715.31	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,715.31
1008	TANF 45-64 M & F WIT	2,768.42	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,768.42
1009	TANF 65+ M & F WITH	1,498.24	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,498.24
1011	TANF <1 M & F NON-ME	691,179.03	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	691,179.03
1012	TANF 01-05 M & F NON	300,554.71	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	300,554.71
1013	TANF 06-13 M & F NON	216,437.47	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	216,437.47
1014	TANF 14-20 MALE NON-	77,950.03	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	77,950.03
1015	TANF 14-20 FEMALE N	181,345.66	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	181,345.66
1016	TANF 21-44 MALE NON-	1,208,018.47	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,208,018.47
1017	TANF 21-44 FEMALE N	4,782,275.12	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,782,275.12
1018	TANF 45-64 M & F NON	1,536,458.94	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,536,458.94
1019	TANF 65+ M & F NON-M	1,488.83	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,488.83
1026	TANF 21-44 MALE WITH	736.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	736.00
1027	TANF 21-44 FEMALE WI	812.39	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	812.39
1028	TANF 45-64 M & F WIT	3,869.59	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,869.59
1029	TANF 65+ M & F WITH	111.13	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	111.13
2100	SSI AGED WITH MEDIC	66,138.34	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	66,138.34
2110	SSI AGED NON-MEDICA	53,486.52	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	53,486.52
2120	SSI AGED WITH QMB	229,795.08	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	229,795.08
2200	SSI DISABLED WITH M	138,965.52	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	138,965.52
2210	SSI DISABLED NON-ME	4,735,804.13	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,735,804.13
2220	SSI DISABLED WITH Q	434,350.13	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	434,350.13
2300	SSI BLIND WITH MEDIC	442.84	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	442.84
2310	SSI BLIND NON-MEDIC	59,992.53	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	59,992.53
2320	SSI BLIND WITH QMB	6,629.65	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,629.65
4303	SOBRA CHILD 06-13 M	441.34	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	441.34
4311	SOBRA CHILD <1 M & F	1,609,122.57	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,609,122.57
4312	SOBRA CHILD 01-05 M	2,972,452.20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,972,452.20
4313	SOBRA CHILD 06-13 M	4,942,683.63	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,942,683.63
4314	SOBRA CHILD 14-20 MA	1,427,842.79	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,427,842.79
4315	SOBRA CHILD 14-20 FE	1,271,324.45	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,271,324.45
5007	SOBRA PREG 21-44 FE	378.25	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	378.25
5013	SOBRA PREG 09-13 FE	8,701.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8,701.00
5015	SOBRA PREG 14-20 FE	301,972.26	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	301,972.26
5017	SOBRA PREG 21-44 FE	1,648,401.34	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,648,401.34

ACUTE FEE FOR SERVICE - IHS FACILITY SERVICES ONLY - EXCLUDING EMERGENCY SERVICES

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
5018	SOBRA PREG 45-64 FE M	1,822.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,822.00
5027	SOBRA PREG 21-44 FE M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
5028	SOBRA PREG 45-64 FE M	64.80	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	64.80
SUBTOTAL:		28,920,351.39	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	28,920,351.39
3100	TRANSPLANT OPTION 1	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SUBTOTAL:		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1106	TANF EXPANDED 21-44	8,602.39	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8,602.39
1107	TANF EXPANDED 21-44	13,205.53	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	13,205.53
1108	TANF EXPANDED 45-64	35,277.85	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	35,277.85
1109	TANF EXPANDED 65+ M&F	25,333.08	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	25,333.08
1112	TANF EXPANDED 01-05	1,472.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,472.00
1113	TANF EXPANDED 06-13	1,086.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,086.00
1114	TANF EXPANDED 14-20	8,498.36	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8,498.36
1115	TANF EXPANDED 14-20	22,839.73	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	22,839.73
1116	TANF EXPANDED 21-44	391,405.06	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	391,405.06
1117	TANF EXPANDED 21-44	1,654,146.61	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,654,146.61
1118	TANF EXPANDED 45-64	1,081,476.90	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,081,476.90
1119	TANF EXPANDED 65+ M&F	3,568.96	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,568.96
1126	TANF EXPANDED 21-44	3,422.37	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,422.37
1127	TANF EXPANDED 21-44	2,367.67	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,367.67
1128	TANF EXPANDED 45-64	9,846.61	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,846.61
1129	TANF EXPANDED 65+ M&F	8,178.44	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8,178.44
2400	SSI AGED EXPANDED M&F	11,068.81	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	11,068.81
2410	SSI AGED EXPANDED M&F	8,461.28	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8,461.28
2420	SSI AGED EXPANDED M&F	138,825.20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	138,825.20
2600	SSI DISABLED EXPAND F	13,441.47	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	13,441.47
2610	SSI DISABLED EXPAND F	113,472.90	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	113,472.90
2620	SSI DISABLED EXPAND F	129,964.16	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	129,964.16
SUBTOTAL:		3,685,961.38	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,685,961.38
3400	MED ELIGIBILITY W/ M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3608	AHC CARE/MI M&F 45-6	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SUBTOTAL:		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3508	ADULT 40-100% M&F 45	5,087.09	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,087.09
3509	ADULT 40-100% M&F 65	2,149.75	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,149.75

ACUTE FEE FOR SERVICE - IHS FACILITY SERVICES ONLY - EXCLUDING EMERGENCY SERVICES

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RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
3514	ADULT 40-100% MALE 1	29,860.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	29,860.10
3515	ADULT 40-100% FEMAL	58,534.61	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	58,534.61
3516	ADULT 40-100% MALE 2	516,106.88	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	516,106.88
3517	ADULT 40-100% FEMAL	515,712.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	515,712.00
3518	ADULT 40-100% M&F 45	1,473,444.90	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,473,444.90
3519	ADULT 40-100% M&F 65	1,472.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,472.00
3526	ADULT 40-100% MALE 2	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3706	ADULT <40% EXP MALE	8.65	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8.65
3707	ADULT <40% EXP FEM	38.04	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	38.04
3708	ADULT <40% EXP M&F	10,145.24	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	10,145.24
3709	ADULT <40% EXP M&F	386.08	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	386.08
3714	ADULT <40% EXP MALE	296,316.38	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	296,316.38
3715	ADULT <40% EXP FEM	395,011.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	395,011.00
3716	ADULT <40% EXP MALE	4,559,384.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,559,384.60
3717	ADULT <40% EXP FEM	3,020,325.53	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,020,325.53
3718	ADULT <40% EXP M&F	5,969,277.06	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,969,277.06
3719	ADULT <40% EXP M&F	2,190.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,190.00
3728	ADULT <40% EXP M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SUBTOTAL:		16,855,449.91	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	16,855,449.91
3906	NEWLY ELIGIBLE MALE	565.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	565.60
3908	NEWLY ELIGIBLE M&F	6,391.01	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,391.01
3909	NEWLY ELIGIBLE M&F	491.18	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	491.18
3914	NEWLY ELIGIBLE MALE	15,249.46	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	15,249.46
3915	NEWLY ELIGIBLE FEMA	35,329.67	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	35,329.67
3916	NEWLY ELIGIBLE MALE	236,860.76	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	236,860.76
3917	NEWLY ELIGIBLE FEMA	595,512.26	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	595,512.26
3918	NEWLY ELIGIBLE M&F	774,247.15	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	774,247.15
3928	NEWLY ELIGIBLE M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SUBTOTAL:		1,664,647.09	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,664,647.09
4413	SOBRA 100-133% M&F	354,893.07	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	354,893.07
4414	SOBRA 100-133% MALE	98,806.05	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	98,806.05
4415	SOBRA 100-133% FEMA	144,611.95	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	144,611.95
SUBTOTAL:		598,311.07	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	598,311.07
4517	BC PATIENT FEMALE 2	368.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	368.00
4518	BC PATIENT FEMALE 4	5,520.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,520.00

ACUTE FEE FOR SERVICE - IHS FACILITY SERVICES ONLY - EXCLUDING EMERGENCY SERVICES

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
4618	CC PATIENT FEMALE 4 C	368.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	368.00
SUBTOTAL:		6,256.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,256.00
8700	SSI DISABLED FREEDO M	7,296.44	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,296.44
8710	SSI DISABLED FREEDO M	1,104.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,104.00
8720	SSI DISABLED FREEDO M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SUBTOTAL:		8,400.44	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8,400.44
TOTAL:		51,739,377.28	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	51,739,377.28

ACUTE FEE FOR SERVICE - IHS NON-CONTRACTED CATEGORICAL REFERRALS - EXCL EMERG SERV

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1006	TANF 21-44 MALE WITH	1,472.69	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,472.69
1007	TANF 21-44 FEMALE WI	6,790.07	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,790.07
1008	TANF 45-64 M & F WIT	5,745.09	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,745.09
1009	TANF 65+ M & F WITH	524.13	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	524.13
1011	TANF <1 M & F NON-ME	189,983.11	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	189,983.11
1012	TANF 01-05 M & F NON	63,137.63	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	63,137.63
1013	TANF 06-13 M & F NON	121,964.92	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	121,964.92
1014	TANF 14-20 MALE NON-	9,809.04	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,809.04
1015	TANF 14-20 FEMALE N	33,485.45	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	33,485.45
1016	TANF 21-44 MALE NON-	538,720.43	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	538,720.43
1017	TANF 21-44 FEMALE N	1,361,290.75	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,361,290.75
1018	TANF 45-64 M & F NON	681,254.62	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	681,254.62
1019	TANF 65+ M & F NON-M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1026	TANF 21-44 MALE WITH	116.86	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	116.86
1027	TANF 21-44 FEMALE WI	2,636.88	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,636.88
1028	TANF 45-64 M & F WIT	5,014.97	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,014.97
1029	TANF 65+ M & F WITH	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2100	SSI AGED WITH MEDIC	115,748.46	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	115,748.46
2110	SSI AGED NON-MEDICA	31,788.57	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	31,788.57
2120	SSI AGED WITH QMB	229,484.07	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	229,484.07
2200	SSI DISABLED WITH M	210,777.77	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	210,777.77
2210	SSI DISABLED NON-ME	3,642,965.31	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,642,965.31
2220	SSI DISABLED WITH Q	718,446.11	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	718,446.11
2300	SSI BLIND WITH MEDIC	14.33	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	14.33
2310	SSI BLIND NON-MEDIC	25,883.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	25,883.10
2320	SSI BLIND WITH QMB	9,644.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,644.50
4303	SOBRA CHILD 06-13 M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
4311	SOBRA CHILD <1 M & F	1,068,603.35	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,068,603.35
4312	SOBRA CHILD 01-05 M	819,475.49	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	819,475.49
4313	SOBRA CHILD 06-13 M	900,853.80	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	900,853.80
4314	SOBRA CHILD 14-20 MA	235,587.23	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	235,587.23
4315	SOBRA CHILD 14-20 FE	319,825.62	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	319,825.62
5007	SOBRA PREG 21-44 FE	459.90	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	459.90
5013	SOBRA PREG 09-13 FE	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
5015	SOBRA PREG 14-20 FE	66,587.06	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	66,587.06
5017	SOBRA PREG 21-44 FE	617,725.42	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	617,725.42

ACUTE FEE FOR SERVICE - IHS NON-CONTRACTED CATEGORICAL REFERRALS - EXCL EMERG SERV

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
5018	SOBRA PREG 45-64 FE M	2,780.26	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,780.26
5027	SOBRA PREG 21-44 FE M	866.28	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	866.28
5028	SOBRA PREG 45-64 FE M	262.71	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	262.71
SUBTOTAL:		12,039,725.98	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12,039,725.98
3100	TRANSPLANT OPTION 1	1,856.12	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,856.12
SUBTOTAL:		1,856.12	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,856.12
1106	TANF EXPANDED 21-44	10,571.52	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	10,571.52
1107	TANF EXPANDED 21-44	31,189.98	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	31,189.98
1108	TANF EXPANDED 45-64	72,354.15	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	72,354.15
1109	TANF EXPANDED 65+ M&F	18,233.09	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	18,233.09
1112	TANF EXPANDED 01-05	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1113	TANF EXPANDED 06-13	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1114	TANF EXPANDED 14-20	4,177.59	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,177.59
1115	TANF EXPANDED 14-20	9,515.12	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,515.12
1116	TANF EXPANDED 21-44	185,416.38	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	185,416.38
1117	TANF EXPANDED 21-44	416,749.19	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	416,749.19
1118	TANF EXPANDED 45-64	408,463.01	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	408,463.01
1119	TANF EXPANDED 65+ M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1126	TANF EXPANDED 21-44	8,136.82	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8,136.82
1127	TANF EXPANDED 21-44	2,366.79	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,366.79
1128	TANF EXPANDED 45-64	23,175.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	23,175.10
1129	TANF EXPANDED 65+ M&F	8,819.97	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8,819.97
2400	SSI AGED EXPANDED M&F	5,234.94	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,234.94
2410	SSI AGED EXPANDED M&F	1,088.04	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,088.04
2420	SSI AGED EXPANDED M&F	151,371.20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	151,371.20
2600	SSI DISABLED EXPAND F	18,539.97	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	18,539.97
2610	SSI DISABLED EXPAND F	56,032.83	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	56,032.83
2620	SSI DISABLED EXPAND F	197,419.13	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	197,419.13
SUBTOTAL:		1,628,854.82	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,628,854.82
3400	MED ELIGIBILITY W/ M	-128.19	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-128.19
3608	AHC CARE/MI M&F 45-6	-10.16	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-10.16
SUBTOTAL:		-138.35	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-138.35
3508	ADULT 40-100% M&F 45	1,642.39	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,642.39
3509	ADULT 40-100% M&F 65	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

ACUTE FEE FOR SERVICE - IHS NON-CONTRACTED CATEGORICAL REFERRALS - EXCL EMERG SERV

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
3514	ADULT 40-100% MALE 1	13,795.62	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	13,795.62
3515	ADULT 40-100% FEMAL	14,424.55	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	14,424.55
3516	ADULT 40-100% MALE 2	241,184.19	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	241,184.19
3517	ADULT 40-100% FEMAL	146,713.41	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	146,713.41
3518	ADULT 40-100% M&F 45	609,541.43	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	609,541.43
3519	ADULT 40-100% M&F 65	22,516.25	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	22,516.25
3526	ADULT 40-100% MALE 2	217.07	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	217.07
3706	ADULT <40% EXP MALE	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3707	ADULT <40% EXP FEM	74.57	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	74.57
3708	ADULT <40% EXP M&F	564.58	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	564.58
3709	ADULT <40% EXP M&F	940.33	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	940.33
3714	ADULT <40% EXP MALE	77,551.63	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	77,551.63
3715	ADULT <40% EXP FEM	64,347.99	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	64,347.99
3716	ADULT <40% EXP MALE	2,548,960.43	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,548,960.43
3717	ADULT <40% EXP FEM	765,143.06	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	765,143.06
3718	ADULT <40% EXP M&F	3,295,413.07	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,295,413.07
3719	ADULT <40% EXP M&F	2,136.91	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,136.91
3728	ADULT <40% EXP M&F	579.64	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	579.64
SUBTOTAL:		7,805,747.12	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,805,747.12
3906	NEWLY ELIGIBLE MALE	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3908	NEWLY ELIGIBLE M&F	2,854.42	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,854.42
3909	NEWLY ELIGIBLE M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3914	NEWLY ELIGIBLE MALE	6,895.37	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,895.37
3915	NEWLY ELIGIBLE FEMA	6,000.59	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,000.59
3916	NEWLY ELIGIBLE MALE	86,585.35	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	86,585.35
3917	NEWLY ELIGIBLE FEMA	150,672.73	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	150,672.73
3918	NEWLY ELIGIBLE M&F	302,477.81	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	302,477.81
3928	NEWLY ELIGIBLE M&F	30.62	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	30.62
SUBTOTAL:		555,516.89	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	555,516.89
4413	SOBRA 100-133% M&F	71,542.65	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	71,542.65
4414	SOBRA 100-133% MALE	13,480.77	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	13,480.77
4415	SOBRA 100-133% FEMA	23,465.33	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	23,465.33
SUBTOTAL:		108,488.75	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	108,488.75
4517	BC PATIENT FEMALE 2	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
4518	BC PATIENT FEMALE 4	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

ACUTE FEE FOR SERVICE - IHS NON-CONTRACTED CATEGORICAL REFERRALS - EXCL EMERG SERV

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
4618	CC PATIENT FEMALE 4 C	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SUBTOTAL:		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
8700	SSI DISABLED FREEDO M	4,051.48	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,051.48
8710	SSI DISABLED FREEDO M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
8720	SSI DISABLED FREEDO M	724.25	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	724.25
SUBTOTAL:		4,775.73	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,775.73
TOTAL:		22,144,827.06	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	22,144,827.06

ACUTE FEE FOR SERVICE - IHS NON-CATEGORICAL REFERRALS - EXCLUDING EMERGENCY SERVICES

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1006	TANF 21-44 MALE WITH	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1007	TANF 21-44 FEMALE WI	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1008	TANF 45-64 M & F WIT	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1009	TANF 65+ M & F WITH	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1011	TANF <1 M & F NON-ME	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1012	TANF 01-05 M & F NON	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1013	TANF 06-13 M & F NON	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1014	TANF 14-20 MALE NON-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1015	TANF 14-20 FEMALE N	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1016	TANF 21-44 MALE NON-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1017	TANF 21-44 FEMALE N	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1018	TANF 45-64 M & F NON	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1019	TANF 65+ M & F NON-M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1026	TANF 21-44 MALE WITH	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1027	TANF 21-44 FEMALE WI	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1028	TANF 45-64 M & F WIT	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1029	TANF 65+ M & F WITH	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2100	SSI AGED WITH MEDIC	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2110	SSI AGED NON-MEDICA	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2120	SSI AGED WITH QMB	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2200	SSI DISABLED WITH M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2210	SSI DISABLED NON-ME	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2220	SSI DISABLED WITH Q	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2300	SSI BLIND WITH MEDIC	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2310	SSI BLIND NON-MEDIC	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2320	SSI BLIND WITH QMB	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
4303	SOBRA CHILD 06-13 M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
4311	SOBRA CHILD <1 M & F	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
4312	SOBRA CHILD 01-05 M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
4313	SOBRA CHILD 06-13 M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
4314	SOBRA CHILD 14-20 MA	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
4315	SOBRA CHILD 14-20 FE	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
5007	SOBRA PREG 21-44 FE	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
5013	SOBRA PREG 09-13 FE	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
5015	SOBRA PREG 14-20 FE	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
5017	SOBRA PREG 21-44 FE	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

ACUTE FEE FOR SERVICE - IHS NON-CATEGORICAL REFERRALS - EXCLUDING EMERGENCY SERVICES

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
5018	SOBRA PREG 45-64 FE M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
5027	SOBRA PREG 21-44 FE M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
5028	SOBRA PREG 45-64 FE M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SUBTOTAL:		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3100	TRANSPLANT OPTION 1	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SUBTOTAL:		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1106	TANF EXPANDED 21-44	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1107	TANF EXPANDED 21-44	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1108	TANF EXPANDED 45-64	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1109	TANF EXPANDED 65+ M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1112	TANF EXPANDED 01-05	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1113	TANF EXPANDED 06-13	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1114	TANF EXPANDED 14-20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1115	TANF EXPANDED 14-20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1116	TANF EXPANDED 21-44	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1117	TANF EXPANDED 21-44	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1118	TANF EXPANDED 45-64	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1119	TANF EXPANDED 65+ M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1126	TANF EXPANDED 21-44	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1127	TANF EXPANDED 21-44	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1128	TANF EXPANDED 45-64	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1129	TANF EXPANDED 65+ M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2400	SSI AGED EXPANDED M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2410	SSI AGED EXPANDED M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2420	SSI AGED EXPANDED M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2600	SSI DISABLED EXPAND F	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2610	SSI DISABLED EXPAND F	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2620	SSI DISABLED EXPAND F	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SUBTOTAL:		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3400	MED ELIGIBILITY W/ M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3608	AHC CARE/MI M&F 45-6	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SUBTOTAL:		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3508	ADULT 40-100% M&F 45	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3509	ADULT 40-100% M&F 65	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

ACUTE FEE FOR SERVICE - IHS NON-CATEGORICAL REFERRALS - EXCLUDING EMERGENCY SERVICES

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
3514	ADULT 40-100% MALE 1	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3515	ADULT 40-100% FEMAL	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3516	ADULT 40-100% MALE 2	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3517	ADULT 40-100% FEMAL	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3518	ADULT 40-100% M&F 45	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3519	ADULT 40-100% M&F 65	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3526	ADULT 40-100% MALE 2	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3706	ADULT <40% EXP MALE	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3707	ADULT <40% EXP FEM	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3708	ADULT <40% EXP M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3709	ADULT <40% EXP M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3714	ADULT <40% EXP MALE	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3715	ADULT <40% EXP FEM	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3716	ADULT <40% EXP MALE	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3717	ADULT <40% EXP FEM	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3718	ADULT <40% EXP M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3719	ADULT <40% EXP M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3728	ADULT <40% EXP M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SUBTOTAL:		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3906	NEWLY ELIGIBLE MALE	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3908	NEWLY ELIGIBLE M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3909	NEWLY ELIGIBLE M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3914	NEWLY ELIGIBLE MALE	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3915	NEWLY ELIGIBLE FEMA	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3916	NEWLY ELIGIBLE MALE	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3917	NEWLY ELIGIBLE FEMA	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3918	NEWLY ELIGIBLE M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3928	NEWLY ELIGIBLE M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SUBTOTAL:		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
4413	SOBRA 100-133% M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
4414	SOBRA 100-133% MALE	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
4415	SOBRA 100-133% FEMA	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SUBTOTAL:		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
4517	BC PATIENT FEMALE 2	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
4518	BC PATIENT FEMALE 4	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

ACUTE FEE FOR SERVICE - IHS NON-CATEGORICAL REFERRALS - EXCLUDING EMERGENCY SERVICES

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
4618	CC PATIENT FEMALE 4 C	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SUBTOTAL:		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
8700	SSI DISABLED FREEDO M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
8710	SSI DISABLED FREEDO M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
8720	SSI DISABLED FREEDO M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SUBTOTAL:		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TOTAL:		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

ACUTE FEE FOR SERVICE - NON IHS ONLY - EXCLUDING EMERGENCY SERVICES

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1006	TANF 21-44 MALE WITH	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1007	TANF 21-44 FEMALE WI	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1008	TANF 45-64 M & F WIT	115.78	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	115.78
1009	TANF 65+ M & F WITH	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1011	TANF <1 M & F NON-ME	1,804.59	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,804.59
1012	TANF 01-05 M & F NON	3,987.61	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,987.61
1013	TANF 06-13 M & F NON	3,653.62	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,653.62
1014	TANF 14-20 MALE NON-	1,143.86	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,143.86
1015	TANF 14-20 FEMALE N	1,333.07	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,333.07
1016	TANF 21-44 MALE NON-	2,299.03	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,299.03
1017	TANF 21-44 FEMALE N	27,040.84	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	27,040.84
1018	TANF 45-64 M & F NON	28,071.21	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	28,071.21
1019	TANF 65+ M & F NON-M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1026	TANF 21-44 MALE WITH	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1027	TANF 21-44 FEMALE WI	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1028	TANF 45-64 M & F WIT	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1029	TANF 65+ M & F WITH	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2100	SSI AGED WITH MEDIC	596.90	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	596.90
2110	SSI AGED NON-MEDICA	5,148.07	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,148.07
2120	SSI AGED WITH QMB	242.01	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	242.01
2200	SSI DISABLED WITH M	60.91	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	60.91
2210	SSI DISABLED NON-ME	27,621.59	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	27,621.59
2220	SSI DISABLED WITH Q	2,632.34	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,632.34
2300	SSI BLIND WITH MEDIC	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2310	SSI BLIND NON-MEDIC	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2320	SSI BLIND WITH QMB	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
4303	SOBRA CHILD 06-13 M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
4311	SOBRA CHILD <1 M & F	3,805.82	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,805.82
4312	SOBRA CHILD 01-05 M	65,933.12	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	65,933.12
4313	SOBRA CHILD 06-13 M	104,379.21	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	104,379.21
4314	SOBRA CHILD 14-20 MA	11,733.15	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	11,733.15
4315	SOBRA CHILD 14-20 FE	7,732.31	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,732.31
5007	SOBRA PREG 21-44 FE	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
5013	SOBRA PREG 09-13 FE	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
5015	SOBRA PREG 14-20 FE	4,124.18	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,124.18
5017	SOBRA PREG 21-44 FE	25,579.26	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	25,579.26

ACUTE FEE FOR SERVICE - NON IHS ONLY - EXCLUDING EMERGENCY SERVICES

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
5018	SOBRA PREG 45-64 FE M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
5027	SOBRA PREG 21-44 FE M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
5028	SOBRA PREG 45-64 FE M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SUBTOTAL:		329,038.48	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	329,038.48
3100	TRANSPLANT OPTION 1	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SUBTOTAL:		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1106	TANF EXPANDED 21-44	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1107	TANF EXPANDED 21-44	86.04	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	86.04
1108	TANF EXPANDED 45-64	698.08	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	698.08
1109	TANF EXPANDED 65+ M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1112	TANF EXPANDED 01-05	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1113	TANF EXPANDED 06-13	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1114	TANF EXPANDED 14-20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1115	TANF EXPANDED 14-20	93.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	93.00
1116	TANF EXPANDED 21-44	2,328.77	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,328.77
1117	TANF EXPANDED 21-44	13,339.04	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	13,339.04
1118	TANF EXPANDED 45-64	861.72	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	861.72
1119	TANF EXPANDED 65+ M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1126	TANF EXPANDED 21-44	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1127	TANF EXPANDED 21-44	64.36	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	64.36
1128	TANF EXPANDED 45-64	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1129	TANF EXPANDED 65+ M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2400	SSI AGED EXPANDED M&F	903.35	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	903.35
2410	SSI AGED EXPANDED M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2420	SSI AGED EXPANDED M&F	174.44	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	174.44
2600	SSI DISABLED EXPAND F	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2610	SSI DISABLED EXPAND F	77.84	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	77.84
2620	SSI DISABLED EXPAND F	1,647.33	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,647.33
SUBTOTAL:		20,273.97	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	20,273.97
3400	MED ELIGIBILITY W/ M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3608	AHC CARE/MI M&F 45-6	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SUBTOTAL:		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3508	ADULT 40-100% M&F 45	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3509	ADULT 40-100% M&F 65	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

ACUTE FEE FOR SERVICE - NON IHS ONLY - EXCLUDING EMERGENCY SERVICES

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
3514	ADULT 40-100% MALE 1	4,337.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,337.00
3515	ADULT 40-100% FEMAL	497.80	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	497.80
3516	ADULT 40-100% MALE 2	15,774.69	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	15,774.69
3517	ADULT 40-100% FEMAL	2,768.54	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,768.54
3518	ADULT 40-100% M&F 45	6,879.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,879.60
3519	ADULT 40-100% M&F 65	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3526	ADULT 40-100% MALE 2	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3706	ADULT <40% EXP MALE	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3707	ADULT <40% EXP FEM	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3708	ADULT <40% EXP M&F	107.45	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	107.45
3709	ADULT <40% EXP M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3714	ADULT <40% EXP MALE	9,037.89	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,037.89
3715	ADULT <40% EXP FEM	6,327.32	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,327.32
3716	ADULT <40% EXP MALE	26,321.69	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	26,321.69
3717	ADULT <40% EXP FEM	14,376.87	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	14,376.87
3718	ADULT <40% EXP M&F	39,054.06	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	39,054.06
3719	ADULT <40% EXP M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3728	ADULT <40% EXP M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SUBTOTAL:		125,482.91	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	125,482.91
3906	NEWLY ELIGIBLE MALE	34.78	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	34.78
3908	NEWLY ELIGIBLE M&F	101.36	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	101.36
3909	NEWLY ELIGIBLE M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3914	NEWLY ELIGIBLE MALE	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3915	NEWLY ELIGIBLE FEMA	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3916	NEWLY ELIGIBLE MALE	2,914.09	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,914.09
3917	NEWLY ELIGIBLE FEMA	11,968.55	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	11,968.55
3918	NEWLY ELIGIBLE M&F	12,324.30	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12,324.30
3928	NEWLY ELIGIBLE M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SUBTOTAL:		27,343.08	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	27,343.08
4413	SOBRA 100-133% M&F	8,378.75	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8,378.75
4414	SOBRA 100-133% MALE	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
4415	SOBRA 100-133% FEMA	901.53	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	901.53
SUBTOTAL:		9,280.28	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,280.28
4517	BC PATIENT FEMALE 2	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
4518	BC PATIENT FEMALE 4	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

ACUTE FEE FOR SERVICE - NON IHS ONLY - EXCLUDING EMERGENCY SERVICES

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
4618	CC PATIENT FEMALE 4 C	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SUBTOTAL:		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
8700	SSI DISABLED FREEDO M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
8710	SSI DISABLED FREEDO M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
8720	SSI DISABLED FREEDO M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SUBTOTAL:		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TOTAL:		511,418.72	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	511,418.72

QMB - FEE FOR SERVICE - IHS FACILITY SERVICES ONLY - EXCLUDING EMERGENCY SERVICES

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
8020	QMB ONLY	36,872.16	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	36,872.16
8040	SLMB	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
8050	Q11	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SUBTOTAL:		36,872.16	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	36,872.16
TOTAL:		36,872.16	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	36,872.16

QMB - FEE FOR SERVICE - IHS NON-CONTRACTED CATEGORICAL REFERRALS - EXCL EMER

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
8020	QMB ONLY	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
8040	SLMB	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
8050	Q11	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SUBTOTAL:		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TOTAL:		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

QMB - FEE FOR SERVICE - NON IHS ONLY - EXCLUDING EMERGENCY SERVICES

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
8020	QMB ONLY	363,227.79	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	363,227.79
8040	SLMB	4.16	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4.16
8050	Q11	7.67	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7.67
SUBTOTAL:		363,239.62	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	363,239.62
TOTAL:		363,239.62	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	363,239.62

ACUTE FEE FOR SERVICE - IHS CONTRACTED CATEGORICAL REFERRALS - EXCL EMERG SERV

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1006	TANF 21-44 MALE WITH	55.05	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	55.05
1007	TANF 21-44 FEMALE WI	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1008	TANF 45-64 M & F WIT	14.46	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	14.46
1009	TANF 65+ M & F WITH	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1011	TANF <1 M & F NON-ME	114,061.33	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	114,061.33
1012	TANF 01-05 M & F NON	1,877.83	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,877.83
1013	TANF 06-13 M & F NON	-34.11	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-34.11
1014	TANF 14-20 MALE NON-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1015	TANF 14-20 FEMALE N	3,050.19	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,050.19
1016	TANF 21-44 MALE NON-	45,482.98	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	45,482.98
1017	TANF 21-44 FEMALE N	106,522.53	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	106,522.53
1018	TANF 45-64 M & F NON	87,013.43	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	87,013.43
1019	TANF 65+ M & F NON-M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1026	TANF 21-44 MALE WITH	148.09	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	148.09
1027	TANF 21-44 FEMALE WI	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1028	TANF 45-64 M & F WIT	50.55	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	50.55
1029	TANF 65+ M & F WITH	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2100	SSI AGED WITH MEDIC	8,499.66	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8,499.66
2110	SSI AGED NON-MEDICA	2,551.19	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,551.19
2120	SSI AGED WITH QMB	9,555.40	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,555.40
2200	SSI DISABLED WITH M	8,793.87	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8,793.87
2210	SSI DISABLED NON-ME	243,889.19	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	243,889.19
2220	SSI DISABLED WITH Q	36,584.54	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	36,584.54
2300	SSI BLIND WITH MEDIC	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2310	SSI BLIND NON-MEDIC	175.91	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	175.91
2320	SSI BLIND WITH QMB	1,288.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,288.00
4303	SOBRA CHILD 06-13 M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
4311	SOBRA CHILD <1 M & F	107,386.13	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	107,386.13
4312	SOBRA CHILD 01-05 M	31,803.55	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	31,803.55
4313	SOBRA CHILD 06-13 M	22,465.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	22,465.50
4314	SOBRA CHILD 14-20 MA	8,438.19	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8,438.19
4315	SOBRA CHILD 14-20 FE	21,162.92	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	21,162.92
5007	SOBRA PREG 21-44 FE	27.54	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	27.54
5013	SOBRA PREG 09-13 FE	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
5015	SOBRA PREG 14-20 FE	26,309.18	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	26,309.18
5017	SOBRA PREG 21-44 FE	138,907.46	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	138,907.46

ACUTE FEE FOR SERVICE - IHS CONTRACTED CATEGORICAL REFERRALS - EXCL EMERG SERV

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
5018	SOBRA PREG 45-64 FE M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
5027	SOBRA PREG 21-44 FE M	56.68	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	56.68
5028	SOBRA PREG 45-64 FE M	80.51	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	80.51
SUBTOTAL:		1,026,217.75	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,026,217.75
3100	TRANSPLANT OPTION 1	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SUBTOTAL:		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1106	TANF EXPANDED 21-44	538.88	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	538.88
1107	TANF EXPANDED 21-44	742.62	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	742.62
1108	TANF EXPANDED 45-64	818.45	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	818.45
1109	TANF EXPANDED 65+ M&F	283.01	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	283.01
1112	TANF EXPANDED 01-05	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1113	TANF EXPANDED 06-13	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1114	TANF EXPANDED 14-20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1115	TANF EXPANDED 14-20	477.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	477.50
1116	TANF EXPANDED 21-44	24,491.12	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	24,491.12
1117	TANF EXPANDED 21-44	23,380.49	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	23,380.49
1118	TANF EXPANDED 45-64	24,860.13	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	24,860.13
1119	TANF EXPANDED 65+ M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1126	TANF EXPANDED 21-44	190.62	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	190.62
1127	TANF EXPANDED 21-44	958.28	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	958.28
1128	TANF EXPANDED 45-64	474.42	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	474.42
1129	TANF EXPANDED 65+ M&F	345.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	345.00
2400	SSI AGED EXPANDED M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2410	SSI AGED EXPANDED M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2420	SSI AGED EXPANDED M&F	10,427.22	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	10,427.22
2600	SSI DISABLED EXPAND F	127.08	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	127.08
2610	SSI DISABLED EXPAND F	1,127.98	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,127.98
2620	SSI DISABLED EXPAND F	9,014.59	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,014.59
SUBTOTAL:		98,257.39	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	98,257.39
3400	MED ELIGIBILITY W/ M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3608	AHC CARE/MI M&F 45-6	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SUBTOTAL:		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3508	ADULT 40-100% M&F 45	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3509	ADULT 40-100% M&F 65	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

ACUTE FEE FOR SERVICE - IHS CONTRACTED CATEGORICAL REFERRALS - EXCL EMERG SERV

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
3514	ADULT 40-100% MALE 1	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3515	ADULT 40-100% FEMAL	1,441.01	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,441.01
3516	ADULT 40-100% MALE 2	102,273.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	102,273.00
3517	ADULT 40-100% FEMAL	23,312.85	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	23,312.85
3518	ADULT 40-100% M&F 45	74,316.57	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	74,316.57
3519	ADULT 40-100% M&F 65	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3526	ADULT 40-100% MALE 2	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3706	ADULT <40% EXP MALE	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3707	ADULT <40% EXP FEM	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3708	ADULT <40% EXP M&F	52.40	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	52.40
3709	ADULT <40% EXP M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3714	ADULT <40% EXP MALE	13,443.49	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	13,443.49
3715	ADULT <40% EXP FEM	1,025.71	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,025.71
3716	ADULT <40% EXP MALE	191,333.82	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	191,333.82
3717	ADULT <40% EXP FEM	64,187.35	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	64,187.35
3718	ADULT <40% EXP M&F	145,955.90	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	145,955.90
3719	ADULT <40% EXP M&F	62.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	62.60
3728	ADULT <40% EXP M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SUBTOTAL:		617,404.70	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	617,404.70
3906	NEWLY ELIGIBLE MALE	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3908	NEWLY ELIGIBLE M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3909	NEWLY ELIGIBLE M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3914	NEWLY ELIGIBLE MALE	833.48	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	833.48
3915	NEWLY ELIGIBLE FEMA	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3916	NEWLY ELIGIBLE MALE	4,882.72	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,882.72
3917	NEWLY ELIGIBLE FEMA	14,967.59	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	14,967.59
3918	NEWLY ELIGIBLE M&F	19,064.87	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	19,064.87
3928	NEWLY ELIGIBLE M&F	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SUBTOTAL:		39,748.66	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	39,748.66
4413	SOBRA 100-133% M&F	1,139.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,139.50
4414	SOBRA 100-133% MALE	476.67	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	476.67
4415	SOBRA 100-133% FEMA	4,498.40	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,498.40
SUBTOTAL:		6,114.57	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,114.57
4517	BC PATIENT FEMALE 2	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
4518	BC PATIENT FEMALE 4	15.42	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	15.42

ACUTE FEE FOR SERVICE - IHS CONTRACTED CATEGORICAL REFERRALS - EXCL EMERG SERV

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
4618	CC PATIENT FEMALE 4 C	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SUBTOTAL:		15.42	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	15.42
8700	SSI DISABLED FREEDO M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
8710	SSI DISABLED FREEDO M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
8720	SSI DISABLED FREEDO M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SUBTOTAL:		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TOTAL:		1,787,758.49	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,787,758.49

LONG TERM CARE FEE FOR SERVICE - IHS FACILITY SERVICES ONLY - EXCLUDING EMERGENCY SER

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
2100	SSI AGED WITH MEDIC A	219,052.35	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	219,052.35
2110	SSI AGED NON-MEDICA B	40,660.18	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	40,660.18
2120	SSI AGED WITH QMB	182,700.41	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	182,700.41
2200	SSI DISABLED WITH M E	34,869.86	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	34,869.86
2210	SSI DISABLED NON-ME D	717,819.30	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	717,819.30
2220	SSI DISABLED WITH Q M	69,871.55	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	69,871.55
2310	SSI BLIND NON-MEDIC A	4,453.28	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,453.28
2320	SSI BLIND WITH QMB	388.66	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	388.66
SUBTOTAL:		1,269,815.59	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,269,815.59
8710	SSI DISABLED FREEDO M	653.30	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	653.30
8720	SSI DISABLED FREEDO M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SUBTOTAL:		653.30	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	653.30
TOTAL:		1,270,468.89	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,270,468.89

LONG TERM CARE FEE FOR SERVICE - IHS NON-CONTRACTED CATEGORICAL REFERRALS - EXCL EMER

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
2100	SSI AGED WITH MEDIC A	2,058,486.95	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,058,486.95
2110	SSI AGED NON-MEDICA B	108,527.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	108,527.50
2120	SSI AGED WITH QMB	2,980,893.26	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,980,893.26
2200	SSI DISABLED WITH M E	499,603.04	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	499,603.04
2210	SSI DISABLED NON-ME D	1,864,375.53	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,864,375.53
2220	SSI DISABLED WITH Q M	686,455.43	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	686,455.43
2310	SSI BLIND NON-MEDIC A	7,847.76	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,847.76
2320	SSI BLIND WITH QMB	6,736.52	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,736.52
SUBTOTAL:		8,212,925.99	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8,212,925.99
8710	SSI DISABLED FREEDO M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
8720	SSI DISABLED FREEDO M	2,765.43	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,765.43
SUBTOTAL:		2,765.43	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,765.43
TOTAL:		8,215,691.42	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8,215,691.42

LONG TERM CARE FEE FOR SERVICE - NON IHS ONLY - EXCLUDING EMERGENCY SERVICES

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
2100	SSI AGED WITH MEDIC A	20,107.37	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	20,107.37
2110	SSI AGED NON-MEDICA B	321.97	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	321.97
2120	SSI AGED WITH QMB	16,004.46	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	16,004.46
2200	SSI DISABLED WITH M E	859.25	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	859.25
2210	SSI DISABLED NON-ME D	65,859.49	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	65,859.49
2220	SSI DISABLED WITH Q M	304.54	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	304.54
2310	SSI BLIND NON-MEDIC A	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2320	SSI BLIND WITH QMB	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SUBTOTAL:		103,457.08	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	103,457.08
8710	SSI DISABLED FREEDO M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
8720	SSI DISABLED FREEDO M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SUBTOTAL:		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TOTAL:		103,457.08	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	103,457.08

LONG TERM CARE FEE FOR SERVICE - IHS CONTRACTED CATEGORICAL REFERRALS - EXCL EMERG SRV

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
2100	SSI AGED WITH MEDIC A	10,300.49	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	10,300.49
2110	SSI AGED NON-MEDICA B	217.99	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	217.99
2120	SSI AGED WITH QMB	16,020.55	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	16,020.55
2200	SSI DISABLED WITH M E	2,621.87	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,621.87
2210	SSI DISABLED NON-ME D	46,899.42	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	46,899.42
2220	SSI DISABLED WITH Q M	7,860.45	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,860.45
2310	SSI BLIND NON-MEDIC A	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2320	SSI BLIND WITH QMB	81.78	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	81.78
SUBTOTAL:		84,002.55	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	84,002.55
8710	SSI DISABLED FREEDO M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
8720	SSI DISABLED FREEDO M	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SUBTOTAL:		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TOTAL:		84,002.55	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	84,002.55

KidsCare - CAPITATION AMOUNTS

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
6011	KIDS <1M&F NON MEDI	479.18	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	479.18
6013	KIDS 6-13 M & F NON-	33,225.63	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	33,225.63
6014	KIDS 14-19 MALE NON-	31,612.49	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	31,612.49
6015	KIDS 14-19 FEMALE NO	40,507.26	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	40,507.26
SUBTOTAL:		105,824.56	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	105,824.56
TOTAL:		105,824.56	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	105,824.56

KidsCare - CAPITATION MEMBER MONTHS

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
6011	KIDS <1M&F NON MEDI C	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
6013	KIDS 6-13 M & F NON-	243.88	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	243.88
6014	KIDS 14-19 MALE NON-	166.11	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	166.11
6015	KIDS 14-19 FEMALE NO	138.19	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	138.19
SUBTOTAL:		549.18	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	549.18
TOTAL:		549.18	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	549.18

KidsCare - MENTAL HEALTH CAPITATION AMOUNTS

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
6011	KIDS <1M&F NON MEDI C	38.24	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	38.24
6013	KIDS 6-13 M & F NON-	8,948.16	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8,948.16
6014	KIDS 14-19 MALE NON-	6,415.19	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,415.19
6015	KIDS 14-19 FEMALE NO	5,325.95	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,325.95
SUBTOTAL:		20,727.54	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	20,727.54
TOTAL:		20,727.54	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	20,727.54

KidsCare - MENTAL HEALTH CAPITATION MEMBER MONTHS

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
6011	KIDS <1M&F NON MEDI C	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
6013	KIDS 6-13 M & F NON-	234.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	234.00
6014	KIDS 14-19 MALE NON-	157.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	157.00
6015	KIDS 14-19 FEMALE NO	130.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	130.00
SUBTOTAL:		522.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	522.00
TOTAL:		522.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	522.00

KidsCare - REINSURANCE

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
6014	KIDS 14-19 MALE NON-	82,673.79	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	82,673.79
SUBTOTAL:		82,673.79	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	82,673.79
TOTAL:		82,673.79	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	82,673.79

110007 DES-DD - CAP MEMBER MONTHS

For The Period Ending July 31, 2016

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1000	TANF WITH MEDICARE	10.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	10.00
1010	TANF NON-MEDICARE	666.51	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	666.51
1020	TANF WITH QMB	2.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2.00
2100	SSI AGED WITH MEDICA	170.32	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	170.32
2110	SSI AGED NON-MEDICAR	4.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4.00
2120	SSI AGED WITH QMB	271.83	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	271.83
2200	SSI DISABLED WITH ME	1,947.34	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,947.34
2210	SSI DISABLED NON-MED	22,244.95	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	22,244.95
2220	SSI DISABLED WITH QM	4,066.85	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,066.85
2300	SSI BLIND WITH MEDIC	13.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	13.00
2310	SSI BLIND NON-MEDICA	118.99	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	118.99
2320	SSI BLIND WITH QMB	28.19	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	28.19
8700	SSI DISABLED FREEDOM	9.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9.00
8710	SSI DISABLED FREEDOM	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
8720	SSI DISABLED FREEDOM	3.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3.00
SUBTOTAL:		29,556.98	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	29,556.98
TOTAL:		29,556.98	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	29,556.98

ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM

EPD/DD EXPENDITURES

For the Period Ending July 31, 2016

EPD/DD CAPITATION-LTC													
	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	TOTAL
TRIBAL	378,708.42	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	378,708.42
EPD	85,600,877.03	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	85,600,877.03
TOTAL AHCCCS LTC	85,979,585.45	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	85,979,585.45
DES/DD	104,331,950.18	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	104,331,950.18
TOTAL DES LTC	104,331,950.18	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	104,331,950.18
TOTAL LTC - CAP	190,311,535.63	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	190,311,535.63

EPD/DD FEE-FOR-SERVICE - LTC													
	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	TOTAL
TOTAL AHCCCS LTC	9,673,619.94	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,673,619.94
DES/DD	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TOTAL DES LTC	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TOTAL LTC - FFS	9,673,619.94	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,673,619.94

EPD/DD REINSURANCE - LTC													
	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	TOTAL
TOTAL AHCCCS LTC	4,453,643.29	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,453,643.29
DES/DD	513,400.18	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	513,400.18
TOTAL DES LTC	513,400.18	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	513,400.18
TOTAL LTC - REIN	4,967,043.47	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,967,043.47

EPD/DD SMIB/HIB-LTC													
	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	TOTAL
TOTAL SMIB/HIB LTC	3,612,630.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,612,630.10

Note to the ASR:

1- EPD reflects the Federal and County share for both acute and LTC services.

2- AHCCCS passes through only the Federal share to DES. Neither the Federal nor the Nonfederal dollars are included on the ASR summary (page 1) because both are included in the DES appropriation.

CRS INTEGRATED HEALTH PLANS - CAPITATION AMOUNTS

For the Period Ending July 31, 2016

		JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
010115	CRS FULLY INTEGRATED PLAN - CAP	14,211,057.11	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	14,211,057.11
010145	CRS ACUTE SEMI INTEGRATED - CAP	145,463.25	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	145,463.25
999125	CRS SEMI INTEGRATED PLAN - CAP	4,973,747.20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,973,747.20
999135	CRS ONLY PLAN - CAP	551,073.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	551,073.60
	Subtotal	19,881,341.16	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	19,881,341.16
999155	CRS REINSURANCE ONLY	2,326,263.42	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,326,263.42
	Subtotal	2,326,263.42	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,326,263.42
010115	CRS FULLY INTEGRATED PLAN - KC CAP	22,593.49	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	22,593.49
	Subtotal	22,593.49	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	22,593.49
GRAND TOTAL		22,230,198.07	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	22,230,198.07

- 1) Expenditures are from the PMMIS Financial subsystem and may not reconcile to data from other PMMIS subsystems or AFIS due to timing and other factors.
- 2) Expenditures are based on date-of-payment.
- 3) Expenditures do not include manual adjustments or reconciliations.

CRS INTEGRATED HEALTH PLANS - MEMBER MONTHS

For the Period Ending July 31, 2016

		JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
010115	CRS FULLY INTEGRATED PLAN - MM	17,102.15	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	17,102.15
010145	CRS ACUTE SEMI INTEGRATED - MM	181.59	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	181.59
999125	CRS SEMI INTEGRATED PLAN - MM	6,586.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,586.00
999135	CRS ONLY PLAN - MM	1,155.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,155.00
Subtotal		25,024.74	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	25,024.74
010115	CRS FULLY INTEGRATED PLAN - KC MM	27.18	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	27.18
Subtotal		27.18	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	27.18
GRAND TOTAL		25,051.92	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	25,051.92

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- 2) Expenditures are based on date-of-payment.
- 3) Expenditures do not include manual adjustments or reconciliations.

BHS INTEGRATED HEALTH PLAN - CAPITATION AMOUNTS

For the Period Ending July 31, 2016

		JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
010700	HEALTH CHOICE INTEGRATED - CAP	8,139,817.79	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8,139,817.79
010725	CENPATICO INTEGRATED - CAP	19,718,383.80	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	19,718,383.80
078999	MERCY MARICOPA INTEGRATED - CAP	43,908,062.70	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	43,908,062.70
	Subtotal	71,766,264.29	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	71,766,264.29
GRAND TOTAL		71,766,264.29	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	71,766,264.29

- 1) Expenditures are from the PMMIS Financial subsystem and may not reconcile to data from other PMMIS subsystems or AFIS due to timing and other factors.
- 2) Expenditures are based on date-of-payment.
- 3) Expenditures do not include manual adjustments or reconciliations.

BHS INTEGRATED HEALTH PLAN - MEMBER MONTHS

For the Period Ending July 31, 2016

		JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
010700	HEALTH CHOICE INTEGRATED - MM	5,434.12	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,434.12
010725	CENPATICO INTEGRATED - MM	12,956.97	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12,956.97
078999	MERCY MARICOPA INTEGRATED - MM	19,855.38	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	19,855.38
	Subtotal	38,246.47	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	38,246.47
GRAND TOTAL		38,246.47	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	38,246.47

- 1) Expenditures are from the PMMIS Financial subsystem and may not reconcile to data from other PMMIS subsystems or AFIS due to timing and other factors.
- 2) Expenditures are based on date-of-payment.
- 3) Expenditures do not include manual adjustments or reconciliations.