

September 25, 2015

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 2016 Appropriation Status Report for the Period Ended August 31, 2015

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 August 31, 2015.

Status Summary – As part of the FY 2017 budget request to the Governor's Office of Strategic Planning and Budgeting, a FY 2016 rebase was prepared. AHCCCS is currently forecasting a FY 2016 Total Fund shortfall of \$639.8 million. The shortfall is comprised of Federal Expenditure Authority (\$610.9 million) and Prescription Drug Rebate Fund (PDRF) State Match (\$28.9 million). The PDRF supplemental requirement is part of the Executive alternative to offset the 5% provider rate reduction.

There are several issues this fiscal year that have the potential to affect the projected shortfall. They include:

- Continued volatility in caseload growth and prior period expenditures.
- Corrections of shifts between Traditional and Proposition 204 programs due to system generated eligibility misclassifications.
- Ongoing implementation of the Medicare primary care physician parity program.
- Implementation of the hospital presumptive eligibility program pending federal approval.
- Potential Agency audit liabilities, which are detailed in the ASR.

AHCCCS intends to utilize surplus FY 2015 General Fund and Expenditure Authority for administrative adjustments of expenditures with dates of service prior to July 1, 2015. These administrative adjustments will reduce the projected Expenditure Authority shortfall.

Given these program changes and issues, for purposes of this report, projected annual expenditures equal the FY 2016 appropriations.

The Honorable Andy Biggs
The Honorable David M. Gowan, Sr.
September 25, 2015
Page 2

Enrollment Update – August 2015 enrollment is 1,755,374 members, a 9,199 member increase over the prior month. Enrollment for September 2015 increased to 1,803,005 members, a 47,631 member increase.

Major September changes by eligibility category include: 1931 for Families and Children/SOBRA – increase of 28,787; Supplemental Security Income – increase of 863; Prop 204 Restoration - increase of 9,628; Adult Expansion - increase of 3,383; Medicare Cost Sharing – increase of 785; and Federal Emergency Services - increase of 3,985.

Tobacco Funds Revenue Update –Tobacco tax revenue transfers have experienced delays due to the new AFIS system. AHCCCS will monitor the tobacco funds revenue collections throughout the year to determine any impact on the FY 2016 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.

Sincerely,



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 2016

Through August 31, 2015

Prepared by: Division of Business and Finance

Appropriation Status Report

Table of Contents

APPROPRIATED SOURCES AND USES OF FUNDS	Page
Summary of Appropriated Expenditures for SFY 2016.....	2
Appropriated Expenditures by Funding Source.....	3
Appropriated Revenue Received Detail Schedule.....	4
FOOTNOTES.....	6
CASELOAD AND EXPENDITURES BY RATE CODE.....	10

Appropriation Status Report

Appropriated Sources and
Uses of Funds

ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM
FY 2016 APPROPRIATION STATUS REPORT
For the Period Ending August 31, 2015
SUMMARY OF APPROPRIATED EXPENDITURES

	(A)	(B)	(A) - (B)		
ANNUAL APPROPRIATION	EXPENDITURE PLAN YTD	EXPENDITURES YTD	VARIANCE YTD	PROJECTED ANNUAL EXPENDITURES	ANNUALIZED VARIANCE
APPROPRIATIONS:					
ADMINISTRATION					
AHCCCS Operating Lump Sum	\$ 77,685,400	\$ 8,952,497	\$ -	\$ 77,685,400	\$ -
AHCCCS Prop 204 Administration	6,832,800	1,024,168	-	6,832,800	-
DES Eligibility	54,874,500	12,400,906	-	54,874,500	-
DES Prop 204 Eligibility	38,358,700	2,075,308	-	38,358,700	-
TOTAL ADMINISTRATION	<u>177,751,400</u>	<u>24,452,879</u>	<u>-</u>	<u>177,751,400</u>	<u>-</u>
Traditional Medicaid Services	3,639,548,600	605,087,267	-	3,639,548,600	-
Proposition 204 Services	2,507,700,600	376,192,094	-	2,507,700,600	-
ACA Adult Expansion	197,183,800	52,921,146	-	197,183,800	-
Children's Rehabilitative Services	234,866,700	38,341,264	-	234,866,700	-
KidsCare Services	6,295,200	457,576	-	6,295,200	-
ALTCS Services	1,386,588,900	219,371,965	-	1,386,588,900	-
Disproportionate Share Payments	5,087,100	-	-	5,087,100	-
Rural Hospitals	22,650,000	-	-	22,650,000	-
Voluntary Political Subdivision Programs	313,096,700	1,853,325	-	313,096,700	-
TOTAL PROGRAMMATIC	<u>8,313,017,600</u>	<u>1,294,224,637</u>	<u>-</u>	<u>8,313,017,600</u>	<u>-</u>
TOTAL EXPENDITURES	<u>\$ 8,490,769,000</u>	<u>\$ 1,318,677,516</u>	<u>\$ -</u>	<u>\$ 8,490,769,000</u>	<u>\$ -</u>

ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM
FY 2016 APPROPRIATION STATUS REPORT
For the Period Ending August 31, 2015
APPROPRIATED EXPENDITURES BY FUNDING SOURCE

	(A) ANNUAL APPROPRIATION	(A) EXPENDITURE PLAN YTD	(B) EXPENDITURES YTD	(A) - (B) VARIANCE YTD	PROJECTED ANNUAL EXPENDITURES	ANNUALIZED VARIANCE
Administrative Expenditures	\$ 51,247,900	\$ 7,691,829	\$ 7,691,829	-	\$ 51,247,900	\$ -
Proposition 204 - Administrative Expenditures	19,547,000	1,171,993	1,171,993	-	19,547,000	-
Programmatic Expenditures						
Traditional Medicaid Services	800,833,000	157,497,554	157,497,554	-	800,833,000	-
Proposition 204 Services	90,000,000	55,895,186	55,895,186	-	90,000,000	-
Children's Rehabilitative Services	73,001,000	11,688,584	11,688,584	-	73,001,000	-
KidsCare Services	338,000	(28,311)	(28,311)	-	338,000	-
ALTCs Services	162,880,800	27,147,000	27,147,000	-	162,880,800	-
DSH and Rural Hospitals	7,314,600	-	-	-	7,314,600	-
TOTAL GF EXPENDITURES	1,205,162,300	261,063,835	261,063,835	-	1,205,162,300	-
Administrative Expenditures	81,114,000	13,656,039	13,656,039	-	81,114,000	-
Proposition 204 - Administrative Expenditures	22,161,600	1,927,483	1,927,483	-	22,161,600	-
Programmatic Expenditures						
Traditional Medicaid Services	2,471,441,100	361,595,113	361,595,113	-	2,471,441,100	-
Proposition 204 Services	2,048,414,400	316,625,936	316,625,936	-	2,048,414,400	-
ACA Adult Expansion	197,183,800	52,921,146	52,921,146	-	197,183,800	-
Children's Rehabilitative Services	161,865,700	26,652,679	26,652,679	-	161,865,700	-
KidsCare Services	5,587,200	485,887	485,887	-	5,587,200	-
ALTCs Services and Nursing Facility Assessment	954,423,500	142,494,686	142,494,686	-	954,423,500	-
DSH and Rural Hospitals	20,422,500	-	-	-	20,422,500	-
Voluntary Political Subdivision Programs - See Note 5	214,151,100	1,245,990	1,245,990	-	214,151,100	-
TOTAL FEDERAL EXPENDITURES	6,176,764,900	917,604,959	917,604,959	-	6,176,764,900	-
Administrative Expenditures Proposition 204 - BNCF	3,482,900	-	-	-	3,482,900	-
Programmatic Expenditures						
Traditional Medicaid Services Acute Care	49,879,700	8,313,283	8,313,283	-	49,879,700	-
ALTCs Services	249,234,600	43,851,585	43,851,585	-	249,234,600	-
TOTAL COUNTY EXPENDITURES	302,597,200	52,164,868	52,164,868	-	302,597,200	-
TOBACCO FUNDS						
Programmatic Expenditures						
Traditional Medicaid Services Acute Care - Medically Needy	31,180,000	4,441,067	4,441,067	-	31,180,000	-
Proposition 204 Services - Emergency Health Services	17,331,400	102,235	102,235	-	17,331,400	-
Proposition 204 Services - Proposition 204 Protection	36,396,000	3,568,737	3,568,737	-	36,396,000	-
Proposition 204 Services - ATLSF	100,000,000	-	-	-	100,000,000	-
TOTAL TOBACCO EXPENDITURES	184,907,400	8,112,038	8,112,038	-	184,907,400	-
OTHER						
Administrative Expenditures						
Prescription Drug Rebate Program	198,000	5,536	5,536	-	198,000	-
Programmatic Expenditures						
Acute Care - Prescription Drug Rebate Program State Match	78,105,000	13,017,500	13,017,500	-	78,105,000	-
Acute Care - Prescription Drug Rebate Program Federal Authority	207,883,900	60,109,479	60,109,479	-	207,883,900	-
Long Term Care - Prescription Drug Rebate Program State Match	5,475,800	912,633	912,633	-	5,475,800	-
Long Term Care - Prescription Drug Rebate Program Federal Authority	14,574,200	4,832,618	4,832,618	-	14,574,200	-
Proposition 204 Services - Hospital Assessment	215,558,800	-	-	-	215,558,800	-
Traditional Medicaid Services - TPL	194,700	104,555	104,555	-	194,700	-
ALTCs Services - TPL	-	133,442	133,442	-	-	-
ALTCs Services - Nursing Facility Assessment	-	-	-	-	-	-
KidsCare Services Premiums	370,000	-	-	-	370,000	-
Freedom to Work Premiums	31,200	8,717	8,717	-	31,200	-
Voluntary Political Subdivision Programs - See Note 5	98,945,600	607,335	607,335	-	98,945,600	-
TOTAL OTHER EXPENDITURES	621,337,200	79,731,814	79,731,814	-	621,337,200	-
TOTAL						
Administrative Expenditures	177,751,400	24,452,879	24,452,879	-	177,751,400	-
Acute Care	6,926,428,700	1,074,852,672	1,074,852,672	-	6,926,428,700	-
Long Term Care	1,386,588,900	219,371,964	219,371,964	-	1,386,588,900	-
TOTAL EXPENDITURES	\$ 8,490,769,000	\$ 1,318,677,515	\$ 1,318,677,515	\$ -	\$ 8,490,769,000	\$ -

ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM
FY 2016 APPROPRIATION STATUS REPORT
APPROPRIATED REVENUE AND OTHER COLLECTIONS RECEIVED DETAIL SCHEDULE
For the Period Ending August 31, 2015

	BUDGET	BUDGET YTD	RECEIPTS YTD
GENERAL FUND:			
Traditional Medicaid Services & Administrative	\$ 932,396,500	\$ 176,877,967	\$ 176,877,967
Proposition 204 Services & Administrative	109,547,000	57,067,179	57,067,179
KidsCare Services	338,000	(28,311)	(28,311)
ALTCS Services	162,880,800	27,147,000	27,147,000
TOTAL	<u>1,205,162,300</u>	<u>261,063,835</u>	<u>261,063,835</u>
FEDERAL:			
Acute & Administrative	5,216,754,200	774,624,386	784,299,330
KidsCare Services	5,587,200	485,887	477,563
ALTCS Services	954,423,500	142,494,686	147,460,491
TOTAL	<u>6,176,764,900</u>	<u>917,604,959</u>	<u>932,237,384</u>
COUNTY:			
Acute & Administrative	53,362,600	8,313,283	4,361,371
ALTCS Services	249,234,600	43,851,585	20,769,551
TOTAL	<u>302,597,200</u>	<u>52,164,868</u>	<u>25,130,922</u>
TOBACCO FUNDS:			
Traditional Medicaid Services	31,180,000	4,441,067	4,441,067
Proposition 204 Services	153,727,400	3,670,972	3,670,972
TOTAL	<u>184,907,400</u>	<u>8,112,038</u>	<u>8,112,038</u>
OTHER:			
Administrative	198,000	5,536	5,536
Acute Care - Prescription Drug Rebate Program	285,988,900	73,126,979	73,126,979
Long Term Care - Prescription Drug Rebate Program	20,050,000	5,745,251	5,745,251
Hospital Assessment	215,558,800	-	62,389,429
ALTCS - Nursing Facility Assessment	-	-	50,287
Acute TPL - Note 1	194,700	104,555	104,555
LTC TPL - Note 1	-	133,442	133,442
KidsCare TPL - Note 1	-	-	21,015
Member Premiums - CHIP	370,000	-	68,133
Member Premiums - Freedom to Work	31,200	8,717	8,717
Voluntary Political Subdivision - State Match	98,945,600	607,335	607,335
TOTAL	<u>621,337,200</u>	<u>79,731,814</u>	<u>142,260,680</u>
TOTAL REVENUE	<u>\$ 8,490,769,000</u>	<u>\$ 1,318,677,515</u>	<u>\$ 1,368,804,859</u>

Appropriation Status Report

Footnotes

ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM

FY 2016 APPROPRIATION STATUS REPORT

For the Period Ending August 31, 2015

Note 1: Third Party Liability Collections:

Gross Collections:

	August 2015	August 2014	July 1, 2015	July 1, 2014
	August 2015	August 2014	August 31, 2015	August 31, 2014
Acute	\$ 335,362	\$ 341,755	\$ 818,607	\$ 1,059,776
LTC	477,470	428,549	588,731	802,597
KidsCare	104,605	-	105,342	819
Total TPL Collections	\$ 917,437	\$ 770,304	\$ 1,512,680	\$ 1,863,192

AHCCCS Net Collections (Net of Federal Share):

Expenditure Offsets:

Acute	\$ 53,101	\$ 42,278	\$ 104,555	\$ 128,421
LTC	110,063	103,000	133,442	187,037
KidsCare	20,901	-	21,015	159
Total Expenditure Offsets	\$ 184,065	\$ 145,278	\$ 259,012	\$ 315,617

FY 16 Total

Note 2: Authorized Positions

1,029.2

Actual Positions as of August 31, 2015

915.0

ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM
FY 2016 APPROPRIATION STATUS REPORT
For the Period Ending August 31, 2015

Note 3: Intergovernmental Service Agreement - State of Hawaii:

Beginning Balance July 1, 2015	\$	2,853,728
Revenues		514,038
Transfers-In		<u>79,277</u>
Total Revenues		<u>593,315</u>
Expenditures		781,220
Transfers-out		-
Total Expenditures		<u>781,220</u>
Ending Balance August 31, 2015	\$	<u>2,665,824</u>

Of the \$2,665,824 ending balance, \$1,206,274 represents restricted cash for prepaid expenses from the State of Hawaii for the projected expenditures through September 2015.

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

Schedule of Outstanding Liabilities
As of August 31, 2015

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
	<u>38,864,844</u>	

ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM
FY 2016 APPROPRIATION STATUS REPORT
For the Period Ending August 31, 2015

Note 5: Summary of Voluntary Political Subdivision Contribution Expenditures.

	As of August 31, 2015		
	Expenditures		
	State Match	Federal	Total
DSH Voluntary	\$ 607,335	\$ 1,245,990	\$ 1,853,325
GME Voluntary	-	-	-
Safety Net Care Pool	-	-	-
Total Voluntary Political Subdivision Program Expenditures	\$ 607,335	\$ 1,245,990	\$ 1,853,325



Appropriation Status Report

Caseload and Expenditures
by Rate Code

ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM

EXPENDITURE SUMMARY

For the Period Ending August 31, 2015

	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
TITLE XIX TRADITIONAL													
CAPITATION - ACUTE	272,366,959	276,316,415	0	0	0	0	0	0	0	0	0	0	548,683,374
CAPITATION - LTC	182,421,827	195,322,105	0	0	0	0	0	0	0	0	0	0	377,743,932
MENTAL HEALTH - CHILD	24,739,142	24,849,877	0	0	0	0	0	0	0	0	0	0	49,589,018
MENTAL HEALTH - ADULT	11,323,471	11,730,505	0	0	0	0	0	0	0	0	0	0	23,053,977
MENTAL HEALTH - GENERAL	15,232,013	15,779,544	0	0	0	0	0	0	0	0	0	0	31,011,557
MENTAL HEALTH - CMDP	14,633,559	14,896,415	0	0	0	0	0	0	0	0	0	0	29,529,974
CHILDREN'S REHAB SERVICES	3,716,383	3,722,744	0	0	0	0	0	0	0	0	0	0	7,439,127
FEE FOR SERVICE - ACUTE	39,309,584	42,687,182	0	0	0	0	0	0	0	0	0	0	81,996,767
FFS - PRIOR QUARTER COVERAGE	597,940	670,476	0	0	0	0	0	0	0	0	0	0	1,268,416
EMERGENCY SERVICES - FEDERAL	4,601,455	4,572,491	0	0	0	0	0	0	0	0	0	0	9,173,947
FFS - FAMILY PLANNING	-39	0	0	0	0	0	0	0	0	0	0	0	-39
FFS MEDICAID IN PUBLIC SCHOOLS	676,499	194,086	0	0	0	0	0	0	0	0	0	0	870,584
INPATIENT INMATES FFS	94,140	163,355	0	0	0	0	0	0	0	0	0	0	257,494
QMB - FEE FOR SERVICE	293,437	211,412	0	0	0	0	0	0	0	0	0	0	504,849
PIMA COUNTY INMATES FFS	339	2,845	0	0	0	0	0	0	0	0	0	0	3,183
MARICOPA CTY INMATES FFS	20,878	34,445	0	0	0	0	0	0	0	0	0	0	55,323
PINAL COUNTY INMATES FFS	0	791	0	0	0	0	0	0	0	0	0	0	791
FEE FOR SERVICE - LTC	8,618,281	9,030,245	0	0	0	0	0	0	0	0	0	0	17,648,526
LFFS - PRIOR QUARTER COVERAGE	15,486	33,993	0	0	0	0	0	0	0	0	0	0	49,479
LFFS MEDICAID IN PUBLIC SCHOOLS	1,303,186	520,396	0	0	0	0	0	0	0	0	0	0	1,823,582
REINSURANCE - ACUTE	7,490,557	6,963,077	0	0	0	0	0	0	0	0	0	0	14,453,634
REINSURANCE - LTC	4,045,763	3,839,634	0	0	0	0	0	0	0	0	0	0	7,885,397
SMIB - ACUTE	9,829,585	10,084,385	0	0	0	0	0	0	0	0	0	0	19,913,971
HIB - ACUTE	261,769	274,050	0	0	0	0	0	0	0	0	0	0	535,819
Q1	2,399,485	1,983,017	0	0	0	0	0	0	0	0	0	0	4,382,502
SMIB - LTC	2,846,826	2,859,916	0	0	0	0	0	0	0	0	0	0	5,706,741
HIB - LTC	269,425	275,672	0	0	0	0	0	0	0	0	0	0	545,097
SUBTOTAL	607,107,950	627,019,071	0	0	0	0	0	0	0	0	0	0	1,234,127,021

ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM

EXPENDITURE SUMMARY

For the Period Ending August 31, 2015

	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
TITLE XIX PROP 204													
CAPITATION - ACUTE	171,977,268	169,158,780	0	0	0	0	0	0	0	0	0	0	341,136,049
MENTAL HEALTH - CHILD	92,936	74,950	0	0	0	0	0	0	0	0	0	0	167,886
MENTAL HEALTH - ADULT	14,130,226	13,753,412	0	0	0	0	0	0	0	0	0	0	27,883,638
MENTAL HEALTH - GENERAL	19,007,580	18,500,700	0	0	0	0	0	0	0	0	0	0	37,508,280
CHILDREN'S REHAB SERVICES	13,342	14,176	0	0	0	0	0	0	0	0	0	0	27,518
FEE FOR SERVICE - ACUTE	23,420,195	26,360,064	0	0	0	0	0	0	0	0	0	0	49,780,259
FFS - PRIOR QUARTER COVERAGE	1,097,380	946,602	0	0	0	0	0	0	0	0	0	0	2,043,982
EMERGENCY SERVICES - FEDERAL	1,615,009	1,756,056	0	0	0	0	0	0	0	0	0	0	3,371,065
FFS MEDICAID IN PUBLIC SCHOOLS	5,786	3,204	0	0	0	0	0	0	0	0	0	0	8,990
INPATIENT INMATES FFS	600,012	766,289	0	0	0	0	0	0	0	0	0	0	1,366,300
MARICOPA CTY INMATES FFS	144,942	138,543	0	0	0	0	0	0	0	0	0	0	283,485
YAVAPAI COUNTY INMATES FFS	306	0	0	0	0	0	0	0	0	0	0	0	306
PINAL COUNTY INMATES FFS	8,167	-1,654	0	0	0	0	0	0	0	0	0	0	6,512
PIMA COUNTY INMATES FFS	16,737	14,619	0	0	0	0	0	0	0	0	0	0	31,356
COCONINO COUNTY INMATES FFS	152	3,842	0	0	0	0	0	0	0	0	0	0	3,994
REINSURANCE - ACUTE	3,024,281	3,235,285	0	0	0	0	0	0	0	0	0	0	6,259,566
SMIB - ACUTE	5,190,825	5,190,446	0	0	0	0	0	0	0	0	0	0	10,381,271
HIB - ACUTE	8,649	8,527	0	0	0	0	0	0	0	0	0	0	17,176
SUBTOTAL	240,353,793	239,923,839	0	0	0	0	0	0	0	0	0	0	480,277,632

ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM

EXPENDITURE SUMMARY

For the Period Ending August 31, 2015

	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
TITLE XIX ACA ADULT EXPANSION													
CAPITATION - ACUTE	22,690,376	23,251,291	0	0	0	0	0	0	0	0	0	0	45,941,667
MENTAL HEALTH - ADULT	2,206,578	2,297,715	0	0	0	0	0	0	0	0	0	0	4,504,292
MENTAL HEALTH - GENERAL	2,968,226	3,090,821	0	0	0	0	0	0	0	0	0	0	6,059,047
CHILDREN'S REHAB SERVICES	417	417	0	0	0	0	0	0	0	0	0	0	834
FEE FOR SERVICE - ACUTE	1,757,826	2,095,785	0	0	0	0	0	0	0	0	0	0	3,853,611
FFS - PRIOR QUARTER COVERAGE	160,594	215,500	0	0	0	0	0	0	0	0	0	0	376,094
EMERGENCY SERVICES - FEDERAL	1,701,575	1,999,988	0	0	0	0	0	0	0	0	0	0	3,701,563
INPATIENT INMATES FFS	6,351	35,816	0	0	0	0	0	0	0	0	0	0	42,167
MARICOPA CTY INMATES FFS	15,154	0	0	0	0	0	0	0	0	0	0	0	15,154
REINSURANCE - ACUTE	276,372	479,010	0	0	0	0	0	0	0	0	0	0	755,382
SMIB - ACUTE	1,469	734	0	0	0	0	0	0	0	0	0	0	2,203
SUBTOTAL	31,784,937	33,467,076	0	0	0	0	0	0	0	0	0	0	65,252,013
TOTAL TITLE XIX	879,246,680	900,409,987	0	0	0	0	0	0	0	0	0	0	1,779,656,667
TITLE XXI KIDSCARE													
KidsCare - CAPITATION	183,782	170,409	0	0	0	0	0	0	0	0	0	0	354,191
KidsCare - FEE FOR SERVICE	-819	774	0	0	0	0	0	0	0	0	0	0	-45
KidsCare - MENTAL HEALTH	37,408	35,365	0	0	0	0	0	0	0	0	0	0	72,773
KidsCare - REINSURANCE	162	30,495	0	0	0	0	0	0	0	0	0	0	30,657
TOTAL TITLE XXI	220,533	237,043	0	0	0	0	0	0	0	0	0	0	457,576
GRAND TOTAL	879,467,213	900,646,743	0	0	0	0	0	0	0	0	0	0	1,780,113,956

ACUTE CAPITATION - AMOUNTS

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1003	TANF 06-13 M & F WIT	113.17	113.17	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	226.34
1006	TANF 21-44 MALE WITH	91,470.48	100,935.93	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	192,406.41
1007	TANF 21-44 FEMALE WI	262,969.81	321,024.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	583,993.81
1008	TANF 45-64 M & F WIT	456,857.48	533,329.59	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	990,187.07
1009	TANF 65+ M & F WITH	130,859.20	158,119.22	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	288,978.42
100F	TANF 21-44 MALE WITH	3,124.94	3,371.26	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,496.20
100G	TANF 21-44 FEMALE WI	6,088.86	5,158.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	11,247.36
100H	TANF 44-64 M & F WIT	43,752.90	40,165.14	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	83,918.04
100J	TANF 65+ M & F WITH	30,736.25	17,071.36	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	47,807.61
1011	TANF <1 M & F NON-ME	7,317,911.15	7,330,064.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	14,647,975.15
1012	TANF 01-05 M & F NON	5,120,069.24	4,255,241.15	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,375,310.39
1013	TANF 06-13 M & F NON	8,517,151.93	7,122,208.02	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	15,639,359.95
1014	TANF 14-20 MALE NON-	2,727,086.79	2,467,883.88	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,194,970.67
1015	TANF 14-20 FEMALE N	5,165,143.02	4,749,211.72	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,914,354.74
1016	TANF 21-44 MALE NON-	5,413,848.55	5,881,009.18	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	11,294,857.73
1017	TANF 21-44 FEMALE N	26,519,446.98	27,563,602.69	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	54,083,049.67
1018	TANF 45-64 M & F NON	11,340,403.80	12,200,886.15	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	23,541,289.95
1019	TANF 65+ M & F NON-M	50,940.78	55,345.09	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	106,285.87
101A	TANF < 1 M & F NON-M	1,483,647.90	1,229,135.61	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,712,783.51
101B	TANF 01-05 M & F NON	18,930.19	10,452.99	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	29,383.18
101C	TANF 06-13 M & F NON	13,827.52	10,991.93	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	24,819.45
101D	TANF 14-20 MALE NON-	30,653.81	23,910.41	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	54,564.22
101E	TANF 14-20 FEMALE N	56,482.84	48,295.58	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	104,778.42
101F	TANF 21-44 MALE NON-	441,372.83	443,539.24	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	884,912.07
101G	TANF 21-44 FEMALE N	967,547.84	939,350.71	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,906,898.55
101H	TANF 44-64 M & F NON	673,153.96	695,670.20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,368,824.16
101J	TANF 65+ N & F NON-M	13,593.90	8,104.86	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	21,698.76
1026	TANF 21-44 MALE WITH	39,781.26	52,613.13	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	92,394.39
1027	TANF 21-44 FEMALE WI	112,487.20	155,750.38	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	268,237.58
1028	TANF 45-64 M & F WIT	142,957.26	219,266.01	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	362,223.27
1029	TANF 65+ M & F WITH	53,811.16	84,861.43	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	138,672.59
102F	TANF 21-44 MALE WITH	0.00	349.97	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	349.97
102G	TANF 21-44 FEMALE WI	894.71	245.67	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,140.38
102H	TANF 44-64 M & F WIT	814.72	5,425.27	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,239.99
102J	TANF 65+ M & F WITH	958.54	944.87	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,903.41
2100	SSI AGED WITH MEDIC	646,891.69	640,426.15	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,287,317.84

ACUTE CAPITATION - AMOUNTS

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
210Z	SSI AGED WITH MEDIC A	42,792.60	35,137.07	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	77,929.67
2110	SSI AGED NON-MEDIC AP	4,841,984.49	4,755,477.85	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,597,462.34
211Z	SSI AGED NON-MEDIC AP	168,114.98	120,300.70	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	288,415.68
2120	SSI AGED WITH QMB	2,773,140.25	2,801,949.97	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,575,090.22
212Z	SSI AGED WITH QMB P P	5,569.66	5,916.01	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	11,485.67
2200	SSI DISABLED WITH M F	1,438,779.65	1,356,642.89	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,795,422.54
220Z	SSI DISABLED WITH M F	21,320.23	23,148.40	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	44,468.63
2210	SSI DISABLED NON-ME D	55,077,622.81	54,829,218.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	109,906,840.81
221Z	SSI DISABLED NON-ME D	491,291.42	492,991.62	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	984,283.04
2220	SSI DISABLED WITH Q M	10,386,804.88	10,418,005.20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	20,804,810.08
222Z	SSI DISABLED WITH Q M	5,921.17	7,380.90	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	13,302.07
2300	SSI BLIND WITH MEDIC	4,363.55	4,060.83	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8,424.38
230Z	SSI BLIND WITH MEDIC	448.85	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	448.85
2310	SSI BLIND NON-MEDIC A	353,568.15	356,359.13	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	709,927.28
231Z	SSI BLIND NON-MEDIC A	3,440.09	12,852.23	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	16,292.32
2320	SSI BLIND WITH QMB	44,041.31	43,688.31	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	87,729.62
4302	SOBRA CHILD 01-05 M	541.57	1,125.47	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,667.04
4303	SOBRA CHILD 06-13 M	227.07	227.07	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	454.14
4304	SOBRA CHILD 14-20 MA	162.24	162.24	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	324.48
4305	SOBRA CHILD 14-20 FE	789.59	840.59	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,630.18
430B	SOBRA CHILD 01-05 M	49.61	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	49.61
430D	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
430E	SOBRA CHILD 14-20 FE	0.00	120.83	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	120.83
4311	SOBRA CHILD <1 M & F	19,081,996.88	19,048,366.58	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	38,130,363.46
4312	SOBRA CHILD 01-05 M	19,072,224.87	20,064,623.31	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	39,136,848.18
4313	SOBRA CHILD 06-13 M	25,452,339.99	27,401,384.87	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	52,853,724.86
4314	SOBRA CHILD 14-20 MA	8,607,044.24	8,948,118.85	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	17,555,163.09
4315	SOBRA CHILD 14-20 FE	13,024,273.87	13,595,781.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	26,620,054.87
431A	SOBRA CHILD < 1 M &	1,266,381.59	1,304,281.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,570,663.19
431B	SOBRA CHILD 01-05 M	494,252.81	475,898.40	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	970,151.21
431C	SOBRA CHILD 6-13 M & F	634,059.19	670,453.45	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,304,512.64
431D	SOBRA CHILD 14-20 MA	467,748.21	431,434.92	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	899,183.13
431E	SOBRA CHILD 14-20 FE	506,841.24	521,342.83	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,028,184.07
4322	SOBRA CHILD 01-05 M	329.97	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	329.97
4323	SOBRA CHILD 06-13 M	755.82	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	755.82
4324	SOBRA CHILD 14-20 MA	623.74	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	623.74

ACUTE CAPITATION - AMOUNTS

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
4325	SOBRA CHILD 14-20 FE	490.95	259.91	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	750.86
5007	SOBRA PREG 21-44 FE	28,646.09	29,529.54	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	58,175.63
5008	SOBRA PREG 45-64 FE	856.00	405.55	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,261.55
500G	SOBRA PREG 21-44 FE	667.73	637.69	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,305.42
5013	SOBRA PREG 09-13 FE	791.84	960.27	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,752.11
5015	SOBRA PREG 14-20 FE	1,153,204.41	1,243,589.20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,396,793.61
5017	SOBRA PREG 21-44 FE	4,969,763.44	5,543,577.71	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	10,513,341.15
5018	SOBRA PREG 45-64 FE	29,226.73	32,189.69	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	61,416.42
501C	SOBRA PREG 09-13 FE	0.00	98.71	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	98.71
501E	SOBRA PREG 14-20 FE	77,023.42	77,726.43	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	154,749.85
501G	SOBRA PREG 21-44 FE	331,612.75	308,457.61	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	640,070.36
501H	SOBRA PREG 45-64 FE	3,630.96	10,740.73	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	14,371.69
5027	SOBRA PREG 21-44 FE	2,329.77	2,829.66	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,159.43
5028	SOBRA PREG 45-64 FE	0.00	2,426.39	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,426.39
502G	SOBRA PREG 21-44 FE	218.29	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	218.29
5510	SOBRA FPS FEMALE W IT	-12.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-12.50
SUBTOTAL:		248,764,079.13	252,354,794.67	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	501,118,873.80
9910	TANF & SOBRA CHILDR E	3,483,562.65	3,047,996.25	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,531,558.90
9920	SSI W/MEDICARE KICK	66,760.99	67,334.84	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	134,095.83
9921	SSI W/O MEDICARE KI	253,912.66	175,567.47	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	429,480.13
9950	S.O.B.R.A. KICK PAYM	12,465,299.69	13,765,854.41	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	26,231,154.10
SUBTOTAL:		16,269,535.99	17,056,752.97	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	33,326,288.96
3100	TRANSPLANT OPTION	70.26	89.42	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	159.68
310Z	TRANSPLANT OPTION	94.74	75.58	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	170.32
SUBTOTAL:		165.00	165.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	330.00
1106	TANF EXPANDED 21-44	167,462.38	144,030.22	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	311,492.60
1107	TANF EXPANDED 21-44	599,045.66	537,386.92	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,136,432.58
1108	TANF EXPANDED 45-64	1,023,600.25	911,053.14	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,934,653.39
1109	TANF EXPANDED 65+	274,415.40	245,636.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	520,051.40
110F	TANF EXPANDED 21-44	3,682.62	630.49	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,313.11
110G	TANF EXPANDED 21-44	520.84	324.33	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	845.17
110H	TANF EXPANDED 45-64	161.40	385.93	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	547.33
110J	TANF EXPANDED 65+	0.00	1,210.32	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,210.32
1111	TANF EXPANDED <1 M FC	6,325.21	4,355.65	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	10,680.86
1112	TANF EXPANDED 01-05	48,437.22	37,053.66	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	85,490.88

ACUTE CAPITATION - AMOUNTS

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1113	TANF EXPANDED 06-13	155,432.39	123,651.13	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	279,083.52
1114	TANF EXPANDED 14-20	114,898.22	90,180.24	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	205,078.46
1115	TANF EXPANDED 14-20	375,463.35	278,983.53	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	654,446.88
1116	TANF EXPANDED 21-44	3,292,450.62	2,886,484.77	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,178,935.39
1117	TANF EXPANDED 21-44	11,884,383.87	10,291,379.14	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	22,175,763.01
1118	TANF EXPANDED 45-64	7,186,338.24	6,353,222.09	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	13,539,560.33
1119	TANF EXPANDED 65+	38,116.96	34,638.80	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	72,755.76
111B	TANF EXPANDED 01-05	0.00	51.33	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	51.33
111C	TANF EXPANDED 06-13	60.93	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	60.93
111D	TANF EXPANDED 14-20	91.04	817.44	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	908.48
111E	TANF EXPANDED 14-20	1,428.69	1,919.48	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,348.17
111F	TANF EXPANDED 21-44	16,857.80	16,840.28	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	33,698.08
111G	TANF EXPANDED 21-44	38,462.54	45,149.24	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	83,611.78
111H	TANF EXPANDED 45-64	12,792.72	53,531.20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	66,323.92
111J	TANF EXPANDED 65+	10,074.33	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	10,074.33
1125	TANF EXPANDED 14-20	259.91	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	259.91
1126	TANF EXPANDED 21-44	77,277.63	71,347.76	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	148,625.39
1127	TANF EXPANDED 21-44	214,717.61	193,927.68	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	408,645.29
1128	TANF EXPANDED 45-64	242,994.86	222,897.30	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	465,892.16
1129	TANF EXPANDED 65+	89,535.41	77,417.22	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	166,952.63
112G	TANF EXPANDED 21-44	0.00	681.07	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	681.07
112H	TANF EXPANDED 45-64	10.59	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	10.59
2400	SSI AGED EXPANDED N/I	90,318.38	78,003.38	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	168,321.76
240Z	SSI AGED EXPANDED N/I	28,495.79	37,821.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	66,317.39
2410	SSI AGED EXPANDED N/O	929,746.50	864,149.68	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,793,896.18
241Z	SSI AGED EXPANDED N/O	7,401.77	16,962.83	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	24,364.60
2420	SSI AGED EXPANDED N/I	5,235,551.09	5,187,661.49	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	10,423,212.58
242Z	SSI AGED EXPANDED N/I	7,997.68	5,766.54	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	13,764.22
2510	SSI BLIND EXPANDED N/I	1,458.65	1,458.65	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,917.30
2520	SSI BLIND EXPANDED N/I	124.99	124.99	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	249.98
2600	SSI DISABLED EXPAND F	159,975.75	157,902.91	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	317,878.66
260Z	SSI DISABLED EXPAND F	17,956.66	21,077.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	39,034.16
2610	SSI DISABLED EXPAND F	2,642,788.10	2,565,161.03	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,207,949.13
261Z	SSI DISABLED EXPAND F	33,355.68	32,438.70	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	65,794.38
2620	SSI DISABLED EXPAND F	7,540,307.86	7,645,491.81	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	15,185,799.67
262Z	SSI DISABLED EXPAND F	6,428.48	5,511.39	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	11,939.87

ACUTE CAPITATION - AMOUNTS

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
SUBTOTAL:		42,577,206.07	39,244,718.86	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	81,821,924.93
9911	SB PAYMENT FOR TAN F	638,069.14	744,028.48	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,382,097.62
9922	SB PAYMENT FOR SSI F	12,450.73	18,552.72	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	31,003.45
9923	SB PAYMENT FOR SSI F	5,743.01	5,963.77	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	11,706.78
SUBTOTAL:		656,262.88	768,544.97	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,424,807.85
3614	AHC CARE/MI MALE 14-	0.00	1,436.95	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,436.95
SUBTOTAL:		0.00	1,436.95	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,436.95
3506	ADULT 40-100% MALE 2	8,422.52	3,645.97	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12,068.49
3507	ADULT 40-100% FEMAL F	14,179.59	8,854.37	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	23,033.96
3508	ADULT 40-100% M&F 45	36,321.61	26,956.15	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	63,277.76
3509	ADULT 40-100% M&F 65	22,353.25	22,570.84	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	44,924.09
350F	ADULT 40-100% MALE 2	3,964.50	465.31	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,429.81
350H	ADULT 40-100% M&F 45	6,365.04	6,197.78	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12,562.82
350J	ADULT 40-100% M&F 65	7,372.56	5,207.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12,579.56
3514	ADULT 40-100% MALE 1	1,324,584.01	1,440,655.36	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,765,239.37
3515	ADULT 40-100% FEMAL F	1,633,845.08	1,727,407.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,361,252.18
3516	ADULT 40-100% MALE 2	7,573,355.50	7,578,276.66	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	15,151,632.16
3517	ADULT 40-100% FEMAL F	6,410,679.09	6,346,041.90	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12,756,720.99
3518	ADULT 40-100% M&F 45	15,191,483.66	15,250,141.05	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	30,441,624.71
3519	ADULT 40-100% M&F 65	16,506.64	15,041.42	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	31,548.06
351D	ADULT 40-100% MALE 4	148,997.70	115,709.11	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	264,706.81
351E	ADULT 40-100% FEMAL F	144,852.52	143,422.42	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	288,274.94
351F	ADULT 40-100% MALE 2	646,088.27	613,079.90	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,259,168.17
351G	ADULT 40-100% FEMAL F	458,558.32	429,699.96	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	888,258.28
351H	ADULT 40-100% M&F 45	1,204,084.30	1,016,417.29	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,220,501.59
351J	ADULT 40-100% M&F 65	27,457.81	15,740.35	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	43,198.16
3525	ADULT 40-100% FEMAL F	351.97	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	351.97
3526	ADULT 40-100% MALE 2	1,168.26	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,168.26
3527	ADULT 40-100% FEMAL F	668.80	1,504.94	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,173.74
3528	ADULT 40-100% M&F 45	10,626.75	7,689.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	18,316.25
3529	ADULT 40-100% M&F 65	2,416.71	4,002.70	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,419.41
352G	ADULT 40-100% FEMAL F	0.00	531.77	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	531.77
352H	ADULT 40-100% M&F 45	16.98	1,224.13	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,241.11
3706	ADULT <40% EXP MAL F	34,143.30	26,154.77	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	60,298.07
3707	ADULT <40% EXP FEM A1	12,691.88	18,567.70	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	31,259.58

ACUTE CAPITATION - AMOUNTS

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
3708	ADULT <40% EXP M&F 4	47,370.84	58,639.06	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	106,009.90
3709	ADULT <40% EXP M&F 6	8,255.13	8,986.58	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	17,241.71
370F	ADULT <40% EXP MAL E	3,590.13	5,678.35	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,268.48
370G	ADULT <40% EXP FEM AI	824.34	1,262.96	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,087.30
370H	ADULT <40% EXP M&F 4	8,737.58	10,393.47	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	19,131.05
3714	ADULT <40% EXP MAL F	4,383,132.32	4,528,025.34	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8,911,157.66
3715	ADULT <40% EXP FEM AI	3,752,637.27	3,863,233.89	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,615,871.16
3716	ADULT <40% EXP MAL F	27,106,086.04	27,395,881.26	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	54,501,967.30
3717	ADULT <40% EXP FEM AI	16,530,344.45	16,579,394.61	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	33,109,739.06
3718	ADULT <40% EXP M&F 4	33,539,387.24	33,762,918.80	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	67,302,306.04
3719	ADULT <40% EXP M&F 6	36,205.17	36,567.62	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	72,772.79
371D	ADULT <40% EXP MAL F	392,849.93	382,830.27	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	775,680.20
371E	ADULT <40% EXP FEM AI	356,021.60	295,087.13	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	651,108.73
371F	ADULT <40% EXP MAL F	2,852,336.09	2,763,526.13	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,615,862.22
371G	ADULT <40% EXP FEM AI	1,605,524.56	1,472,687.76	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,078,212.32
371H	ADULT <40% EXP M&F 4	2,523,268.04	2,262,250.08	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,785,518.12
371J	ADULT <40% EXP M&F 6	2,019.24	1,369.87	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,389.11
3724	ADULT <40% EXP MAL F	480.74	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	480.74
3726	ADULT <40% EXP MAL E	3,936.06	7,430.66	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	11,366.72
3727	ADULT <40% EXP FEM AI	4,778.02	3,573.32	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8,351.34
3728	ADULT <40% EXP M&F 4	17,960.52	5,138.97	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	23,099.49
3729	ADULT <40% EXP M&F 6	1,616.38	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,616.38
372F	ADULT <40% EXP MAL F	0.00	711.09	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	711.09
372G	ADULT <40% EXP FEM AI	598.25	1,319.88	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,918.13
372H	ADULT <40% EXP M&F 4	470.36	1,351.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,821.96
SUBTOTAL:		128,119,986.92	128,273,464.15	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	256,393,451.07
9935	BIRTH SUPP PAYMENT A	176,469.55	272,778.55	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	449,248.10
9937	BIRTH SUPP PAYMENT A	447,342.88	597,836.74	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,045,179.62
SUBTOTAL:		623,812.43	870,615.29	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,494,427.72
3904	NEWLY ELIGIBLE MALE	0.00	55.96	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	55.96
3906	NEWLY ELIGIBLE MALE	2,243.33	4,164.05	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,407.38
3907	NEWLY ELIGIBLE FEMA	11,101.01	5,502.90	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	16,603.91
3908	NEWLY ELIGIBLE M&F 4	30,815.43	20,891.02	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	51,706.45
3909	NEWLY ELIGIBLE M&F 6	3,752.37	6,340.48	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	10,092.85
390D	NEWLY ELIGIBLE MALE	0.00	318.47	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	318.47

ACUTE CAPITATION - AMOUNTS

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
390F	NEWLY ELIGIBLE MALE	154.29	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	154.29
390G	NEWLY ELIGIBLE FEMA	558.35	584.83	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,143.18
390H	NEWLY ELIGIBLE M&F	20,702.19	14,075.84	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	34,778.03
390J	NEWLY ELIGIBLE M&F	3,743.08	5,233.41	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8,976.49
3914	NEWLY ELIGIBLE MALE	520,790.75	542,267.89	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,063,058.64
3915	NEWLY ELIGIBLE FEMA	601,783.26	669,009.91	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,270,793.17
3916	NEWLY ELIGIBLE MALE	5,010,046.71	5,234,991.72	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	10,245,038.43
3917	NEWLY ELIGIBLE FEMA	6,457,501.35	6,891,154.05	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	13,348,655.40
3918	NEWLY ELIGIBLE M&F	7,992,989.32	8,091,976.44	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	16,084,965.76
3919	NEWLY ELIGIBLE M&F	13,274.71	12,857.15	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	26,131.86
391D	NEWLY ELIGIBLE MALE	48,199.73	37,609.47	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	85,809.20
391E	NEWLY ELIGIBLE FEMA	52,151.67	50,095.35	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	102,247.02
391F	NEWLY ELIGIBLE MALE	503,095.65	399,419.06	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	902,514.71
391G	NEWLY ELIGIBLE FEMA	575,662.05	557,633.73	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,133,295.78
391H	NEWLY ELIGIBLE M&F	598,828.85	481,913.67	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,080,742.52
391J	NEWLY ELIGIBLE M&F	3,178.08	11,525.06	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	14,703.14
3926	NEWLY ELIGIBLE MALE	282.13	198.55	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	480.68
3927	NEWLY ELIGIBLE FEMA	0.00	3,064.18	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,064.18
3928	NEWLY ELIGIBLE M&F	1,925.68	968.19	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,893.87
3929	NEWLY ELIGIBLE M&F	598.20	308.72	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	906.92
392F	NEWLY ELIGIBLE MALE	0.00	81.24	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	81.24
392H	NEWLY ELIGIBLE M&F	782.69	451.48	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,234.17
392J	NEWLY ELIGIBLE M&F	0.00	11.02	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	11.02
SUBTOTAL:		22,454,160.88	23,042,703.84	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	45,496,864.72
9939	BIRTH SUPP PAYMENT	236,215.30	208,587.25	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	444,802.55
SUBTOTAL:		236,215.30	208,587.25	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	444,802.55
4412	SOBRA 100-133% M&F	227.07	113.90	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	340.97
4413	SOBRA 100-133% M&F	2,472,060.61	2,222,646.29	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,694,706.90
4414	SOBRA 100-133% MALE	1,124,482.78	1,019,075.04	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,143,557.82
4415	SOBRA 100-133% FEM	1,627,175.04	1,485,905.55	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,113,080.59
441C	SOBRA 100-133% M&F	16,933.27	18,946.08	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	35,879.35
441D	SOBRA 100-133% MALE	21,389.49	17,226.07	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	38,615.56
441E	SOBRA 100-133% FEM	15,755.99	20,553.56	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	36,309.55
SUBTOTAL:		5,278,024.25	4,784,466.49	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	10,062,490.74
9944	BIRTH SUPP PAYMENT	48,525.79	80,265.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	128,790.89

ACUTE CAPITATION - AMOUNTS

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
SUBTOTAL:		48,525.79	80,265.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	128,790.89
4517	BC PATIENT FEMALE 2 1	6,031.34	6,350.82	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12,382.16
4518	BC PATIENT FEMALE 4 5	112,672.67	110,350.85	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	223,023.52
4519	BC PATIENT FEMALE 6 5	273.27	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	273.27
451G	BC PATIENT FEMALE 2 1	0.00	718.61	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	718.61
451H	BC PATIENT FEMALE 4 5	3,437.97	2,627.92	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,065.89
4617	CC PATIENT FEMALE 2 1	6,156.87	6,362.76	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12,519.63
4618	CC PATIENT FEMALE 4 5	7,757.51	7,379.70	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	15,137.21
461G	CC PATIENT FEMALE 2 1	0.00	323.65	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	323.65
SUBTOTAL:		136,329.63	134,114.31	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	270,443.94
8600	SSI BLIND FREEDOM/W O	119.15	119.15	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	238.30
8700	SSI DISABLED FREEDO M	1,387,627.33	1,409,227.99	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,796,855.32
870Z	SSI DISABLED FREEDO M	14,851.04	13,861.37	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	28,712.41
8710	SSI DISABLED FREEDO M	257,066.42	281,571.85	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	538,638.27
871Z	SSI DISABLED FREEDO M	43,575.80	38,994.92	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	82,570.72
8720	SSI DISABLED FREEDO M	165,188.17	161,572.52	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	326,760.69
872Z	SSI DISABLED FREEDO M	1,871.66	508.27	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,379.93
SUBTOTAL:		1,870,299.57	1,905,856.07	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,776,155.64
TOTAL:		467,034,603.84	468,726,485.92	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	935,761,089.76

ACUTE CAPITATION - MEMBER MONTHS

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1003	TANF 06-13 M & F WIT	1.00	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2.00
1006	TANF 21-44 MALE WITH	297.30	350.67	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	647.97
1007	TANF 21-44 FEMALE WI	579.79	671.41	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,251.20
1008	TANF 45-64 M & F WIT	870.42	1,013.58	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,884.00
1009	TANF 65+ M & F WITH	306.00	373.68	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	679.68
100F	TANF 21-44 MALE WITH	18.22	19.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	37.82
100G	TANF 21-44 FEMALE WI	29.70	24.31	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	54.01
100H	TANF 44-64 M & F WIT	97.51	98.86	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	196.37
100J	TANF 65+ M & F WITH	73.60	39.19	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	112.79
1011	TANF <1 M & F NON-ME	14,502.91	14,510.24	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	29,013.15
1012	TANF 01-05 M & F NON	41,759.21	34,503.32	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	76,262.53
1013	TANF 06-13 M & F NON	68,866.70	57,435.45	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	126,302.15
1014	TANF 14-20 MALE NON-	15,523.91	13,919.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	29,442.91
1015	TANF 14-20 FEMALE N	19,492.05	17,891.08	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	37,383.13
1016	TANF 21-44 MALE NON-	32,422.89	35,110.56	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	67,533.45
1017	TANF 21-44 FEMALE N	100,171.76	104,138.61	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	204,310.37
1018	TANF 45-64 M & F NON	26,326.13	28,376.39	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	54,702.52
1019	TANF 65+ M & F NON-M	122.25	133.13	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	255.38
101A	TANF < 1 M & F NON-M	1,323.68	1,107.58	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,431.26
101B	TANF 01-05 M & F NON	323.00	173.98	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	496.98
101C	TANF 06-13 M & F NON	235.43	179.19	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	414.62
101D	TANF 14-20 MALE NON-	182.94	145.97	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	328.91
101E	TANF 14-20 FEMALE N	278.91	237.91	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	516.82
101F	TANF 21-44 MALE NON-	2,653.94	2,660.54	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,314.48
101G	TANF 21-44 FEMALE N	4,819.02	4,659.58	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,478.60
101H	TANF 44-64 M & F NON	1,604.09	1,643.02	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,247.11
101J	TANF 65+ N & F NON-M	31.66	19.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	51.16
1026	TANF 21-44 MALE WITH	136.90	188.45	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	325.35
1027	TANF 21-44 FEMALE WI	222.81	306.53	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	529.34
1028	TANF 45-64 M & F WIT	257.30	401.73	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	659.03
1029	TANF 65+ M & F WITH	125.59	199.79	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	325.38
102F	TANF 21-44 MALE WITH	0.00	2.12	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2.12
102G	TANF 21-44 FEMALE WI	4.49	1.22	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5.71
102H	TANF 44-64 M & F WIT	1.88	12.13	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	14.01
102J	TANF 65+ M & F WITH	2.37	2.17	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4.54
2100	SSI AGED WITH MEDIC	3,945.61	3,902.67	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,848.28

ACUTE CAPITATION - MEMBER MONTHS

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
210Z	SSI AGED WITH MEDIC A	450.53	377.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	828.13
2110	SSI AGED NON-MEDIC AP	5,996.37	5,885.71	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	11,882.08
211Z	SSI AGED NON-MEDIC AP	323.02	229.89	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	552.91
2120	SSI AGED WITH QMB	16,192.79	16,392.49	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	32,585.28
212Z	SSI AGED WITH QMB P	60.27	61.77	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	122.04
2200	SSI DISABLED WITH M	3,600.36	3,525.64	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,126.00
220Z	SSI DISABLED WITH M	236.76	251.22	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	487.98
2210	SSI DISABLED NON-ME D	57,143.85	56,902.31	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	114,046.16
221Z	SSI DISABLED NON-ME D	983.56	949.62	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,933.18
2220	SSI DISABLED WITH Q M	24,588.70	24,755.94	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	49,344.64
222Z	SSI DISABLED WITH Q M	62.38	77.46	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	139.84
2300	SSI BLIND WITH MEDIC	28.24	25.87	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	54.11
230Z	SSI BLIND WITH MEDIC	4.45	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4.45
2310	SSI BLIND NON-MEDIC A	428.12	430.04	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	858.16
231Z	SSI BLIND NON-MEDIC A	8.02	26.80	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	34.82
2320	SSI BLIND WITH QMB	207.48	205.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	412.58
4302	SOBRA CHILD 01-05 M	5.00	3.99	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8.99
4303	SOBRA CHILD 06-13 M	2.00	2.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4.00
4304	SOBRA CHILD 14-20 MA	1.00	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2.00
4305	SOBRA CHILD 14-20 FE	1.00	1.19	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2.19
430B	SOBRA CHILD 01-05 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
430D	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
430E	SOBRA CHILD 14-20 FE	0.00	0.61	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.61
4311	SOBRA CHILD <1 M & F	37,929.50	37,878.33	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	75,807.83
4312	SOBRA CHILD 01-05 M	150,215.05	158,567.13	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	308,782.18
4313	SOBRA CHILD 06-13 M	200,525.14	216,198.75	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	416,723.89
4314	SOBRA CHILD 14-20 MA	49,529.14	51,683.40	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	101,212.54
4315	SOBRA CHILD 14-20 FE	49,621.28	51,750.56	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	101,371.84
431A	SOBRA CHILD < 1 M &	1,144.43	1,199.85	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,344.28
431B	SOBRA CHILD 01-05 M	7,397.32	7,233.01	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	14,630.33
431C	SOBRA CHILD 6-13 M&	9,664.24	10,386.87	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	20,051.11
431D	SOBRA CHILD 14-20 MA	2,729.60	2,547.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,276.60
431E	SOBRA CHILD 14-20 FE	2,479.42	2,548.58	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,028.00
4322	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
4323	SOBRA CHILD 06-13 M	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
4324	SOBRA CHILD 14-20 MA	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

ACUTE CAPITATION - MEMBER MONTHS

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
4325	SOBRA CHILD 14-20 FE	2.00	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3.00
5007	SOBRA PREG 21-44 FE	44.60	44.25	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	88.85
5008	SOBRA PREG 45-64 FE	2.00	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3.00
500G	SOBRA PREG 21-44 FE	3.37	3.12	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6.49
5013	SOBRA PREG 09-13 FE	6.00	7.38	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	13.38
5015	SOBRA PREG 14-20 FE	4,442.88	4,822.40	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,265.28
5017	SOBRA PREG 21-44 FE	19,288.96	21,436.17	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	40,725.13
5018	SOBRA PREG 45-64 FE	70.02	76.99	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	147.01
501C	SOBRA PREG 09-13 FE	0.00	1.61	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.61
501E	SOBRA PREG 14-20 FE	380.96	386.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	767.46
501G	SOBRA PREG 21-44 FE	1,656.15	1,536.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,192.65
501H	SOBRA PREG 45-64 FE	7.91	23.95	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	31.86
5027	SOBRA PREG 21-44 FE	9.11	11.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	20.11
5028	SOBRA PREG 45-64 FE	0.00	1.00	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	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
5510	SOBRA FPS FEMALE W IT	-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:		985,098.82	1,002,906.76	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,988,005.58
9910	TANF & SOBRA CHILDR E	571.00	500.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,071.00
9920	SSI W/MEDICARE KICK	11.00	11.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	22.00
9921	SSI W/O MEDICARE KI	42.00	29.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	71.00
9950	S.O.B.R.A. KICK PAYM	2,053.00	2,266.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,319.00
SUBTOTAL:		2,677.00	2,806.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,483.00
3100	TRANSPLANT OPTION	4.24	5.41	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9.65
310Z	TRANSPLANT OPTION	5.74	4.58	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	10.32
SUBTOTAL:		9.98	9.99	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	19.97
1106	TANF EXPANDED 21-44	537.81	462.89	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,000.70
1107	TANF EXPANDED 21-44	1,129.92	997.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,127.42
1108	TANF EXPANDED 45-64	1,914.12	1,697.63	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,611.75
1109	TANF EXPANDED 65+	634.27	568.85	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,203.12
110F	TANF EXPANDED 21-44	18.70	3.61	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	22.31
110G	TANF EXPANDED 21-44	2.64	1.64	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4.28
110H	TANF EXPANDED 45-64	0.86	0.82	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.68
110J	TANF EXPANDED 65+	0.00	2.64	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2.64
1111	TANF EXPANDED <1 M 8 F	12.00	8.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	20.00
1112	TANF EXPANDED 01-05	390.00	311.16	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	701.16

ACUTE CAPITATION - MEMBER MONTHS

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1113	TANF EXPANDED 06-13	1,229.70	991.16	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,220.86
1114	TANF EXPANDED 14-20	683.08	531.13	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,214.21
1115	TANF EXPANDED 14-20	1,447.98	1,085.47	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,533.45
1116	TANF EXPANDED 21-44	20,507.88	17,866.93	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	38,374.81
1117	TANF EXPANDED 21-44	46,392.97	40,134.22	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	86,527.19
1118	TANF EXPANDED 45-64	16,838.19	14,850.87	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	31,689.06
1119	TANF EXPANDED 65+ MS	91.37	83.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	174.37
111B	TANF EXPANDED 01-05	0.00	0.83	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.83
111C	TANF EXPANDED 06-13	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
111D	TANF EXPANDED 14-20	0.54	5.28	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5.82
111E	TANF EXPANDED 14-20	7.24	9.73	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	16.97
111F	TANF EXPANDED 21-44	101.48	104.36	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	205.84
111G	TANF EXPANDED 21-44	197.09	224.68	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	421.77
111H	TANF EXPANDED 45-64	28.12	127.83	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	155.95
111J	TANF EXPANDED 65+ MS	22.31	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	22.31
1125	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
1126	TANF EXPANDED 21-44	172.31	149.33	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	321.64
1127	TANF EXPANDED 21-44	382.43	351.28	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	733.71
1128	TANF EXPANDED 45-64	446.94	399.71	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	846.65
1129	TANF EXPANDED 65+ MS	194.69	165.94	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	360.63
112G	TANF EXPANDED 21-44	0.00	3.44	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3.44
112H	TANF EXPANDED 45-64	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
2400	SSI AGED EXPANDED W/I	518.42	487.04	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,005.46
240Z	SSI AGED EXPANDED W/I	304.76	401.03	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	705.79
2410	SSI AGED EXPANDED N/O	1,134.27	1,056.52	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,190.79
241Z	SSI AGED EXPANDED N/O	13.94	39.82	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	53.76
2420	SSI AGED EXPANDED W/I	26,853.34	26,842.37	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	53,695.71
242Z	SSI AGED EXPANDED W/I	86.51	60.16	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	146.67
2510	SSI BLIND EXPANDED N	2.00	2.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4.00
2520	SSI BLIND EXPANDED W/I	1.00	1.00	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 F	387.35	391.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	778.45
260Z	SSI DISABLED EXPAND F	198.57	225.21	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	423.78
2610	SSI DISABLED EXPAND F	2,800.72	2,719.35	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,520.07
261Z	SSI DISABLED EXPAND F	66.87	64.13	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	131.00
2620	SSI DISABLED EXPAND F	15,882.49	16,101.98	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	31,984.47
262Z	SSI DISABLED EXPAND F	70.33	62.70	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	133.03

ACUTE CAPITATION - MEMBER MONTHS

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
SUBTOTAL:		141,707.24	129,594.34	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	271,301.58
9911	SB PAYMENT FOR TAN F	105.00	122.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	227.00
9922	SB PAYMENT FOR SSI F	2.00	3.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5.00
9923	SB PAYMENT FOR SSI F	1.00	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2.00
SUBTOTAL:		108.00	126.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	234.00
3614	AHC CARE/MI MALE 14-	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
3506	ADULT 40-100% MALE 2	15.63	8.90	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	24.53
3507	ADULT 40-100% FEMAL F	14.06	5.76	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	19.82
3508	ADULT 40-100% M&F 45	67.69	54.87	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	122.56
3509	ADULT 40-100% M&F 65	55.05	55.40	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	110.45
350F	ADULT 40-100% MALE 2	6.92	0.67	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7.59
350H	ADULT 40-100% M&F 45	8.97	10.81	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	19.78
350J	ADULT 40-100% M&F 65	10.92	7.57	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	18.49
3514	ADULT 40-100% MALE 1	3,038.92	3,290.06	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,328.98
3515	ADULT 40-100% FEMAL F	3,734.50	3,945.56	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,680.06
3516	ADULT 40-100% MALE 2	17,324.13	17,315.90	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	34,640.03
3517	ADULT 40-100% FEMAL F	14,579.12	14,409.13	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	28,988.25
3518	ADULT 40-100% M&F 45	35,161.66	35,276.58	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	70,438.24
3519	ADULT 40-100% M&F 65	39.09	36.01	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	75.10
351D	ADULT 40-100% MALE 4	223.89	174.95	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	398.84
351E	ADULT 40-100% FEMAL F	215.10	215.28	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	430.38
351F	ADULT 40-100% MALE 2	970.65	931.86	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,902.51
351G	ADULT 40-100% FEMAL F	687.03	645.80	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,332.83
351H	ADULT 40-100% M&F 45	1,789.29	1,532.58	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,321.87
351J	ADULT 40-100% M&F 65	40.88	22.67	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	63.55
3525	ADULT 40-100% FEMAL 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
3526	ADULT 40-100% MALE 2	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
3527	ADULT 40-100% FEMAL F	1.41	3.21	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4.62
3528	ADULT 40-100% M&F 45	20.96	15.68	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	36.64
3529	ADULT 40-100% M&F 65	6.00	10.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	16.00
352G	ADULT 40-100% FEMAL F	0.00	0.77	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.77
352H	ADULT 40-100% M&F 45	0.03	1.83	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.86
3706	ADULT <40% EXP MAL F	34.74	33.74	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	68.48
3707	ADULT <40% EXP FEM Δ1	7.49	15.61	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	23.10

ACUTE CAPITATION - MEMBER MONTHS

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
3708	ADULT <40% EXP M&F 4	88.23	98.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	186.83
3709	ADULT <40% EXP M&F 6	19.67	21.38	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	41.05
370F	ADULT <40% EXP MAL E	5.51	8.57	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	14.08
370G	ADULT <40% EXP FEM AI	1.54	1.81	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3.35
370H	ADULT <40% EXP M&F 4	14.58	15.74	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	30.32
3714	ADULT <40% EXP MAL F	9,839.70	10,160.23	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	19,999.93
3715	ADULT <40% EXP FEM AI	8,418.28	8,667.97	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	17,086.25
3716	ADULT <40% EXP MAL F	58,247.03	58,634.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	116,881.03
3717	ADULT <40% EXP FEM AI	34,827.18	34,929.63	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	69,756.81
3718	ADULT <40% EXP M&F 4	72,820.34	73,231.71	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	146,052.05
3719	ADULT <40% EXP M&F 6	80.88	80.74	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	161.62
371D	ADULT <40% EXP MAL F	580.76	572.41	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,153.17
371E	ADULT <40% EXP FEM AI	519.38	449.84	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	969.22
371F	ADULT <40% EXP MAL F	4,244.00	4,145.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8,389.00
371G	ADULT <40% EXP FEM AI	2,410.81	2,215.92	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,626.73
371H	ADULT <40% EXP M&F 4	3,754.97	3,389.75	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,144.72
371J	ADULT <40% EXP M&F 6	2.98	2.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4.98
3724	ADULT <40% EXP MAL 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
3726	ADULT <40% EXP MAL E	9.00	8.05	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	17.05
3727	ADULT <40% EXP FEM AI	6.12	3.96	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	10.08
3728	ADULT <40% EXP M&F 4	23.78	6.39	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	30.17
3729	ADULT <40% EXP M&F 6	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
372F	ADULT <40% EXP MAL F	0.00	0.86	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.86
372G	ADULT <40% EXP FEM AI	0.87	1.79	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2.66
372H	ADULT <40% EXP M&F 4	0.77	1.95	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2.72
SUBTOTAL:		273,979.51	274,669.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	548,649.01
9935	BIRTH SUPP PAYMENT A	29.00	45.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	74.00
9937	BIRTH SUPP PAYMENT A	74.00	98.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	172.00
SUBTOTAL:		103.00	143.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	246.00
3904	NEWLY ELIGIBLE MALE	0.00	0.16	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.16
3906	NEWLY ELIGIBLE MALE	6.92	5.18	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12.10
3907	NEWLY ELIGIBLE FEMA	14.99	10.72	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	25.71
3908	NEWLY ELIGIBLE M&F 4	71.56	53.47	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	125.03
3909	NEWLY ELIGIBLE M&F 6	12.19	19.97	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	32.16
390D	NEWLY ELIGIBLE MALE	0.00	0.83	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.83

ACUTE CAPITATION - MEMBER MONTHS

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
390F	NEWLY ELIGIBLE MALE	0.45	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.45
390G	NEWLY ELIGIBLE FEMA	1.83	2.06	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3.89
390H	NEWLY ELIGIBLE M&F	64.25	40.88	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	105.13
390J	NEWLY ELIGIBLE M&F	10.96	14.95	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	25.91
3914	NEWLY ELIGIBLE MALE	1,606.89	1,676.79	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,283.68
3915	NEWLY ELIGIBLE FEMA	1,867.46	2,072.53	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,939.99
3916	NEWLY ELIGIBLE MALE	15,590.65	16,339.89	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	31,930.54
3917	NEWLY ELIGIBLE FEMA	20,086.40	21,456.04	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	41,542.44
3918	NEWLY ELIGIBLE M&F	24,879.24	25,158.44	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	50,037.68
3919	NEWLY ELIGIBLE M&F	43.11	41.59	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	84.70
391D	NEWLY ELIGIBLE MALE	141.51	112.48	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	253.99
391E	NEWLY ELIGIBLE FEMA	153.51	153.08	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	306.59
391F	NEWLY ELIGIBLE MALE	1,523.12	1,206.66	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,729.78
391G	NEWLY ELIGIBLE FEMA	1,726.49	1,680.05	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,406.54
391H	NEWLY ELIGIBLE M&F	1,771.32	1,458.13	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,229.45
391J	NEWLY ELIGIBLE M&F	8.86	33.37	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	42.23
3926	NEWLY ELIGIBLE MALE	1.00	0.70	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.70
3927	NEWLY ELIGIBLE FEMA	0.00	3.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3.00
3928	NEWLY ELIGIBLE M&F	6.22	3.11	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9.33
3929	NEWLY ELIGIBLE M&F	2.00	0.96	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2.96
392F	NEWLY ELIGIBLE MALE	0.00	0.29	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.29
392H	NEWLY ELIGIBLE M&F	2.40	1.28	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3.68
392J	NEWLY ELIGIBLE M&F	0.00	0.03	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.03
SUBTOTAL:		69,593.33	71,546.64	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	141,139.97
9939	BIRTH SUPP PAYMENT	39.00	34.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	73.00
SUBTOTAL:		39.00	34.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	73.00
4412	SOBRA 100-133% M&F	2.00	1.00	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	20,103.69	18,080.37	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	38,184.06
4414	SOBRA 100-133% MALE	6,535.04	5,919.99	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12,455.03
4415	SOBRA 100-133% FEM	6,240.09	5,678.68	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	11,918.77
441C	SOBRA 100-133% M&F	288.14	323.40	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	611.54
441D	SOBRA 100-133% MALE	126.41	106.24	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	232.65
441E	SOBRA 100-133% FEM	81.96	103.18	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	185.14
SUBTOTAL:		33,377.33	30,212.86	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	63,590.19
9944	BIRTH SUPP PAYMENT	8.00	13.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	21.00

ACUTE CAPITATION - MEMBER MONTHS

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
SUBTOTAL:		8.00	13.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	21.00
4517	BC PATIENT FEMALE 2 1	23.96	25.35	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	49.31
4518	BC PATIENT FEMALE 4 5	251.91	246.16	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	498.07
4519	BC PATIENT FEMALE 6 5	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
451G	BC PATIENT FEMALE 2 1	0.00	3.64	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3.64
451H	BC PATIENT FEMALE 4 5	10.28	5.89	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	16.17
4617	CC PATIENT FEMALE 2 1	15.86	16.54	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	32.40
4618	CC PATIENT FEMALE 4 5	18.00	17.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	35.00
461G	CC PATIENT FEMALE 2 1	0.00	1.45	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.45
SUBTOTAL:		320.78	316.03	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	636.81
8600	SSI BLIND FREEDOM/W O	1.00	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2.00
8700	SSI DISABLED FREEDO M	1,505.00	1,555.45	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,060.45
870Z	SSI DISABLED FREEDO M	161.37	146.05	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	307.42
8710	SSI DISABLED FREEDO M	246.99	274.32	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	521.31
871Z	SSI DISABLED FREEDO M	85.86	73.98	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	159.84
8720	SSI DISABLED FREEDO M	213.90	216.30	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	430.20
872Z	SSI DISABLED FREEDO M	20.61	6.41	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	27.02
SUBTOTAL:		2,234.73	2,273.51	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,508.24
TOTAL:		1,509,256.72	1,514,651.63	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,023,908.35

LONG TERM CARE CAPITATION - AMOUNTS

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1000	TANF WITH MEDICARE	9,923.14	10,424.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	20,347.64
1010	TANF NON-MEDICARE	2,246,124.76	2,243,143.25	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,489,268.01
1020	TANF WITH QMB	3,414.03	3,414.03	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,828.06
2100	SSI AGED WITH MEDIC A	31,188,469.28	36,229,127.20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	67,417,596.48
210Z	SSI AGED WITH MEDIC A	707,295.55	628,872.62	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,336,168.17
2110	SSI AGED NON-MEDIC AP	2,884,201.93	3,146,295.69	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,030,497.62
211Z	SSI AGED NON-MEDIC AP	20,970.93	11,535.77	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	32,506.70
2120	SSI AGED WITH QMB	18,966,113.95	22,019,693.90	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	40,985,807.85
212Z	SSI AGED WITH QMB P P	27,811.67	8,720.78	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	36,532.45
2200	SSI DISABLED WITH M F	13,803,406.37	14,998,436.84	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	28,801,843.21
220Z	SSI DISABLED WITH M F	40,564.67	63,879.36	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	104,444.03
2210	SSI DISABLED NON-ME D	90,370,918.56	92,527,644.78	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	182,898,563.34
221Z	SSI DISABLED NON-ME D	66,459.25	35,301.18	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	101,760.43
2220	SSI DISABLED WITH Q M	21,237,804.05	22,510,241.65	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	43,748,045.70
222Z	SSI DISABLED WITH Q M	2,948.16	9,227.84	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12,176.00
2300	SSI BLIND WITH MEDIC	64,338.16	65,260.19	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	129,598.35
2310	SSI BLIND NON-MEDIC A	444,420.36	460,483.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	904,903.46
2320	SSI BLIND WITH QMB	130,315.90	135,811.83	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	266,127.73
SUBTOTAL:		182,215,500.72	195,107,514.51	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	377,323,015.23
8700	SSI DISABLED FREEDO M	70,007.12	77,437.98	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	147,445.10
870Z	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	113,605.70	118,717.57	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	232,323.27
871Z	SSI DISABLED FREEDO M	2,876.81	-2,876.81	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	19,836.86	21,311.74	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	41,148.60
SUBTOTAL:		206,326.49	214,590.48	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	420,916.97
TOTAL:		182,421,827.21	195,322,104.99	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	377,743,932.20

LONG TERM CARE MEMBER MONTHS

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1000	TANF WITH MEDICARE	3.00	3.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6.00
1010	TANF NON-MEDICARE	654.15	651.89	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,306.04
1020	TANF WITH QMB	1.00	1.00	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	11,288.11	11,289.28	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	22,577.39
210Z	SSI AGED WITH MEDIC A	717.21	639.08	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,356.29
2110	SSI AGED NON-MEDIC AP	655.14	653.57	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,308.71
211Z	SSI AGED NON-MEDIC AP	21.10	12.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	33.60
2120	SSI AGED WITH QMB	7,334.44	7,374.82	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	14,709.26
212Z	SSI AGED WITH QMB P P	27.75	9.33	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	37.08
2200	SSI DISABLED WITH M F	4,540.03	4,507.46	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,047.49
220Z	SSI DISABLED WITH M F	40.61	63.99	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	104.60
2210	SSI DISABLED NON-ME D	25,726.52	25,794.02	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	51,520.54
221Z	SSI DISABLED NON-ME D	68.02	35.27	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	103.29
2220	SSI DISABLED WITH Q M	6,765.32	6,778.39	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	13,543.71
222Z	SSI DISABLED WITH Q M	2.73	7.18	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9.91
2300	SSI BLIND WITH MEDIC	20.00	19.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	39.00
2310	SSI BLIND NON-MEDIC A	128.16	130.38	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	258.54
2320	SSI BLIND WITH QMB	42.00	42.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	84.00
SUBTOTAL:		58,035.29	58,012.16	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	116,047.45
8700	SSI DISABLED FREEDO M	22.00	22.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	44.00
870Z	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	27.09	25.91	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	53.00
871Z	SSI DISABLED FREEDO M	2.90	-2.90	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	7.00	7.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	14.00
SUBTOTAL:		58.99	52.01	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	111.00
TOTAL:		58,094.28	58,064.17	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	116,158.45

MENTAL HEALTH CAPITATION AMOUNTS - CHILDREN

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1000	TANF WITH MEDICARE	37.55	37.55	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	75.10
1010	TANF NON-MEDICARE	6,001,729.15	5,085,321.40	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	11,087,050.55
2110	SSI AGED NON-MEDIC	37.55	75.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	112.65
2200	SSI DISABLED WITH M	37.55	37.55	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	75.10
2210	SSI DISABLED NON-ME	430,210.35	427,168.80	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	857,379.15
2220	SSI DISABLED WITH Q	225.30	225.30	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	450.60
2310	SSI BLIND NON-MEDIC	1,464.45	1,614.65	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,079.10
4300	SOBRA CHILD WITH M	225.30	225.30	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	450.60
4310	SOBRA CHILD NON-ME	17,147,019.75	18,291,093.15	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	35,438,112.90
4320	SOBRA CHILD WITH Q	525.70	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	525.70
5010	SOBRA PREGNANT WO	20,427.20	22,567.55	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	42,994.75
SUBTOTAL:		23,601,939.85	23,828,366.35	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	47,430,306.20
1110	TANF EXPANDED FOR	92,861.15	74,837.15	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	167,698.30
2610	SSI DISABLED EXPAND	37.55	37.55	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	75.10
SUBTOTAL:		92,898.70	74,874.70	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	167,773.40
3510	ADULT 40-100% FOR FI	37.55	37.55	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	75.10
3710	AHC CARE EXPANDED	0.00	37.55	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	37.55
SUBTOTAL:		37.55	75.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	112.65
4410	SOBRA 100-133% FOR	1,137,201.75	1,021,510.20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,158,711.95
SUBTOTAL:		1,137,201.75	1,021,510.20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,158,711.95
TOTAL:		24,832,077.85	24,924,826.35	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	49,756,904.20

MENTAL HEALTH CAPITATION MEMBER MONTHS - CHILDREN

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1000	TANF WITH MEDICARE	1.00	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2.00
1010	TANF NON-MEDICARE	159,833.00	135,428.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	295,261.00
2110	SSI AGED NON-MEDIC	1.00	2.00	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	1.00	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2.00
2210	SSI DISABLED NON-ME	11,457.00	11,376.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	22,833.00
2220	SSI DISABLED WITH Q	6.00	6.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12.00
2310	SSI BLIND NON-MEDIC	39.00	43.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	82.00
4300	SOBRA CHILD WITH M	6.00	6.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12.00
4310	SOBRA CHILD NON-ME	456,645.00	487,113.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	943,758.00
4320	SOBRA CHILD WITH Q	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
5010	SOBRA PREGNANT WO	544.00	601.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,145.00
SUBTOTAL:		628,547.00	634,577.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,263,124.00
1110	TANF EXPANDED FOR	2,473.00	1,993.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,466.00
2610	SSI DISABLED EXPAND	1.00	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2.00
SUBTOTAL:		2,474.00	1,994.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,468.00
3510	ADULT 40-100% FOR FI	1.00	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2.00
3710	AHC CARE EXPANDED	0.00	1.00	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	2.00	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	30,285.00	27,204.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	57,489.00
SUBTOTAL:		30,285.00	27,204.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	57,489.00
TOTAL:		661,307.00	663,777.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,325,084.00

MENTAL HEALTH CAPITATION AMOUNTS - ADULT

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1000	TANF WITH MEDICARE	67,083.83	80,473.34	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	147,557.17
1010	TANF NON-MEDICARE	6,077,917.65	6,393,201.43	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12,471,119.08
1020	TANF WITH QMB	24,837.03	36,897.81	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	61,734.84
2100	SSI AGED WITH MEDICARE	139,789.21	137,949.43	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	277,738.64
2110	SSI AGED NON-MEDICARE	205,476.17	200,433.81	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	405,909.98
2120	SSI AGED WITH QMB	595,679.88	602,630.16	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,198,310.04
2200	SSI DISABLED WITH MEDICARE	134,133.59	132,327.88	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	266,461.47
2210	SSI DISABLED NON-MEDICARE	1,422,763.20	1,422,831.34	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,845,594.54
2220	SSI DISABLED WITH QMB	832,159.75	837,747.23	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,669,906.98
2300	SSI BLIND WITH MEDICARE	1,226.52	1,158.38	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,384.90
2310	SSI BLIND NON-MEDICARE	14,820.45	14,650.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	29,470.55
2320	SSI BLIND WITH QMB	8,279.01	8,210.87	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	16,489.88
4300	SOBRA CHILD WITH MEDICARE	34.07	34.07	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	68.14
4310	SOBRA CHILD NON-MEDICARE	834,544.65	810,661.58	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,645,206.23
4320	SOBRA CHILD WITH QMB	68.14	34.07	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	102.21
5000	SOBRA PREGNANT WOMEN	1,260.59	1,226.52	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,487.11
5010	SOBRA PREGNANT WOMEN	802,586.99	894,950.76	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,697,537.75
5020	SOBRA PREGNANT WOMEN	306.63	408.84	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	715.47
SUBTOTAL:		11,162,967.36	11,575,827.62	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	22,738,794.98
1100	TANF EXPANDED FPR	141,594.92	125,002.83	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	266,597.75
1110	TANF EXPANDED FOR	3,052,160.95	2,639,368.83	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,691,529.78
1120	TANF EXPANDED FOR	39,930.04	35,535.01	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	75,465.05
2400	SSI AGED EXPANDED	14,990.80	14,173.12	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	29,163.92
2410	SSI AGED EXPANDED	39,725.62	37,068.16	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	76,793.78
2420	SSI AGED EXPANDED	952,256.50	951,711.38	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,903,967.88
2510	SSI BLIND EXPANDED	68.14	68.14	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	136.28
2520	SSI BLIND EXPANDED	34.07	34.07	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	68.14
2600	SSI DISABLED EXPANDED	9,505.53	9,335.18	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	18,840.71
2610	SSI DISABLED EXPANDED	91,103.18	87,900.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	179,003.78
2620	SSI DISABLED EXPANDED	488,427.52	493,674.30	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	982,101.82
SUBTOTAL:		4,829,797.27	4,393,871.62	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,223,668.89
3500	ADULT 40-100% FOR FI	4,974.22	4,326.89	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,301.11
3510	ADULT 40-100% FOR FI	2,568,639.51	2,579,984.82	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,148,624.33
3520	ADULT 40-100% FOR FI	1,056.17	919.89	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,976.06
3700	ADULT <40% EXP FOR	4,463.17	4,667.59	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,130.76

MENTAL HEALTH CAPITATION AMOUNTS - ADULT

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
3710	AHC CARE EXPANDED FO	6,719,966.80	6,769,163.88	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	13,489,130.68
3720	AHC CARE EXPANDED FO	1,328.73	476.98	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,805.71
SUBTOTAL:		9,300,428.60	9,359,540.05	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	18,659,968.65
3900	NEWLY ELIGIBLE FOR F	3,032.23	2,044.20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,076.43
3910	NEWLY ELIGIBLE FOR F	2,203,170.62	2,295,500.32	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,498,670.94
3920	NEWLY ELIGIBLE FOR F	374.77	170.35	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	545.12
SUBTOTAL:		2,206,577.62	2,297,714.87	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,504,292.49
4410	SOBRA 100-133% FOR F	103,709.08	95,634.49	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	199,343.57
SUBTOTAL:		103,709.08	95,634.49	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	199,343.57
4510	BC PATIENT FOR FINA N	9,471.46	9,301.11	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	18,772.57
4610	CC PATIENT FOR FINA N	1,192.45	1,158.38	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,350.83
SUBTOTAL:		10,663.91	10,459.49	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	21,123.40
8600	SSI BLIND FREEDOM/W O	34.07	34.07	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	68.14
8700	SSI DISABLED FREEDO M	33,831.51	35,194.31	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	69,025.82
8710	SSI DISABLED FREEDO M	7,086.56	7,938.31	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	15,024.87
8720	SSI DISABLED FREEDO M	5,178.64	5,417.13	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	10,595.77
SUBTOTAL:		46,130.78	48,583.82	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	94,714.60
TOTAL:		27,660,274.62	27,781,631.96	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	55,441,906.58

MENTAL HEALTH CAPITATION MEMBER MONTHS - ADULT

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1000	TANF WITH MEDICARE	1,969.00	2,362.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,331.00
1010	TANF NON-MEDICARE	178,395.00	187,649.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	366,044.00
1020	TANF WITH QMB	729.00	1,083.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,812.00
2100	SSI AGED WITH MEDIC A	4,103.00	4,049.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8,152.00
2110	SSI AGED NON-MEDIC AP	6,031.00	5,883.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	11,914.00
2120	SSI AGED WITH QMB	17,484.00	17,688.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	35,172.00
2200	SSI DISABLED WITH M E	3,937.00	3,884.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,821.00
2210	SSI DISABLED NON-ME D	41,760.00	41,762.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	83,522.00
2220	SSI DISABLED WITH Q M	24,425.00	24,589.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	49,014.00
2300	SSI BLIND WITH MEDIC	36.00	34.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	70.00
2310	SSI BLIND NON-MEDIC A	435.00	430.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	865.00
2320	SSI BLIND WITH QMB	243.00	241.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	484.00
4300	SOBRA CHILD WITH M ED	1.00	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2.00
4310	SOBRA CHILD NON-ME DL	24,495.00	23,794.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	48,289.00
4320	SOBRA CHILD WITH Q MB	2.00	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3.00
5000	SOBRA PREGNANT WO MAN	37.00	36.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	73.00
5010	SOBRA PREGNANT WO MAN	23,557.00	26,268.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	49,825.00
5020	SOBRA PREGNANT WO MAN	9.00	12.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	21.00
SUBTOTAL:		327,648.00	339,766.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	667,414.00
1100	TANF EXPANDED FPR FI	4,156.00	3,669.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,825.00
1110	TANF EXPANDED FOR FI	89,585.00	77,469.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	167,054.00
1120	TANF EXPANDED FOR FI	1,172.00	1,043.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,215.00
2400	SSI AGED EXPANDED WI	440.00	416.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	856.00
2410	SSI AGED EXPANDED NO	1,166.00	1,088.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,254.00
2420	SSI AGED EXPANDED WI	27,950.00	27,934.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	55,884.00
2510	SSI BLIND EXPANDED N	2.00	2.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4.00
2520	SSI BLIND EXPANDED W	1.00	1.00	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 E	279.00	274.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	553.00
2610	SSI DISABLED EXPAND E	2,674.00	2,580.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,254.00
2620	SSI DISABLED EXPAND E	14,336.00	14,490.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	28,826.00
SUBTOTAL:		141,761.00	128,966.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	270,727.00
3500	ADULT 40-100% FOR FI	146.00	127.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	273.00
3510	ADULT 40-100% FOR FI	75,393.00	75,726.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	151,119.00
3520	ADULT 40-100% FOR FI	31.00	27.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	58.00
3700	ADULT <40% EXP FOR F	131.00	137.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	268.00

MENTAL HEALTH CAPITATION MEMBER MONTHS - ADULT

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
3710	AHC CARE EXPANDED FO	197,240.00	198,684.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	395,924.00
3720	AHC CARE EXPANDED FO	39.00	14.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	53.00
SUBTOTAL:		272,980.00	274,715.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	547,695.00
3900	NEWLY ELIGIBLE FOR F	89.00	60.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	149.00
3910	NEWLY ELIGIBLE FOR F	64,666.00	67,376.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	132,042.00
3920	NEWLY ELIGIBLE FOR F	11.00	5.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	16.00
SUBTOTAL:		64,766.00	67,441.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	132,207.00
4410	SOBRA 100-133% FOR F	3,044.00	2,807.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,851.00
SUBTOTAL:		3,044.00	2,807.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,851.00
4510	BC PATIENT FOR FINA N	278.00	273.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	551.00
4610	CC PATIENT FOR FINA N	35.00	34.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	69.00
SUBTOTAL:		313.00	307.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	620.00
8600	SSI BLIND FREEDOM/W O	1.00	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2.00
8700	SSI DISABLED FREEDO M	993.00	1,033.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,026.00
8710	SSI DISABLED FREEDO M	208.00	233.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	441.00
8720	SSI DISABLED FREEDO M	152.00	159.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	311.00
SUBTOTAL:		1,354.00	1,426.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,780.00
TOTAL:		811,866.00	815,428.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,627,294.00

MENTAL HEALTH CAPITATION AMOUNTS - GENERAL

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1000	TANF WITH MEDICARE	90,239.27	108,250.46	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	198,489.73
1010	TANF NON-MEDICARE	8,175,842.85	8,599,953.67	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	16,775,796.52
1020	TANF WITH QMB	33,410.07	49,633.89	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	83,043.96
2100	SSI AGED WITH MEDIC A	188,040.49	185,565.67	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	373,606.16
2110	SSI AGED NON-MEDIC AP	276,400.73	269,617.89	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	546,018.62
2120	SSI AGED WITH QMB	801,291.72	810,641.04	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,611,932.76
2200	SSI DISABLED WITH M E	180,432.71	178,003.72	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	358,436.43
2210	SSI DISABLED NON-ME D	1,913,860.80	1,913,952.46	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,827,813.26
2220	SSI DISABLED WITH Q M	1,119,397.75	1,126,913.87	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,246,311.62
2300	SSI BLIND WITH MEDIC A	1,649.88	1,558.22	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,208.10
2310	SSI BLIND NON-MEDIC A	19,936.05	19,706.90	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	39,642.95
2320	SSI BLIND WITH QMB	11,136.69	11,045.03	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	22,181.72
4300	SOBRA CHILD WITH M ED	45.83	45.83	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	91.66
4310	SOBRA CHILD NON-ME DL	1,122,605.85	1,090,479.02	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,213,084.87
4320	SOBRA CHILD WITH Q MB	91.66	45.83	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	137.49
5000	SOBRA PREGNANT WO MAN	1,695.71	1,649.88	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,345.59
5010	SOBRA PREGNANT WO MAN	1,079,617.31	1,203,862.44	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,283,479.75
5020	SOBRA PREGNANT WO MAN	412.47	549.96	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	962.43
SUBTOTAL:		15,016,107.84	15,571,475.78	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	30,587,583.62
1100	TANF EXPANDED FPR FI	190,469.48	168,150.27	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	358,619.75
1110	TANF EXPANDED FOR FI	4,105,680.55	3,550,404.27	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,656,084.82
1120	TANF EXPANDED FOR FI	53,712.76	47,800.69	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	101,513.45
2400	SSI AGED EXPANDED WI	20,165.20	19,065.28	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	39,230.48
2410	SSI AGED EXPANDED NO	53,437.78	49,863.04	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	103,300.82
2420	SSI AGED EXPANDED WI	1,280,948.50	1,280,215.22	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,561,163.72
2510	SSI BLIND EXPANDED NL	91.66	91.66	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	183.32
2520	SSI BLIND EXPANDED WI	45.83	45.83	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	91.66
2600	SSI DISABLED EXPAND E	12,786.57	12,557.42	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	25,343.99
2610	SSI DISABLED EXPAND E	122,549.42	118,241.40	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	240,790.82
2620	SSI DISABLED EXPAND E	657,018.88	664,076.70	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,321,095.58
SUBTOTAL:		6,496,906.63	5,910,511.78	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12,407,418.41
3500	ADULT 40-100% FOR FI C	6,691.18	5,820.41	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12,511.59
3510	ADULT 40-100% FOR FI C	3,455,261.19	3,470,522.58	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,925,783.77
3520	ADULT 40-100% FOR FI C	1,420.73	1,237.41	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,658.14
3700	ADULT <40% EXP FOR C	6,003.73	6,278.71	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12,282.44

MENTAL HEALTH CAPITATION AMOUNTS - GENERAL

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
3710	AHC CARE EXPANDED FO	9,039,509.20	9,105,687.72	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	18,145,196.92
3720	AHC CARE EXPANDED FO	1,787.37	641.62	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,428.99
SUBTOTAL:		12,510,673.40	12,590,188.45	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	25,100,861.85
3900	NEWLY ELIGIBLE FOR F	4,078.87	2,749.80	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,828.67
3910	NEWLY ELIGIBLE FOR F	2,963,642.78	3,087,842.08	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,051,484.86
3920	NEWLY ELIGIBLE FOR F	504.13	229.15	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	733.28
SUBTOTAL:		2,968,225.78	3,090,821.03	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,059,046.81
4410	SOBRA 100-133% FOR F	139,506.52	128,644.81	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	268,151.33
SUBTOTAL:		139,506.52	128,644.81	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	268,151.33
4510	BC PATIENT FOR FINA N	12,740.74	12,511.59	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	25,252.33
4610	CC PATIENT FOR FINA N	1,604.05	1,558.22	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,162.27
SUBTOTAL:		14,344.79	14,069.81	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	28,414.60
8600	SSI BLIND FREEDOM/W O	45.83	45.83	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	91.66
8700	SSI DISABLED FREEDO M	45,509.19	47,342.39	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	92,851.58
8710	SSI DISABLED FREEDO M	9,532.64	10,678.39	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	20,211.03
8720	SSI DISABLED FREEDO M	6,966.16	7,286.97	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	14,253.13
SUBTOTAL:		62,053.82	65,353.58	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	127,407.40
TOTAL:		37,207,818.78	37,371,065.24	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	74,578,884.02

MENTAL HEALTH CAPITATION MEMBER MONTHS - GENERAL

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1000	TANF WITH MEDICARE	1,969.00	2,362.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,331.00
1010	TANF NON-MEDICARE	178,395.00	187,649.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	366,044.00
1020	TANF WITH QMB	729.00	1,083.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,812.00
2100	SSI AGED WITH MEDIC A	4,103.00	4,049.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8,152.00
2110	SSI AGED NON-MEDIC AP	6,031.00	5,883.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	11,914.00
2120	SSI AGED WITH QMB	17,484.00	17,688.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	35,172.00
2200	SSI DISABLED WITH M E	3,937.00	3,884.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,821.00
2210	SSI DISABLED NON-ME D	41,760.00	41,762.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	83,522.00
2220	SSI DISABLED WITH Q M	24,425.00	24,589.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	49,014.00
2300	SSI BLIND WITH MEDIC	36.00	34.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	70.00
2310	SSI BLIND NON-MEDIC A	435.00	430.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	865.00
2320	SSI BLIND WITH QMB	243.00	241.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	484.00
4300	SOBRA CHILD WITH M ED	1.00	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2.00
4310	SOBRA CHILD NON-ME DL	24,495.00	23,794.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	48,289.00
4320	SOBRA CHILD WITH Q MB	2.00	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3.00
5000	SOBRA PREGNANT WO MAN	37.00	36.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	73.00
5010	SOBRA PREGNANT WO MAN	23,557.00	26,268.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	49,825.00
5020	SOBRA PREGNANT WO MAN	9.00	12.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	21.00
SUBTOTAL:		327,648.00	339,766.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	667,414.00
1100	TANF EXPANDED FPR FI	4,156.00	3,669.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,825.00
1110	TANF EXPANDED FOR FI	89,585.00	77,469.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	167,054.00
1120	TANF EXPANDED FOR FI	1,172.00	1,043.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,215.00
2400	SSI AGED EXPANDED WI	440.00	416.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	856.00
2410	SSI AGED EXPANDED NO	1,166.00	1,088.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,254.00
2420	SSI AGED EXPANDED WI	27,950.00	27,934.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	55,884.00
2510	SSI BLIND EXPANDED N	2.00	2.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4.00
2520	SSI BLIND EXPANDED W	1.00	1.00	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 E	279.00	274.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	553.00
2610	SSI DISABLED EXPAND E	2,674.00	2,580.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,254.00
2620	SSI DISABLED EXPAND E	14,336.00	14,490.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	28,826.00
SUBTOTAL:		141,761.00	128,966.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	270,727.00
3500	ADULT 40-100% FOR FI	146.00	127.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	273.00
3510	ADULT 40-100% FOR FI	75,393.00	75,726.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	151,119.00
3520	ADULT 40-100% FOR FI	31.00	27.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	58.00
3700	ADULT <40% EXP FOR F	131.00	137.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	268.00

MENTAL HEALTH CAPITATION MEMBER MONTHS - GENERAL

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
3710	AHC CARE EXPANDED FO	197,240.00	198,684.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	395,924.00
3720	AHC CARE EXPANDED FO	39.00	14.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	53.00
SUBTOTAL:		272,980.00	274,715.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	547,695.00
3900	NEWLY ELIGIBLE FOR F	89.00	60.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	149.00
3910	NEWLY ELIGIBLE FOR F	64,666.00	67,376.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	132,042.00
3920	NEWLY ELIGIBLE FOR F	11.00	5.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	16.00
SUBTOTAL:		64,766.00	67,441.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	132,207.00
4410	SOBRA 100-133% FOR F	3,044.00	2,807.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,851.00
SUBTOTAL:		3,044.00	2,807.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,851.00
4510	BC PATIENT FOR FINA N	278.00	273.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	551.00
4610	CC PATIENT FOR FINA N	35.00	34.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	69.00
SUBTOTAL:		313.00	307.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	620.00
8600	SSI BLIND FREEDOM/W O	1.00	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2.00
8700	SSI DISABLED FREEDO M	993.00	1,033.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,026.00
8710	SSI DISABLED FREEDO M	208.00	233.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	441.00
8720	SSI DISABLED FREEDO M	152.00	159.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	311.00
SUBTOTAL:		1,354.00	1,426.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,780.00
TOTAL:		811,866.00	815,428.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,627,294.00

MENTAL HEALTH CAPITATION AMOUNTS - CMDP

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1010	TANF NON-MEDICARE	912,101.24	848,941.48	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,761,042.72
2210	SSI DISABLED NON-ME D	339,019.30	338,090.48	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	677,109.78
2310	SSI BLIND NON-MEDIC A	928.82	928.82	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,857.64
4310	SOBRA CHILD NON-ME DI	13,288,627.74	13,621,145.30	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	26,909,773.04
5010	SOBRA PREGNANT WO MAN	19,505.22	15,789.94	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	35,295.16
SUBTOTAL:		14,560,182.32	14,824,896.02	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	29,385,078.34
4410	SOBRA 100-133% FOR F	73,376.78	71,519.14	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	144,895.92
SUBTOTAL:		73,376.78	71,519.14	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	144,895.92
TOTAL:		14,633,559.10	14,896,415.16	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	29,529,974.26

MENTAL HEALTH CAPITATION MEMBER MONTHS - CMDP

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1010	TANF NON-MEDICARE	982.00	914.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,896.00
2210	SSI DISABLED NON-ME D	365.00	364.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	729.00
2310	SSI BLIND NON-MEDIC A	1.00	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2.00
4310	SOBRA CHILD NON-ME DI	14,307.00	14,665.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	28,972.00
5010	SOBRA PREGNANT WO MAN	21.00	17.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	38.00
SUBTOTAL:		15,676.00	15,961.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	31,637.00
4410	SOBRA 100-133% FOR F	79.00	77.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	156.00
SUBTOTAL:		79.00	77.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	156.00
TOTAL:		15,755.00	16,038.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	31,793.00

CHILDREN'S REHABILITATIVE SERVICES - CAPITATION AMOUNTS

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1000	TANF WITH MEDICARE	1,008.42	1,008.42	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,016.84
1010	TANF NON-MEDICARE	133,111.44	130,590.39	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	263,701.83
1011	TANF <1 M & F NON-ME	9,104.82	10,355.64	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	19,460.46
1012	TANF 01-05 M & F NON	25,956.96	17,113.95	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	43,070.91
1013	TANF 06-13 M & F NON	30,058.50	22,049.37	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	52,107.87
1014	TANF 14-20 MALE NON-	8,513.34	6,845.58	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	15,358.92
1015	TANF 14-20 FEMALE N	9,017.55	7,766.73	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	16,784.28
1017	TANF 21-44 FEMALE N	833.88	833.88	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,667.76
2110	SSI AGED NON-MEDIC	416.94	416.94	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	833.88
2200	SSI DISABLED WITH M	8,571.57	9,492.72	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	18,064.29
2210	SSI DISABLED NON-ME	3,071,131.98	3,075,185.07	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,146,317.05
2220	SSI DISABLED WITH Q	24,444.48	25,452.90	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	49,897.38
2300	SSI BLIND WITH MEDIC	504.21	504.21	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,008.42
2310	SSI BLIND NON-MEDIC	27,624.87	28,129.08	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	55,753.95
4311	SOBRA CHILD <1 M & F	21,273.72	19,935.63	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	41,209.35
4312	SOBRA CHILD 01-05 M	137,425.89	146,162.22	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	283,588.11
4313	SOBRA CHILD 06-13 M	130,832.34	140,421.96	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	271,254.30
4314	SOBRA CHILD 14-20 MA	30,970.02	33,141.99	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	64,112.01
4315	SOBRA CHILD 14-20 FE	35,226.69	37,815.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	73,042.29
5015	SOBRA PREG 14-20 FE	3,005.85	2,588.91	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,594.76
SUBTOTAL:		3,709,033.47	3,715,811.19	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,424,844.66
1113	TANF EXPANDED 06-13	416.94	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	416.94
1116	TANF EXPANDED 21-44	416.94	416.94	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	833.88
SUBTOTAL:		833.88	416.94	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,250.82
3514	ADULT 40-100% MALE	833.88	833.88	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,667.76
3515	ADULT 40-100% FEMAL	833.88	833.88	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,667.76
3714	ADULT <40% EXP MAL	6,254.10	7,087.98	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	13,342.08
3715	ADULT <40% EXP FEM	3,752.46	4,169.40	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,921.86
3716	ADULT <40% EXP MAL	416.94	416.94	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	833.88
3717	ADULT <40% EXP FEM	416.94	416.94	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	833.88
SUBTOTAL:		12,508.20	13,759.02	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	26,267.22
3915	NEWLY ELIGIBLE FEMA	416.94	416.94	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	833.88
SUBTOTAL:		416.94	416.94	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	833.88
4413	SOBRA 100-133% M&F	4,760.88	4,343.94	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,104.82

CHILDREN'S REHABILITATIVE SERVICES - CAPITATION AMOUNTS

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
4414	SOBRA 100-133% MALE	1,755.03	1,755.03	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,510.06
4415	SOBRA 100-133% FEM AL	833.88	833.88	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,667.76
SUBTOTAL:		7,349.79	6,932.85	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	14,282.64
TOTAL:		3,730,142.28	3,737,336.94	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,467,479.22

CHILDREN'S REHABILITATIVE SERVICES - CAPITATION MEMBER MONTHS

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1000	TANF WITH MEDICARE	2.00	2.00	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	264.00	259.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	523.00
1011	TANF <1 M & F NON-ME	21.00	24.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	45.00
1012	TANF 01-05 M & F NON	61.00	40.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	101.00
1013	TANF 06-13 M & F NON	70.00	51.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	121.00
1014	TANF 14-20 MALE NON-	20.00	16.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	36.00
1015	TANF 14-20 FEMALE N	21.00	18.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	39.00
1017	TANF 21-44 FEMALE N	2.00	2.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4.00
2110	SSI AGED NON-MEDIC	1.00	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2.00
2200	SSI DISABLED WITH M	17.00	19.00	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	6,177.00	6,184.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12,361.00
2220	SSI DISABLED WITH Q	49.00	51.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	100.00
2300	SSI BLIND WITH MEDIC	1.00	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2.00
2310	SSI BLIND NON-MEDIC	56.00	57.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	113.00
4311	SOBRA CHILD <1 M & F	46.00	43.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	89.00
4312	SOBRA CHILD 01-05 M	298.00	320.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	618.00
4313	SOBRA CHILD 06-13 M	287.00	310.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	597.00
4314	SOBRA CHILD 14-20 MA	68.00	73.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	141.00
4315	SOBRA CHILD 14-20 FE	78.00	84.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	162.00
5015	SOBRA PREG 14-20 FE	7.00	6.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	13.00
SUBTOTAL:		7,546.00	7,561.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	15,107.00
1113	TANF EXPANDED 06-13	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
1116	TANF EXPANDED 21-44	1.00	1.00	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	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3.00
3514	ADULT 40-100% MALE	2.00	2.00	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	2.00	2.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4.00
3714	ADULT <40% EXP MAL	15.00	17.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	32.00
3715	ADULT <40% EXP FEM	9.00	10.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	19.00
3716	ADULT <40% EXP MAL	1.00	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2.00
3717	ADULT <40% EXP FEM	1.00	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2.00
SUBTOTAL:		30.00	33.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	63.00
3915	NEWLY ELIGIBLE FEMA	1.00	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2.00
SUBTOTAL:		1.00	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2.00
4413	SOBRA 100-133% M&F	11.00	10.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	21.00

CHILDREN'S REHABILITATIVE SERVICES - CAPITATION MEMBER MONTHS

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
4414	SOBRA 100-133% MALE	4.00	4.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8.00
4415	SOBRA 100-133% FEM AL	2.00	2.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4.00
SUBTOTAL:		17.00	16.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	33.00
TOTAL:		7,596.00	7,612.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	15,208.00

ACUTE FEE FOR SERVICE - EXCLUDING EMERGENCY SERVICES

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
13AD	MARICOPA ADULT INM AT	0.00	-286.63	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-286.63
SUBTOTAL:		0.00	-286.63	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-286.63
1006	TANF 21-44 MALE WITH	13,748.51	11,706.46	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	25,454.97
1007	TANF 21-44 FEMALE WI	17,026.44	13,867.21	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	30,893.65
1008	TANF 45-64 M & F WIT	29,543.51	38,496.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	68,040.01
1009	TANF 65+ M & F WITH	9,711.26	9,427.79	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	19,139.05
1011	TANF <1 M & F NON-ME	1,290,959.10	1,245,523.04	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,536,482.14
1012	TANF 01-05 M & F NON	1,257,382.93	1,081,951.02	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,339,333.95
1013	TANF 06-13 M & F NON	1,882,318.21	1,589,351.98	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,471,670.19
1014	TANF 14-20 MALE NON-	349,688.37	397,522.68	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	747,211.05
1015	TANF 14-20 FEMALE N	618,162.51	955,347.31	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,573,509.82
1016	TANF 21-44 MALE NON-	1,720,458.08	1,835,554.52	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,556,012.60
1017	TANF 21-44 FEMALE N	6,255,681.23	6,847,408.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	13,103,089.73
1018	TANF 45-64 M & F NON	2,241,687.50	2,225,717.52	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,467,405.02
1019	TANF 65+ M & F NON-M	10,320.41	9,670.04	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	19,990.45
1026	TANF 21-44 MALE WITH	700.00	568.89	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,268.89
1027	TANF 21-44 FEMALE WI	1,268.82	1,174.29	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,443.11
1028	TANF 45-64 M & F WIT	6,682.12	19,778.64	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	26,460.76
1029	TANF 65+ M & F WITH	5,507.74	3,496.54	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,004.28
2100	SSI AGED WITH MEDIC A	167,284.72	163,478.22	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	330,762.94
2110	SSI AGED NON-MEDIC AD	125,205.47	128,787.96	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	253,993.43
2120	SSI AGED WITH QMB	326,875.26	398,974.35	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	725,849.61
2200	SSI DISABLED WITH M F	306,269.94	461,879.30	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	768,149.24
2210	SSI DISABLED NON-ME D	8,070,657.42	8,785,140.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	16,855,798.02
2220	SSI DISABLED WITH Q M	1,017,428.75	1,228,462.25	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,245,891.00
2300	SSI BLIND WITH MEDIC	2,615.94	1,503.84	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,119.78
2310	SSI BLIND NON-MEDIC A	117,830.33	100,119.21	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	217,949.54
2320	SSI BLIND WITH QMB	16,751.49	16,898.33	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	33,649.82
4311	SOBRA CHILD <1 M & F	2,174,749.48	2,074,877.06	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,249,626.54
4312	SOBRA CHILD 01-05 M	2,763,871.20	2,834,483.06	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,598,354.26
4313	SOBRA CHILD 06-13 M	3,762,824.46	4,361,436.75	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8,124,261.21
4314	SOBRA CHILD 14-20 MA	939,030.81	1,434,713.92	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,373,744.73
4315	SOBRA CHILD 14-20 FE	1,301,099.71	1,480,601.04	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,781,700.75
5007	SOBRA PREG 21-44 FE M	0.00	700.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	700.00
5015	SOBRA PREG 14-20 FE MA	396,630.45	405,096.39	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	801,726.84

ACUTE FEE FOR SERVICE - EXCLUDING EMERGENCY SERVICES

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
5017	SOBRA PREG 21-44 FE M	1,708,550.06	2,049,753.34	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,758,303.40
5018	SOBRA PREG 45-64 FE M	4,193.00	14,500.38	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	18,693.38
SUBTOTAL:		38,912,715.23	42,227,968.93	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	81,140,684.16
1106	TANF EXPANDED 21-44	10,284.15	10,175.29	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	20,459.44
1107	TANF EXPANDED 21-44	22,395.39	24,471.89	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	46,867.28
1108	TANF EXPANDED 45-64	62,335.76	91,660.22	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	153,995.98
1109	TANF EXPANDED 65+ MR	23,910.19	20,501.26	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	44,411.45
1111	TANF EXPANDED <1 M RF	0.00	107.79	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	107.79
1112	TANF EXPANDED 01-05	5,732.86	4,829.90	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	10,562.76
1113	TANF EXPANDED 06-13	30,078.23	19,474.68	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	49,552.91
1114	TANF EXPANDED 14-20	15,858.70	9,308.99	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	25,167.69
1115	TANF EXPANDED 14-20	28,001.63	22,720.99	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	50,722.62
1116	TANF EXPANDED 21-44	362,417.96	353,624.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	716,042.56
1117	TANF EXPANDED 21-44	1,288,260.07	1,258,732.85	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,546,992.92
1118	TANF EXPANDED 45-64	704,691.67	705,276.22	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,409,967.89
1119	TANF EXPANDED 65+ MR	4.35	1,208.05	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,212.40
1126	TANF EXPANDED 21-44	1,500.26	3,544.35	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,044.61
1127	TANF EXPANDED 21-44	2,664.74	2,843.89	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,508.63
1128	TANF EXPANDED 45-64	9,867.91	10,323.33	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	20,191.24
1129	TANF EXPANDED 65+ MR	7,716.84	9,382.71	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	17,099.55
2400	SSI AGED EXPANDED MI	22,942.06	38,024.62	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	60,966.68
2410	SSI AGED EXPANDED NO	67,166.54	76,848.41	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	144,014.95
2420	SSI AGED EXPANDED MI	381,632.77	433,733.65	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	815,366.42
2600	SSI DISABLED EXPAND F	12,133.96	14,195.83	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	26,329.79
2610	SSI DISABLED EXPAND F	300,375.73	232,843.02	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	533,218.75
2620	SSI DISABLED EXPAND F	285,198.27	311,126.24	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	596,324.51
SUBTOTAL:		3,645,170.04	3,654,958.78	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,300,128.82
3308	AHC CARE M&F 45-64 M	21.62	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	21.62
3316	AHC CARE MALE 21-44	-95.91	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-95.91
3317	AHC CARE FEMALE 21-44	-527.88	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-527.88
3318	AHC CARE M&F 45-64 N	-12,669.89	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-12,669.89
SUBTOTAL:		-13,272.06	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-13,272.06
3608	AHC CARE/MI M&F 45-6	60.75	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	60.75
3614	AHC CARE/MI MALE 14-44	-2,238.34	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-2,238.34
3615	AHC CARE/MI FEMALE 14-44	-35.45	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-35.45

ACUTE FEE FOR SERVICE - EXCLUDING EMERGENCY SERVICES

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
3616	AHC CARE/MI MALE 21-	-23,081.14	-52.99	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-23,134.13
3617	AHC CARE/MI FEMALE	-672.13	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-672.13
3618	AHC CARE/MI M&F 45-6	48,625.18	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	48,625.18
SUBTOTAL:		22,658.87	-52.99	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	22,605.88
3506	ADULT 40-100% MALE	100.62	646.90	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	747.52
3507	ADULT 40-100% FEMAL	350.00	-297.96	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	52.04
3508	ADULT 40-100% M&F 45	4,048.26	5,152.04	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,200.30
3509	ADULT 40-100% M&F 65	1,136.72	650.66	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,787.38
3514	ADULT 40-100% MALE	28,154.57	16,919.86	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	45,074.43
3515	ADULT 40-100% FEMAL	63,740.82	68,857.24	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	132,598.06
3516	ADULT 40-100% MALE	595,422.82	648,844.84	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,244,267.66
3517	ADULT 40-100% FEMAL	448,531.84	490,065.88	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	938,597.72
3518	ADULT 40-100% M&F 45	1,779,103.67	1,877,742.95	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,656,846.62
3519	ADULT 40-100% M&F 65	700.00	1,114.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,814.00
3526	ADULT 40-100% MALE	0.00	74.88	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	74.88
3528	ADULT 40-100% M&F 45	101.17	60.44	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	161.61
3705	ADULT <40% EXP FEM	0.00	5.04	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5.04
3706	ADULT <40% EXP MAL	254.18	187.24	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	441.42
3707	ADULT <40% EXP FEM	3,196.60	2,984.95	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,181.55
3708	ADULT <40% EXP M&F	20,398.58	29,175.88	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	49,574.46
3709	ADULT <40% EXP M&F	662.62	898.69	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,561.31
3714	ADULT <40% EXP MAL	222,884.44	394,365.52	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	617,249.96
3715	ADULT <40% EXP FEM	310,676.54	280,914.28	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	591,590.82
3716	ADULT <40% EXP MAL	5,628,508.71	6,879,358.31	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12,507,867.02
3717	ADULT <40% EXP FEM	3,131,984.98	3,612,847.61	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,744,832.59
3718	ADULT <40% EXP M&F	7,505,601.56	8,385,725.63	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	15,891,327.19
3719	ADULT <40% EXP M&F	20,526.57	6,525.97	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	27,052.54
3727	ADULT <40% EXP FEM	166.20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	166.20
3728	ADULT <40% EXP M&F	-612.98	2,336.87	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,723.89
SUBTOTAL:		19,765,638.49	22,705,157.72	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	42,470,796.21
3906	NEWLY ELIGIBLE MALE	1,400.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,400.00
3908	NEWLY ELIGIBLE M&F	8,274.29	12,110.91	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	20,385.20
3909	NEWLY ELIGIBLE M&F	291.65	74.97	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	366.62
3914	NEWLY ELIGIBLE MALE	6,715.58	7,956.39	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	14,671.97
3915	NEWLY ELIGIBLE FEMAL	22,792.35	34,855.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	57,647.95

ACUTE FEE FOR SERVICE - EXCLUDING EMERGENCY SERVICES

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
3916	NEWLY ELIGIBLE MALE	305,610.01	396,142.75	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	701,752.76
3917	NEWLY ELIGIBLE FEMA	365,563.44	469,279.85	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	834,843.29
3918	NEWLY ELIGIBLE M&F	1,046,431.51	1,175,014.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,221,445.61
3919	NEWLY ELIGIBLE M&F	700.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	700.00
3928	NEWLY ELIGIBLE M&F	47.11	350.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	397.11
SUBTOTAL:		1,757,825.94	2,095,784.57	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,853,610.51
4413	SOBRA 100-133% M&F	208,919.81	208,659.92	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	417,579.73
4414	SOBRA 100-133% MALE	89,702.86	89,764.24	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	179,467.10
4415	SOBRA 100-133% FEM	72,034.45	135,577.62	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	207,612.07
SUBTOTAL:		370,657.12	434,001.78	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	804,658.90
4517	BC PATIENT FEMALE 2	5,936.00	6,300.97	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12,236.97
4518	BC PATIENT FEMALE 4	1,513.47	2,898.87	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,412.34
4617	CC PATIENT FEMALE 2	8,655.21	1,050.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,705.21
4618	CC PATIENT FEMALE 4	4,085.95	1,050.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,135.95
SUBTOTAL:		20,190.63	11,299.84	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	31,490.47
8700	SSI DISABLED FREEDO	3,861.91	11,145.71	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	15,007.62
8710	SSI DISABLED FREEDO	2,100.00	2,528.61	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,628.61
8720	SSI DISABLED FREEDO	59.40	237.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	297.00
SUBTOTAL:		6,021.31	13,911.92	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	19,933.23
TOTAL:		64,487,605.57	71,142,743.92	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	135,630,349.49

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

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1006	TANF 21-44 MALE WITH	0.00	79.15	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	79.15
1011	TANF <1 M & F NON-ME	439.67	11,488.16	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	11,927.83
1012	TANF 01-05 M & F NON	1,999.68	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,999.68
1014	TANF 14-20 MALE NON-	1,639.96	371.56	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,011.52
1015	TANF 14-20 FEMALE N	10,367.88	4,369.23	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	14,737.11
1016	TANF 21-44 MALE NON-	27,978.02	35,547.13	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	63,525.15
1017	TANF 21-44 FEMALE N	85,071.84	122,995.47	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	208,067.31
1018	TANF 45-64 M & F NON	19,601.63	63,726.19	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	83,327.82
2100	SSI AGED WITH MEDIC A	4,288.93	2,161.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,449.93
2110	SSI AGED NON-MEDIC AP	16,932.19	33,017.03	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	49,949.22
2120	SSI AGED WITH QMB	0.00	807.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	807.00
2200	SSI DISABLED WITH M F	488.66	1,617.07	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,105.73
2210	SSI DISABLED NON-ME D	39,007.48	95,497.11	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	134,504.59
2220	SSI DISABLED WITH Q M	0.00	1,277.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,277.10
4311	SOBRA CHILD <1 M & F	117,403.64	23,297.12	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	140,700.76
4312	SOBRA CHILD 01-05 M	64,184.72	52,686.05	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	116,870.77
4313	SOBRA CHILD 06-13 M	34,405.76	34,320.87	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	68,726.63
4314	SOBRA CHILD 14-20 MA	34,112.02	13,654.57	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	47,766.59
4315	SOBRA CHILD 14-20 FE	25,544.79	41,450.78	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	66,995.57
5007	SOBRA PREG 21-44 FE M	1,316.92	-622.54	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	694.38
5015	SOBRA PREG 14-20 FE M	17,081.33	30,674.40	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	47,755.73
5017	SOBRA PREG 21-44 FE M	77,766.50	80,269.95	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	158,036.45
5018	SOBRA PREG 45-64 FE M	0.00	28.27	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	28.27
8040	SLMB	6,944.53	49.41	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,993.94
8050	QI1	959.34	1,438.39	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,397.73
SUBTOTAL:		587,535.49	650,200.47	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,237,735.96
1106	TANF EXPANDED 21-44	0.00	93.33	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	93.33
1107	TANF EXPANDED 21-44	264.36	294.74	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	559.10
1108	TANF EXPANDED 45-64	773.33	420.71	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,194.04
1114	TANF EXPANDED 14-20	515.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	515.10
1115	TANF EXPANDED 14-20	1,224.74	4,420.72	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,645.46
1116	TANF EXPANDED 21-44	13,694.50	13,902.95	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	27,597.45
1117	TANF EXPANDED 21-44	31,143.56	46,456.94	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	77,600.50
1118	TANF EXPANDED 45-64	29,015.56	33,956.75	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	62,972.31
2400	SSI AGED EXPANDED MM	2,377.90	12,618.70	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	14,996.60

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

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
2410	SSI AGED EXPANDED NO	979.32	10,480.42	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	11,459.74
2420	SSI AGED EXPANDED WU	550.98	1,286.23	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,837.21
2600	SSI DISABLED EXPAND	2,818.70	1,835.75	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,654.45
2610	SSI DISABLED EXPAND F	3,572.35	3,805.02	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,377.37
2620	SSI DISABLED EXPAND F	260.03	91.97	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	352.00
SUBTOTAL:		87,190.43	129,664.23	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	216,854.66
3508	ADULT 40-100% M&F 45	39.84	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	39.84
3514	ADULT 40-100% MALE 1	7,354.73	2,210.13	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,564.86
3515	ADULT 40-100% FEMAL F	4,053.85	7,409.16	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	11,463.01
3516	ADULT 40-100% MALE 2	22,487.77	47,727.87	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	70,215.64
3517	ADULT 40-100% FEMAL F	32,478.15	34,588.71	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	67,066.86
3518	ADULT 40-100% M&F 45	115,109.31	85,155.48	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	200,264.79
3519	ADULT 40-100% M&F 65	0.00	83.25	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	83.25
3527	ADULT 40-100% FEMAL F	35.04	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	35.04
3706	ADULT <40% EXP MAL F	1,587.28	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,587.28
3707	ADULT <40% EXP FEM AL	947.85	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	947.85
3714	ADULT <40% EXP MAL F	-3,202.73	15,501.02	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12,298.29
3715	ADULT <40% EXP FEM AL	8,301.75	16,458.77	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	24,760.52
3716	ADULT <40% EXP MAL F	167,516.26	204,690.38	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	372,206.64
3717	ADULT <40% EXP FEM AL	161,052.04	116,919.92	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	277,971.96
3718	ADULT <40% EXP M&F A	492,428.69	286,192.87	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	778,621.56
SUBTOTAL:		1,010,189.83	816,937.56	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,827,127.39
3907	NEWLY ELIGIBLE FEMAL I	125.54	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	125.54
3908	NEWLY ELIGIBLE M&F A	90.99	700.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	790.99
3914	NEWLY ELIGIBLE MALE	654.68	234.01	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	888.69
3915	NEWLY ELIGIBLE FEMAL I	4,655.16	13,237.05	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	17,892.21
3916	NEWLY ELIGIBLE MALE	33,428.04	33,670.17	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	67,098.21
3917	NEWLY ELIGIBLE FEMAL I	33,130.96	36,088.32	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	69,219.28
3918	NEWLY ELIGIBLE M&F A	88,508.51	131,570.76	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	220,079.27
SUBTOTAL:		160,593.88	215,500.31	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	376,094.19
4413	SOBRA 100-133% M&F E	4,059.93	12,186.74	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	16,246.67
4414	SOBRA 100-133% MALE	5,335.47	2,393.38	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,728.85
4415	SOBRA 100-133% FEM AL	867.96	4,065.21	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,933.17
SUBTOTAL:		10,263.36	18,645.33	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	28,908.69

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

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
8700	SSI DISABLED FREEDO M	141.21	1,493.16	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,634.37
8710	SSI DISABLED FREEDO M	0.00	137.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	137.00
SUBTOTAL:		141.21	1,630.16	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,771.37
TOTAL:		1,855,914.20	1,832,578.06	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,688,492.26

FAMILY PLANNING SERVICES

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
5510	SOBRA FPS FEMALE W IT	-39.37	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-39.37
SUBTOTAL:		-39.37	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-39.37
TOTAL:		-39.37	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-39.37

FEDERAL EMERGENCY SERVICES

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1011	TANF <1 M & F NON-ME	0.00	455.46	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	455.46
1012	TANF 01-05 M & F NON	3,325.77	8,684.64	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12,010.41
1013	TANF 06-13 M & F NON	54,626.02	34,912.76	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	89,538.78
1014	TANF 14-20 MALE NON-	65,319.99	60,239.51	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	125,559.50
1015	TANF 14-20 FEMALE N	458,200.55	295,670.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	753,870.55
1016	TANF 21-44 MALE NON-	60,888.08	100,933.93	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	161,822.01
1017	TANF 21-44 FEMALE N	2,670,623.86	2,730,005.88	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,400,629.74
1018	TANF 45-64 M & F NON	115,318.65	114,094.17	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	229,412.82
1019	TANF 65+ M & F NON-M	974.37	580.16	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,554.53
2100	SSI AGED WITH MEDIC	1,028.00	1,134.36	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,162.36
2110	SSI AGED NON-MEDIC	767,030.64	976,118.47	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,743,149.11
2120	SSI AGED WITH QMB	0.00	1,247.40	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,247.40
2200	SSI DISABLED WITH M	15,487.16	14,895.52	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	30,382.68
2210	SSI DISABLED NON-ME	388,846.01	233,518.99	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	622,365.00
2310	SSI BLIND NON-MEDIC	-213.81	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-213.81
SUBTOTAL:		4,601,455.29	4,572,491.25	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,173,946.54
1106	TANF EXPANDED 21-44	942.36	1,534.47	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,476.83
1107	TANF EXPANDED 21-44	926.52	718.33	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,644.85
1108	TANF EXPANDED 45-64	2,965.50	1,071.83	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,037.33
1114	TANF EXPANDED 14-20	1,190.91	3,724.52	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,915.43
1115	TANF EXPANDED 14-20	10,061.00	21,034.78	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	31,095.78
1116	TANF EXPANDED 21-44	354,391.46	305,914.64	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	660,306.10
1117	TANF EXPANDED 21-44	755,978.61	983,459.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,739,437.71
1118	TANF EXPANDED 45-64	334,689.08	312,771.14	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	647,460.22
1119	TANF EXPANDED 65+	5,837.82	4,006.70	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,844.52
2400	SSI AGED EXPANDED	3,738.85	228.58	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,967.43
2410	SSI AGED EXPANDED	91,019.49	40,318.46	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	131,337.95
2600	SSI DISABLED EXPAND	698.31	742.38	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,440.69
2610	SSI DISABLED EXPAND	34,997.13	35,849.69	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	70,846.82
SUBTOTAL:		1,597,437.04	1,711,374.62	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,308,811.66
3516	ADULT 40-100% MALE	631.64	303.33	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	934.97
3517	ADULT 40-100% FEMAL	0.00	3,220.32	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,220.32
3518	ADULT 40-100% M&F 45	363.70	744.09	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,107.79
3708	ADULT <40% EXP M&F	0.00	83.87	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	83.87
3715	ADULT <40% EXP FEM	0.00	689.22	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	689.22

FEDERAL EMERGENCY SERVICES

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
3716	ADULT <40% EXP MAL F	3,173.56	985.83	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,159.39
3717	ADULT <40% EXP FEM A1	7,385.92	3,761.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	11,147.52
3718	ADULT <40% EXP M&F A	6,017.10	34,892.69	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	40,909.79
SUBTOTAL:		17,571.92	44,680.95	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	62,252.87
3908	NEWLY ELIGIBLE M&F A	3,134.87	5,350.82	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8,485.69
3914	NEWLY ELIGIBLE MALE	22,970.43	28,098.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	51,068.43
3915	NEWLY ELIGIBLE FEMA	30,691.94	32,607.21	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	63,299.15
3916	NEWLY ELIGIBLE MALE	433,489.69	517,176.26	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	950,665.95
3917	NEWLY ELIGIBLE FEMA	300,086.49	238,508.95	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	538,595.44
3918	NEWLY ELIGIBLE M&F A	894,595.81	1,176,047.32	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,070,643.13
3919	NEWLY ELIGIBLE M&F 6	15,863.94	1,457.81	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	17,321.75
3927	NEWLY ELIGIBLE FEMA	46.58	46.58	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	93.16
3928	NEWLY ELIGIBLE M&F A	695.06	694.80	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,389.86
SUBTOTAL:		1,701,574.81	1,999,987.75	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,701,562.56
TOTAL:		7,918,039.06	8,328,534.57	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	16,246,573.63

QMB - FEE FOR SERVICE

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
8020	QMB ONLY	293,436.77	211,412.30	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	504,849.07
SUBTOTAL:		293,436.77	211,412.30	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	504,849.07
TOTAL:		293,436.77	211,412.30	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	504,849.07

INPATIENT INMATES FEE FOR SERVICE

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1017	TANF 21-44 FEMALE N O	3,227.31	2,397.42	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,624.73
2100	SSI AGED WITH MEDIC A	15,412.32	89,978.84	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	105,391.16
2110	SSI AGED NON-MEDIC A	61,148.18	60,953.07	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	122,101.25
2120	SSI AGED WITH QMB A	1,093.55	171.15	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,264.70
2200	SSI DISABLED WITH M F	4,280.93	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,280.93
2210	SSI DISABLED NON-ME D	0.00	806.03	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	806.03
2220	SSI DISABLED WITH Q M	5,933.83	6,506.08	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12,439.91
5017	SOBRA PREG 21-44 FE M	3,043.51	2,377.80	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,421.31
8020	QMB ONLY	0.00	164.38	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	164.38
SUBTOTAL:		94,139.63	163,354.77	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	257,494.40
2620	SSI DISABLED EXPAND F	10,918.19	376.34	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	11,294.53
SUBTOTAL:		10,918.19	376.34	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	11,294.53
3516	ADULT 40-100% MALE 2	276.08	465.25	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	741.33
3706	ADULT <40% EXP MAL F	2,286.61	1,389.07	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,675.68
3708	ADULT <40% EXP M&F A	48,908.37	28,993.62	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	77,901.99
3714	ADULT <40% EXP MAL F	0.00	108.35	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	108.35
3716	ADULT <40% EXP MAL F	282,960.57	239,237.96	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	522,198.53
3717	ADULT <40% EXP FEM A	8,006.01	55,446.91	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	63,452.92
3718	ADULT <40% EXP M&F A	235,458.94	434,500.79	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	669,959.73
3719	ADULT <40% EXP M&F S	1,495.64	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,495.64
3726	ADULT <40% EXP MAL F	73.01	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	73.01
3728	ADULT <40% EXP M&F A	9,628.14	5,770.49	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	15,398.63
SUBTOTAL:		589,093.37	765,912.44	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,355,005.81
3916	NEWLY ELIGIBLE MALE	352.61	16,903.27	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	17,255.88
3918	NEWLY ELIGIBLE M&F A	5,998.76	18,912.57	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	24,911.33
SUBTOTAL:		6,351.37	35,815.84	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	42,167.21
TOTAL:		700,502.56	965,459.39	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,665,961.95

COCONINO COUNTY INMATES FEE FOR SERVICE

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
3716	ADULT <40% EXP MAL F	0.00	3,842.02	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,842.02
3718	ADULT <40% EXP M&F A	151.74	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	151.74
SUBTOTAL:		151.74	3,842.02	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,993.76
TOTAL:		151.74	3,842.02	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,993.76

MARICOPA COUNTY INMATES FEE FOR SERVICE

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1016	TANF 21-44 MALE NON-	2,440.29	3,129.66	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,569.95
1017	TANF 21-44 FEMALE N	0.00	2,041.21	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,041.21
2200	SSI DISABLED WITH M	0.00	10,751.39	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	10,751.39
2210	SSI DISABLED NON-ME	18,422.83	10,195.76	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	28,618.59
2220	SSI DISABLED WITH Q	15.35	3,019.90	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,035.25
5017	SOBRA PREG 21-44 FE	0.00	5,306.85	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,306.85
SUBTOTAL:		20,878.47	34,444.77	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	55,323.24
1116	TANF EXPANDED 21-44	3,673.93	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,673.93
1118	TANF EXPANDED 45-64	14,172.42	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	14,172.42
2620	SSI DISABLED EXPAND	2,757.38	5,096.64	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,854.02
SUBTOTAL:		20,603.73	5,096.64	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	25,700.37
3518	ADULT 40-100% M&F 45	0.00	16,799.05	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	16,799.05
3716	ADULT <40% EXP MAL	69,878.66	66,286.32	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	136,164.98
3717	ADULT <40% EXP FEM	5,251.56	3,256.51	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8,508.07
3718	ADULT <40% EXP M&F	49,207.81	47,104.83	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	96,312.64
SUBTOTAL:		124,338.03	133,446.71	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	257,784.74
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
3918	NEWLY ELIGIBLE M&F	15,153.54	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	15,153.54
SUBTOTAL:		15,153.54	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	15,153.54
TOTAL:		180,973.77	172,988.12	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	353,961.89

PIMA COUNTY INMATES FEE FOR SERVICE

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
2210	SSI DISABLED NON-ME D	327.15	591.37	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	918.52
5017	SOBRA PREG 21-44 FE M	11.66	2,253.21	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,264.87
SUBTOTAL:		338.81	2,844.58	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,183.39
1116	TANF EXPANDED 21-44	435.29	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	435.29
1117	TANF EXPANDED 21-44	112.96	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	112.96
SUBTOTAL:		548.25	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	548.25
3716	ADULT <40% EXP MAL F	13,355.83	4,487.44	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	17,843.27
3717	ADULT <40% EXP FEM M	55.30	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	55.30
3718	ADULT <40% EXP M&F M	2,778.01	10,131.21	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12,909.22
SUBTOTAL:		16,189.14	14,618.65	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	30,807.79
TOTAL:		17,076.20	17,463.23	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	34,539.43

PINAL COUNTY INMATES FEE FOR SERVICE

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
2200	SSI DISABLED WITH M F	0.00	630.38	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	630.38
2210	SSI DISABLED NON-ME D	0.00	160.89	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	160.89
SUBTOTAL:		0.00	791.27	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	791.27
3716	ADULT <40% EXP MAL F	7.98	1,430.76	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,438.74
3717	ADULT <40% EXP FEM AI	144.34	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	144.34
3718	ADULT <40% EXP M&F A	8,014.50	-3,085.25	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,929.25
SUBTOTAL:		8,166.82	-1,654.49	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,512.33
TOTAL:		8,166.82	-863.22	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,303.60

YAVAPAI COUNTY INMATES FEE FOR SERVICE

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
3716	ADULT <40% EXP MAL F	306.05	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	306.05
SUBTOTAL:		306.05	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	306.05
TOTAL:		306.05	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	306.05

LONG TERM CARE FEE FOR SERVICE - EPD AND DES DD

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1010	TANF NON-MEDICARE	0.00	350.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	350.00
2100	SSI AGED WITH MEDIC A	1,867,476.11	2,106,357.37	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,973,833.48
2110	SSI AGED NON-MEDIC A	177,147.26	101,345.13	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	278,492.39
2120	SSI AGED WITH QMB	2,867,399.51	2,877,254.51	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,744,654.02
2200	SSI DISABLED WITH M F	543,524.04	474,214.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,017,738.54
2210	SSI DISABLED NON-ME D	2,493,153.38	2,750,175.45	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,243,328.83
2220	SSI DISABLED WITH Q M	639,532.10	693,460.39	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,332,992.49
2300	SSI BLIND WITH MEDIC	74.93	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	74.93
2310	SSI BLIND NON-MEDIC A	22,797.15	14,440.58	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	37,237.73
2320	SSI BLIND WITH QMB	5,463.78	7,778.92	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	13,242.70
SUBTOTAL:		8,616,568.26	9,025,376.85	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	17,641,945.11
8710	SSI DISABLED FREEDO M	0.00	1,877.34	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,877.34
8720	SSI DISABLED FREEDO M	1,712.52	2,990.88	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,703.40
SUBTOTAL:		1,712.52	4,868.22	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,580.74
TOTAL:		8,618,280.78	9,030,245.07	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	17,648,525.85

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

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
2100	SSI AGED WITH MEDIC A	4,497.83	12,645.58	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	17,143.41
2120	SSI AGED WITH QMB	0.00	83.04	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	83.04
2200	SSI DISABLED WITH M E	572.87	1,912.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,484.97
2210	SSI DISABLED NON-ME D	10,415.23	19,351.87	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	29,767.10
SUBTOTAL:		15,485.93	33,992.59	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	49,478.52
TOTAL:		15,485.93	33,992.59	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	49,478.52

ACUTE FEE FOR SERVICE MEDICAID IN PUBLIC SCHOOLS

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1012	TANF 01-05 M & F NON	44,618.60	15,435.03	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	60,053.63
1013	TANF 06-13 M & F NON	101,743.02	26,444.15	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	128,187.17
1014	TANF 14-20 MALE NON-	8,473.78	2,483.13	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	10,956.91
1015	TANF 14-20 FEMALE N	3,292.00	1,194.76	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,486.76
2200	SSI DISABLED WITH M	33.88	103.18	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	137.06
2210	SSI DISABLED NON-ME	252,041.30	84,309.59	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	336,350.89
2300	SSI BLIND WITH MEDIC	158.70	63.48	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	222.18
2310	SSI BLIND NON-MEDIC	2,989.18	538.14	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,527.32
2320	SSI BLIND WITH QMB	0.00	333.30	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	333.30
4305	SOBRA CHILD 14-20 FE	32.20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	32.20
4312	SOBRA CHILD 01-05 M	74,849.31	21,849.59	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	96,698.90
4313	SOBRA CHILD 06-13 M	138,639.38	30,827.76	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	169,467.14
4314	SOBRA CHILD 14-20 MA	12,134.57	3,360.74	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	15,495.31
4315	SOBRA CHILD 14-20 FE	3,881.60	1,365.86	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,247.46
SUBTOTAL:		642,887.52	188,308.71	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	831,196.23
1112	TANF EXPANDED 01-05	126.67	308.78	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	435.45
1113	TANF EXPANDED 06-13	2,228.51	2,807.73	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,036.24
1114	TANF EXPANDED 14-20	31.33	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	31.33
1115	TANF EXPANDED 14-20	135.37	38.36	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	173.73
2620	SSI DISABLED EXPAND	210.61	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	210.61
SUBTOTAL:		2,732.49	3,154.87	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,887.36
3516	ADULT 40-100% MALE	0.00	12.33	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12.33
3707	ADULT <40% EXP FEM	6.83	27.28	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	34.11
3714	ADULT <40% EXP MAL	1,726.70	9.31	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,736.01
3715	ADULT <40% EXP FEM	1,319.96	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,319.96
SUBTOTAL:		3,053.49	48.92	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,102.41
4413	SOBRA 100-133% M&F	25,022.12	4,486.95	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	29,509.07
4414	SOBRA 100-133% MALE	8,073.76	649.78	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8,723.54
4415	SOBRA 100-133% FEM	515.37	640.27	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,155.64
SUBTOTAL:		33,611.25	5,777.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	39,388.25
TOTAL:		682,284.75	197,289.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	879,574.25

LONG TERM CARE FEE FOR SERVICE MEDICAID IN PUBLIC SCHOOLS

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1000	TANF WITH MEDICARE	831.19	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	831.19
1010	TANF NON-MEDICARE	40,868.65	24,234.06	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	65,102.71
2200	SSI DISABLED WITH M	2,871.13	789.16	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,660.29
2210	SSI DISABLED NON-ME D	1,249,307.80	489,106.70	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,738,414.50
2220	SSI DISABLED WITH Q	2,114.42	-248.86	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,865.56
2310	SSI BLIND NON-MEDIC A	7,193.15	6,514.48	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	13,707.63
SUBTOTAL:		1,303,186.34	520,395.54	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,823,581.88
TOTAL:		1,303,186.34	520,395.54	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,823,581.88

ACUTE REINSURANCE

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1006	TANF 21-44 MALE WITH	98.96	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	98.96
1011	TANF <1 M & F NON-ME	741,618.20	275,323.86	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,016,942.06
1012	TANF 01-05 M & F NON	59,967.01	17,049.65	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	77,016.66
1013	TANF 06-13 M & F NON	184,625.99	341,772.36	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	526,398.35
1014	TANF 14-20 MALE NON-	12,269.60	19,354.41	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	31,624.01
1015	TANF 14-20 FEMALE N	18,361.96	12,714.48	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	31,076.44
1016	TANF 21-44 MALE NON-	161,649.37	-21,881.23	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	139,768.14
1017	TANF 21-44 FEMALE N	127,936.47	159,048.89	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	286,985.36
1018	TANF 45-64 M & F NON	84,129.25	65,348.37	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	149,477.62
2100	SSI AGED WITH MEDIC	624.78	33,070.16	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	33,694.94
2110	SSI AGED NON-MEDIC	67,861.38	195,769.67	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	263,631.05
2200	SSI DISABLED WITH M	43,874.36	10,496.70	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	54,371.06
2210	SSI DISABLED NON-ME	4,045,297.65	3,940,603.94	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,985,901.59
2310	SSI BLIND NON-MEDIC	40,412.86	2,873.76	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	43,286.62
4311	SOBRA CHILD <1 M & F	929,626.36	754,864.21	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,684,490.57
4312	SOBRA CHILD 01-05 M	114,463.42	359,348.65	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	473,812.07
4313	SOBRA CHILD 06-13 M	239,870.36	136,192.59	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	376,062.95
4314	SOBRA CHILD 14-20 MA	115,773.80	89,801.77	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	205,575.57
4315	SOBRA CHILD 14-20 FE	14,027.07	63,132.41	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	77,159.48
5015	SOBRA PREG 14-20 FE	0.00	9,507.28	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,507.28
5017	SOBRA PREG 21-44 FE	8,128.10	28,115.83	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	36,243.93
SUBTOTAL:		7,010,616.95	6,492,507.76	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	13,503,124.71
1106	TANF EXPANDED 21-44	212.95	936.55	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,149.50
1115	TANF EXPANDED 14-20	0.00	505.48	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	505.48
1116	TANF EXPANDED 21-44	33,363.51	116,852.15	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	150,215.66
1117	TANF EXPANDED 21-44	89,055.47	57,583.74	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	146,639.21
1118	TANF EXPANDED 45-64	124,365.77	99,058.09	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	223,423.86
2400	SSI AGED EXPANDED	-18.11	42.85	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	24.74
2410	SSI AGED EXPANDED	14,090.33	42,829.44	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	56,919.77
2600	SSI DISABLED EXPAND	35,356.98	19,953.70	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	55,310.68
2610	SSI DISABLED EXPAND	20,284.70	72,266.71	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	92,551.41
SUBTOTAL:		316,711.60	410,028.71	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	726,740.31
3316	AHC CARE MALE 21-44	22.30	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	22.30
3318	AHC CARE M&F 45-64 N	742.92	2,889.03	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,631.95
SUBTOTAL:		765.22	2,889.03	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,654.25

ACUTE REINSURANCE

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
3616	AHC CARE/MI MALE 21-	9,760.41	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,760.41
3618	AHC CARE/MI M&F 45-6	28,195.73	-1,579.93	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	26,615.80
SUBTOTAL:		37,956.14	-1,579.93	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	36,376.21
3508	ADULT 40-100% M&F 45	-1,247.11	6.67	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-1,240.44
3514	ADULT 40-100% MALE	0.00	90,377.57	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	90,377.57
3515	ADULT 40-100% FEMAL	9,715.08	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,715.08
3516	ADULT 40-100% MALE	42,038.64	132,978.87	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	175,017.51
3517	ADULT 40-100% FEMAL	69,797.48	154,862.63	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	224,660.11
3518	ADULT 40-100% M&F 45	414,839.94	278,819.33	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	693,659.27
3708	ADULT <40% EXP M&F	37,973.29	1,282.59	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	39,255.88
3714	ADULT <40% EXP MAL	150,958.00	173,540.11	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	324,498.11
3715	ADULT <40% EXP FEM	103,135.79	82,987.17	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	186,122.96
3716	ADULT <40% EXP MAL	502,179.54	650,833.61	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,153,013.15
3717	ADULT <40% EXP FEM	256,435.90	98,701.30	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	355,137.20
3718	ADULT <40% EXP M&F	1,083,021.23	1,159,557.65	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,242,578.88
SUBTOTAL:		2,668,847.78	2,823,947.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,492,795.28
3908	NEWLY ELIGIBLE M&F	75,258.45	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	75,258.45
3914	NEWLY ELIGIBLE MALE	4,356.93	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,356.93
3916	NEWLY ELIGIBLE MALE	34,179.36	117,409.93	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	151,589.29
3917	NEWLY ELIGIBLE FEMA	-833.32	13,544.41	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12,711.09
3918	NEWLY ELIGIBLE M&F	163,410.54	348,055.35	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	511,465.89
SUBTOTAL:		276,371.96	479,009.69	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	755,381.65
4413	SOBRA 100-133% M&F	19,844.57	10,180.96	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	30,025.53
4414	SOBRA 100-133% MALE	451,101.89	451,107.67	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	902,209.56
4415	SOBRA 100-133% FEM	188.17	9,280.96	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,469.13
SUBTOTAL:		471,134.63	470,569.59	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	941,704.22
4517	BC PATIENT FEMALE 2	6,209.80	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,209.80
SUBTOTAL:		6,209.80	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,209.80
8710	SSI DISABLED FREEDO	2,595.44	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,595.44
SUBTOTAL:		2,595.44	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,595.44
TOTAL:		10,791,209.52	10,677,372.35	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	21,468,581.87

LONG TERM CARE REINSURANCE

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1010	TANF NON-MEDICARE	0.00	43.57	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	43.57
2100	SSI AGED WITH MEDIC A	327,108.06	281,473.61	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	608,581.67
2110	SSI AGED NON-MEDIC A	218,322.47	133,627.59	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	351,950.06
2200	SSI DISABLED WITH M E	644,979.13	626,909.22	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,271,888.35
2210	SSI DISABLED NON-ME D	2,840,717.50	2,796,391.98	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,637,109.48
2310	SSI BLIND NON-MEDIC A	2,067.18	829.15	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,896.33
SUBTOTAL:		4,033,194.34	3,839,275.12	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,872,469.46
8710	SSI DISABLED FREEDO M	12,568.90	358.45	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12,927.35
SUBTOTAL:		12,568.90	358.45	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12,927.35
TOTAL:		4,045,763.24	3,839,633.57	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,885,396.81

ACUTE SMIB

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1000	TANF WITH MEDICARE	194,274.80	239,591.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	433,866.40
1010	TANF NON-MEDICARE	419.60	314.70	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	734.30
1020	TANF WITH QMB	59,218.50	89,224.80	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	148,443.30
2100	SSI AGED WITH MEDIC A	55,177.40	57,030.30	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	112,207.70
2110	SSI AGED NON-MEDIC AP	390,962.30	405,066.70	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	796,029.00
2120	SSI AGED WITH QMB	1,817,089.90	1,837,723.90	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,654,813.80
2200	SSI DISABLED WITH M E	156,570.80	143,157.80	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	299,728.60
2210	SSI DISABLED NON-ME D	332,008.50	338,302.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	670,311.00
2220	SSI DISABLED WITH Q M	2,831,922.00	2,873,883.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,705,805.50
2300	SSI BLIND WITH MEDIC A	419.60	419.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	839.20
2310	SSI BLIND NON-MEDIC A	3,251.90	3,356.80	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,608.70
2320	SSI BLIND WITH QMB	25,071.10	24,336.80	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	49,407.90
4300	SOBRA CHILD WITH M ED	104.90	104.90	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	209.80
4320	SOBRA CHILD WITH Q MB	104.90	104.90	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	209.80
5000	SOBRA PREGNANT WO MAN	1,363.70	1,363.70	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,727.40
5020	SOBRA PREGNANT WO MAN	944.10	839.20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,783.30
8020	QMB ONLY	543,517.80	550,391.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,093,908.90
8040	SLMB	3,389,057.50	3,504,045.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,893,103.10
8888	SMIB ONLY NOT ELIGIB	-52,359.80	-26,959.30	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-79,319.10
9999	SMIB ONLY NOT ELIGIB	59,066.30	19,847.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	78,913.80
SUBTOTAL:		9,808,185.80	10,062,146.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	19,870,332.40
1100	TANF EXPANDED FPR FI	470,376.20	412,891.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	883,267.20
1110	TANF EXPANDED FOR FI	209.80	104.90	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	314.70
1120	TANF EXPANDED FOR FI	128,342.70	125,775.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	254,117.80
2400	SSI AGED EXPANDED W/I	3,042.10	1,468.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,510.70
2410	SSI AGED EXPANDED NO	524.50	524.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,049.00
2420	SSI AGED EXPANDED W/I	2,928,537.00	2,921,828.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,850,365.60
2520	SSI BLIND EXPANDED M	104.90	104.90	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	209.80
2600	SSI DISABLED EXPAND E	-419.60	209.80	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-209.80
2620	SSI DISABLED EXPAND E	1,653,183.80	1,727,813.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,380,996.90
SUBTOTAL:		5,183,901.40	5,190,720.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	10,374,621.90
3520	ADULT 40-100% FOR FI	3,147.00	-1,743.30	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,403.70
3720	AHC CARE EXPANDED FO	3,776.40	1,468.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,245.00
SUBTOTAL:		6,923.40	-274.70	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,648.70
3920	NEWLY ELIGIBLE FOR E	1,468.60	734.30	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,202.90

ACUTE SMIB

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
SUBTOTAL:		1,468.60	734.30	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,202.90
8720	SSI DISABLED FREEDO M	21,399.60	22,238.80	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	43,638.40
SUBTOTAL:		21,399.60	22,238.80	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	43,638.40
TOTAL:		15,021,878.80	15,275,565.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	30,297,444.30

ACUTE HIB

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
2100	SSI AGED WITH MEDIC A	2,442.00	-814.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,628.00
2120	SSI AGED WITH QMB	173,720.20	179,916.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	353,636.70
2220	SSI DISABLED WITH Q B	88,616.20	96,125.80	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	184,742.00
2320	SSI BLIND WITH QMB	407.00	407.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	814.00
8020	QMB ONLY	4,988.10	2,953.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,941.20
9999	SMIB ONLY NOT ELIGIB	-8,404.70	-4,538.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-12,943.20
SUBTOTAL:		261,768.80	274,049.90	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	535,818.70
2420	SSI AGED EXPANDED WU	8,649.20	8,527.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	17,176.30
SUBTOTAL:		8,649.20	8,527.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	17,176.30
TOTAL:		270,418.00	282,577.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	552,995.00

Q1

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
8050	Q11	2,434,626.70	1,985,923.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,420,550.30
9999	SMIB ONLY NOT ELIGIB	-35,141.50	-2,907.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-38,048.60
SUBTOTAL:		2,399,485.20	1,983,016.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,382,501.70
TOTAL:		2,399,485.20	1,983,016.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,382,501.70

LTC SMIB

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1000	TANF WITH MEDICARE	524.50	419.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	944.10
1020	TANF WITH QMB	104.90	104.90	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	209.80
2100	SSI AGED WITH MEDIC A	874,183.40	870,946.20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,745,129.60
2110	SSI AGED NON-MEDIC AP	155,566.70	157,769.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	313,336.30
2120	SSI AGED WITH QMB	764,559.10	761,981.70	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,526,540.80
2200	SSI DISABLED WITH M F	319,840.10	329,595.80	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	649,435.90
2210	SSI DISABLED NON-ME D	15,630.10	25,513.40	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	41,143.50
2220	SSI DISABLED WITH Q M	710,227.60	707,605.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,417,832.70
2300	SSI BLIND WITH MEDIC	944.10	734.30	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,678.40
2310	SSI BLIND NON-MEDIC A	209.80	104.90	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	314.70
2320	SSI BLIND WITH QMB	4,300.90	4,510.70	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8,811.60
SUBTOTAL:		2,846,091.20	2,859,286.20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,705,377.40
8720	SSI DISABLED FREEDO M	734.30	629.40	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,363.70
SUBTOTAL:		734.30	629.40	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,363.70
TOTAL:		2,846,825.50	2,859,915.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,706,741.10

LTC HIB

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
2110	SSI AGED NON-MEDIC AP	407.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	407.00
2120	SSI AGED WITH QMB	256,094.80	261,120.80	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	517,215.60
2200	SSI DISABLED WITH M F	0.00	407.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	407.00
2220	SSI DISABLED WITH Q M	12,923.00	14,144.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	27,067.00
SUBTOTAL:		269,424.80	275,671.80	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	545,096.60
TOTAL:		269,424.80	275,671.80	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	545,096.60

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

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
13AD	MARICOPA ADULT INM AT	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
1006	TANF 21-44 MALE WITH	1,467.46	3,014.86	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,482.32
1007	TANF 21-44 FEMALE WI	4,007.77	5,488.43	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,496.20
1008	TANF 45-64 M & F WIT	8,300.31	14,284.07	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	22,584.38
1009	TANF 65+ M & F WITH	4,262.82	6,279.98	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	10,542.80
1011	TANF <1 M & F NON-ME	706,541.50	682,073.88	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,388,615.38
1012	TANF 01-05 M & F NON	969,410.73	801,705.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,771,116.23
1013	TANF 06-13 M & F NON	1,633,637.26	1,349,156.15	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,982,793.41
1014	TANF 14-20 MALE NON-	262,704.72	279,116.04	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	541,820.76
1015	TANF 14-20 FEMALE N	478,631.67	795,039.67	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,273,671.34
1016	TANF 21-44 MALE NON-	1,118,523.79	1,179,594.23	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,298,118.02
1017	TANF 21-44 FEMALE N	4,416,969.19	4,825,798.89	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,242,768.08
1018	TANF 45-64 M & F NON	1,478,215.20	1,497,596.26	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,975,811.46
1019	TANF 65+ M & F NON-M	5,703.98	4,317.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	10,021.48
1026	TANF 21-44 MALE WITH	700.00	210.84	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	910.84
1027	TANF 21-44 FEMALE WI	855.92	822.87	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,678.79
1028	TANF 45-64 M & F WIT	3,634.52	8,293.46	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	11,927.98
1029	TANF 65+ M & F WITH	2,256.22	1,398.03	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,654.25
2100	SSI AGED WITH MEDIC A	51,457.56	41,686.19	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	93,143.75
2110	SSI AGED NON-MEDIC AD	60,414.26	72,757.77	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	133,172.03
2120	SSI AGED WITH QMB	145,603.01	196,624.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	342,227.01
2200	SSI DISABLED WITH M F	118,193.79	139,630.47	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	257,824.26
2210	SSI DISABLED NON-ME D	3,959,038.86	4,322,461.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8,281,500.46
2220	SSI DISABLED WITH Q M	327,062.97	435,664.94	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	762,727.91
2300	SSI BLIND WITH MEDIC	1,289.05	551.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,840.05
2310	SSI BLIND NON-MEDIC A	50,186.61	38,392.80	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	88,579.41
2320	SSI BLIND WITH QMB	3,801.09	7,726.54	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	11,527.63
4311	SOBRA CHILD <1 M & F	1,574,251.07	1,423,643.90	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,997,894.97
4312	SOBRA CHILD 01-05 M	2,244,228.98	2,250,185.12	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,494,414.10
4313	SOBRA CHILD 06-13 M	3,142,386.43	3,632,568.25	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,774,954.68
4314	SOBRA CHILD 14-20 MA	747,001.51	1,133,294.81	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,880,296.32
4315	SOBRA CHILD 14-20 FE	984,792.86	1,180,701.71	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,165,494.57
5007	SOBRA PREG 21-44 FE M	0.00	700.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	700.00
5015	SOBRA PREG 14-20 FE MA	237,999.22	275,437.95	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	513,437.17

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

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
5017	SOBRA PREG 21-44 FE M	1,131,352.11	1,456,601.24	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,587,953.35
5018	SOBRA PREG 45-64 FE M	4,193.00	1,958.21	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,151.21
SUBTOTAL:		25,879,075.44	28,064,777.16	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	53,943,852.60
1106	TANF EXPANDED 21-44	2,193.53	4,316.53	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,510.06
1107	TANF EXPANDED 21-44	3,881.00	7,550.93	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	11,431.93
1108	TANF EXPANDED 45-64	17,862.89	29,601.36	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	47,464.25
1109	TANF EXPANDED 65+ MM	11,589.10	11,907.56	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	23,496.66
1111	TANF EXPANDED <1 M RF	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	5,250.00	4,248.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,498.00
1113	TANF EXPANDED 06-13	26,366.06	18,797.44	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	45,163.50
1114	TANF EXPANDED 14-20	8,195.40	8,023.36	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	16,218.76
1115	TANF EXPANDED 14-20	25,647.40	20,633.17	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	46,280.57
1116	TANF EXPANDED 21-44	278,711.63	257,235.68	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	535,947.31
1117	TANF EXPANDED 21-44	1,001,394.14	971,890.27	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,973,284.41
1118	TANF EXPANDED 45-64	498,055.24	489,955.39	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	988,010.63
1119	TANF EXPANDED 65+ MM	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	460.06	495.48	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	955.54
1127	TANF EXPANDED 21-44	1,085.12	2,207.71	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,292.83
1128	TANF EXPANDED 45-64	2,666.83	4,370.29	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,037.12
1129	TANF EXPANDED 65+ MM	3,939.78	7,378.95	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	11,318.73
2400	SSI AGED EXPANDED MM	15,824.15	18,656.13	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	34,480.28
2410	SSI AGED EXPANDED MM	44,953.28	27,103.71	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	72,056.99
2420	SSI AGED EXPANDED MM	165,461.94	213,135.45	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	378,597.39
2600	SSI DISABLED EXPAND F	6,769.93	6,974.26	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	13,744.19
2610	SSI DISABLED EXPAND F	109,481.97	123,966.21	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	233,448.18
2620	SSI DISABLED EXPAND F	85,508.30	104,493.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	190,001.90
SUBTOTAL:		2,315,297.75	2,332,941.48	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,648,239.23
3308	AHC CARE M&F 45-64 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
3316	AHC CARE MALE 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
3317	AHC CARE FEMALE 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
3318	AHC CARE M&F 45-64 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
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
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
3614	AHC CARE/MI MALE 14-	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
3615	AHC CARE/MI FEMALE 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

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

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
3616	AHC CARE/MI MALE 21-	0.00	-52.99	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-52.99
3617	AHC CARE/MI FEMALE	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
3618	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	-52.99	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-52.99
3506	ADULT 40-100% MALE	85.05	386.37	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	471.42
3507	ADULT 40-100% FEMAL	350.00	-297.96	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	52.04
3508	ADULT 40-100% M&F 45	645.75	4,143.44	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,789.19
3509	ADULT 40-100% M&F 65	1,136.72	452.79	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,589.51
3514	ADULT 40-100% MALE	26,346.12	11,086.99	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	37,433.11
3515	ADULT 40-100% FEMAL	39,467.46	45,163.63	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	84,631.09
3516	ADULT 40-100% MALE	304,613.42	425,982.76	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	730,596.18
3517	ADULT 40-100% FEMAL	316,477.56	364,737.12	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	681,214.68
3518	ADULT 40-100% M&F 45	1,086,597.94	1,026,522.27	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,113,120.21
3519	ADULT 40-100% M&F 65	700.00	1,114.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,814.00
3526	ADULT 40-100% MALE	0.00	74.88	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	74.88
3528	ADULT 40-100% M&F 45	59.40	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	59.40
3705	ADULT <40% EXP FEM	0.00	5.04	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5.04
3706	ADULT <40% EXP MAL	357.00	187.24	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	544.24
3707	ADULT <40% EXP FEM	1,396.64	1,663.61	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,060.25
3708	ADULT <40% EXP M&F	4,997.35	11,572.19	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	16,569.54
3709	ADULT <40% EXP M&F	550.16	545.25	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,095.41
3714	ADULT <40% EXP MAL	165,528.85	261,775.93	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	427,304.78
3715	ADULT <40% EXP FEM	208,336.04	216,013.15	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	424,349.19
3716	ADULT <40% EXP MAL	3,029,287.38	3,988,308.94	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,017,596.32
3717	ADULT <40% EXP FEM	1,927,561.48	2,317,641.88	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,245,203.36
3718	ADULT <40% EXP M&F	4,322,313.67	5,015,624.62	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,337,938.29
3719	ADULT <40% EXP M&F	1,400.00	4,739.20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,139.20
3727	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
3728	ADULT <40% EXP M&F	0.00	476.33	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	476.33
SUBTOTAL:		11,438,207.99	13,697,919.67	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	25,136,127.66
3906	NEWLY ELIGIBLE MALE	1,400.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,400.00
3908	NEWLY ELIGIBLE M&F	5,768.03	7,449.33	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	13,217.36
3909	NEWLY ELIGIBLE M&F	291.65	74.97	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	366.62
3914	NEWLY ELIGIBLE MALE	5,286.80	5,739.88	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	11,026.68
3915	NEWLY ELIGIBLE FEMAL	18,281.55	30,911.29	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	49,192.84

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

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
3916	NEWLY ELIGIBLE MALE	196,798.09	227,258.24	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	424,056.33
3917	NEWLY ELIGIBLE FEMA	271,360.04	317,416.51	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	588,776.55
3918	NEWLY ELIGIBLE M&F	680,980.32	652,498.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,333,478.92
3919	NEWLY ELIGIBLE M&F	700.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	700.00
3928	NEWLY ELIGIBLE M&F	0.00	350.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	350.00
SUBTOTAL:		1,180,866.48	1,241,698.82	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,422,565.30
4413	SOBRA 100-133% M&F	189,176.92	189,687.05	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	378,863.97
4414	SOBRA 100-133% MALE	79,176.44	75,187.22	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	154,363.66
4415	SOBRA 100-133% FEM	64,105.03	76,235.87	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	140,340.90
SUBTOTAL:		332,458.39	341,110.14	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	673,568.53
4517	BC PATIENT FEMALE 2	5,936.00	4,286.25	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	10,222.25
4518	BC PATIENT FEMALE 4	1,109.40	2,490.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,599.40
4617	CC PATIENT FEMALE 2	350.00	1,050.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,400.00
4618	CC PATIENT FEMALE 4	4,085.95	1,050.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,135.95
SUBTOTAL:		11,481.35	8,876.25	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	20,357.60
8700	SSI DISABLED FREEDO	209.72	5,846.12	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,055.84
8710	SSI DISABLED FREEDO	2,100.00	350.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,450.00
8720	SSI DISABLED FREEDO	59.40	237.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	297.00
SUBTOTAL:		2,369.12	6,433.72	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8,802.84
TOTAL:		41,159,756.52	45,693,704.25	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	86,853,460.77

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

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
13AD	MARICOPA ADULT INM AT	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
1006	TANF 21-44 MALE WITH	12,234.63	8,503.24	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	20,737.87
1007	TANF 21-44 FEMALE WI	12,732.53	6,507.68	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	19,240.21
1008	TANF 45-64 M & F WIT	20,039.18	23,077.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	43,116.68
1009	TANF 65+ M & F WITH	5,432.47	3,081.30	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8,513.77
1011	TANF <1 M & F NON-ME	567,248.47	532,325.46	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,099,573.93
1012	TANF 01-05 M & F NON	268,055.89	267,958.17	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	536,014.06
1013	TANF 06-13 M & F NON	241,026.07	231,615.87	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	472,641.94
1014	TANF 14-20 MALE NON-	82,531.85	114,669.34	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	197,201.19
1015	TANF 14-20 FEMALE N	132,827.40	149,313.25	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	282,140.65
1016	TANF 21-44 MALE NON-	562,279.40	623,087.17	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,185,366.57
1017	TANF 21-44 FEMALE N	1,689,259.97	1,841,435.05	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,530,695.02
1018	TANF 45-64 M & F NON	717,249.74	673,156.71	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,390,406.45
1019	TANF 65+ M & F NON-M	4,366.70	5,352.54	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,719.24
1026	TANF 21-44 MALE WITH	0.00	358.05	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	358.05
1027	TANF 21-44 FEMALE WI	412.90	351.42	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	764.32
1028	TANF 45-64 M & F WIT	3,047.60	9,471.40	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12,519.00
1029	TANF 65+ M & F WITH	3,251.52	2,098.51	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,350.03
2100	SSI AGED WITH MEDIC A	106,798.55	110,945.57	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	217,744.12
2110	SSI AGED NON-MEDIC AD	64,152.89	46,997.31	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	111,150.20
2120	SSI AGED WITH QMB	175,558.22	197,043.69	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	372,601.91
2200	SSI DISABLED WITH M F	166,567.65	317,497.47	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	484,065.12
2210	SSI DISABLED NON-ME D	3,771,166.39	3,833,723.81	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,604,890.20
2220	SSI DISABLED WITH Q M	655,176.74	747,126.30	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,402,303.04
2300	SSI BLIND WITH MEDIC	1,326.89	422.13	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,749.02
2310	SSI BLIND NON-MEDIC A	66,376.71	61,383.92	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	127,760.63
2320	SSI BLIND WITH QMB	12,727.94	8,978.40	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	21,706.34
4311	SOBRA CHILD <1 M & F	497,249.77	602,823.96	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,100,073.73
4312	SOBRA CHILD 01-05 M	458,185.52	543,964.72	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,002,150.24
4313	SOBRA CHILD 06-13 M	547,894.44	679,833.89	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,227,728.33
4314	SOBRA CHILD 14-20 MA	142,589.40	263,389.36	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	405,978.76
4315	SOBRA CHILD 14-20 FE	302,021.91	271,458.30	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	573,480.21
5007	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
5015	SOBRA PREG 14-20 FE M	134,500.45	112,857.97	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	247,358.42

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

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
5017	SOBRA PREG 21-44 FE M	505,008.76	490,355.70	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	995,364.46
5018	SOBRA PREG 45-64 FE M	0.00	12,542.17	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12,542.17
SUBTOTAL:		11,929,298.55	12,793,707.33	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	24,723,005.88
1106	TANF EXPANDED 21-44	8,090.62	5,444.07	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	13,534.69
1107	TANF EXPANDED 21-44	17,273.14	16,429.02	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	33,702.16
1108	TANF EXPANDED 45-64	42,647.41	59,814.53	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	102,461.94
1109	TANF EXPANDED 65+ MM	11,071.23	8,539.97	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	19,611.20
1111	TANF EXPANDED <1 M RF	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	394.14	374.54	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	768.68
1113	TANF EXPANDED 06-13	3,697.17	677.24	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,374.41
1114	TANF EXPANDED 14-20	6,680.00	533.05	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,213.05
1115	TANF EXPANDED 14-20	2,354.23	2,087.82	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,442.05
1116	TANF EXPANDED 21-44	76,478.73	84,826.03	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	161,304.76
1117	TANF EXPANDED 21-44	248,164.67	258,823.73	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	506,988.40
1118	TANF EXPANDED 45-64	195,427.93	197,298.94	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	392,726.87
1119	TANF EXPANDED 65+ MM	4.35	149.65	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	154.00
1126	TANF EXPANDED 21-44	867.04	2,844.83	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,711.87
1127	TANF EXPANDED 21-44	1,490.53	614.49	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,105.02
1128	TANF EXPANDED 45-64	6,588.12	5,873.05	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12,461.17
1129	TANF EXPANDED 65+ MM	3,777.06	2,003.76	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,780.82
2400	SSI AGED EXPANDED MI	6,604.72	20,310.29	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	26,915.01
2410	SSI AGED EXPANDED MI	21,709.26	49,550.80	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	71,260.06
2420	SSI AGED EXPANDED MI	212,432.79	214,996.21	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	427,429.00
2600	SSI DISABLED EXPAND F	4,806.76	6,477.98	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	11,284.74
2610	SSI DISABLED EXPAND F	109,739.51	100,550.95	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	210,290.46
2620	SSI DISABLED EXPAND F	194,924.82	195,369.54	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	390,294.36
SUBTOTAL:		1,175,224.23	1,233,590.49	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,408,814.72
3308	AHC CARE M&F 45-64 M	21.62	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	21.62
3316	AHC CARE MALE 21-44	-40.77	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-40.77
3317	AHC CARE FEMALE 21-44	-527.88	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-527.88
3318	AHC CARE M&F 45-64 N	-12,669.89	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-12,669.89
SUBTOTAL:		-13,216.92	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-13,216.92
3608	AHC CARE/MI M&F 45-6	60.75	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	60.75
3614	AHC CARE/MI MALE 14-	-2,238.34	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-2,238.34
3615	AHC CARE/MI FEMALE 1	-35.45	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-35.45

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

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
3616	AHC CARE/MI MALE 21-	-24,077.78	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-24,077.78
3617	AHC CARE/MI FEMALE	-672.13	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-672.13
3618	AHC CARE/MI M&F 45-6	-7,509.71	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-7,509.71
SUBTOTAL:		-34,472.66	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-34,472.66
3506	ADULT 40-100% MALE	15.57	260.53	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	276.10
3507	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
3508	ADULT 40-100% M&F 45	3,307.43	1,008.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,316.03
3509	ADULT 40-100% M&F 65	0.00	154.04	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	154.04
3514	ADULT 40-100% MALE	1,808.45	2,617.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,425.95
3515	ADULT 40-100% FEMAL	19,931.75	23,276.12	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	43,207.87
3516	ADULT 40-100% MALE	229,346.72	174,196.94	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	403,543.66
3517	ADULT 40-100% FEMAL	109,841.40	105,802.51	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	215,643.91
3518	ADULT 40-100% M&F 45	610,123.29	776,775.68	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,386,898.97
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	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
3528	ADULT 40-100% M&F 45	41.77	60.44	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	102.21
3705	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
3706	ADULT <40% EXP MAL	-113.08	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-113.08
3707	ADULT <40% EXP FEM	1,799.96	1,321.34	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,121.30
3708	ADULT <40% EXP M&F	13,612.17	16,184.28	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	29,796.45
3709	ADULT <40% EXP M&F	112.46	353.44	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	465.90
3714	ADULT <40% EXP MAL	49,424.42	117,557.97	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	166,982.39
3715	ADULT <40% EXP FEM	91,002.56	63,238.93	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	154,241.49
3716	ADULT <40% EXP MAL	2,375,248.97	2,548,511.24	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,923,760.21
3717	ADULT <40% EXP FEM	1,081,236.95	1,138,344.74	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,219,581.69
3718	ADULT <40% EXP M&F	2,866,722.75	3,197,371.03	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,064,093.78
3719	ADULT <40% EXP M&F	19,126.57	1,786.77	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	20,913.34
3727	ADULT <40% EXP FEM	166.20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	166.20
3728	ADULT <40% EXP M&F	-612.98	600.54	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-12.44
SUBTOTAL:		7,472,143.33	8,169,422.64	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	15,641,565.97
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	1,878.61	4,565.59	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,444.20
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	1,428.78	2,216.51	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,645.29
3915	NEWLY ELIGIBLE FEMA	4,206.93	3,731.02	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,937.95

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

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
3916	NEWLY ELIGIBLE MALE	104,385.56	160,195.48	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	264,581.04
3917	NEWLY ELIGIBLE FEMA	89,440.86	139,303.63	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	228,744.49
3918	NEWLY ELIGIBLE M&F	273,456.06	265,129.06	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	538,585.12
3919	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	47.11	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	47.11
SUBTOTAL:		474,843.91	575,141.29	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,049,985.20
4413	SOBRA 100-133% M&F	18,822.56	18,033.29	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	36,855.85
4414	SOBRA 100-133% MALE	10,518.44	14,508.22	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	25,026.66
4415	SOBRA 100-133% FEM	7,170.95	59,145.25	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	66,316.20
SUBTOTAL:		36,511.95	91,686.76	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	128,198.71
4517	BC PATIENT FEMALE 2	0.00	2,014.72	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,014.72
4518	BC PATIENT FEMALE 4	393.90	393.23	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	787.13
4617	CC PATIENT FEMALE 2	4,917.91	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,917.91
4618	CC 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
SUBTOTAL:		5,311.81	2,407.95	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,719.76
8700	SSI DISABLED FREEDO	3,652.19	5,276.89	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8,929.08
8710	SSI DISABLED FREEDO	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	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:		3,652.19	5,276.89	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8,929.08
TOTAL:		21,049,296.39	22,871,233.35	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	43,920,529.74

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

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
13AD	MARICOPA ADULT INM AT	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
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-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
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
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
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

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

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
5017	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
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
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+ MM2	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
1111	TANF EXPANDED <1 M RF	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+ MM2	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+ MM2	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 MMI	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 MMI	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 MMI	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
3308	AHC CARE M&F 45-64 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
3316	AHC CARE MALE 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
3317	AHC CARE FEMALE 21- 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
3318	AHC CARE M&F 45-64 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
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
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
3614	AHC CARE/MI MALE 14-	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
3615	AHC CARE/MI FEMALE 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

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

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
3616	AHC CARE/MI MALE 21-	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
3617	AHC CARE/MI FEMALE	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
3618	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
3506	ADULT 40-100% 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
3507	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
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
3514	ADULT 40-100% 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
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	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	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
3528	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
3705	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
3706	ADULT <40% EXP MAL	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 MAL	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 MAL	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
3727	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
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

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

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
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
3919	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% 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
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
4617	CC 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
4618	CC 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
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	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	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	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 August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
13AD	MARICOPA ADULT INM AT	0.00	-286.63	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-286.63
SUBTOTAL:		0.00	-286.63	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-286.63
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	240.08	144.26	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	384.34
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	3,067.29	5,821.79	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8,889.08
1012	TANF 01-05 M & F NON	3,377.40	2,687.30	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,064.70
1013	TANF 06-13 M & F NON	1,218.15	1,408.01	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,626.16
1014	TANF 14-20 MALE NON-	3,194.76	243.36	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,438.12
1015	TANF 14-20 FEMALE N	3,183.01	6,546.81	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,729.82
1016	TANF 21-44 MALE NON-	15,380.38	5,438.43	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	20,818.81
1017	TANF 21-44 FEMALE N	26,675.44	30,189.68	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	56,865.12
1018	TANF 45-64 M & F NON	1,585.03	20,476.42	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	22,061.45
1019	TANF 65+ M & F NON-M	249.73	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	249.73
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 A	241.77	1,611.38	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,853.15
2110	SSI AGED NON-MEDIC AD	371.10	7,188.56	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,559.66
2120	SSI AGED WITH QMB	74.34	-102.87	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-28.53
2200	SSI DISABLED WITH M F	274.99	1,222.09	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,497.08
2210	SSI DISABLED NON-ME D	25,287.18	285,986.08	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	311,273.26
2220	SSI DISABLED WITH Q M	3,344.91	11,090.04	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	14,434.95
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 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
4311	SOBRA CHILD <1 M & F	3,804.18	13,609.55	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	17,413.73
4312	SOBRA CHILD 01-05 M	23,471.36	22,204.78	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	45,676.14
4313	SOBRA CHILD 06-13 M	51,607.75	20,148.09	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	71,755.84
4314	SOBRA CHILD 14-20 MA	12,529.17	16,769.02	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	29,298.19
4315	SOBRA CHILD 14-20 FE	6,477.83	5,659.71	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12,137.54
5007	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
5015	SOBRA PREG 14-20 FE M	4,547.68	626.35	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,174.03

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

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
5017	SOBRA PREG 21-44 FE M	21,818.94	29,403.82	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	51,222.76
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
SUBTOTAL:		212,022.47	488,372.66	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	700,395.13
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	6.07	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6.07
1109	TANF EXPANDED 65+ MM2	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
1111	TANF EXPANDED <1 M RF	0.00	107.79	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	107.79
1112	TANF EXPANDED 01-05	88.72	207.36	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	296.08
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	983.30	246.21	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,229.51
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	207.41	1,374.65	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,582.06
1117	TANF EXPANDED 21-44	9,469.13	1,756.74	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	11,225.87
1118	TANF EXPANDED 45-64	3,509.12	2,951.74	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,460.86
1119	TANF EXPANDED 65+ MM2	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+ MM2	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 MMI	338.53	-1,011.94	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-673.41
2410	SSI AGED EXPANDED MMI	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 MMI	199.65	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	199.65
2600	SSI DISABLED EXPAND F	386.96	48.09	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	435.05
2610	SSI DISABLED EXPAND F	56,129.73	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	56,129.73
2620	SSI DISABLED EXPAND F	479.32	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	479.32
SUBTOTAL:		71,791.87	5,686.71	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	77,478.58
3308	AHC CARE M&F 45-64 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
3316	AHC CARE MALE 21-44	-55.14	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-55.14
3317	AHC CARE FEMALE 21- 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
3318	AHC CARE M&F 45-64 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
SUBTOTAL:		-55.14	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-55.14
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
3614	AHC CARE/MI MALE 14-	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
3615	AHC CARE/MI FEMALE 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

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

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
3616	AHC CARE/MI MALE 21-	996.64	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	996.64
3617	AHC CARE/MI 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
3618	AHC CARE/MI M&F 45-6	56,134.89	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	56,134.89
SUBTOTAL:		57,131.53	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	57,131.53
3506	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
3507	ADULT 40-100% FEMAL 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
3508	ADULT 40-100% M&F 45	95.08	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	95.08
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
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 F	3,430.56	332.79	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,763.35
3516	ADULT 40-100% MALE 2	29,537.65	17,618.83	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	47,156.48
3517	ADULT 40-100% FEMAL F	9,918.88	16,192.67	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	26,111.55
3518	ADULT 40-100% M&F 45	17,006.11	11,808.33	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	28,814.44
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
3528	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
3705	ADULT <40% EXP FEM A1	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 MAL F	10.26	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	10.26
3707	ADULT <40% EXP FEM A1	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 A	47.77	159.41	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	207.18
3709	ADULT <40% EXP M&F 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
3714	ADULT <40% EXP MAL F	638.33	2,949.89	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,588.22
3715	ADULT <40% EXP FEM A1	6,886.22	1,333.58	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8,219.80
3716	ADULT <40% EXP MAL F	87,516.94	137,213.09	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	224,730.03
3717	ADULT <40% EXP FEM A1	28,711.56	30,380.42	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	59,091.98
3718	ADULT <40% EXP M&F A	73,759.29	34,317.41	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	108,076.70
3719	ADULT <40% EXP M&F 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
3727	ADULT <40% EXP FEM A1	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 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
SUBTOTAL:		257,558.65	252,306.42	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	509,865.07
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 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
3909	NEWLY ELIGIBLE M&F 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
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 L	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 August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
3916	NEWLY ELIGIBLE MALE	2,177.20	3,667.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,844.30
3917	NEWLY ELIGIBLE FEMA	2,187.81	6,610.07	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8,797.88
3918	NEWLY ELIGIBLE M&F	40,072.00	12,789.89	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	52,861.89
3919	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:		44,437.01	23,067.06	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	67,504.07
4413	SOBRA 100-133% M&F	0.00	332.82	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	332.82
4414	SOBRA 100-133% MALE	7.98	68.80	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	76.78
4415	SOBRA 100-133% FEM	169.44	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	169.44
SUBTOTAL:		177.42	401.62	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	579.04
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
4617	CC PATIENT FEMALE 2	3,387.30	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,387.30
4618	CC 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
SUBTOTAL:		3,387.30	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,387.30
8700	SSI DISABLED FREEDO	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	0.00	2,178.61	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,178.61
8720	SSI DISABLED FREEDO	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	2,178.61	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,178.61
TOTAL:		646,451.11	771,726.45	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,418,177.56

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

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
5510	SOBRA FPS FEMALE W IT	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
8020	QMB ONLY	22,473.97	26,318.07	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	48,792.04
SUBTOTAL:		22,473.97	26,318.07	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	48,792.04
TOTAL:		22,473.97	26,318.07	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	48,792.04

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

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
5510	SOBRA FPS FEMALE W IT	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
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
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 August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
5510	SOBRA FPS FEMALE W IT	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
8020	QMB ONLY	270,941.80	185,031.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	455,973.30
SUBTOTAL:		270,941.80	185,031.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	455,973.30
TOTAL:		270,941.80	185,031.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	455,973.30

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

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
13AD	MARICOPA ADULT INM AT	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
1006	TANF 21-44 MALE WITH	46.42	188.36	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	234.78
1007	TANF 21-44 FEMALE WI	286.14	1,871.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,157.24
1008	TANF 45-64 M & F WIT	963.94	990.67	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,954.61
1009	TANF 65+ M & F WITH	15.97	66.51	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	82.48
1011	TANF <1 M & F NON-ME	14,101.84	25,301.91	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	39,403.75
1012	TANF 01-05 M & F NON	16,538.91	9,600.05	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	26,138.96
1013	TANF 06-13 M & F NON	6,436.73	7,171.95	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	13,608.68
1014	TANF 14-20 MALE NON-	1,257.04	3,493.94	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,750.98
1015	TANF 14-20 FEMALE N	3,520.43	4,447.58	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,968.01
1016	TANF 21-44 MALE NON-	24,274.51	27,434.69	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	51,709.20
1017	TANF 21-44 FEMALE N	122,776.63	149,984.88	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	272,761.51
1018	TANF 45-64 M & F NON	44,637.53	34,488.13	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	79,125.66
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	2,013.78	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,013.78
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	8,786.84	9,235.08	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	18,021.92
2110	SSI AGED NON-MEDIC	267.22	1,844.32	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,111.54
2120	SSI AGED WITH QMB	5,639.69	5,409.53	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	11,049.22
2200	SSI DISABLED WITH M	21,233.51	3,529.27	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	24,762.78
2210	SSI DISABLED NON-ME	231,778.99	342,969.11	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	574,748.10
2220	SSI DISABLED WITH Q	31,844.13	34,580.97	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	66,425.10
2300	SSI BLIND WITH MEDIC	0.00	530.71	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	530.71
2310	SSI BLIND NON-MEDIC	1,267.01	342.49	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,609.50
2320	SSI BLIND WITH QMB	222.46	193.39	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	415.85
4311	SOBRA CHILD <1 M & F	99,444.46	34,799.65	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	134,244.11
4312	SOBRA CHILD 01-05 M	37,985.34	18,128.44	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	56,113.78
4313	SOBRA CHILD 06-13 M	20,935.84	28,886.52	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	49,822.36
4314	SOBRA CHILD 14-20 MA	36,910.73	21,260.73	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	58,171.46
4315	SOBRA CHILD 14-20 FE	7,807.11	22,781.32	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	30,588.43
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
5015	SOBRA PREG 14-20 FE	19,583.10	16,174.12	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	35,757.22

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

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
5017	SOBRA PREG 21-44 FE M	50,370.25	73,392.58	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	123,762.83
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
SUBTOTAL:		808,932.77	881,111.78	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,690,044.55
1106	TANF EXPANDED 21-44	0.00	414.69	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	414.69
1107	TANF EXPANDED 21-44	1,241.25	491.94	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,733.19
1108	TANF EXPANDED 45-64	1,825.46	2,238.26	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,063.72
1109	TANF EXPANDED 65+ MM	1,249.86	53.73	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,303.59
1111	TANF EXPANDED <1 M RF	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	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
1114	TANF EXPANDED 14-20	0.00	506.37	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	506.37
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	7,020.19	10,188.24	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	17,208.43
1117	TANF EXPANDED 21-44	29,232.13	26,262.11	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	55,494.24
1118	TANF EXPANDED 45-64	7,699.38	15,070.15	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	22,769.53
1119	TANF EXPANDED 65+ MM	0.00	1,058.40	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,058.40
1126	TANF EXPANDED 21-44	173.16	204.04	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	377.20
1127	TANF EXPANDED 21-44	89.09	21.69	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	110.78
1128	TANF EXPANDED 45-64	612.96	79.99	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	692.95
1129	TANF EXPANDED 65+ MM	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 MI	174.66	70.14	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	244.80
2410	SSI AGED EXPANDED MI	504.00	193.90	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	697.90
2420	SSI AGED EXPANDED MI	3,538.39	5,601.99	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	9,140.38
2600	SSI DISABLED EXPAND F	170.31	695.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	865.81
2610	SSI DISABLED EXPAND F	13,636.52	8,325.86	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	21,962.38
2620	SSI DISABLED EXPAND F	4,285.83	11,263.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	15,548.93
SUBTOTAL:		71,468.19	82,740.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	154,208.29
3308	AHC CARE M&F 45-64 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
3316	AHC CARE MALE 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
3317	AHC CARE FEMALE 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
3318	AHC CARE M&F 45-64 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
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
3608	AHC CARE/MI M&F 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
3614	AHC CARE/MI MALE 14-44	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
3615	AHC CARE/MI FEMALE 14-44	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

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

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
3616	AHC CARE/MI MALE 21-	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
3617	AHC CARE/MI 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
3618	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
3506	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
3507	ADULT 40-100% FEMALE	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	43.83	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	43.83
3514	ADULT 40-100% MALE 1	0.00	3,215.37	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,215.37
3515	ADULT 40-100% FEMALE	911.05	84.70	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	995.75
3516	ADULT 40-100% MALE 2	31,925.03	31,046.31	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	62,971.34
3517	ADULT 40-100% FEMALE	12,294.00	3,333.58	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	15,627.58
3518	ADULT 40-100% M&F 45	65,376.33	62,636.67	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	128,013.00
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
3528	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
3705	ADULT <40% EXP FEMALE 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
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 FEMALE 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
3708	ADULT <40% EXP M&F 4	1,741.29	1,260.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,001.29
3709	ADULT <40% EXP M&F 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
3714	ADULT <40% EXP MALE	7,292.84	12,081.73	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	19,374.57
3715	ADULT <40% EXP FEMALE 1	4,451.72	328.62	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,780.34
3716	ADULT <40% EXP MALE	136,455.42	205,325.04	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	341,780.46
3717	ADULT <40% EXP FEMALE 1	94,474.99	126,480.57	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	220,955.56
3718	ADULT <40% EXP M&F 4	181,612.85	129,721.57	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	311,334.42
3719	ADULT <40% EXP M&F 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
3727	ADULT <40% EXP FEMALE 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
3728	ADULT <40% EXP M&F 4	0.00	1,260.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,260.00
SUBTOTAL:		536,535.52	576,817.99	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,113,353.51
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 4	627.65	95.99	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	723.64
3909	NEWLY ELIGIBLE M&F 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
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 FEMALE 1	303.87	213.29	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	517.16

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

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
3916	NEWLY ELIGIBLE MALE	2,249.16	5,021.93	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,271.09
3917	NEWLY ELIGIBLE FEMA	2,574.73	5,949.64	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	8,524.37
3918	NEWLY ELIGIBLE M&F	51,923.13	16,392.55	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	68,315.68
3919	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:		57,678.54	27,673.40	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	85,351.94
4413	SOBRA 100-133% M&F	920.33	606.76	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,527.09
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% FEM	589.03	196.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	785.53
SUBTOTAL:		1,509.36	803.26	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,312.62
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	10.17	15.64	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	25.81
4617	CC 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
4618	CC 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
SUBTOTAL:		10.17	15.64	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	25.81
8700	SSI DISABLED FREEDO	0.00	22.70	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	22.70
8710	SSI DISABLED FREEDO	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	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	22.70	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	22.70
TOTAL:		1,476,134.55	1,569,184.87	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,045,319.42

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

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1010	TANF NON-MEDICARE	0.00	350.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	350.00
2100	SSI AGED WITH MEDIC A	106,605.75	138,772.37	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	245,378.12
2110	SSI AGED NON-MEDIC A	26,434.90	13,763.26	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	40,198.16
2120	SSI AGED WITH QMB	121,926.99	174,038.05	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	295,965.04
2200	SSI DISABLED WITH M F	45,476.20	32,686.17	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	78,162.37
2210	SSI DISABLED NON-ME D	688,624.66	871,046.82	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,559,671.48
2220	SSI DISABLED WITH Q M	48,687.58	68,819.71	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	117,507.29
2300	SSI BLIND WITH MEDIC	74.93	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	74.93
2310	SSI BLIND NON-MEDIC A	8,400.00	7,019.66	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	15,419.66
2320	SSI BLIND WITH QMB	431.94	428.25	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	860.19
SUBTOTAL:		1,046,662.95	1,306,924.29	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,353,587.24
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:		1,046,662.95	1,306,924.29	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,353,587.24

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

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1010	TANF NON-MEDICARE	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 A	1,685,117.40	1,915,799.87	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,600,917.27
2110	SSI AGED NON-MEDIC A	134,210.18	86,635.19	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	220,845.37
2120	SSI AGED WITH QMB	2,732,315.87	2,691,509.27	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,423,825.14
2200	SSI DISABLED WITH M F	484,829.08	429,355.23	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	914,184.31
2210	SSI DISABLED NON-ME D	1,738,486.52	1,802,598.11	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,541,084.63
2220	SSI DISABLED WITH Q M	585,872.48	620,560.01	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,206,432.49
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 A	7,740.32	7,420.92	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	15,161.24
2320	SSI BLIND WITH QMB	4,994.88	7,132.53	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12,127.41
SUBTOTAL:		7,373,566.73	7,561,011.13	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	14,934,577.86
8710	SSI DISABLED FREEDO M	0.00	1,877.34	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,877.34
8720	SSI DISABLED FREEDO M	1,712.52	2,990.88	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,703.40
SUBTOTAL:		1,712.52	4,868.22	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,580.74
TOTAL:		7,375,279.25	7,565,879.35	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	14,941,158.60

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

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1010	TANF NON-MEDICARE	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 A	57,961.58	35,627.77	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	93,589.35
2110	SSI AGED NON-MEDIC A	16,433.83	946.68	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	17,380.51
2120	SSI AGED WITH QMB	443.59	1,507.61	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,951.20
2200	SSI DISABLED WITH M F	11,220.75	6,502.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	17,722.75
2210	SSI DISABLED NON-ME D	26,834.51	19,004.26	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	45,838.77
2220	SSI DISABLED WITH Q M	2,359.28	722.71	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,081.99
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 A	6,656.83	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,656.83
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:		121,910.37	64,311.03	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	186,221.40
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:		121,910.37	64,311.03	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	186,221.40

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

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1010	TANF NON-MEDICARE	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 A	17,791.38	16,157.36	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	33,948.74
2110	SSI AGED NON-MEDIC A	68.35	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	68.35
2120	SSI AGED WITH QMB	12,713.06	10,199.58	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	22,912.64
2200	SSI DISABLED WITH M F	1,998.01	5,671.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,669.11
2210	SSI DISABLED NON-ME D	39,207.69	57,526.26	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	96,733.95
2220	SSI DISABLED WITH Q M	2,612.76	3,357.96	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	5,970.72
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 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	36.96	218.14	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	255.10
SUBTOTAL:		74,428.21	93,130.40	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	167,558.61
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:		74,428.21	93,130.40	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	167,558.61

KidsCare - CAPITATION AMOUNTS

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
6011	KIDS <1M&F NON MEDI C	1,007.22	1,007.22	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,014.44
6012	KIDS 1-5 M & F NON-M	220.96	220.96	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	441.92
6013	KIDS 6-13 M & F NON-	58,022.76	55,071.22	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	113,093.98
6014	KIDS 14-19 MALE NON-	49,755.46	44,451.13	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	94,206.59
6015	KIDS 14-19 FEMALE NO	74,775.69	69,658.38	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	144,434.07
SUBTOTAL:		183,782.09	170,408.91	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	354,191.00
TOTAL:		183,782.09	170,408.91	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	354,191.00

KidsCare - CAPITATION MEMBER MONTHS

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
6011	KIDS <1M&F NON MEDI	2.00	2.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4.00
6012	KIDS 1-5 M & F NON-M	2.00	2.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4.00
6013	KIDS 6-13 M & F NON-	456.25	434.86	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	891.11
6014	KIDS 14-19 MALE NON-	258.56	236.67	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	495.23
6015	KIDS 14-19 FEMALE NO	274.80	256.99	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	531.79
SUBTOTAL:		993.61	932.52	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,926.13
TOTAL:		993.61	932.52	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,926.13

KidsCare - MENTAL HEALTH CAPITATION AMOUNTS

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
6011	KIDS <1M&F NON MEDI	75.10	75.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	150.20
6012	KIDS 1-5 M & F NON-M	75.10	75.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	150.20
6013	KIDS 6-13 M & F NON-	16,709.75	16,146.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	32,856.25
6014	KIDS 14-19 MALE NON-	9,776.08	8,979.83	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	18,755.91
6015	KIDS 14-19 FEMALE NO	10,772.21	10,088.61	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	20,860.82
SUBTOTAL:		37,408.24	35,365.14	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	72,773.38
TOTAL:		37,408.24	35,365.14	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	72,773.38

KidsCare - MENTAL HEALTH CAPITATION MEMBER MONTHS

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
6011	KIDS <1M&F NON MEDI	2.00	2.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4.00
6012	KIDS 1-5 M & F NON-M	2.00	2.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4.00
6013	KIDS 6-13 M & F NON-	445.00	430.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	875.00
6014	KIDS 14-19 MALE NON-	248.00	229.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	477.00
6015	KIDS 14-19 FEMALE NO	271.00	255.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	526.00
SUBTOTAL:		968.00	918.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,886.00
TOTAL:		968.00	918.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,886.00

KidsCare - FEE FOR SERVICE

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
6012	KIDS 1-5 M & F NON-M	-357.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-357.10
6013	KIDS 6-13 M & F NON-	364.77	362.20	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	726.97
6014	KIDS 14-19 MALE NON-	-652.26	85.01	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-567.25
6015	KIDS 14-19 FEMALE NO	-174.33	326.70	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	152.37
SUBTOTAL:		-818.92	773.91	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-45.01
TOTAL:		-818.92	773.91	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-45.01

KidsCare - REINSURANCE

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
6013	KIDS 6-13 M & F NON-	161.54	203.93	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	365.47
6014	KIDS 14-19 MALE NON-	0.00	29,016.36	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	29,016.36
6015	KIDS 14-19 FEMALE NO	0.00	1,274.86	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,274.86
SUBTOTAL:		161.54	30,495.15	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	30,656.69
TOTAL:		161.54	30,495.15	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	30,656.69

110007 DES-DD - CAP MEMBER MONTHS

For The Period Ending August 31, 2015

RATE CODE	DESCRIPTION	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
1000	TANF WITH MEDICARE	2.00	2.00	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	643.15	641.57	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,284.72
1020	TANF WITH QMB	1.00	1.00	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	151.70	154.89	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	306.59
2110	SSI AGED NON-MEDICAR	5.00	5.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	10.00
2120	SSI AGED WITH QMB	272.31	272.62	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	544.93
2200	SSI DISABLED WITH ME	1,753.65	1,745.73	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,499.38
2210	SSI DISABLED NON-MED	21,475.15	21,538.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	43,013.65
221Z	SSI DISABLED NON-MED	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
2220	SSI DISABLED WITH QM	3,977.48	3,986.67	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,964.15
222Z	SSI DISABLED WITH QM	0.00	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.00
2300	SSI BLIND WITH MEDIC	13.00	13.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	26.00
2310	SSI BLIND NON-MEDICA	111.00	112.38	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	223.38
2320	SSI BLIND WITH QMB	28.00	29.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	57.00
8700	SSI DISABLED FREEDOM	7.00	7.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	14.00
8710	SSI DISABLED FREEDOM	2.00	2.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4.00
8720	SSI DISABLED FREEDOM	3.00	3.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6.00
SUBTOTAL:		28,445.47	28,515.36	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	56,960.83
TOTAL:		28,445.47	28,515.36	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	56,960.83

ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM

EPD/DD EXPENDITURES

For the Period Ending August 31, 2015

EPD/DD CAPITATION-LTC													
	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	TOTAL
TRIBAL	370,741.89	366,197.37	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	736,939.26
EPD	84,945,196.47	97,607,756.74	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	182,552,953.21
TOTAL AHCCCS LTC	85,315,938.36	97,973,954.11	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	183,289,892.47
DES/DD	97,105,888.85	97,348,150.88	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	194,454,039.73
TOTAL DES LTC	97,105,888.85	97,348,150.88	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	194,454,039.73
TOTAL LTC - CAP	182,421,827.21	195,322,104.99	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	377,743,932.20

EPD/DD FEE-FOR-SERVICE - LTC													
	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	TOTAL
TOTAL AHCCCS LTC	8,618,280.78	9,030,245.07	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	17,648,525.85
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	8,618,280.78	9,030,245.07	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	17,648,525.85

EPD/DD REINSURANCE - LTC													
	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	TOTAL
TOTAL AHCCCS LTC	3,670,305.62	3,513,547.75	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,183,853.37
DES/DD	375,457.62	326,085.82	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	701,543.44
TOTAL DES LTC	375,457.62	326,085.82	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	701,543.44
TOTAL LTC - REIN	4,045,763.24	3,839,633.57	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7,885,396.81

EPD/DD SMIB/HIB-LTC													
	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	TOTAL
TOTAL SMIB/HIB LTC	3,116,250.30	3,135,587.40	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,251,837.70

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 August 31, 2015

		JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
010115	CRS FULLY INTEGRATED PLAN - CAP	13,474,971.60	13,492,632.75	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	26,967,604.35
010145	CRS ACUTE SEMI INTEGRATED - CAP	122,251.86	115,316.41	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	237,568.27
999125	CRS SEMI INTEGRATED PLAN - CAP	3,253,162.92	3,256,188.18	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6,509,351.10
999135	CRS ONLY PLAN - CAP	476,979.36	481,148.76	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	958,128.12
	Subtotal	17,327,365.74	17,345,286.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	34,672,651.84
999155	CRS REINSURANCE ONLY	2,189,497.55	1,498,470.16	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,687,967.71
	Subtotal	2,189,497.55	1,498,470.16	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3,687,967.71
010115	CRS FULLY INTEGRATED PLAN - KC CAP	29,112.95	25,266.88	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	54,379.83
	Subtotal	29,112.95	25,266.88	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	54,379.83
GRAND TOTAL		19,545,976.24	18,869,023.14	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	38,414,999.38

- 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 August 31, 2015

		JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
010115	CRS FULLY INTEGRATED PLAN - MM	17,063.13	17,085.46	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	34,148.59
010145	CRS ACUTE SEMI INTEGRATED - MM	174.03	164.14	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	338.17
999125	CRS SEMI INTEGRATED PLAN - MM	6,452.00	6,458.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12,910.00
999135	CRS ONLY PLAN - MM	1,144.00	1,154.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2,298.00
	Subtotal	24,833.16	24,861.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	49,694.76
010115	CRS FULLY INTEGRATED PLAN - KC MM	36.87	32.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	68.87
	Subtotal	36.87	32.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	68.87
GRAND TOTAL		24,870.03	24,893.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	49,763.63

- 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 - CAPITATION AMOUNTS

For the Period Ending August 31, 2015

		JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
078999	MERCY MARICOPA INTEGRATED - CAP	47,152,827.77	47,326,614.65	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	94,479,442.42
	Subtotal	47,152,827.77	47,326,614.65	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	94,479,442.42
GRAND TOTAL		47,152,827.77	47,326,614.65	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	94,479,442.42

- 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 August 31, 2015

		JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
078999	MERCY MARICOPA INTEGRATED - MM	19,430.16	19,501.43	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	38,931.59
	Subtotal	19,430.16	19,501.43	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	38,931.59
GRAND TOTAL		19,430.16	19,501.43	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	38,931.59

- 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.