

2021-22 SAMH Monthly Expenditure Report

Provider Name:	0
Contract #:	0
Month/Yr:	July 2021
Program	Adult Mental Health
Months Completed	1

State Program Component (SPC) Grouping	OCA	Covered Services	Project Code	Units to be Paid this Month	Total Contract Amount	Total YTD Number of Units	Total YTD Less Unit Adjustments/Third Party Unit Payments (Enter as a positive #)	Total Lutheran YTD Units Produced	Unit Rate	Total YTD earned	Total YTD paid	Total YTD earned, but not paid	Prorata	Total Payment Due
--	-----	------------------	--------------	-----------------------------	-----------------------	---------------------------	---	-----------------------------------	-----------	------------------	----------------	--------------------------------	---------	-------------------

AVAILABILITY SERVICES

AMH	MHA18	Crisis Stabilization Units	03 Crisis Stabilization	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
TOTAL	MHA18									\$ -	\$ -	\$ -		\$ -

RESIDENTIAL SERVICES

AMH	MHA01	Residential Level I	18 Residential I	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA01	Residential Level II	19 Residential II	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA01	Residential Level III	20 Residential III	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA01	Residential Level IV	21 Residential IV	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA01	Room and Board Level I	36 R&B with Sup. I	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA01	Room and Board Level II	37 R&B with Sup. II	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA01	Room & Board Level II STGC	37a R&B with Sup. II STGC	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA01	Room & Board Level II STGC - B	37b R&B with Sup. II STGC - B	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA01	Room & Board Level II STGC - L	37c R&B with Sup. II STGC - L	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA01	Room & Board Level II STGC - N	37d R&B with Sup. II STGC - N	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA01	Room & Board Level II PIL	37e R&B with Sup. II PIL	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA01	Room and Board with Supervision - Level II OTPR	37f R&B with Sup. II OTPR	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA01	Room and Board Level III	38 R&B with Sup. III	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA01	Room and Board with Supervision - Level III (Enhance Rate)	38a R&B with Sup. III (Enhanced Rate)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -

NON-RESIDENTIAL SERVICES

AMH	MHA09	Assessment	01 Assessment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA09	Case Management	02 Case Management	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA18	Crisis Support/Emergency	04 Crisis Support/Emergency	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA09	Day Care	05 Day Care	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA09	Day Treatment	06 Day Treatment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA09	In-Home and On-site Services	08 In-Home & Onsite	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA18	Inpatient	09 Inpatient	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA09	Intensive Case Management	10 Intensive Case Mgmt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA09	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA09	Medical Services	12 Medical Services	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA09	Outpatient - Individual	14 Outpatient (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA09	Respite Services	22 Respite Services	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA09	Supported Employment	25 Supported Employment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA09	Supported Housing/Living	26 Supportive Housing/Living	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA09	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA09	Aftercare - Individual	29 Aftercare (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA09	Outpatient - Group	35 Outpatient (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA18	Short-term Residential Treatment	39 Short-term Residential	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA09	Intervention - Group	42 Intervention (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA09	Aftercare - Group	43 Aftercare (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA09	Comprehensive Community Service Team - Individual	44 CCST (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA09	Comprehensive Community Service Team - Group	45 CCST (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA09	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA09	Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -

NON PERSON SPECIFIC SERVICES

AMH	MHA09	Drop-in/Self-Help Centers	07 Drop-In/Self Help Ctr.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA09	Drop-in/Self Help Centers - Daily	C0 Other Bundled Projects	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA09	Outreach	15 Outreach	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA09	Outreach - Monthly	B1 Network Eval. & Dvlpmt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA09	Information & Referral	30 Information and Referral	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA09	Mental Health Clubhouse Services	40 MH Clubhouse	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -

TOTAL	MHA00									\$ -	\$ -	\$ -	\$ -	\$ -
SPECIAL FUNDED PROJECTS														
AMH	MH011	Assessment	01 Assessment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH011	Case Management	02 Case Management	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH011	Crisis Support/Emergency	04 Crisis Support/Emergency	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH011	Day Care	05 Day Care	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH011	Day Treatment	06 Day Treatment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH011	In-Home and On-Site Services	08 In-Home & Onsite	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH011	Intensive Case Management	10 Intensive Case Mgmt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH011	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH011	Medical Services	12 Medical Services	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH011	Medication-Assisted Treatment	13 Medication-Assisted Tx;	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH011	Outpatient - Individual	14 Outpatient (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH011	Outreach	15 Outreach	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH011	Outreach - Monthly	B1 Network Eval. & Dvlpmt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH011	Respite Services	22 Respite Services	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH011	Supported Employment	25 Supported Employment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH011	Supported Housing/Living	26 Supportive Housing/Living	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH011	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH011	Aftercare - Individual	29 Aftercare (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH011	Information & Referral	30 Information and Referral	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH011	Florida Assertive Community Treatment (FACT)	B5 FACT Team	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH011	FACT Teams - St. Johns	B5 FACT Team	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH011	Outpatient - Group	35 Outpatient (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH011	Comprehensive Community Service Team - Individual	44 CCST (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH011	Comprehensive Community Service Team - Group	45 CCST (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH011	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH011	Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	MH011									\$ -	\$ -	\$ -	\$ -	\$ -

EARLY INTERVENTION SERVICES - PSYCHOTIC DISORDERS														
AMH	MH026	Assessment	01 Assessment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH026	Case Management	02 Case Management	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH026	Crisis Support/Emergency	04 Crisis Support/Emergency	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH026	Day Treatment	06 Day Treatment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH026	In-Home and On-Site Services	08 In-Home & Onsite	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH026	Intensive Case Management	10 Intensive Case Mgmt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH026	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH026	Medical Services	12 Medical Services	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH026	Outpatient - Individual	14 Outpatient (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH026	Outreach	15 Outreach	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH026	Outreach - Monthly	B1 Network Eval. & Dvlpmt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH026	Residential Level I	18 Residential I	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH026	Supported Employment	25 Supported Employment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH026	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH026	Aftercare - Individual	29 Aftercare (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH026	Information & Referral	30 Information and Referral	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH026	Outpatient - Group	35 Outpatient (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH026	Short-Term Residential Treatment	39 Short-term Residential	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH026	Mental Health Clubhouse Services	40 MH Clubhouse	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH026	Comprehensive Community Service Team - Individual	44 CCST (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH026	Comprehensive Community Service Team - Group	45 CCST (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH026	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH026	Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	MH026									\$ -	\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS														
AMH	MHA33	Assessment	01 Assessment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHA33	Case Management	02 Case Management	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHA33	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHA33	Medical Services	12 Medical Services	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHA33	Outpatient - Individual	14 Outpatient (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHA33	Residential Level III	20 Residential III	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHA33	Supported Housing/Living	26 Supportive Housing/Living	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHA33	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHA33	Aftercare - Individual	29 Aftercare (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHA33	Outpatient - Group	35 Outpatient (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHA33	Intervention - Group	42 Intervention (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -

TOTAL	MHA33									\$ -	\$ -	\$ -	\$ -	\$ -
--------------	--------------	--	--	--	--	--	--	--	--	------	------	------	------	------

SPECIAL FUNDED PROJECTS

AMH	MH035	Assessment	01 Assessment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH035	Case Management	02 Case Management	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH035	Crisis Stabilization Units	03 Crisis Stabilization	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH035	Crisis Support/Emergency	04 Crisis Support/Emergency	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH035	Inpatient	09 Inpatient	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH035	Intensive Case Management	10 Intensive Case Mgmt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH035	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH035	Medical Services	12 Medical Services	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH035	Outpatient - Individual	14 Outpatient (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH035	Outreach	15 Outreach	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH035	Outreach - Monthly	B1 Network Eval. & Dvlpmt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH035	Residential Level I	18 Residential I	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH035	Residential Level II	19 Residential II	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH035	Residential Level III	20 Residential III	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH035	Residential Level IV	21 Residential IV	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH035	Detoxification Services - SA Detox Beds	24 Inpatient Detoxification	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH035	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH035	Information & Referral	30 Information and Referral	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH035	Outpatient Detoxification	32 Outpatient Detoxification	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH035	Outpatient - Group	35 Outpatient (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH035	Room and Board Level I	36 R&B with Sup. I	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH035	Room and Board Level II	37 R&B with Sup. II	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH035	Room & Board Level II STGC	37a R&B with Sup. II STGC	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH035	Room & Board Level II STGC - B	37b R&B with Sup. II STGC - B	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH035	Room & Board Level II STGC - L	37c R&B with Sup. II STGC - L	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH035	Room & Board Level II STGC - N	37d R&B with Sup. II STGC - N	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH035	Room & Board Level II PIL	37e R&B with Sup. II PIL	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH035	Room and Board with Supervision - Level II OTPR	37f R&B with Sup. II OTPR	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH035	Room and Board Level III	38 R&B with Sup. III	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH035	Room and Board with Supervision - Level III (Enhance Rate)	38a R&B with Sup. III (Enhanced Rate)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH035	Short-Term Residential Treatment	39 Short-term Residential	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH035	Comprehensive Community Service Team - Individual	44 CCST (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH035	Comprehensive Community Service Team - Group	45 CCST (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH035	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH035	Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	MH035									\$ -	\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS

AMH	MH072	Assessment	01 Assessment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH072	Case Management	02 Case Management	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH072	Crisis Support/Emergency	04 Crisis Support/Emergency	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH072	Day Treatment	06 Day Treatment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH072	In-Home and On-Site Services	08 In-Home & Onsite	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH072	Intensive Case Management	10 Intensive Case Mgmt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH072	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH072	Medical Services	12 Medical Services	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH072	Outpatient - Individual	14 Outpatient (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH072	Outreach	15 Outreach	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH072	Outreach - Monthly	B1 Network Eval. & Dvlpmt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH072	Residential Level I	18 Residential I	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH072	Residential Level II	19 Residential II	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH072	Residential Level III	20 Residential III	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH072	Residential Level IV	21 Residential IV	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH072	Supported Employment	25 Supported Employment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH072	Supported Housing/Living	26 Supportive Housing/Living	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH072	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH072	Outpatient - Group	35 Outpatient (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH072	Room and Board Level I	36 R&B with Sup. I	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH072	Room and Board Level II	37 R&B with Sup. II	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH072	Room & Board Level II STGC	37a R&B with Sup. II STGC	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH072	Room & Board Level II STGC - B	37b R&B with Sup. II STGC - B	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH072	Room & Board Level II STGC - L	37c R&B with Sup. II STGC - L	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH072	Room & Board Level II STGC - N	37d R&B with Sup. II STGC - N	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH072	Room & Board Level II PIL	37e R&B with Sup. II PIL	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH072	Room and Board with Supervision - Level II OTPR	37f R&B with Sup. II OTPR	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH072	Room and Board Level III	38 R&B with Sup. III	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MH072	Room and Board with Supervision - Level III (Enhance Rate)	38a R&B with Sup. III (Enhanced Rate)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -

AMH	MH072	Intervention - Group	42 Intervention (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH072	Comprehensive Community Service Team - Individual	44 CCST (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH072	Comprehensive Community Service Team - Group	45 CCST (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH072	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH072	Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
TOTAL	MH072									\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS

AMH	MH073	Florida Assertive Community Treatment (FACT)	B5 FACT Team	N/A		5.71		5.71	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH073	Assessment	01 Assessment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH073	Case Management	02 Case Management	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH073	Crisis Support/Emergency	04 Crisis Support/Emergency	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH073	Day Care	05 Day Care	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH073	Day Treatment	06 Day Treatment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH073	In-Home and On-Site Services	08 In-Home & Onsite	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH073	Inpatient	09 Inpatient	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH073	Intensive Case Management	10 Intensive Case Mgmt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH073	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH073	Medical Services	12 Medical Services	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH073	Outpatient - Individual	14 Outpatient (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH073	Outreach	15 Outreach	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH073	Outreach - Monthly	B1 Network Eval. & Dvlpmnt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH073	Residential Level I	18 Residential I	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH073	Residential Level II	19 Residential II	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH073	Residential Level III	20 Residential III	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH073	Respite Services	22 Respite Services	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH073	Supported Employment	25 Supported Employment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH073	Supported Housing/Living	26 Supportive Housing/Living	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH073	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH073	Aftercare - Individual	29 Aftercare (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH073	Information & Referral	30 Information and Referral	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH073	Florida Assertive Community Treatment (FACT)	B5 FACT Team	N/A		5.71		5.71	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH073	Outpatient - Group	35 Outpatient (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH073	Comprehensive Community Service Team - Individual	44 CCST (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH073	Comprehensive Community Service Team - Group	45 CCST (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH073	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH073	Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
TOTAL	MH073									\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS

AMH	MH076	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
TOTAL	MH076									\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS

AMH	MH089	Case Management	02 Case Management	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH089	Day Treatment	06 Day Treatment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH089	Drop-in/Self-Help Centers	07 Drop-In/Self Help Ctr.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH089	Medical Services	12 Medical Services	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH089	Outpatient - Individual	14 Outpatient (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH089	Supported Employment	25 Supported Employment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH089	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH089	Outpatient - Group	35 Outpatient (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH089	Room and Board Level II	37 R&B with Sup. II	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH089	Room & Board Level II STGC	37a R&B with Sup. II STGC	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH089	Room & Board Level II STGC - B	37b R&B with Sup. II STGC - B	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH089	Room & Board Level II STGC - L	37c R&B with Sup. II STGC - L	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH089	Room & Board Level II STGC - N	37d R&B with Sup. II STGC - N	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH089	Room & Board Level II PIL	37e R&B with Sup. II PIL	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH089	Room and Board with Supervision - Level II OTPR	37f R&B with Sup. II OTPR	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
TOTAL	MH089									\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS

AMH	MH0FH	Multidisciplinary Forensic Team	A0 Forensic Multidisciplinary Team	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH0FH	Assessment	01 Assessment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH0FH	Case Management	02 Case Management	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH0FH	Crisis Stabilization Units	03 Crisis Stabilization	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH0FH	Crisis Support/Emergency	04 Crisis Support/Emergency	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH0FH	Day Care	05 Day Care	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH0FH	Day Treatment	06 Day Treatment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -

AMH	MHOFH	In-Home and On-Site Services	08 In-Home & Onsite	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHOFH	Inpatient	09 Inpatient	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHOFH	Intensive Case Management	10 Intensive Case Mgmt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHOFH	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHOFH	Medical Services	12 Medical Services	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHOFH	Outpatient - Individual	14 Outpatient (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHOFH	Outreach	15 Outreach	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHOFH	Outreach - Monthly	B1 Network Eval. & Dvlpmt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHOFH	Residential Level I	18 Residential I	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHOFH	Residential Level II	19 Residential II	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHOFH	Residential Level III	20 Residential III	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHOFH	Residential Level IV	21 Residential IV	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHOFH	Respite Services	22 Respite Services	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHOFH	Supported Employment	25 Supported Employment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHOFH	Supported Housing/Living	26 Supportive Housing/Living	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHOFH	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHOFH	Aftercare - Individual	29 Aftercare (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHOFH	Outpatient - Group	35 Outpatient (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHOFH	Room and Board Level I	36 R&B with Sup. I	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHOFH	Room and Board Level II	37 R&B with Sup. II	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHOFH	Room & Board Level II STGC	37a R&B with Sup. II STGC	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHOFH	Room & Board Level II STGC - B	37b R&B with Sup. II STGC - B	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHOFH	Room & Board Level II STGC - L	37c R&B with Sup. II STGC - L	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHOFH	Room & Board Level II STGC - N	37d R&B with Sup. II STGC - N	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHOFH	Room & Board Level II PIL	37e R&B with Sup. II PIL	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHOFH	Room and Board with Supervision - Level II OTPR	37f R&B with Sup. II OTPR	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHOFH	Room and Board Level III	38 R&B with Sup. III	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHOFH	Room and Board with Supervision - Level III (Enhance Rate)	38a R&B with Sup. III (Enhanced Rate)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHOFH	Short-Term Residential Treatment	39 Short-term Residential	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHOFH	Intervention - Group	42 Intervention (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHOFH	Comprehensive Community Service Team - Individual	44 CCST (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHOFH	Comprehensive Community Service Team - Group	45 CCST (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHOFH	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHOFH	Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHOFH	Prevention - Indicated	48 Prevention - Indicated	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
TOTAL	MHOFH									\$ -	\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS

AMH	MHOFT	Florida Assertive Community Treatment (FACT)	B5 FACT Team	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHOFT			N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
TOTAL	MHOFT									\$ -	\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS

AMH	MHOPG	Assessment	01 Assessment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHOPG	Case Management	02 Case Management	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHOPG	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHOPG	Medical Services	12 Medical Services	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHOPG	Outpatient - Individual	14 Outpatient (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHOPG	Outreach	15 Outreach	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHOPG	Outreach - Monthly	B1 Network Eval. & Dvlpmt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHOPG	Supported Employment	25 Supported Employment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHOPG	Supported Housing/Living	26 Supportive Housing/Living	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHOPG	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHOPG	Information & Referral	30 Information and Referral	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHOPG	Outpatient - Group	35 Outpatient (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHOPG	Mental Health Clubhouse Services	40 MH Clubhouse	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHOPG	Comprehensive Community Service Team - Individual	44 CCST (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHOPG	Comprehensive Community Service Team - Group	45 CCST (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHOPG	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHOPG	Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
TOTAL	MHOPG									\$ -	\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS

AMH	MHACN	Assessment	01 Assessment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHACN	Case Management	02 Case Management	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHACN	Crisis Support/Emergency	04 Crisis Support/Emergency	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHACN	In-Home and On-Site Services	08 In-Home & Onsite	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHACN	Intensive Case Management	10 Intensive Case Mgmt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHACN	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -

AMH	MHACN	Outreach	15 Outreach	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHACN	Outreach - Monthly	B1 Network Eval. & Dvlpmt.	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHACN	Supported Housing/Living	26 Supportive Housing/Living	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHACN	Supported Housing/Living - Monthly	26 Supportive Housing/Living	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHACN	Supported Housing/Living - Care Coordination Clients	A4 Care Coordination	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHACN	Incidental Expenses	28 Incidental Expenses	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHACN	Intervention - Group	42 Intervention (Group)	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHACN	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHACN	Recovery Support - Group	47 Recovery Support (Group)	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
TOTAL	MHACN							\$ -	\$ -	\$ -	\$ -

Temporary Assistance for Needy Families (TANF)

AMH	MH0TB	Assessment	01 Assessment	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH0TB	Case Management	02 Case Management	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH0TB	Crisis Stabilization Units	03 Crisis Stabilization	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH0TB	Crisis Support/Emergency	04 Crisis Support/Emergency	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH0TB	Day Care	05 Day Care	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH0TB	Day Treatment	06 Day Treatment	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH0TB	In-Home and On-Site Services	08 In-Home & Onsite	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH0TB	Intensive Case Management	10 Intensive Case Mgmt.	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH0TB	Intervention - Individual	11 Intervention (Indiv.)	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH0TB	Outpatient - Individual	14 Outpatient (Indiv.)	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH0TB	Residential Level I	18 Residential I	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH0TB	Residential Level II	19 Residential II	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH0TB	Residential Level III	20 Residential III	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH0TB	Residential Level IV	21 Residential IV	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH0TB	Respite Services	22 Respite Services	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH0TB	Supported Employment	25 Supported Employment	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH0TB	Supported Housing/Living	26 Supportive Housing/Living	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH0TB	Incidental Expenses	28 Incidental Expenses	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH0TB	Aftercare - Individual	29 Aftercare (Indiv.)	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH0TB	Outpatient - Group	35 Outpatient (Group)	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH0TB	Room and Board Level I	36 R&B with Sup. I	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH0TB	Room and Board Level II	37 R&B with Sup. II	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH0TB	Room & Board Level II STGC	37a R&B with Sup. II STGC	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH0TB	Room & Board Level II STGC - B	37b R&B with Sup. II STGC - B	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH0TB	Room & Board Level II STGC - L	37c R&B with Sup. II STGC - L	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH0TB	Room & Board Level II STGC - N	37d R&B with Sup. II STGC - N	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH0TB	Room & Board Level II PIL	37e R&B with Sup. II PIL	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH0TB	Room and Board with Supervision - Level II OTPR	37f R&B with Sup. II OTPR	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH0TB	Room and Board Level III	38 R&B with Sup. III	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH0TB	Room and Board with Supervision - Level III (Enhance Rate)	38a R&B with Sup. III (Enhanced Rate)	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH0TB	Intervention - Group	42 Intervention (Group)	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH0TB	MH Comprehensive - Individual	44 CCST (Indiv.)	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH0TB	MH Comprehensive - Group	45 CCST (Group)	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH0TB	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH0TB	Recovery Support - Group	47 Recovery Support (Group)	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
TOTAL	MH0TB							\$ -	\$ -	\$ -	\$ -

Temporary Assistance for Needy Families (TANF)

AMH	MHCA8	Outreach	15 Outreach	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHCA8	Outreach - Monthly	B1 Network Eval. & Dvlpmt.	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHCA8	Information & Referral	30 Information and Referral	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHCA8	Network Evaluation & Development	B1 Network Eval. & Dvlpmt.	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHCA8	Cost Reimbursement	B3 Cost Reimbursement	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
TOTAL	MHCA8							\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROGRAMS

AMH	MHCAF	Assessment	01 Assessment	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHCAF	Case Management	02 Case Management	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHCAF	Crisis Support/Emergency	04 Crisis Support/Emergency	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHCAF	Day Care	05 Day Care	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHCAF	Day Treatment	06 Day Treatment	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHCAF	Drop-in/Self-Help Centers	07 Drop-In/Self Help Ctr.	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHCAF	Drop-in Self-Help Centers	07 Drop-In/Self Help Ctr. [a]	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHCAF	In-Home and On-Site Services	08 In-Home & Onsite	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHCAF	Inpatient	09 Inpatient	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHCAF	Intensive Case Management	10 Intensive Case Mgmt.	N/A	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -

AMH	MHCAF	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHCAF	Medical Services	12 Medical Services	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHCAF	Medication-Assisted Treatment	13 Medication-Assisted Tx;	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHCAF	Outpatient - Individual	14 Outpatient (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHCAF	Outreach	15 Outreach	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHCAF	Outreach - Monthly	B1 Network Eval. & Dvlpmt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHCAF	Residential Level I	18 Residential I	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHCAF	Residential Level II	19 Residential II	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHCAF	Residential Level III	20 Residential III	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHCAF	Respite Services	22 Respite Services	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHCAF	Supported Employment	25 Supported Employment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHCAF	Supported Housing/Living	26 Supportive Housing/Living	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHCAF	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHCAF	Aftercare - Individual	29 Aftercare (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHCAF	Information & Referral	30 Information and Referral	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHCAF	FACT Teams – Enhanced Rate	B5 FACT Team	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHCAF	Outpatient - Group	35 Outpatient (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHCAF	Comprehensive Community Service Team - Individual	44 CCST (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHCAF	Comprehensive Community Service Team - Group	45 CCST (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHCAF	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHCAF	Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHCAF	Cost Reimbursement	B3 Cost Reimbursement	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHCAF	FACT Team	B5 FACT Team	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
TOTAL	MHCAF									\$ -	\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROGRAMS

AMH	MHCAJ	Assessment	01 Assessment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHCAJ	Case Management	02 Case Management	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHCAJ	Crisis Stabilization Units	03 Crisis Stabilization	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHCAJ	Crisis Support/Emergency	04 Crisis Support/Emergency	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHCAJ	Day Care	05 Day Care	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHCAJ	Day Treatment	06 Day Treatment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHCAJ	In-Home and On-Site Services	08 In-Home & Onsite	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHCAJ	Inpatient	09 Inpatient	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHCAJ	Intensive Case Management	10 Intensive Case Mgmt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHCAJ	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHCAJ	Outpatient - Individual	14 Outpatient (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHCAJ	Outreach	15 Outreach	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHCAJ	Outreach - Monthly	B1 Network Eval. & Dvlpmt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHCAJ	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHCAJ	Aftercare - Individual	29 Aftercare (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHCAJ	Information & Referral	30 Information and Referral	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHCAJ	Outpatient - Group	35 Outpatient (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHCAJ	Intervention - Group	42 Intervention (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHCAJ	Comprehensive Community Service Team - Individual	44 CCST (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHCAJ	Comprehensive Community Service Team - Group	45 CCST (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHCAJ	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHCAJ	Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHCAJ	Forensic Multidisciplinary Team	A0 Forensic Multidisciplinary Team	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHCAJ	Local Diversion Forensic Project	A8 Local Diversion Forensic Project	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHCAJ	Cost Reimbursement	B3 Cost Reimbursement	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHCAJ	Wraparound	B7 Wraparound	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
TOTAL	MHCAJ									\$ -	\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS

AMH	MHDRF	Assessment	01 Assessment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHDRF	Case Management	02 Case Management	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHDRF	Day Care	05 Day Care	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHDRF	Day Treatment	06 Day Treatment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHDRF	In-Home and On-Site Services	08 In-Home & Onsite	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHDRF	Intensive Case Management	10 Intensive Case Mgmt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHDRF	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHDRF	Medical Services	12 Medical Services	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHDRF	Outpatient - Individual	14 Outpatient (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHDRF	Respite Services	22 Respite Services	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHDRF	Supported Employment	25 Supported Employment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -

AMH	MHDRF	Supported Housing/Living	26 Supportive Housing/Living	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHDRF	Supportive Housing/Living - Monthly	B2 Transition Voucher	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHDRF	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHDRF	Aftercare - Individual	29 Aftercare (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHDRF	Outpatient - Group	35 Outpatient (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHDRF	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHDRF	Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
TOTAL	MHDRF									\$ -	\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS - UNCONTRACTED

AMH	MHDRF	Incidental Expenses [Uncontracted]	28 Incidental Expenses [Uncontracted]			0.00		0.00	1.00	\$ -	\$ -	\$ -		\$ -
TOTAL	MHDRF									\$ -	\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS

AMH	MHEDT	Assessment	01 Assessment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHEDT	Case Management	02 Case Management	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHEDT	In-Home and On-Site Services	08 In-Home & Onsite	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHEDT	Intensive Case Management	10 Intensive Case Mgmt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHEDT	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHEDT	Outpatient - Individual	14 Outpatient (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHEDT	Outreach	15 Outreach	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHEDT	Outreach - Monthly	B1 Network Eval. & Dvlpmt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHEDT	Supported Employment	25 Supported Employment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHEDT	Supported Housing/Living	26 Supportive Housing/Living	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHEDT	Aftercare - Individual	29 Aftercare (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHEDT	Outpatient - Group	35 Outpatient (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHEDT	Intervention - Group	42 Intervention (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHEDT	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHEDT	Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
TOTAL	MHEDT									\$ -	\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS

AMH	MHEMP	Supported Employment	25 Supported Employment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHEMP	Mental Health Clubhouse Services	40 MH Clubhouse	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
TOTAL	MHEMP									\$ -	\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS

AMH	MHFMH	Residential Level I	18 Residential I	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHFMH	Residential Level II	19 Residential II	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHFMH	Residential Level III	20 Residential III	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHFMH	Residential Level IV	21 Residential IV	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHFMH	Room and Board Level I	36 R&B with Sup. I	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHFMH	Room and Board Level II	37 R&B with Sup. II	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHFMH	Room & Board Level II STGC	37a R&B with Sup. II STGC	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHFMH	Room & Board Level II STGC - B	37b R&B with Sup. II STGC - B	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHFMH	Room & Board Level II STGC - L	37c R&B with Sup. II STGC - L	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHFMH	Room & Board Level II STGC - N	37d R&B with Sup. II STGC - N	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHFMH	Room & Board Level II PIL	37e R&B with Sup. II PIL	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHFMH	Room and Board with Supervision - Level II OTPR	37f R&B with Sup. II OTPR	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHFMH	Room and Board Level III	38 R&B with Sup. III	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHFMH	Room and Board with Supervision - Level III (Enhance Rate)	38a R&B with Sup. III (Enhanced Rate)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
TOTAL	MHFMH									\$ -	\$ -	\$ -	\$ -	\$ -

Crisis Stabilization Services

AMH	MHS50	Crisis Stabilization Units	03 Crisis Stabilization	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHS50	Crisis Support/Emergency	04 Crisis Support/Emergency	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHS50	Inpatient	09 Inpatient	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
TOTAL	MHS50									\$ -	\$ -	\$ -	\$ -	\$ -

Central Receiving Facility

AMH	MHSCR	Assessment	01 Assessment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSCR	Case Management	02 Case Management	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSCR	Crisis Stabilization Units	03 Crisis Stabilization	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSCR	Crisis Support/Emergency	04 Crisis Support/Emergency	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSCR	Inpatient	09 Inpatient	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSCR	Intensive Case Management	10 Intensive Case Mgmt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSCR	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSCR	Medical Services	12 Medical Services	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -

AMH	MHSCR	Outpatient - Individual	14 Outpatient (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSCR	Outreach	15 Outreach	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSCR	Outreach - Monthly	B1 Network Eval. & Dvlpmt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSCR	Residential Level I	18 Residential I	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSCR	Residential Level II	19 Residential II	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSCR	Residential Level III	20 Residential III	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSCR	Residential Level IV	21 Residential IV	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSCR	Respite Services	22 Respite Services	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSCR	Detoxification Services - SA Detox Beds	24 Inpatient Detoxification	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSCR	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSCR	Information & Referral	30 Information and Referral	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSCR	Outpatient Detoxification	32 Outpatient Detoxification	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSCR	Outpatient - Group	35 Outpatient (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSCR	Room and Board Level I	36 R&B with Sup. I	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSCR	Room and Board Level II	37 R&B with Sup. II	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSCR	Room & Board Level II STGC	37a R&B with Sup. II STGC	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSCR	Room & Board Level II STGC - B	37b R&B with Sup. II STGC - B	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSCR	Room & Board Level II STGC - L	37c R&B with Sup. II STGC - L	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSCR	Room & Board Level II STGC - N	37d R&B with Sup. II STGC - N	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSCR	Room & Board Level II PIL	37e R&B with Sup. II PIL	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSCR	Room and Board with Supervision - Level II OTPR	37f R&B with Sup. II OTPR	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSCR	Room and Board Level III	38 R&B with Sup. III	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSCR	Room and Board with Supervision - Level III (Enhance Rate)	38a R&B with Sup. III (Enhanced Rate)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSCR	Short-Term Residential Treatment	39 Short-term Residential	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSCR	Comprehensive Community Service Team - Individual	44 CCST (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSCR	Comprehensive Community Service Team - Group	45 CCST (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSCR	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSCR	Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
TOTAL	MHSCR									\$ -	\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS

AMH	MHSCV	Outreach	15 Outreach	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSCV	Outreach - Monthly	B1 Network Eval. & Dvlpmt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSCV	Information & Referral	30 Information and Referral	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
TOTAL	MHSCV									\$ -	\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS

AMH	MHSFP	Assessment	01 Assessment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSFP	Case Management	02 Case Management	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSFP	Crisis Stabilization Units	03 Crisis Stabilization	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSFP	Crisis Support/Emergency	04 Crisis Support/Emergency	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSFP	Day Care	05 Day Care	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSFP	Day Treatment	06 Day Treatment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSFP	Drop-in/Self-Help Centers	07 Drop-In/Self Help Ctr.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSFP	In-Home and On-Site Services	08 In-Home & Onsite	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSFP	Inpatient	09 Inpatient	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSFP	Intensive Case Management	10 Intensive Case Mgmt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSFP	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSFP	Medical Services	12 Medical Services	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSFP	Medication-Assisted Treatment	13 Medication-Assisted Tx;	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSFP	Outpatient - Individual	14 Outpatient (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSFP	Outreach	15 Outreach	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSFP	Outreach - Monthly	B1 Network Eval. & Dvlpmt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSFP	Residential Level I	18 Residential I	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSFP	Residential Level II	19 Residential II	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSFP	Residential Level III	20 Residential III	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSFP	Residential Level IV	21 Residential IV	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSFP	Respite Services	22 Respite Services	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSFP	Detoxification Services - SA Detox Beds	24 Inpatient Detoxification	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSFP	Supported Employment	25 Supported Employment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSFP	Supported Housing/Living	26 Supportive Housing/Living	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSFP	TASC	27 TASC	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSFP	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSFP	Aftercare - Individual	29 Aftercare (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSFP	Information & Referral	30 Information and Referral	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSFP	Outpatient Detoxification	32 Outpatient Detoxification	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSFP	Outpatient - Group	35 Outpatient (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSFP	Room and Board Level I	36 R&B with Sup. I	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHSFP	Room and Board Level II	37 R&B with Sup. II	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -

Adult Mental Health

AMH	MHSFP	Room & Board Level II STGC	37a R&B with Sup. II STGC	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHSFP	Room & Board Level II STGC - B	37b R&B with Sup. II STGC - B	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHSFP	Room & Board Level II STGC - L	37c R&B with Sup. II STGC - L	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHSFP	Room & Board Level II STGC - N	37d R&B with Sup. II STGC - N	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHSFP	Room & Board Level II PIL	37e R&B with Sup. II PIL	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHSFP	Room and Board with Supervision - Level II OTPR	37f R&B with Sup. II OTPR	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHSFP	Room and Board Level III	38 R&B with Sup. III	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHSFP	Room and Board with Supervision - Level III (Enhance Rate)	38a R&B with Sup. III (Enhanced Rate)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHSFP	Short-Term Residential Treatment	39 Short-term Residential	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHSFP	Mental Health Clubhouse Services	40 MH Clubhouse	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHSFP	Intervention - Group	42 Intervention (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHSFP	Aftercare - Group	43 Aftercare (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHSFP	Comprehensive Community Service Team - Individual	44 CCST (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHSFP	Comprehensive Community Service Team - Group	45 CCST (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHSFP	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHSFP	Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHSFP	Prevention - Indicated	48 Prevention - Indicated	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHSFP	Prevention - Selective	49 Prevention - Selective	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHSFP	Prevention - Universal Direct	50 Prevention - Universal Direct	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHSFP	Prevention - Universal Indirect	51 Prevention - Universal Indirect	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
TOTAL	MHSFP									\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS

AMH	MHTMH	Residential Level I	18 Residential I	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHTMH	Residential Level II	19 Residential II	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHTMH	Residential Level III	20 Residential III	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHTMH	Residential Level IV	21 Residential IV	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHTMH	Room and Board Level I	36 R&B with Sup. I	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHTMH	Room and Board Level II	37 R&B with Sup. II	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHTMH	Room & Board Level II STGC	37a R&B with Sup. II STGC	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHTMH	Room & Board Level II STGC - B	37b R&B with Sup. II STGC - B	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHTMH	Room & Board Level II STGC - L	37c R&B with Sup. II STGC - L	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHTMH	Room & Board Level II STGC - N	37d R&B with Sup. II STGC - N	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHTMH	Room & Board Level II PIL	37e R&B with Sup. II PIL	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHTMH	Room and Board with Supervision - Level II OTPR	37f R&B with Sup. II OTPR	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHTMH	Room and Board Level III	38 R&B with Sup. III	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHTMH	Room and Board with Supervision - Level III (Enhance Rate)	38a R&B with Sup. III (Enhanced Rate)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHTMH	Transitional Beds	B6 Provider Proviso Projects	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
TOTAL	MHTMH									\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS

AMH	MHTRV	Assessment	01 Assessment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHTRV	Case Management	02 Case Management	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHTRV	Day Care	05 Day Care	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHTRV	Day Treatment	06 Day Treatment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHTRV	In-Home and On-Site Services	08 In-Home & Onsite	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHTRV	Intensive Case Management	10 Intensive Case Mgmt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHTRV	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHTRV	Medical Services	12 Medical Services	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHTRV	Outpatient - Individual	14 Outpatient (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHTRV	Respite Services	22 Respite Services	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHTRV	Supported Employment	25 Supported Employment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHTRV	Supported Housing/Living	26 Supportive Housing/Living	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHTRV	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHTRV	Aftercare - Individual	29 Aftercare (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHTRV	Outpatient - Group	35 Outpatient (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHTRV	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
TOTAL	MHTRV									\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS - UNCONTRACTED

AMH	MHTRV	Incidental Expenses [Uncontracted]	28 Incidental Expenses [Uncontracted]	-		0.00		0.00	1.00	\$ -	\$ -	\$ -	\$ -
TOTAL	MHTRV									\$ -	\$ -	\$ -	\$ -

FIXED RATE

AMH	MH026	Fixed Rate - First Episode Team	A5 First Episode Team	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH089	Fixed Rate - Community Crisis Prevention Team	B6 Provider Proviso Projects	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHSCR	Fixed Rate - Central Receiving System	A3 Central Receiving System	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHA00	Fixed Rate - COVID-19 - MHA00	C0 Other Bundled Projects [COVID-19]	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -

Adult Mental Health

AMH	MHA00	Fixed Rate - COVID-19 - MHA00 Changes in funding (11/1)	C0 Other Bundled Projects [COVID-19]	N/A	-	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MH072	Fixed Rate - COVID-19 - MH072	C0 Other Bundled Projects [COVID-19]	N/A	-	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHACN	Fixed Rate - COVID-19 - MHACN	C0 Other Bundled Projects [COVID-19]	N/A	-	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHSCR	Fixed Rate - COVID-19 - MHSCR	C0 Other Bundled Projects [COVID-19]	N/A	-	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHA00	Fixed Rate - Outreach	Fixed Rate - Outreach	N/A	-	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHSCV	Cost Reimbursement	B3 Cost Reimbursement	N/A	-	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH				N/A	-	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH				N/A	-	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH				N/A	-	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH				N/A	-	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH				N/A	-	0.00	0.00	0.00	\$ -	\$ -	\$ -	\$ -
TOTAL									\$ -	\$ -	\$ -	\$ -

Summary	
Total Payment Approved	\$ -

2021-22 SAMH Monthly Expenditure Report

Provider Name:	0
Contract #:	0
Month/Yr:	July 2021
Program	Adult Substance Abuse
Months Completed	1

State Program Component (SPC) Grouping	OCA	Covered Services	Project Code	Units to be Paid this Month	Total Contract Amount	Total YTD Number of Units	Total YTD Less Unit Adjustments/Third Party Unit Payments (Enter as a positive #)	Total Lutheran YTD Units Produced	Unit Rate	Total YTD earned	Total YTD paid	Total YTD earned, but not paid	Prorata	Total Payment Due
--	-----	------------------	--------------	-----------------------------	-----------------------	---------------------------	---	-----------------------------------	-----------	------------------	----------------	--------------------------------	---------	-------------------

AVAILABILITY SERVICES														
ASA	MSA21	Detoxification Services - SA Detox Beds	24 Inpatient Detoxification	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
TOTAL	MSA21									\$ -	\$ -	\$ -	\$ -	\$ -

RESIDENTIAL SERVICES														
ASA	MSA03	Residential Level I	18 Residential I	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA03	Residential Level II	19 Residential II	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA03	Residential Level III	20 Residential III	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA03	Residential Level IV	21 Residential IV	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA03	Room and Board Level I	36 R&B with Sup. I	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA03	Room and Board Level II	37 R&B with Sup. II	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA03	Room & Board Level II STGC	37a R&B with Sup. II STGC	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA03	Room & Board Level II STGC - B	37b R&B with Sup. II STGC - B	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA03	Room & Board Level II STGC - L	37c R&B with Sup. II STGC - L	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA03	Room & Board Level II STGC - N	37d R&B with Sup. II STGC - N	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA03	Room & Board Level II PIL	37e R&B with Sup. II PIL	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA03	Room and Board with Supervision - Level II OTPR	37f R&B with Sup. II OTPR	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA03	Room and Board Level III	38 R&B with Sup. III	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA03	Room and Board with Supervision - Level III (Enhanced Rate)	38a R&B with Sup. III (Enhanced Rate)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -

NON-RESIDENTIAL SERVICES														
ASA	MSA11	Assessment	01 Assessment	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA11	Case Management	02 Case Management	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA21	Crisis Support/Emergency	04 Crisis Support/Emergency	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA11	Day Care	05 Day Care	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA11	Day Treatment	06 Day Treatment	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA11	In-Home and On-Site Services	08 In-Home & Onsite	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA11	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA11	Medical Services	12 Medical Services	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA11	Medication-Assisted Treatment	13 Medication-Assisted Tx;	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA11	Medication-Assisted Treatment - Weekly	A7 Federal Project Grant	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA11	Medication-Assisted Treatment - Weekly Methadone	A7 Federal Project Grant	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA11	Medication-Assisted Treatment - Weekly Buprenephrine	A7 Federal Project Grant	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA11	Medication Assisted Treatment - Sublocate	A7 Federal Project Grant	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA11	Medication Assisted Treatment - Enhanced	A7 Federal Project Grant	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA11	Outpatient - Individual	14 Outpatient (Indiv.)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA11	Outreach	15 Outreach	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA11	Outreach - Monthly	B1 Network Eval. & Dvlpmt.	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA11	Respite Services	22 Respite Services	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA11	Supported Employment	25 Supported Employment	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA11	Supported Housing/Living	26 Supportive Housing/Living	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA11	TASC	27 TASC	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA11	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA11	Aftercare - Individual	29 Aftercare (Indiv.)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA11	Information & Referral	30 Information and Referral	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA11	Outpatient Detoxification	32 Outpatient Detoxification	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA11	Outpatient - Group	35 Outpatient (Group)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA11	Intervention - Group	42 Intervention (Group)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA11	Aftercare - Group	43 Aftercare (Group)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -

ASA	MSA11	Comprehensive Community Service Team - Individual	44 CCST (Indiv.)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA11	Comprehensive Community Service Team - Group	45 CCST (Group)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA11	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA11	Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
TOTAL	MSA00								\$ -	\$ -	\$ -	\$ -		\$ -

Substance Abuse Prevention and Treatment Block Grant

ASA	MSA23	Case Management	02 Case Management	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA23	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA23	Medical Services	12 Medical Services	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA23	Outpatient - Individual	14 Outpatient (Indiv.)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
TOTAL	MSA23								\$ -	\$ -	\$ -	\$ -		\$ -

Substance Abuse Prevention and Treatment Block Grant

ASA	MSA25	Prevention - Indicated	48 Prevention - Indicated	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA25	Prevention - Selective	49 Prevention - Selective	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA25	Prevention - Universal Direct	50 Prevention - Universal Direct	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA25	Prevention - Universal Indirect	51 Prevention - Universal Indirect	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA25	Network Evaluation & Development	B1 Network Eval. & Dvlpmt.	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
TOTAL	MSA25								\$ -	\$ -	\$ -	\$ -		\$ -

SPECIAL FUNDED PROJECTS

ASA	MS081	Assessment	01 Assessment	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MS081	Case Management	02 Case Management	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MS081	Crisis Support/Emergency	04 Crisis Support/Emergency	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MS081	Day Care	05 Day Care	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MS081	Day Treatment	06 Day Treatment	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MS081	In-Home and On-Site Services	08 In-Home & Onsite	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MS081	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MS081	Medical Services	12 Medical Services	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MS081	Medication-Assisted Treatment	13 Medication-Assisted Tx;	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MS081	Medication-Assisted Treatment - Weekly	A7 Federal Project Grant	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MS081	Medication-Assisted Treatment - Weekly Methadone	A7 Federal Project Grant	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MS081	Medication-Assisted Treatment - Weekly Buprenorphine	A7 Federal Project Grant	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MS081	Medication Assisted Treatment - Sublocate	A7 Federal Project Grant	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MS081	Medication Assisted Treatment - Enhanced	A7 Federal Project Grant	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MS081	Outpatient - Individual	14 Outpatient (Indiv.)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MS081	Outreach	15 Outreach	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MS081	Outreach - Monthly	B1 Network Eval. & Dvlpmt.	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MS081	Residential Level I	18 Residential I	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MS081	Residential Level II	19 Residential II	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MS081	Residential Level III	20 Residential III	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MS081	Residential Level IV	21 Residential IV	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MS081	Respite Services	22 Respite Services	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MS081	Detoxification Services - SA Detox Beds	24 Inpatient Detoxification	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MS081	Supported Employment	25 Supported Employment	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MS081	Supported Housing/Living	26 Supportive Housing/Living	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MS081	TASC	27 TASC	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MS081	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MS081	Aftercare - Individual	29 Aftercare (Indiv.)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MS081	Information & Referral	30 Information and Referral	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MS081	Outpatient Detoxification	32 Outpatient Detoxification	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MS081	Outpatient - Group	35 Outpatient (Group)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MS081	Room and Board Level I	36 R&B with Sup. I	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MS081	Room and Board Level II	37 R&B with Sup. II	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MS081	Room & Board Level II STGC	37a R&B with Sup. II STGC	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MS081	Room & Board Level II STGC - B	37b R&B with Sup. II STGC - B	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MS081	Room & Board Level II STGC - L	37c R&B with Sup. II STGC - L	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MS081	Room & Board Level II STGC - N	37d R&B with Sup. II STGC - N	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MS081	Room & Board Level II PIL	37e R&B with Sup. II PIL	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MS081	Room and Board with Supervision - Level II OTPR	37f R&B with Sup. II OTPR	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MS081	Room and Board Level III	38 R&B with Sup. III	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MS081	Room and Board with Supervision - Level III (Enhance Rate)	38a R&B with Sup. III (Enhanced Rate)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MS081	Intervention - Group	42 Intervention (Group)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -

ASA	MS081	Aftercare - Group	43 Aftercare (Group)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS081	Comprehensive Community Service Team - Individual	44 CCST (Indiv.)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS081	Comprehensive Community Service Team - Group	45 CCST (Group)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS081	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS081	Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	MS081								\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS

ASA	MS091	Assessment	01 Assessment	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091	Case Management	02 Case Management	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091	Crisis Stabilization Units	03 Crisis Stabilization	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091	Crisis Support/Emergency	04 Crisis Support/Emergency	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091	Day Treatment	06 Day Treatment	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091	In-Home and On-Site Services	08 In-Home & Onsite	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091	Medical Services	12 Medical Services	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091	Medication-Assisted Treatment	13 Medication-Assisted Tx;	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091	Medication-Assisted Treatment - Weekly	A7 Federal Project Grant	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091	Medication-Assisted Treatment - Weekly Methadone	A7 Federal Project Grant	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091	Medication-Assisted Treatment - Weekly Buprenephrine	A7 Federal Project Grant	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091	Medication Assisted Treatment - Sublocate	A7 Federal Project Grant	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091	Medication Assisted Treatment - Enhanced	A7 Federal Project Grant	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091	Outpatient - Individual	14 Outpatient (Indiv.)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091	Outreach	15 Outreach	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091	Outreach - Monthly	B1 Network Eval. & Dvlpmt.	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091	Residential Level I	18 Residential I	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091	Residential Level II	19 Residential II	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091	Residential Level III	20 Residential III	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091	Residential Level IV	21 Residential IV	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091	Respite Services	22 Respite Services	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091	Detoxification Services - SA Detox Beds	24 Inpatient Detoxification	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091	Supported Employment	25 Supported Employment	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091	Supported Housing/Living	26 Supportive Housing/Living	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091	Aftercare - Individual	29 Aftercare (Indiv.)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091	Information & Referral	30 Information and Referral	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091	Outpatient Detoxification	32 Outpatient Detoxification	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091	Outpatient - Group	35 Outpatient (Group)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091	Room and Board Level I	36 R&B with Sup. I	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091	Room and Board Level II	37 R&B with Sup. II	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091	Room & Board Level II STGC	37a R&B with Sup. II STGC	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091	Room & Board Level II STGC - B	37b R&B with Sup. II STGC - B	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091	Room & Board Level II STGC - L	37c R&B with Sup. II STGC - L	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091	Room & Board Level II STGC - N	37d R&B with Sup. II STGC - N	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091	Room & Board Level II PIL	37e R&B with Sup. II PIL	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091	Room and Board with Supervision - Level II OTPR	37f R&B with Sup. II OTPR	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091	Room and Board Level III	38 R&B with Sup. III	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091	Room and Board with Supervision - Level III (Enhance Rate)	38a R&B with Sup. III (Enhanced Rate)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091	Intervention - Group	42 Intervention (Group)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091	Aftercare - Group	43 Aftercare (Group)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091	Comprehensive Community Service Team - Individual	44 CCST (Indiv.)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091	Comprehensive Community Service Team - Group	45 CCST (Group)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091	Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	MS091								\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS

ASA	MS091-X	Assessment	01 Assessment	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091-X	Case Management	02 Case Management	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091-X	Crisis Stabilization Units	03 Crisis Stabilization	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091-X	Crisis Support/Emergency	04 Crisis Support/Emergency	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091-X	Day Treatment	06 Day Treatment	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091-X	In-Home and On-Site Services	08 In-Home & Onsite	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091-X	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091-X	Medical Services	12 Medical Services	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

ASA	MS091-X	Medication-Assisted Treatment	13 Medication-Assisted Tx;	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091-X	Medication-Assisted Treatment - Weekly	A7 Federal Project Grant	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091-X	Medication-Assisted Treatment - Weekly Methadone	A7 Federal Project Grant	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091-X	Medication-Assisted Treatment - Weekly Bupenephrine	A7 Federal Project Grant	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091-X	Medication Assisted Treatment – Sublocate	A7 Federal Project Grant	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091-X	Medication Assisted Treatment – Enhanced	A7 Federal Project Grant	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091-X	Outpatient - Individual	14 Outpatient (Indiv.)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091-X	Outreach	15 Outreach	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091-X	Outreach - Monthly	B1 Network Eval. & Dvlpmt.	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091-X	Residential Level I	18 Residential I	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091-X	Residential Level II	19 Residential II	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091-X	Residential Level III	20 Residential III	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091-X	Residential Level IV	21 Residential IV	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091-X	Respite Services	22 Respite Services	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091-X	Detoxification Services - SA Detox Beds	24 Inpatient Detoxification	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091-X	Supported Employment	25 Supported Employment	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091-X	Supported Housing/Living	26 Supportive Housing/Living	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091-X	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091-X	Aftercare - Individual	29 Aftercare (Indiv.)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091-X	Information & Referral	30 Information and Referral	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091-X	Outpatient Detoxification	32 Outpatient Detoxification	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091-X	Outpatient - Group	35 Outpatient (Group)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091-X	Room and Board Level I	36 R&B with Sup. I	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091-X	Room and Board Level II	37 R&B with Sup. II	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091-X	Room & Board Level II STGC	37a R&B with Sup. II STGC	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091-X	Room & Board Level II STGC - B	37b R&B with Sup. II STGC - B	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091-X	Room & Board Level II STGC - L	37c R&B with Sup. II STGC - L	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091-X	Room & Board Level II STGC - N	37d R&B with Sup. II STGC - N	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091-X	Room & Board Level II PIL	37e R&B with Sup. II PIL	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091-X	Room and Board with Supervision - Level II OTRP	37f R&B with Sup. II OTRP	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091-X	Room and Board Level III	38 R&B with Sup. III	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091-X	Room and Board with Supervision - Level III (Enhance Rate)	38a R&B with Sup. III (Enhanced Rate)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091-X	Intervention - Group	42 Intervention (Group)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091-X	Aftercare - Group	43 Aftercare (Group)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091-X	Comprehensive Community Service Team - Individual	44 CCST (Indiv.)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091-X	Comprehensive Community Service Team - Group	45 CCST (Group)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091-X	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS091-X	Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	MS091-X								\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS														
ASA	MS907	Assessment	01 Assessment	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS907	Crisis Support/Emergency	04 Crisis Support/Emergency	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS907	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS907	Medication-Assisted Treatment	13 Medication-Assisted Tx;	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS907	Medication-Assisted Treatment - Weekly	A7 Federal Project Grant	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS907	Medication-Assisted Treatment - Weekly Methadone	A7 Federal Project Grant	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS907	Medication-Assisted Treatment - Weekly Bupenephrine	A7 Federal Project Grant	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS907	Medication Assisted Treatment – Sublocate	A7 Federal Project Grant	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS907	Medication Assisted Treatment – Enhanced	A7 Federal Project Grant	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS907	Outpatient - Individual	14 Outpatient (Indiv.)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS907	Residential Level I	18 Residential I	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS907	Detoxification Services - SA Detox Beds	24 Inpatient Detoxification	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS907	Outpatient Detoxification	32 Outpatient Detoxification	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS907	Outpatient - Group	35 Outpatient (Group)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	MS907								\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS														
ASA	MS916	Assessment	01 Assessment	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS916	Crisis Support/Emergency	04 Crisis Support/Emergency	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS916	In-Home and On-Site Services	08 In-Home & Onsite	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS916	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS916	Medical Services	12 Medical Services	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS916	Medication-Assisted Treatment	13 Medication-Assisted Tx;	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS916	Medication-Assisted Treatment - Weekly	A7 Federal Project Grant	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

ASA	MS916	Medication-Assisted Treatment - Weekly Methadone	A7 Federal Project Grant	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS916	Medication-Assisted Treatment - Weekly Buprenephrine	A7 Federal Project Grant	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS916	Medication Assisted Treatment – Sublocate	A7 Federal Project Grant	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS916	Medication Assisted Treatment – Enhanced	A7 Federal Project Grant	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS916	Outpatient - Individual	14 Outpatient (Indiv.)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS916	Outreach	15 Outreach	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS916	Outreach - Monthly	B1 Network Eval. & Dvlpmt.	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS916	Residential Level I	18 Residential I	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS916	Residential - Level I (Forensic)	18a Residential - Level I (Forensic)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS916	Residential - Level I (Enhanced Rate)	18b Residential - Level I (Enhanced Rate)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS916	Residential Level II	19 Residential II	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS916	Residential - Level II (Forensic)	19a Residential - Level II (Forensic)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS916	Residential - Level II (Enhanced Rate)	19b Residential - Level II (Enhanced Rate)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS916	Residential - Level II STGC	19c Residential - Level II STGC	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS916	Residential - Level II PIL	19d Residential - Level II PIL	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS916	Residential Level III	20 Residential III	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS916	Residential - Level III (Forensic)	20a Residential - Level III (Forensic)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS916	Residential - Level III (Enhanced Rate)	20b Residential - Level III (Enhanced Rate)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS916	Residential Level IV	21 Residential IV	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS916	Residential - Level IV (Forensic)	21a Residential - Level IV (Forensic)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS916	Residential - Level IV (Enhanced Rate)	21b Residential - Level IV (Enhanced Rate)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS916	Aftercare - Individual	29 Aftercare (Indiv.)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS916	Outpatient - Group	35 Outpatient (Group)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS916	Room and Board Level III	38 R&B with Sup. III	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS916	Room and Board with Supervision - Level III (Enhance Rate)	38a R&B with Sup. III (Enhanced Rate)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS916	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	MS916								\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS

ASA	MS918	Residential Level I	18 Residential I	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS918	Residential Level II	19 Residential II	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS918	Residential Level III	20 Residential III	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS918	Residential Level IV	21 Residential IV	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS918	Detoxification Services - SA Detox Beds	24 Inpatient Detoxification	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	MS918								\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS

ASA	MS920	Assessment	01 Assessment	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS920	Case Management	02 Case Management	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS920	Crisis Support/Emergency	04 Crisis Support/Emergency	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS920	Day Care	05 Day Care	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS920	Day Treatment	06 Day Treatment	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS920	In-Home and On-Site Services	08 In-Home & Onsite	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS920	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS920	Medical Services	12 Medical Services	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS920	Medication-Assisted Treatment	13 Medication-Assisted Tx;	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS920	Medication-Assisted Treatment - Weekly	A7 Federal Project Grant	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS920	Medication-Assisted Treatment - Weekly Methadone	A7 Federal Project Grant	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS920	Medication-Assisted Treatment - Weekly Buprenephrine	A7 Federal Project Grant	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS920	Medication Assisted Treatment – Sublocate	A7 Federal Project Grant	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS920	Medication Assisted Treatment – Enhanced	A7 Federal Project Grant	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS920	Outpatient - Individual	14 Outpatient (Indiv.)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS920	Outreach	15 Outreach	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS920	Outreach - Monthly	B1 Network Eval. & Dvlpmt.	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS920	Residential Level I	18 Residential I	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS920	Residential Level II	19 Residential II	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS920	Residential Level III	20 Residential III	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS920	Residential Level IV	21 Residential IV	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS920	Respite Services	22 Respite Services	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS920	Detoxification Services - SA Detox Beds	24 Inpatient Detoxification	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS920	Supported Employment	25 Supported Employment	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS920	Supported Housing/Living	26 Supportive Housing/Living	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS920	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS920	Aftercare - Individual	29 Aftercare (Indiv.)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS920	Information & Referral	30 Information and Referral	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

ASA	MS920	Outpatient Detoxification	32 Outpatient Detoxification	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS920	Outpatient - Group	35 Outpatient (Group)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS920	Room and Board Level I	36 R&B with Sup. I	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS920	Room and Board Level II	37 R&B with Sup. II	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS920	Room & Board Level II STGC	37a R&B with Sup. II STGC	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS920	Room & Board Level II STGC - B	37b R&B with Sup. II STGC - B	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS920	Room & Board Level II STGC - L	37c R&B with Sup. II STGC - L	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS920	Room & Board Level II STGC - N	37d R&B with Sup. II STGC - N	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS920	Room & Board Level II PIL	37e R&B with Sup. II PIL	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS920	Room and Board with Supervision - Level II OTPR	37f R&B with Sup. II OTPR	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS920	Room and Board Level III	38 R&B with Sup. III	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS920	Room and Board with Supervision - Level III (Enhance Rate)	38a R&B with Sup. III (Enhanced Rate)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS920	Intervention - Group	42 Intervention (Group)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS920	Aftercare - Group	43 Aftercare (Group)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS920	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS920	Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS920	Prevention - Indicated	48 Prevention - Indicated	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS920	Prevention - Selective	49 Prevention - Selective	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS920	Prevention - Universal Direct	50 Prevention - Universal Direct	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MS920	Prevention - Universal Indirect	51 Prevention - Universal Indirect	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	MS920								\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS

ASA	MSACN	Assessment	01 Assessment	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSACN	Case Management	02 Case Management	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSACN	Crisis Support/Emergency	04 Crisis Support/Emergency	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSACN	In-Home and On-Site Services	08 In-Home & Onsite	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSACN	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSACN	Outreach	15 Outreach	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSACN	Outreach - Monthly	B1 Network Eval. & Dvlpmt.	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSACN	Supported Housing/Living	26 Supportive Housing/Living	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSACN	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSACN	Intervention - Group	42 Intervention (Group)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSACN	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSACN	Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	MSACN								\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

Temporary Assistance for Needy Families (TANF)

ASA	MSATB	Assessment	01 Assessment	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSATB	Case Management	02 Case Management	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSATB	Crisis Support/Emergency	04 Crisis Support/Emergency	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSATB	Day Care	05 Day Care	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSATB	Day Treatment	06 Day Treatment	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSATB	In-Home and On-Site Services	08 In-Home & Onsite	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSATB	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSATB	Medication-Assisted Treatment	13 Medication-Assisted Tx;	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSATB	Medication-Assisted Treatment - Weekly	A7 Federal Project Grant	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSATB	Medication-Assisted Treatment - Weekly Methadone	A7 Federal Project Grant	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSATB	Medication-Assisted Treatment - Weekly Buprenephrine	A7 Federal Project Grant	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSATB	Medication Assisted Treatment - Sublocate	A7 Federal Project Grant	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSATB	Medication Assisted Treatment - Enhanced	A7 Federal Project Grant	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSATB	Outpatient - Individual	14 Outpatient (Indiv.)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSATB	Residential Level I	18 Residential I	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSATB	Residential Level II	19 Residential II	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSATB	Residential Level III	20 Residential III	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSATB	Residential Level IV	21 Residential IV	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSATB	Respite Services	22 Respite Services	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSATB	Supported Employment	25 Supported Employment	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSATB	Supported Housing/Living	26 Supportive Housing/Living	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSATB	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSATB	Aftercare - Individual	29 Aftercare (Indiv.)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSATB	Outpatient - Group	35 Outpatient (Group)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSATB	Room and Board Level I	36 R&B with Sup. I	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSATB	Room and Board Level II	37 R&B with Sup. II	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSATB	Room & Board Level II STGC	37a R&B with Sup. II STGC	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

ASA	MSATB	Room & Board Level II STGC - B	37b R&B with Sup. II STGC - B	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSATB	Room & Board Level II STGC - L	37c R&B with Sup. II STGC - L	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSATB	Room & Board Level II STGC - N	37d R&B with Sup. II STGC - N	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSATB	Room & Board Level II PIL	37e R&B with Sup. II PIL	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSATB	Room and Board with Supervision - Level II OTPR	37f R&B with Sup. II OTPR	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSATB	Room and Board Level III	38 R&B with Sup. III	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSATB	Room and Board with Supervision - Level III (Enhance Rate)	38a R&B with Sup. III (Enhanced Rate)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSATB	Intervention - Group	42 Intervention (Group)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSATB	Aftercare - Group	43 Aftercare (Group)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSATB	Comprehensive Community Service Team - Individual	44 CCST (Indiv.)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSATB	Comprehensive Community Service Team - Group	45 CCST (Group)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSATB	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSATB	Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	MSATB								\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS														
ASA	MSCAS	Assessment	01 Assessment	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCAS	Case Management	02 Case Management	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCAS	Crisis Support/Emergency	04 Crisis Support/Emergency	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCAS	In-Home and On-Site Services	08 In-Home & Onsite	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCAS	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCAS	Outreach	15 Outreach	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCAS	Outreach - Monthly	B1 Network Eval. & Dvlpmt.	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCAS	Supported Housing/Living	26 Supportive Housing/Living	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCAS	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCAS	Intervention - Group	42 Intervention (Group)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCAS	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCAS	Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCAS	Care Coordination	A4 Care Coordination	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCAS	Network Evaluation & Development	B1 Network Eval. & Dvlpmt.	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCAS	Cost Reimbursement	B3 Cost Reimbursement	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCAS	Wraparound	B7 Wraparound	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	MSCAS								\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS														
ASA	MSCBS	Assessment	01 Assessment	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCBS	Case Management	02 Case Management	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCBS	Crisis Stabilization	04 Crisis Support/Emergency	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCBS	Day Care	05 Day Care	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCBS	Day Treatment	06 Day Treatment	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCBS	In-Home and On-Site Services	08 In-Home & Onsite	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCBS	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCBS	Medical Services	12 Medical Services	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCBS	Medication-Assisted Treatment	13 Medication-Assisted Tx;	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCBS	Medication-Assisted Treatment - Weekly	A7 Federal Project Grant	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCBS	Medication-Assisted Treatment - Weekly Methadone	A7 Federal Project Grant	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCBS	Medication-Assisted Treatment - Weekly Buprenephrine	A7 Federal Project Grant	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCBS	Medication Assisted Treatment - Sublocate	A7 Federal Project Grant	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCBS	Medication Assisted Treatment - Enhanced	A7 Federal Project Grant	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCBS	Outpatient - Individual	14 Outpatient (Indiv.)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCBS	Outreach	15 Outreach	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCBS	Outreach - Monthly	B1 Network Eval. & Dvlpmt.	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCBS	Residential Level I	18 Residential I	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCBS	Residential Level II	19 Residential II	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCBS	Residential Level III	20 Residential III	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCBS	Residential Level IV	21 Residential IV	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCBS	Respite Services	22 Respite Services	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCBS	Detoxification Services - SA Detox Beds	24 Inpatient Detoxification	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCBS	Supported Employment	25 Supported Employment	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCBS	Supported Housing/Living	26 Supportive Housing/Living	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCBS	TASC	27 TASC	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCBS	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCBS	Aftercare - Individual	29 Aftercare (Indiv.)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCBS	Information & Referral	30 Information and Referral	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCBS	Outpatient Detoxification	32 Outpatient Detoxification	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

Adult Substance Abuse

ASA	MSCBS	Outpatient - Group	35 Outpatient (Group)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCBS	Room and Board Level I	36 R&B with Sup. I	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCBS	Room and Board Level II	37 R&B with Sup. II	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCBS	Room & Board Level II STGC	37a R&B with Sup. II STGC	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCBS	Room & Board Level II STGC - B	37b R&B with Sup. II STGC - B	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCBS	Room & Board Level II STGC - L	37c R&B with Sup. II STGC - L	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCBS	Room & Board Level II STGC - N	37d R&B with Sup. II STGC - N	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCBS	Room & Board Level II PIL	37e R&B with Sup. II PIL	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCBS	Room and Board with Supervision - Level II OTPR	37f R&B with Sup. II OTPR	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCBS	Room and Board Level III	38 R&B with Sup. III	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCBS	Room and Board with Supervision - Level III (Enhanced Rate)	38a R&B with Sup. III (Enhanced Rate)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCBS	Intervention - Group	42 Intervention (Group)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCBS	Aftercare - Group	43 Aftercare (Group)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCBS	Comprehensive Community Service Team - Individual	44 CCST (Indiv.)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCBS	Comprehensive Community Service Team - Group	45 CCST (Group)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCBS	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCBS	Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCBS	Network Evaluation & Development	B1 Network Eval. & Dvlpmt.	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSCBS	Cost Reimbursement	B3 Cost Reimbursement	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	MSCBS								\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS

ASA	MSRC2	Outreach	15 Outreach	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSRC2	Outreach - Monthly	B1 Network Eval. & Dvlpmt.	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSRC2	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSRC2	Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	MSRC2								\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS

ASA	MSRC3	Medical Services	12 Medical Services	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSRC3	Medication-Assisted Treatment	13 Medication-Assisted Tx;	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSRC3	Medication-Assisted Treatment - Weekly	A7 Federal Project Grant	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSRC3	Medication-Assisted Treatment - Weekly Methadone	A7 Federal Project Grant	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSRC3	Medication-Assisted Treatment - Weekly Buprenephrine	A7 Federal Project Grant	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSRC3	Medication Assisted Treatment - Sublocate	A7 Federal Project Grant	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSRC3	Medication Assisted Treatment - Enhanced	A7 Federal Project Grant	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSRC3	Outreach	15 Outreach	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSRC3	Outreach - Monthly	B1 Network Eval. & Dvlpmt.	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSRC3	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSRC3	Information & Referral	30 Information and Referral	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSRC3	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSRC3	Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	MSRC3								\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS

ASA	MSSFP	Assessment	01 Assessment	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSFP	Case Management	02 Case Management	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSFP	Crisis Support/Emergency	04 Crisis Support/Emergency	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSFP	Day Care	05 Day Care	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSFP	Day Treatment	06 Day Treatment	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSFP	In-Home and On-Site Services	08 In-Home & Onsite	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSFP	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSFP	Medical Services	12 Medical Services	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSFP	Medication-Assisted Treatment	13 Medication-Assisted Tx;	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSFP	Medication-Assisted Treatment - Weekly	A7 Federal Project Grant	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSFP	Medication-Assisted Treatment - Weekly Methadone	A7 Federal Project Grant	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSFP	Medication-Assisted Treatment - Weekly Buprenephrine	A7 Federal Project Grant	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSFP	Medication Assisted Treatment - Sublocate	A7 Federal Project Grant	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSFP	Medication Assisted Treatment - Enhanced	A7 Federal Project Grant	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSFP	Outpatient - Individual	14 Outpatient (Indiv.)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSFP	Outreach	15 Outreach	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSFP	Outreach - Monthly	B1 Network Eval. & Dvlpmt.	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSFP	Residential Level I	18 Residential I	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSFP	Residential Level II	19 Residential II	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

ASA	MSSFP	Residential Level III	20 Residential III	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSFP	Residential Level IV	21 Residential IV	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSFP	Respite Services	22 Respite Services	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSFP	Detoxification Services - SA Detox Beds	24 Inpatient Detoxification	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSFP	Supported Employment	25 Supported Employment	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSFP	Supported Housing/Living	26 Supportive Housing/Living	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSFP	TASC	27 TASC	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSFP	Incidental Expenses	28 Incidental Expenses	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSFP	Aftercare - Individual	29 Aftercare (Indiv.)	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSFP	Information & Referral	30 Information and Referral	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSFP	Outpatient Detoxification	32 Outpatient Detoxification	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSFP	Outpatient - Group	35 Outpatient (Group)	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSFP	Room and Board Level I	36 R&B with Sup. I	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSFP	Room and Board Level II	37 R&B with Sup. II	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSFP	Room & Board Level II STGC	37a R&B with Sup. II STGC	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSFP	Room & Board Level II STGC - B	37b R&B with Sup. II STGC - B	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSFP	Room & Board Level II STGC - L	37c R&B with Sup. II STGC - L	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSFP	Room & Board Level II STGC - N	37d R&B with Sup. II STGC - N	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSFP	Room & Board Level II PIL	37e R&B with Sup. II PIL	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSFP	Room and Board with Supervision - Level II OTPR	37f R&B with Sup. II OTPR	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSFP	Room and Board Level III	38 R&B with Sup. III	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSFP	Room and Board with Supervision - Level III (Enhance Rate)	38a R&B with Sup. III (Enhanced Rate)	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSFP	Comprehensive Community Service Team - Individual	44 CCST (Indiv.)	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSFP	Comprehensive Community Service Team - Group	45 CCST (Group)	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSFP	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSFP	Recovery Support - Group	47 Recovery Support (Group)	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSFP	Prevention - Indicated	48 Prevention - Indicated	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSFP	Prevention - Selective	49 Prevention - Selective	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSFP	Prevention - Universal Direct	50 Prevention - Universal Direct	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSFP	Prevention - Universal Indirect	51 Prevention - Universal Indirect	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	MSSFP						\$ -	\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS

ASA	MSSM2	Assessment	01 Assessment	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM2	Assessment - Enhanced	01a Assessment - Enhanced	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM2	Case Management	02 Case Management	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM2	Crisis Support/Emergency	04 Crisis Support/Emergency	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM2	Day Care	05 Day Care	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM2	Day Treatment	06 Day Treatment	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM2	In-Home and On-Site Services	08 In-Home & Onsite	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM2	Medical Services	12 Medical Services	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM2	Medication-Assisted Treatment	13 Medication-Assisted Tx;	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM2	Medication-Assisted Treatment - Weekly	A7 Federal Project Grant	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM2	Medication-Assisted Treatment - Weekly Methadone	A7 Federal Project Grant	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM2	Medication-Assisted Treatment - Weekly Buprenephrine	A7 Federal Project Grant	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM2	Medication Assisted Treatment - Sublocate	13d Medication Assisted Treatment - Sublocate	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM2	Medication Assisted Treatment - Enhanced	13e Medication Assisted Treatment - Enhanced	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM2	Outpatient - Individual	14 Outpatient (Indiv.)	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM2	Outreach	15 Outreach	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM2	Outreach - Monthly	B1 Network Eval. & Dvlpmt.	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM2	Residential Level I	18 Residential I	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM2	Residential Level II	19 Residential II	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM2	Residential Level II - (Enhanced Rate)	19b Residential II - (Enhanced Rate)	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM2	Respite Services	22 Respite Services	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM2	Detoxification Services - SA Detox Beds	24 Inpatient Detoxification	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM2	Supported Employment	25 Supported Employment	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM2	Supported Housing/Living	26 Supportive Housing/Living	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM2	Incidental Expenses	28 Incidental Expenses	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM2	Aftercare - Individual	29 Aftercare (Indiv.)	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM2	Information & Referral	30 Information and Referral	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM2	Outpatient Detoxification	32 Outpatient Detoxification	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM2	Outpatient - Group	35 Outpatient (Group)	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM2	Room and Board Level I	36 R&B with Sup. I	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM2	Room and Board Level II	37 R&B with Sup. II	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM2	Room & Board Level II STGC	37a R&B with Sup. II STGC	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM2	Room & Board Level II STGC - B	37b R&B with Sup. II STGC - B	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -

Adult Substance Abuse

ASA	MSSM2	Room & Board Level II STGC - L	37c R&B with Sup. II STGC - L	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM2	Room & Board Level II STGC - N	37d R&B with Sup. II STGC - N	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM2	Room & Board Level II PIL	37e R&B with Sup. II PIL	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM2	Room and Board with Supervision - Level II OTPR	37f R&B with Sup. II OTPR	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM2	Aftercare - Group	43 Aftercare (Group)	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM2	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM2	Recovery Support - Group	47 Recovery Support (Group)	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM2	Network Evaluation & Development	B1 Network Eval. & Dvlpmt.	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM2	Cost Reimbursement	B3 Cost Reimbursement	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	MSSM2						\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS

ASA	MSSM3	Assessment	01 Assessment	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM3	Assessment - Enhanced	01a Assessment - Enhanced	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM3	Case Management	02 Case Management	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM3	Crisis Support/Emergency	04 Crisis Support/Emergency	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM3	Day Care	05 Day Care	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM3	Day Treatment	06 Day Treatment	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM3	In-Home and On-Site Services	08 In-Home & Onsite	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM3	Intervention - Individual	11 Intervention (Indiv.)	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM3	Medical Services	12 Medical Services	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM3	Medication-Assisted Treatment	13 Medication-Assisted Tx;	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM3	Medication-Assisted Treatment - Weekly	A7 Federal Project Grant	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM3	Medication-Assisted Treatment - Weekly Methadone	A7 Federal Project Grant	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM3	Medication-Assisted Treatment - Weekly Buprenephrine	A7 Federal Project Grant	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM3	Medication Assisted Treatment - Sublocate	13d Medication Assisted Treatment - Sublocate	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM3	Medication Assisted Treatment - Enhanced	13e Medication Assisted Treatment - Enhanced	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM3	Outpatient - Individual	14 Outpatient (Indiv.)	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM3	Outreach	15 Outreach	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM3	Outreach - Monthly	B1 Network Eval. & Dvlpmt.	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM3	Residential Level I	18 Residential I	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM3	Residential Level II	19 Residential II	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM3	Residential Level II - (Enhanced Rate)	19b Residential II - (Enhanced Rate)	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM3	Respite Services	22 Respite Services	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM3	Detoxification Services - SA Detox Beds	24 Inpatient Detoxification	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM3	Supported Employment	25 Supported Employment	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM3	Supported Housing/Living	26 Supportive Housing/Living	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM3	Incidental Expenses	28 Incidental Expenses	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM3	Aftercare - Individual	29 Aftercare (Indiv.)	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM3	Information & Referral	30 Information and Referral	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM3	Outpatient Detoxification	32 Outpatient Detoxification	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM3	Outpatient - Group	35 Outpatient (Group)	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM3	Room and Board Level I	36 R&B with Sup. I	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM3	Room and Board Level II	37 R&B with Sup. II	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM3	Room & Board Level II STGC	37a R&B with Sup. II STGC	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM3	Room & Board Level II STGC - B	37b R&B with Sup. II STGC - B	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM3	Room & Board Level II STGC - L	37c R&B with Sup. II STGC - L	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM3	Room & Board Level II STGC - N	37d R&B with Sup. II STGC - N	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM3	Room & Board Level II PIL	37e R&B with Sup. II PIL	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM3	Room and Board with Supervision - Level II OTPR	37f R&B with Sup. II OTPR	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM3	Intervention - Group	42 Intervention (Group)	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM3	Aftercare - Group	43 Aftercare (Group)	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM3	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM3	Recovery Support - Group	47 Recovery Support (Group)	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM3	Network Evaluation & Development	B1 Network Eval. & Dvlpmt.	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSSM3	Cost Reimbursement	B3 Cost Reimbursement	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	MSSM3						\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS

ASA	MSTRV	Assessment	01 Assessment	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSTRV	Case Management	02 Case Management	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSTRV	Day Care	05 Day Care	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSTRV	Day Treatment	06 Day Treatment	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSTRV	In-Home and On-Site Services	08 In-Home & Onsite	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSTRV	Intervention - Individual	11 Intervention (Indiv.)	N/A	0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

ASA	MSTRV	Medical Services	12 Medical Services	N/A	-	0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSTRV	Outpatient - Individual	14 Outpatient (Indiv.)	N/A	-	0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSTRV	Respite Services	22 Respite Services	N/A	-	0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSTRV	Supported Employment	25 Supported Employment	N/A	-	0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSTRV	Supported Housing/Living	26 Supportive Housing/Living	N/A	-	0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSTRV	Incidental Expenses	28 Incidental Expenses	N/A	-	0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSTRV	Aftercare - Individual	29 Aftercare (Indiv.)	N/A	-	0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSTRV	Outpatient - Group	35 Outpatient (Group)	N/A	-	0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSTRV	Aftercare - Group	43 Aftercare (Group)	N/A	-	0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSTRV	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A	-	0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -
ASA	MSTRV	Recovery Support - Group	47 Recovery Support (Group)	N/A	-	0.00		0.00	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	MSTRV				-				\$ -	\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS - UNCONTRACTED													
ASA	MSTRV	Incidental Expenses [Uncontracted]	28 Incidental Expenses [Uncontracted]		-	0.00		0.00	\$ 1.00	\$ -	\$ -	\$ -	\$ -
TOTAL	MSTRV				-				\$ -	\$ -	\$ -	\$ -	\$ -

FIXED RATE													
ASA	MS091	Fixed Rate - FIT	A2 FIT Team	N/A	-	0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
ASA	MS091	Fixed Rate - FIT - St. Johns	A2 FIT Team [St. Johns]	N/A	-	0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
ASA	MS091	Fixed Rate - FIT - Putnam	A2 FIT Team [Putnam]	N/A	-	0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
ASA	MS091	Fixed Rate - FIT - Volusia	A2 FIT Team [Volusia]	N/A	-	0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
ASA	MS091-X	Fixed Rate - FIT Expansion	A2 FIT Team [Expansion]	N/A	-	0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
ASA	MSCBS	Fixed Rate - Community Based Services	C0 Other Bundled Projects	N/A	-	0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
ASA	MSA00	Fixed Rate - COVID-19 - MSA00	C0 Other Bundled Projects [COVID-19]	N/A	-	0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
ASA	MS081	Fixed Rate - COVID-19 - MS081	C0 Other Bundled Projects [COVID-19]	N/A	-	0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
ASA	MS907	Fixed Rate - COVID-19 - MS907	C0 Other Bundled Projects [COVID-19]	N/A	-	0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
ASA	MS916	Fixed Rate - COVID-19 - MS916	C0 Other Bundled Projects [COVID-19]	N/A	-	0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
ASA	MS918	Fixed Rate - COVID-19 - MS918	C0 Other Bundled Projects [COVID-19]	N/A	-	0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
ASA	MS920	Fixed Rate - COVID-19 - MS920	C0 Other Bundled Projects [COVID-19]	N/A	-	0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
ASA	MSCBS	Fixed Rate - COVID-19 - MSCBS	C0 Other Bundled Projects [COVID-19]	N/A	-	0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
ASA	MSRC3	Fixed Rate - Recovery Community Organizations	A7 Federal Project Grant	N/A	-	0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
ASA				N/A	-	0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
TOTAL					-				\$ -	\$ -	\$ -	\$ -	\$ -

Summary	
Total Payment Approved	\$ -

2021-22 SAMH Monthly Expenditure Report

Provider Name:	0
Contract #:	0
Month/Yr:	July 2021
Program:	Children's Mental Health
Months Completed:	1

State Program Component (SPC) Grouping	OCA	Covered Services	Project Code	Units to be Paid this Month	Total Contract Amount	Total YTD Number of Units	Total Lutheran YTD Units Produced	Unit Rate	Total YTD earned	Total YTD paid	Total YTD earned, but not paid	Prorata	Total Payment Due
--	-----	------------------	--------------	-----------------------------	-----------------------	---------------------------	-----------------------------------	-----------	------------------	----------------	--------------------------------	---------	-------------------

AVAILABILITY SERVICES													
CMH	MHC18	Crisis Stabilization Units	03 Crisis Stabilization	N/A		0.00	0.00	0.00	\$ -	\$ -	\$ -		\$ -
TOTAL	MHC18								\$ -	\$ -	\$ -		\$ -

RESIDENTIAL SERVICES													
CMH	MHC01	Residential Level I	18 Residential I	N/A		0.00	0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC01	Residential Level II	19 Residential II	N/A		0.00	0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC01	Residential Level III	20 Residential III	N/A		0.00	0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC01	Residential Level IV	21 Residential IV	N/A		0.00	0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC01	Room and Board Level I	36 R&B with Sup. I	N/A		0.00	0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC01	Room and Board Level II	37 R&B with Sup. II	N/A		0.00	0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC01	Room & Board Level II STGC	37a R&B with Sup. II STGC	N/A		0.00	0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC01	Room & Board Level II STGC - B	37b R&B with Sup. II STGC - B	N/A		0.00	0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC01	Room & Board Level II STGC - L	37c R&B with Sup. II STGC - L	N/A		0.00	0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC01	Room & Board Level II STGC - N	37d R&B with Sup. II STGC - N	N/A		0.00	0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC01	Room & Board Level II PIL	37e R&B with Sup. II PIL	N/A		0.00	0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC01	Room and Board with Supervision - Level II OTPR	37f R&B with Sup. II OTPR	N/A		0.00	0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC01	Room and Board Level III	38 R&B with Sup. III	N/A		0.00	0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC01	Room and Board with Supervision - Level III (Enhanced Rate)	38a R&B with Sup. III (Enhanced Rate)	N/A		0.00	0.00	0.00	\$ -	\$ -	\$ -		\$ -

NON-RESIDENTIAL SERVICES													
CMH	MHC09	Assessment	01 Assessment	N/A		0.00	0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC09	Case Management	02 Case Management	N/A		0.00	0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC09	Case Management - Wraparound Clients	07 Wraparound Projects	N/A		0.00	0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC18	Crisis Support/Emergency	04 Crisis Support/Emergency	N/A		0.00	0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC09	Day Care	05 Day Care	N/A		0.00	0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC09	Day Treatment	06 Day Treatment	N/A		0.00	0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC09	In-Home and On-site Services	08 In-Home & Onsite	N/A		0.00	0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC18	Inpatient	09 Inpatient	N/A		0.00	0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC09	Intensive Case Management	10 Intensive Case Mgmt.	N/A		0.00	0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC09	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00	0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC09	Medical Services	12 Medical Services	N/A		0.00	0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC09	Outpatient - Individual	14 Outpatient (Indiv.)	N/A		0.00	0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC09	Respite Services	22 Respite Services	N/A		0.00	0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC09	Supported Employment	25 Supported Employment	N/A		0.00	0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC09	Supported Housing/Living	26 Supportive Housing/Living	N/A		0.00	0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC09	Incidental Expenses	28 Incidental Expenses	N/A		0.00	0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC09	Aftercare - Individual	29 Aftercare (Indiv.)	N/A		0.00	0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC09	Outpatient - Group	35 Outpatient (Group)	N/A		0.00	0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC09	Intervention - Group	42 Intervention (Group)	N/A		0.00	0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC09	Aftercare - Group	43 Aftercare (Group)	N/A		0.00	0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC09	Comprehensive Community Service Team - Individual	44 CCST (Indiv.)	N/A		0.00	0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC09	Comprehensive Community Service Team - Group	45 CCST (Group)	N/A		0.00	0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC09	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00	0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC09	Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00	0.00	0.00	\$ -	\$ -	\$ -		\$ -

NON PERSON SPECIFIC SERVICES													
CMH	MHC09	Outreach	15 Outreach	N/A		0.00	0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC09	Outreach - Monthly	01 Network Eval. & Dvlpmt.	N/A		0.00	0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC09	Information & Referral	30 Information and Referral	N/A		0.00	0.00	0.00	\$ -	\$ -	\$ -		\$ -

TOTAL	MHC00									\$ -	\$ -	\$ -	\$ -	\$ -
--------------	--------------	--	--	--	--	--	--	--	--	------	------	------	------	------

FAMILY SERVICES PLANNING TEAM

CMH	MHC09	FSPT - Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHC09	FSPT - Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHC09	FSPT - Information & Referral	30 Information and Referral	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHC09	FSPT - Intervention - Group	42 Intervention (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHC09	FSPT - Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHC09	FSPT - Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	MHC00									\$ -	\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS

CMH	MHC33	Assessment	01 Assessment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHC33	Case Management	02 Case Management	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHC33	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHC33	FSPT - Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHC33	Medical Services	12 Medical Services	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHC33	Outpatient - Individual	14 Outpatient (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHC33	Residential Level III	20 Residential III	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHC33	Supported Housing/Living	26 Supportive Housing/Living	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHC33	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHC33	FSPT - Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHC33	Aftercare - Individual	29 Aftercare (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHC33	Outpatient - Group	35 Outpatient (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHC33	Intervention - Group	42 Intervention (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHC33	FSPT - Intervention - Group	42 Intervention (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	MHC33									\$ -	\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS

CMH	MH036	Assessment	01 Assessment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MH036	Case Management	02 Case Management	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MH036	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MH036	FSPT - Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MH036	Outpatient - Individual	14 Outpatient (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MH036	FSPT - Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MH036	Aftercare - Individual	29 Aftercare (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MH036	Outpatient - Group	35 Outpatient (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MH036	Intervention - Group	42 Intervention (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MH036	FSPT - Intervention - Group	42 Intervention (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	MH036									\$ -	\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS

CMH	MH048	Assessment	01 Assessment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MH048	Case Management	02 Case Management	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MH048	Crisis Support/Emergency	04 Crisis Support/Emergency	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MH048	In-Home and On-Site Services	08 In-Home & Onsite	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MH048	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MH048	Medical Services	12 Medical Services	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MH048	Outpatient - Individual	14 Outpatient (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MH048	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MH048	FSPT - Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MH048	Outpatient - Group	35 Outpatient (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MH048	Intervention - Group	42 Intervention (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MH048	Aftercare - Group	43 Aftercare (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MH048	Comprehensive Community Service Team - Individual	44 CCST (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MH048	Comprehensive Community Service Team - Group	45 CCST (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	MH048									\$ -	\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS

CMH	MH071	Inpatient	09 Inpatient	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MH071	Residential Level I	18 Residential I	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MH071	Residential Level II	19 Residential II	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MH071	Residential Level II STGC	19 Residential II	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MH071	Residential Level II PIL	19 Residential II	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -

CMH	MH071	Room & Board Level I	36 R&B with Sup. I	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MH071	Room & Board Level II	37 R&B with Sup. II	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MH071	Room & Board Level II STGC	37a R&B with Sup. II STGC	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MH071	Room & Board Level II STGC - B	37b R&B with Sup. II STGC - B	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MH071	Room & Board Level II STGC - L	37c R&B with Sup. II STGC - L	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MH071	Room & Board Level II STGC - N	37d R&B with Sup. II STGC - N	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MH071	Room & Board Level II PIL	37e R&B with Sup. II PIL	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MH071	Room and Board with Supervision - Level II OTPR	37f R&B with Sup. II OTPR	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
TOTAL	MH071									\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS

CMH	MH0BN	Title XXI Children's Health Insurance Program (BNet)	A1 BNET	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MH0BN	Assessment	01 Assessment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MH0BN	Case Management	02 Case Management	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MH0BN	Crisis Stabilization Units	03 Crisis Stabilization	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MH0BN	Crisis Support/Emergency	04 Crisis Support/Emergency	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MH0BN	Day Treatment	06 Day Treatment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MH0BN	In-Home and On-Site Services	08 In-Home & Onsite	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MH0BN	Inpatient	09 Inpatient	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MH0BN	Intensive Case Management	10 Intensive Case Mgmt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MH0BN	Medical Services	12 Medical Services	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MH0BN	Medication-Assisted Treatment	13 Medication-Assisted Tx;	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MH0BN	Outpatient - Individual	14 Outpatient (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MH0BN	Residential Level I	18 Residential I	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MH0BN	Residential Level II	19 Residential II	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MH0BN	Residential Level III	20 Residential III	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MH0BN	Residential Level IV	21 Residential IV	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MH0BN	Respite Services	22 Respite Services	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MH0BN	Detoxification Services - SA Detox Beds	24 Inpatient Detoxification	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MH0BN	Supported Employment	25 Supported Employment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MH0BN	Supported Housing/Living	26 Supportive Housing/Living	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MH0BN	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MH0BN	Aftercare - Individual	29 Aftercare (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MH0BN	Outpatient Detoxification	32 Outpatient Detoxification	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MH0BN	Outpatient - Group	35 Outpatient (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MH0BN	Aftercare - Group	43 Aftercare (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MH0BN	Comprehensive Community Service Team - Individual	44 CCST (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MH0BN	Comprehensive Community Service Team - Group	45 CCST (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MH0BN	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
TOTAL	MH0BN									\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS

CMH	MHCA2	Assessment	01 Assessment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHCA2	Case Management	02 Case Management	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHCA2	Crisis Support/Emergency	04 Crisis Support/Emergency	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHCA2	In-Home and On-Site Services	08 In-Home & Onsite	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHCA2	Intensive Case Management	10 Intensive Case Mgmt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHCA2	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHCA2	Medical Services	12 Medical Services	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHCA2	Outpatient - Individual	14 Outpatient (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHCA2	Outreach	15 Outreach	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHCA2	Outreach - Monthly	B1 Network Eval. & Dvlpmt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHCA2	Respite Services	22 Respite Services	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHCA2	Supported Employment	25 Supported Employment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHCA2	Supported Housing/Living	26 Supportive Housing/Living	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHCA2	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHCA2	Information & Referral	30 Information and Referral	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHCA2	FSPT - Information & Referral	30 Information and Referral	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHCA2	Outpatient Detoxification	32 Outpatient Detoxification	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHCA2	Outpatient - Group	35 Outpatient (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHCA2	Intervention - Group	42 Intervention (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHCA2	Aftercare - Group	43 Aftercare (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHCA2	Comprehensive Community Service Team - Individual	44 CCST (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHCA2	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHCA2	FSPT - Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -

CMH	MHCA2	Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCA2	FSPT - Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCA2	Cost Reimbursement	B3 Cost Reimbursement	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCA2	Wraparound	B7 Wraparound	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	MHCA2									\$ -	\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS

CMH	MHCAS	Assessment	01 Assessment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAS	Case Management	02 Case Management	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAS	Crisis Support/Emergency	04 Crisis Support/Emergency	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAS	In-Home and On-Site Services	08 In-Home & Onsite	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAS	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAS	Outreach	15 Outreach	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAS	Outreach - Monthly	B1 Network Eval. & Dvlpmt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAS	Supported Housing/Living	26 Supportive Housing/Living	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAS	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAS	Intervention - Group	42 Intervention (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAS	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAS	FSPT - Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAS	Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAS	FSPT - Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAS	Care Coordination	A4 Care Coordination	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAS	Network Evaluation & Development	B1 Network Eval. & Dvlpmt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAS	Cost Reimbursement	B3 Cost Reimbursement	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAS	Wraparound	B7 Wraparound	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	MHCAS									\$ -	\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS

CMH	MHCAT	Assessment	01 Assessment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAT	Case Management	02 Case Management	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAT	Crisis Support/Emergency	04 Crisis Support/Emergency	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAT	In-Home and On-Site Services	08 In-Home & Onsite	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAT	Intensive Case Management	10 Intensive Case Mgmt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAT	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAT	Medical Services	12 Medical Services	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAT	Outpatient - Individual	14 Outpatient (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAT	Outreach	15 Outreach	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAT	Outreach - Monthly	B1 Network Eval. & Dvlpmt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAT	Respite Services	22 Respite Services	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAT	Supported Employment	25 Supported Employment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAT	Supported Housing/Living	26 Supportive Housing/Living	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAT	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAT	Information & Referral	30 Information and Referral	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAT	FSPT - Information & Referral	30 Information and Referral	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAT	Outpatient Detoxification	32 Outpatient Detoxification	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAT	Outpatient - Group	35 Outpatient (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAT	Aftercare - Group	43 Aftercare (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAT	Comprehensive Community Service Team - Individual	44 CCST (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAT	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAT	FSPT - Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAT	Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAT	FSPT - Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	MHCAT									\$ -	\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS

CMH	MHCCN	Assessment	01 Assessment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCCN	Case Management	02 Case Management	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCCN	Crisis Support/Emergency	04 Crisis Support/Emergency	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCCN	In-Home and On-Site Services	08 In-Home & Onsite	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCCN	Intensive Case Management	10 Intensive Case Mgmt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCCN	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCCN	Outreach	15 Outreach	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCCN	Outreach - Monthly	B1 Network Eval. & Dvlpmt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCCN	Supported Housing/Living	26 Supportive Housing/Living	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCCN	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -

CMH	MHCCN	Intervention - Group	42 Intervention (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHCCN	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHCCN	Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
TOTAL	MHCCN									\$ -	\$ -	\$ -		\$ -

SPECIAL FUNDED PROJECTS

CMH	MHMCT	Crisis Support/Emergency	04 Crisis Support/Emergency	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHMCT	Medical Services	12 Medical Services	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHMCT	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHMCT	Information & Referral	30 Information and Referral	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
TOTAL	MHMCT									\$ -	\$ -	\$ -		\$ -

SPECIAL FUNDED PROJECTS

CMH	MHTLH	Assessment	01 Assessment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHTLH	Case Management	02 Case Management			0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHTLH	Crisis Support/Emergency	04 Crisis Support/Emergency			0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHTLH	In-Home and On-Site Services	08 In-Home & Onsite	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHTLH	Intensive Case Management	10 Intensive Case Mgmt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHTLH	Intervention - Individual	11 Intervention (Indiv.)			0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHTLH	Outpatient - Individual	14 Outpatient (Indiv.)			0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHTLH	Outreach	15 Outreach	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHTLH	Outreach - Monthly	B1 Network Eval. & Dvlpmt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHTLH	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHTLH	Aftercare - Individual	29 Aftercare (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHTLH	Outpatient Detoxification	32 Outpatient Detoxification			0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHTLH	Outpatient - Group	35 Outpatient (Group)			0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHTLH	Intervention - Group	42 Intervention (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHTLH	Aftercare - Group	43 Aftercare (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHTLH	Recovery Support - Individual	46 Recovery Support (Indiv.)			0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHTLH	Recovery Support - Group	47 Recovery Support (Group)			0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHTLH	Network Evaluation & Development	B1 Network Eval. & Dvlpmt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHTLH	Cost Reimbursement	B3 Cost Reimbursement	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
TOTAL	MHTLH									\$ -	\$ -	\$ -		\$ -

FIXED RATE

CMH	MHCAT	Fixed Rate - Community Action Team	B4 CAT Team	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHESP	Fixed Rate - System of Care Expansion & Sustainability Project	A7 Federal Project Grant	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHMCT	Fixed Rate - Mobile Crisis Teams	C0 Other Bundled Projects	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC00	Fixed Rate - COVID-19 - MHC00	C0 Other Bundled Projects [COVID-19]	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC33	Fixed Rate - COVID-19 - MHC33	C0 Other Bundled Projects [COVID-19]	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHCA2	Fixed Rate - Community Action Team	B4 CAT Team	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHTLH	Fixed Rate - Community Crisis Prevention Team	B6 Provider Proviso Projects	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MH048	Fixed Rate - Treating Trauma Now	B6 Provider Proviso Projects	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH				N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH				N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH				N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH				N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH				N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH				N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH				N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
TOTAL						\$ -				\$ -	\$ -	\$ -		\$ -

Summary	
Total Payment Approved	\$ -

2021-22 SAMH Monthly Expenditure Report

Provider Name:	0
Contract #:	0
Month/Yr:	July 2021
Program	Children's Substance Abuse
Months Completed	1

State Program Component (SPC) Grouping	OCA	Covered Services	Project Code	Units to be Paid this Month	Total Contract Amount	Total YTD Number of Units	Total YTD Less Unit Adjustments/Third Party Unit Payments (Enter as a positive #)	Total Lutheran YTD Units Produced	Unit Rate	Total YTD earned	Total YTD paid	Total YTD earned, but not paid	Prorata	Total Payment Due
AVAILABILITY SERVICES														
CSA	MSC21	Detoxification Services - SA Detox Beds	24 Inpatient Detoxification	N/A	-	0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
TOTAL	MSC21									\$ -	\$ -	\$ -		\$ -
RESIDENTIAL SERVICES														
CSA	MSC03	Residential Level I	18 Residential I	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC03	Residential Level II	19 Residential II	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC03	Residential Level III	20 Residential III	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC03	Residential Level IV	21 Residential IV	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC03	Room and Board Level I	36 R&B with Sup. I	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC03	Room and Board Level II	37 R&B with Sup. II	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC03	Room & Board Level II STGC	37a R&B with Sup. II STGC	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC03	Room & Board Level II STGC - B	37b R&B with Sup. II STGC - B	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC03	Room & Board Level II STGC - L	37c R&B with Sup. II STGC - L	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC03	Room & Board Level II STGC - N	37d R&B with Sup. II STGC - N	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC03	Room & Board Level II PIL	37e R&B with Sup. II PIL	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC03	Room and Board with Supervision - Level II OTPR	37f R&B with Sup. II OTPR	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC03	Room and Board Level III	38 R&B with Sup. III	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC03	Room and Board with Supervision - Level III (Enhanced Rate)	38a R&B with Sup. III (Enhanced Rate)	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
NON-RESIDENTIAL SERVICES														
CSA	MSC11	Assessment	01 Assessment	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC11	Case Management	02 Case Management	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC21	Crisis Support/Emergency	04 Crisis Support/Emergency	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC11	Day Care	05 Day Care	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC11	Day Treatment	06 Day Treatment	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC11	In-Home and On-Site Services	08 In-Home & Onsite	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC21	Inpatient	09 Inpatient	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC11	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC11	Medical Services	12 Medical Services	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC11	Medication-Assisted Treatment	13 Medication-Assisted Tx;	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC11	Outpatient - Individual	14 Outpatient (Indiv.)	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC11	Outreach	15 Outreach	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC11	Outreach - Monthly	B1 Network Eval. & Dvlpmnt.	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC11	Respite Services	22 Respite Services	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC11	Detoxification Services - SA Detox Beds	24 Inpatient Detoxification	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC11	Supported Employment	25 Supported Employment	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC11	Supported Housing/Living	26 Supportive Housing/Living	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC11	TASC	27 TASC	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC11	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC11	Aftercare - Individual	29 Aftercare (Indiv.)	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC11	Information & Referral	30 Information and Referral	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC11	Outpatient Detoxification	32 Outpatient Detoxification	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC11	Outpatient - Group	35 Outpatient (Group)	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC21	Short-term Residential Treatment	39 Short-term Residential	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC11	Intervention - Group	42 Intervention (Group)	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC11	Aftercare - Group	43 Aftercare (Group)	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC11	Comprehensive Community Service Team - Individual	44 CCST (Indiv.)	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC11	Comprehensive Community Service Team - Group	45 CCST (Group)	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -

CSA	MSC11	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSC11	Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
TOTAL	MSC00								\$	-	\$	-	\$	-	\$	-	\$

Substance Abuse Prevention and Treatment Block Grant

CSA	MSC23	Case Management	02 Case Management	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSC23	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSC23	Medical Services	12 Medical Services	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSC23	Outpatient - Individual	14 Outpatient (Indiv.)	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
TOTAL	MSC23								\$	-	\$	-	\$	-	\$	-	\$

Substance Abuse Prevention and Treatment Block Grant

CSA	MSC25	Prevention - Indicated	48 Prevention - Indicated	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSC25	Prevention - Selective	49 Prevention - Selective	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSC25	Prevention - Universal Direct	50 Prevention - Universal Direct	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSC25	Prevention - Universal Indirect	51 Prevention - Universal Indirect	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSC25	Network Evaluation & Development	81 Network Eval. & Dvlpmnt.	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
TOTAL	MSC25								\$	-	\$	-	\$	-	\$	-	\$

Prevention Partnership Grant (PPG)

CSA	MSOPP	Prevention - Indicated	48 Prevention - Indicated	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSOPP	Prevention - Selective	49 Prevention - Selective	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSOPP	Prevention - Universal Direct	50 Prevention - Universal Direct	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSOPP	Prevention - Universal Indirect	51 Prevention - Universal Indirect	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
TOTAL	MSOPP								\$	-	\$	-	\$	-	\$	-	\$

Prevention Partnership Grant (PPG) - Alachua County

CSA	MSOPP	Alachua - Prevention - Indicated	48 Prevention - Indicated	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSOPP	Alachua - Prevention - Selective	49 Prevention - Selective	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSOPP	Alachua - Prevention - Universal Direct	50 Prevention - Universal Direct	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSOPP	Alachua - Prevention - Universal Indirect	51 Prevention - Universal Indirect	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
TOTAL	MSOPP								\$	-	\$	-	\$	-	\$	-	\$

Prevention Partnership Grant (PPG) - Clay, Baker, & Bradford Counties

CSA	MSOPP	Clay Baker Bradford - Prevention - Indicated	48 Prevention - Indicated	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSOPP	Clay Baker Bradford - Prevention - Selective	49 Prevention - Selective	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSOPP	Clay Baker Bradford - Prevention - Universal Direct	50 Prevention - Universal Direct	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSOPP	Clay Baker Bradford - Prevention - Universal Indirect	51 Prevention - Universal Indirect	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
TOTAL	MSOPP								\$	-	\$	-	\$	-	\$	-	\$

Prevention Partnership Grant (PPG) - Dixie, Gilchrist, & Levy Counties

CSA	MSOPP	Dixie Gilchrist Levy - Prevention - Indicated	48 Prevention - Indicated	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSOPP	Dixie Gilchrist Levy - Prevention - Selective	49 Prevention - Selective	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSOPP	Dixie Gilchrist Levy - Prevention - Universal Direct	50 Prevention - Universal Direct	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSOPP	Dixie Gilchrist Levy - Prevention - Universal Indirect	51 Prevention - Universal Indirect	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
TOTAL	MSOPP								\$	-	\$	-	\$	-	\$	-	\$

Prevention Partnership Grant (PPG) - Putnam County

CSA	MSOPP	Putnam - Prevention - Indicated	48 Prevention - Indicated	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSOPP	Putnam - Prevention - Selective	49 Prevention - Selective	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSOPP	Putnam - Prevention - Universal Direct	50 Prevention - Universal Direct	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSOPP	Putnam - Prevention - Universal Indirect	51 Prevention - Universal Indirect	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
TOTAL	MSOPP								\$	-	\$	-	\$	-	\$	-	\$

SPECIAL FUNDED PROJECTS

CSA	MSCCN	Assessment	01 Assessment	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSCCN	Case Management	02 Case Management	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSCCN	Crisis Support/Emergency	04 Crisis Support/Emergency	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSCCN	In-Home and On-Site Services	08 In-Home & Onsite	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSCCN	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSCCN	Outreach	15 Outreach	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-

CSA	MSCCN	Outreach - Monthly	B1 Network Eval. & Dvlpmt.	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSCCN	Supported Housing/Living	26 Supportive Housing/Living	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSCCN	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSCCN	Intervention - Group	42 Intervention (Group)	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSCCN	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSCCN	Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
TOTAL	MSCCN									\$	-	\$	-	\$	-	\$	-

Temporary Assistance for Needy Families (TANF)																	
CSA	MSCTB	Assessment	01 Assessment	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSCTB	Case Management	02 Case Management	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSCTB	Crisis Support/Emergency	04 Crisis Support/Emergency	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSCTB	Day Care	05 Day Care	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSCTB	Day Treatment	06 Day Treatment	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSCTB	In-Home and On-Site Services	08 In-Home & Onsite	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSCTB	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSCTB	Medication-Assisted Treatment	13 Medication-Assisted Tx;	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSCTB	Outpatient - Individual	14 Outpatient (Indiv.)	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSCTB	Residential Level I	18 Residential I	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSCTB	Residential Level II	19 Residential II	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSCTB	Residential Level III	20 Residential III	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSCTB	Residential Level IV	21 Residential IV	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSCTB	Respite Services	22 Respite Services	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSCTB	Supported Employment	25 Supported Employment	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSCTB	Supported Housing/Living	26 Supportive Housing/Living	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSCTB	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSCTB	Aftercare - Individual	29 Aftercare (Indiv.)	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSCTB	Outpatient - Group	35 Outpatient (Group)	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSCTB	Room and Board Level I	36 R&B with Sup. I	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSCTB	Room and Board Level II	37 R&B with Sup. II	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSCTB	Room & Board Level II STGC	37a R&B with Sup. II STGC	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSCTB	Room & Board Level II STGC - B	37b R&B with Sup. II STGC - B	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSCTB	Room & Board Level II STGC - L	37c R&B with Sup. II STGC - L	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSCTB	Room & Board Level II STGC - N	37d R&B with Sup. II STGC - N	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSCTB	Room & Board Level II PIL	37e R&B with Sup. II PIL	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSCTB	Room and Board with Supervision - Level II OTPR	37f R&B with Sup. II OTPR	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSCTB	Room and Board Level III	38 R&B with Sup. III	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSCTB	Room and Board with Supervision - Level III (Enhance Rate)	38a R&B with Sup. III (Enhanced Rate)	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSCTB	Intervention - Group	42 Intervention (Group)	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSCTB	Aftercare - Group	43 Aftercare (Group)	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSCTB	Comprehensive Community Service Team - Individual	44 CCST (Indiv.)	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSCTB	Comprehensive Community Service Team - Group	45 CCST (Group)	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSCTB	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSCTB	Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
TOTAL	MSCTB									\$	-	\$	-	\$	-	\$	-

SPECIAL FUNDED PROJECTS																	
CSA	MSSP2	Prevention - Indicated	48 Prevention - Indicated	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSSP2	Prevention - Selective	49 Prevention - Selective	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSSP2	Prevention - Universal Direct	50 Prevention - Universal Direct	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSSP2	Prevention - Universal Indirect	51 Prevention - Universal Indirect	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSSP2	Network Evaluation & Development	B1 Network Eval. & Dvlpmt.	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
TOTAL	MSSP2									\$	-	\$	-	\$	-	\$	-

SPECIAL FUNDED PROJECTS																	
CSA	MSSP3	Prevention - Indicated	48 Prevention - Indicated	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSSP3	Prevention - Selective	49 Prevention - Selective	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSSP3	Prevention - Universal Direct	50 Prevention - Universal Direct	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSSP3	Prevention - Universal Indirect	51 Prevention - Universal Indirect	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
CSA	MSSP3	Network Evaluation & Development	B1 Network Eval. & Dvlpmt.	N/A		0.00		0.00	-	\$	-	\$	-	\$	-	\$	-
TOTAL	MSSP3									\$	-	\$	-	\$	-	\$	-

FIXED RATE																	
CSA	MSC00	Fixed Rate - COVID-19 - MSC00	CO Other Bundled Projects [COVID-19]	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-	\$	-

CSA				N/A	-	0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CSA				N/A	-	0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CSA				N/A	-	0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CSA				N/A	-	0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CSA				N/A	-	0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CSA				N/A	-	0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CSA				N/A	-	0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CSA				N/A	-	0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CSA				N/A	-	0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CSA				N/A	-	0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CSA				N/A	-	0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CSA				N/A	-	0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CSA				N/A	-	0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CSA				N/A	-	0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
TOTAL					\$ -					\$ -	\$ -	\$ -		\$ -

Summary	
Total Payment Approved	\$ -

2021-22 SAMH Monthly Expenditure Report

Provider Name:	0
Contract #:	0
Month/Yr:	July 2021
Program	Adult Mental Health
Months Completed	1

State Program Component (SPC) Grouping	OCA	Covered Services	Project Code	Units to be Paid this Month	Total Contract Amount	Total YTD Number of Units	Total YTD Less Unit Adjustments/Third Party Unit Payments (Enter as a positive #)	Total Lutheran YTD Units Produced	Unit Rate	Total YTD earned	Total YTD paid	Total YTD earned, but not paid	Prorata	Total Payment Due
--	-----	------------------	--------------	-----------------------------	-----------------------	---------------------------	---	-----------------------------------	-----------	------------------	----------------	--------------------------------	---------	-------------------

AVAILABILITY SERVICES														
AMH	MHA18-CF	Crisis Stabilization Units	03 Crisis Stabilization	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
TOTAL	MHA18-CF									\$ -	\$ -	\$ -	\$ -	\$ -

RESIDENTIAL SERVICES														
AMH	MHA01-CF	Residential Level I	18 Residential I	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA01-CF	Residential Level II	19 Residential II	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA01-CF	Residential Level III	20 Residential III	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA01-CF	Residential Level IV	21 Residential IV	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA01-CF	Room and Board Level I	36 R&B with Sup. I	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA01-CF	Room and Board Level II	37 R&B with Sup. II	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA01-CF	Room & Board Level II STGC	37a R&B with Sup. II STGC	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA01-CF	Room & Board Level II STGC - B	37b R&B with Sup. II STGC - B	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA01-CF	Room & Board Level II STGC - L	37c R&B with Sup. II STGC - L	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA01-CF	Room & Board Level II STGC - N	37d R&B with Sup. II STGC - N	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA01-CF	Room & Board Level II PIL	37e R&B with Sup. II PIL	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA01-CF	Room and Board with Supervision - Level II OTPR	37f R&B with Sup. II OTPR	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA01-CF	Room and Board Level III	38 R&B with Sup. III	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA01-CF	Room and Board with Supervision - Level III (Enhanced Rate)	38a R&B with Sup. III (Enhanced Rate)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -

NON-RESIDENTIAL SERVICES														
AMH	MHA09-CF	Assessment	01 Assessment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA09-CF	Case Management	02 Case Management	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA18-CF	Crisis Support/Emergency	04 Crisis Support/Emergency	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA09-CF	Day Care	05 Day Care	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA09-CF	Day Treatment	06 Day Treatment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA09-CF	In-Home and On-site Services	08 In-Home & Onsite	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA18-CF	Inpatient	09 Inpatient	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA09-CF	Intensive Case Management	10 Intensive Case Mgmt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA09-CF	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA09-CF	Medical Services	12 Medical Services	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA09-CF	Outpatient - Individual	14 Outpatient (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA09-CF	Respite Services	22 Respite Services	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA09-CF	Supported Employment	25 Supported Employment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA09-CF	Supported Housing/Living	26 Supportive Housing/Living	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA09-CF	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA09-CF	Aftercare - Individual	29 Aftercare (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA09-CF	Outpatient - Group	35 Outpatient (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA18-CF	Short-term Residential Treatment	39 Short-term Residential	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA09-CF	Intervention - Group	42 Intervention (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA09-CF	Aftercare - Group	43 Aftercare (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA09-CF	Comprehensive Community Service Team - Individual	44 CCST (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA09-CF	Comprehensive Community Service Team - Group	45 CCST (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA09-CF	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA09-CF	Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -

NON PERSON SPECIFIC SERVICES														
AMH	MHA09-CF	Drop-in/Self-Help Centers	07 Drop-In/Self Help Ctr.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA09-CF	Drop-in Self-Help Centers	07 Drop-In/Self Help Ctr.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA09-CF	Outreach	15 Outreach	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -

Adult Mental Health - Carry Forward

AMH	MHA09-CF	Outreach - Monthly	B1 Network Eval. & Dvlpmt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA09-CF	Information & Referral	30 Information and Referral	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHA09-CF	Mental Health Clubhouse Services	40 MH Clubhouse	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
TOTAL	MHA00-CF									\$ -	\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS

AMH	MH023-CF	Crisis Stabilization Units	03 Crisis Stabilization	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MH023-CF	Crisis Support/Emergency	04 Crisis Support/Emergency	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
TOTAL	MH023-CF									\$ -	\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS

AMH	MH072-CF	Assessment	01 Assessment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MH072-CF	Case Management	02 Case Management	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MH072-CF	Crisis Support/Emergency	04 Crisis Support/Emergency	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MH072-CF	Day Treatment	06 Day Treatment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MH072-CF	In-Home and On-Site Services	08 In-Home & Onsite	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MH072-CF	Intensive Case Management	10 Intensive Case Mgmt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MH072-CF	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MH072-CF	Medical Services	12 Medical Services	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MH072-CF	Outpatient - Individual	14 Outpatient (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MH072-CF	Outreach	15 Outreach	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MH072-CF	Outreach - Monthly	B1 Network Eval. & Dvlpmt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MH072-CF	Residential Level I	18 Residential I	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MH072-CF	Residential Level II	19 Residential II	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MH072-CF	Residential Level III	20 Residential III	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MH072-CF	Residential Level IV	21 Residential IV	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MH072-CF	Supported Employment	25 Supported Employment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MH072-CF	Supported Housing/Living	26 Supportive Housing/Living	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MH072-CF	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MH072-CF	Outpatient - Group	35 Outpatient (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MH072-CF	Room and Board Level I	36 R&B with Sup. I	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MH072-CF	Room and Board Level II	37 R&B with Sup. II	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MH072-CF	Room & Board Level II STGC	37a R&B with Sup. II STGC	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MH072-CF	Room & Board Level II STGC - B	37b R&B with Sup. II STGC - B	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MH072-CF	Room & Board Level II STGC - L	37c R&B with Sup. II STGC - L	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MH072-CF	Room & Board Level II STGC - N	37d R&B with Sup. II STGC - N	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MH072-CF	Room & Board Level II PIL	37e R&B with Sup. II PIL	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MH072-CF	Room and Board with Supervision - Level II OTPR	37f R&B with Sup. II OTPR	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MH072-CF	Room and Board Level III	38 R&B with Sup. III	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MH072-CF	Room and Board with Supervision - Level III (Enhance Rate)	38a R&B with Sup. III (Enhanced Rate)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MH072-CF	Intervention - Group	42 Intervention (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MH072-CF	Comprehensive Community Service Team - Individual	44 CCST (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MH072-CF	Comprehensive Community Service Team - Group	45 CCST (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MH072-CF	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MH072-CF	Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
TOTAL	MH072-CF									\$ -	\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS

AMH	MH076-CF	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
TOTAL	MH076-CF									\$ -	\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS

AMH	MHACN-CF	Assessment	01 Assessment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHACN-CF	Case Management	02 Case Management	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHACN-CF	Crisis Support/Emergency	04 Crisis Support/Emergency	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHACN-CF	In-Home and On-Site Services	08 In-Home & Onsite	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHACN-CF	Intensive Case Management	10 Intensive Case Mgmt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHACN-CF	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHACN-CF	Outreach	15 Outreach	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHACN-CF	Outreach - Monthly	B1 Network Eval. & Dvlpmt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHACN-CF	Supported Housing/Living	26 Supportive Housing/Living	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHACN-CF	Supportive Housing/Living - Monthly	26 Supportive Housing/Living	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHACN-CF	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHACN-CF	Intervention - Group	42 Intervention (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHACN-CF	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -

Adult Mental Health - Carry Forward

AMH	MHACN-CF	Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	MHACN-CF									\$ -	\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS

AMH	MHCAB-CF	Outreach	15 Outreach	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHCAB-CF	Outreach - Monthly	B1 Network Eval. & Dvlpm.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHCAB-CF	Information & Referral	30 Information and Referral	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHCAB-CF	Network Evaluation & Development	B1 Network Eval. & Dvlpm.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHCAB-CF	Cost Reimbursement	B3 Cost Reimbursement	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	MHCAB-CF									\$ -	\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS

AMH	MHCAF-CF	Assessment	01 Assessment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHCAF-CF	Case Management	02 Case Management	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHCAF-CF	Crisis Support/Emergency	04 Crisis Support/Emergency	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHCAF-CF	Day Care	05 Day Care	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHCAF-CF	Day Treatment	06 Day Treatment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHCAF-CF	Drop-in/Self-Help Centers	07 Drop-In/Self Help Ctr.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHCAF-CF	Drop-in Self-Help Centers	07 Drop-In/Self Help Ctr. [a]	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHCAF-CF	In-Home and On-Site Services	08 In-Home & Onsite	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHCAF-CF	Inpatient	09 Inpatient	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHCAF-CF	Intensive Case Management	10 Intensive Case Mgmt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHCAF-CF	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHCAF-CF	Medical Services	12 Medical Services	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHCAF-CF	Medication-Assisted Treatment	13 Medication-Assisted Tx;	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHCAF-CF	Outpatient - Individual	14 Outpatient (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHCAF-CF	Outreach	15 Outreach	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHCAF-CF	Outreach - Monthly	B1 Network Eval. & Dvlpm.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHCAF-CF	Residential Level I	18 Residential I	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHCAF-CF	Residential Level II	19 Residential II	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHCAF-CF	Residential Level III	20 Residential III	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHCAF-CF	Respite Services	22 Respite Services	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHCAF-CF	Supported Employment	25 Supported Employment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHCAF-CF	Supported Housing/Living	26 Supportive Housing/Living	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHCAF-CF	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHCAF-CF	Aftercare - Individual	29 Aftercare (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHCAF-CF	Information & Referral	30 Information and Referral	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHCAF-CF	FACT Teams - Enhanced Rate	B5 FACT Team	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHCAF-CF	Outpatient - Group	35 Outpatient (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHCAF-CF	Comprehensive Community Service Team - Individual	44 CCST (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHCAF-CF	Comprehensive Community Service Team - Group	45 CCST (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHCAF-CF	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHCAF-CF	Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHCAF-CF	Cost Reimbursement	B3 Cost Reimbursement	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHCAF-CF	FACT Team	B5 FACT Team	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	MHCAF-CF									\$ -	\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS

AMH	MHCAJ-CF	Assessment	01 Assessment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHCAJ-CF	Case Management	02 Case Management	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHCAJ-CF	Crisis Stabilization Units	03 Crisis Stabilization	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHCAJ-CF	Crisis Support/Emergency	04 Crisis Support/Emergency	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHCAJ-CF	Day Care	05 Day Care	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHCAJ-CF	Day Treatment	06 Day Treatment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHCAJ-CF	In-Home and On-Site Services	08 In-Home & Onsite	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHCAJ-CF	Inpatient	09 Inpatient	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHCAJ-CF	Intensive Case Management	10 Intensive Case Mgmt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHCAJ-CF	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHCAJ-CF	Outpatient - Individual	14 Outpatient (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHCAJ-CF	Outreach	15 Outreach	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHCAJ-CF	Outreach - Monthly	B1 Network Eval. & Dvlpm.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHCAJ-CF	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHCAJ-CF	Aftercare - Individual	29 Aftercare (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHCAJ-CF	Information & Referral	30 Information and Referral	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
AMH	MHCAJ-CF	Outpatient - Group	35 Outpatient (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -

Adult Mental Health - Carry Forward

AMH	MHCAJ-CF	Intervention - Group	42 Intervention (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHCAJ-CF	Comprehensive Community Service Team - Individual	44 CCST (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHCAJ-CF	Comprehensive Community Service Team - Group	45 CCST (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHCAJ-CF	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHCAJ-CF	Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHCAJ-CF	Forensic Multidisciplinary Team	A0 Forensic Multidisciplinary Team	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHCAJ-CF	Local Diversion Forensic Project	A8 Local Diversion Forensic Project	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHCAJ-CF	Cost Reimbursement	B3 Cost Reimbursement	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHCAJ-CF	Wraparound	B7 Wraparound	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
TOTAL	MHCAJ-CF									\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS

AMH	MHSCR-CF	Assessment	01 Assessment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHSCR-CF	Case Management	02 Case Management	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHSCR-CF	Crisis Stabilization Units	03 Crisis Stabilization	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHSCR-CF	Crisis Support/Emergency	04 Crisis Support/Emergency	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHSCR-CF	Inpatient	09 Inpatient	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHSCR-CF	Intensive Case Management	10 Intensive Case Mgmt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHSCR-CF	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHSCR-CF	Medical Services	12 Medical Services	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHSCR-CF	Outpatient - Individual	14 Outpatient (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHSCR-CF	Outreach	15 Outreach	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHSCR-CF	Outreach - Monthly	B1 Network Eval. & Dvlpmnt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHSCR-CF	Residential Level I	18 Residential I	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHSCR-CF	Residential Level II	19 Residential II	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHSCR-CF	Residential Level III	20 Residential III	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHSCR-CF	Residential Level IV	21 Residential IV	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHSCR-CF	Respite Services	22 Respite Services	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHSCR-CF	Detoxification Services - SA Detox Beds	24 Inpatient Detoxification	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHSCR-CF	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHSCR-CF	Information & Referral	30 Information and Referral	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHSCR-CF	Outpatient Detoxification	32 Outpatient Detoxification	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHSCR-CF	Outpatient - Group	35 Outpatient (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHSCR-CF	Room and Board Level I	36 R&B with Sup. I	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHSCR-CF	Room and Board Level II	37 R&B with Sup. II	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHSCR-CF	Room & Board Level II STGC	37a R&B with Sup. II STGC	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHSCR-CF	Room & Board Level II STGC - B	37b R&B with Sup. II STGC - B	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHSCR-CF	Room & Board Level II STGC - L	37c R&B with Sup. II STGC - L	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHSCR-CF	Room & Board Level II STGC - N	37d R&B with Sup. II STGC - N	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHSCR-CF	Room & Board Level II PIL	37e R&B with Sup. II PIL	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHSCR-CF	Room and Board with Supervision - Level II OTPR	37f R&B with Sup. II OTPR	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHSCR-CF	Room and Board Level III	38 R&B with Sup. III	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHSCR-CF	Room and Board with Supervision - Level III (Enhance Rate)	38a R&B with Sup. III (Enhanced Rate)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHSCR-CF	Short-Term Residential Treatment	39 Short-term Residential	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHSCR-CF	Comprehensive Community Service Team - Individual	44 CCST (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHSCR-CF	Comprehensive Community Service Team - Group	45 CCST (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHSCR-CF	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHSCR-CF	Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
TOTAL	MHSCR-CF									\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS

AMH	MHDRF-CF	Assessment	01 Assessment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHDRF-CF	Case Management	02 Case Management	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHDRF-CF	Day Care	05 Day Care	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHDRF-CF	Day Treatment	06 Day Treatment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHDRF-CF	In-Home and On-Site Services	08 In-Home & Onsite	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHDRF-CF	Intensive Case Management	10 Intensive Case Mgmt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHDRF-CF	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHDRF-CF	Medical Services	12 Medical Services	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHDRF-CF	Outpatient - Individual	14 Outpatient (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHDRF-CF	Respite Services	22 Respite Services	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHDRF-CF	Supported Employment	25 Supported Employment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHDRF-CF	Supported Housing/Living	26 Supportive Housing/Living	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHDRF-CF	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
AMH	MHDRF-CF	Aftercare - Individual	29 Aftercare (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -

AMH	MHDRF-CF	Outpatient - Group	35 Outpatient (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHDRF-CF	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHDRF-CF	Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
TOTAL	MHDRF-CF									\$ -	\$ -	\$ -		\$ -

SPECIAL FUNDED PROJECTS - UNCONTRACTED

AMH	MHDRF-CF	Incidental Expenses (Uncontracted)	28 Incidental Expenses (Uncontracted)			0.00		0.00	1.00	\$ -	\$ -	\$ -		\$ -
TOTAL	MHDRF-CF									\$ -	\$ -	\$ -		\$ -

SPECIAL FUNDED PROJECTS

AMH	MHTRV-CF	Assessment	01 Assessment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHTRV-CF	Case Management	02 Case Management	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHTRV-CF	Day Care	05 Day Care	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHTRV-CF	Day Treatment	06 Day Treatment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHTRV-CF	In-Home and On-Site Services	08 In-Home & Onsite	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHTRV-CF	Intensive Case Management	10 Intensive Case Mgmt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHTRV-CF	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHTRV-CF	Medical Services	12 Medical Services	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHTRV-CF	Outpatient - Individual	14 Outpatient (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHTRV-CF	Respite Services	22 Respite Services	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHTRV-CF	Supported Employment	25 Supported Employment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHTRV-CF	Supported Housing/Living	26 Supportive Housing/Living	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHTRV-CF	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHTRV-CF	Aftercare - Individual	29 Aftercare (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHTRV-CF	Outpatient - Group	35 Outpatient (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH	MHTRV-CF	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
TOTAL	MHTRV-CF									\$ -	\$ -	\$ -		\$ -

SPECIAL FUNDED PROJECTS - UNCONTRACTED

AMH	MHTRV-CF	Incidental Expenses (Uncontracted)	28 Incidental Expenses (Uncontracted)			0.00		0.00	1.00	\$ -	\$ -	\$ -		\$ -
TOTAL	MHTRV-CF									\$ -	\$ -	\$ -		\$ -

FIXED RATE

AMH	MHSCV-CF	Cost Reimbursement	B3 Cost Reimbursement	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH				N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
AMH				N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
TOTAL										\$ -	\$ -	\$ -		\$ -

Summary	
Total Payment Approved	\$ -

2021-22 SAMH Monthly Expenditure Report

Provider Name:	0
Contract #:	0
Month/Yr:	July 2021
Program	Adult Substance Abuse
Months Completed	1

State Program Component (SPC) Grouping	OCA	Covered Services	Project Code	Units to be Paid this Month	Total Contract Amount	Total YTD Number of Units	Total YTD Less Unit Adjustments/Third Party Unit Payments (Enter as a positive #)	Total Lutheran YTD Units Produced	Unit Rate	Total YTD earned	Total YTD paid	Total YTD earned, but not paid	Prorata	Total Payment Due
AVAILABILITY SERVICES														
ASA	MSA21-CF	Detoxification Services - SA Detox Beds	24 Inpatient Detoxification	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
TOTAL	MSA21-CF									\$ -	\$ -	\$ -	\$ -	\$ -
RESIDENTIAL SERVICES														
ASA	MSA03-CF	Residential Level I	18 Residential I	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA03-CF	Residential Level II	19 Residential II	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA03-CF	Residential Level III	20 Residential III	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA03-CF	Residential Level IV	21 Residential IV	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA03-CF	Room and Board Level I	36 R&B with Sup. I	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA03-CF	Room and Board Level II	37 R&B with Sup. II	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA03-CF	Room & Board Level II STGC	37a R&B with Sup. II STGC	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA03-CF	Room & Board Level II STGC - B	37b R&B with Sup. II STGC - B	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA03-CF	Room & Board Level II STGC - L	37c R&B with Sup. II STGC - L	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA03-CF	Room & Board Level II STGC - N	37d R&B with Sup. II STGC - N	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA03-CF	Room & Board Level II PIL	37e R&B with Sup. II PIL	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA03-CF	Room and Board with Supervision - Level II OTPR	37f R&B with Sup. II OTPR	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA03-CF	Room and Board Level III	38 R&B with Sup. III	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA03-CF	Room and Board with Supervision - Level III (Enhance Rate)	38a R&B with Sup. III (Enhanced Rate)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
NON-RESIDENTIAL SERVICES														
ASA	MSA11-CF	Assessment	01 Assessment	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA11-CF	Case Management	02 Case Management	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA21-CF	Crisis Support/Emergency	04 Crisis Support/Emergency	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA11-CF	Day Care	05 Day Care	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA11-CF	Day Treatment	06 Day Treatment	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA11-CF	In-Home and On-Site Services	08 In-Home & Onsite	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA11-CF	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA11-CF	Medical Services	12 Medical Services	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA11-CF	Medication-Assisted Treatment	13 Medication-Assisted Tx;	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA11-CF	Outpatient - Individual	14 Outpatient (Indiv.)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA11-CF	Outreach	15 Outreach	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA11-CF	Outreach - Monthly	B1 Network Eval. & Dvlpmnt.	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA11-CF	Respite Services	22 Respite Services	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA11-CF	Supported Employment	25 Supported Employment	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA11-CF	Supported Housing/Living	26 Supportive Housing/Living	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA11-CF	Incidental Expenses	27 TASC	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA11-CF	Aftercare - Individual	28 Incidental Expenses	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA11-CF	Aftercare - Individual	29 Aftercare (Indiv.)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA11-CF	Information & Referral	30 Information and Referral	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA11-CF	Outpatient Detoxification	32 Outpatient Detoxification	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA11-CF	Outpatient - Group	35 Outpatient (Group)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA11-CF	Intervention - Group	42 Intervention (Group)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA11-CF	Aftercare - Group	43 Aftercare (Group)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA11-CF	Comprehensive Community Service Team - Individual	44 CCST (Indiv.)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA11-CF	Comprehensive Community Service Team - Group	45 CCST (Group)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA11-CF	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
ASA	MSA11-CF	Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	\$ -	\$ -	\$ -	\$ -		\$ -
TOTAL	MSA00-CF									\$ -	\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS															
ASA	MS091-CF	Assessment	01 Assessment	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MS091-CF	Case Management	02 Case Management	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MS091-CF	Crisis Stabilization Units	03 Crisis Stabilization	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MS091-CF	Crisis Support/Emergency	04 Crisis Support/Emergency	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MS091-CF	Day Treatment	06 Day Treatment	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MS091-CF	In-Home and On-Site Services	08 In-Home & Onsite	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MS091-CF	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MS091-CF	Medical Services	12 Medical Services	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MS091-CF	Medication-Assisted Treatment	13 Medication-Assisted Tx;	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MS091-CF	Outpatient - Individual	14 Outpatient (Indiv.)	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MS091-CF	Outreach	15 Outreach	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MS091-CF	Outreach - Monthly	B1 Network Eval. & Dvlpmt.	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MS091-CF	Residential Level I	18 Residential I	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MS091-CF	Residential Level II	19 Residential II	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MS091-CF	Residential Level III	20 Residential III	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MS091-CF	Residential Level IV	21 Residential IV	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MS091-CF	Respite Services	22 Respite Services	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MS091-CF	Detoxification Services - SA Detox Beds	24 Inpatient Detoxification	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MS091-CF	Supported Employment	25 Supported Employment	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MS091-CF	Supported Housing/Living	26 Supportive Housing/Living	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MS091-CF	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MS091-CF	Aftercare - Individual	29 Aftercare (Indiv.)	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MS091-CF	Information & Referral	30 Information and Referral	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MS091-CF	Outpatient Detoxification	32 Outpatient Detoxification	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MS091-CF	Outpatient - Group	35 Outpatient (Group)	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MS091-CF	Room and Board Level I	36 R&B with Sup. I	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MS091-CF	Room and Board Level II	37 R&B with Sup. II	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MS091-CF	Room & Board Level II STGC	37a R&B with Sup. II STGC	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MS091-CF	Room & Board Level II STGC - B	37b R&B with Sup. II STGC - B	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MS091-CF	Room & Board Level II STGC - L	37c R&B with Sup. II STGC - L	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MS091-CF	Room & Board Level II STGC - N	37d R&B with Sup. II STGC - N	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MS091-CF	Room & Board Level II PIL	37e R&B with Sup. II PIL	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MS091-CF	Room and Board with Supervision - Level II OTPR	37f R&B with Sup. II OTPR	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MS091-CF	Room and Board Level III	38 R&B with Sup. III	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MS091-CF	Room and Board with Supervision - Level III (Enhance Rate)	38a R&B with Sup. III (Enhanced Rate)	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MS091-CF	Intervention - Group	42 Intervention (Group)	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MS091-CF	Aftercare - Group	43 Aftercare (Group)	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MS091-CF	Comprehensive Community Service Team - Individual	44 CCST (Indiv.)	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MS091-CF	Comprehensive Community Service Team - Group	45 CCST (Group)	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MS091-CF	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MS091-CF	Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
TOTAL	MS091-CF									\$	-	\$	-	\$	-

SPECIAL FUNDED PROJECTS															
ASA	MS916-CF	Assessment	01 Assessment	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MS916-CF	Crisis Support/Emergency	04 Crisis Support/Emergency	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MS916-CF	In-Home and On-Site Services	08 In-Home & Onsite	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MS916-CF	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MS916-CF	Medical Services	12 Medical Services	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MS916-CF	Medication-Assisted Treatment	13 Medication-Assisted Tx;	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MS916-CF	Outpatient - Individual	14 Outpatient (Indiv.)	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MS916-CF	Outreach	15 Outreach	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MS916-CF	Outreach - Monthly	B1 Network Eval. & Dvlpmt.	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MS916-CF	Residential Level I	18 Residential I	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MS916-CF	Residential Level II	19 Residential II	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MS916-CF	Residential Level III	20 Residential III	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MS916-CF	Residential Level IV	21 Residential IV	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MS916-CF	Aftercare - Individual	29 Aftercare (Indiv.)	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MS916-CF	Outpatient - Group	35 Outpatient (Group)	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MS916-CF	Room and Board Level III	38 R&B with Sup. III	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MS916-CF	Room and Board with Supervision - Level III (Enhance Rate)	38a R&B with Sup. III (Enhanced Rate)	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MS916-CF	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
TOTAL	MS916-CF									\$	-	\$	-	\$	-

SPECIAL FUNDED PROJECTS															
ASA	MSACN-CF	Assessment	01 Assessment	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MSACN-CF	Case Management	02 Case Management	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MSACN-CF	Crisis Support/Emergency	04 Crisis Support/Emergency	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MSACN-CF	In-Home and On-Site Services	08 In-Home & Onsite	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MSACN-CF	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MSACN-CF	Outreach	15 Outreach	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MSACN-CF	Outreach - Monthly	B1 Network Eval. & Dvlpmt.	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MSACN-CF	Supported Housing/Living	26 Supportive Housing/Living	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MSACN-CF	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MSACN-CF	Intervention - Group	42 Intervention (Group)	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MSACN-CF	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MSACN-CF	Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
TOTAL	MSACN-CF									\$	-	\$	-	\$	-

SPECIAL FUNDED PROJECTS															
ASA	MSCAS-CF	Assessment	01 Assessment	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MSCAS-CF	Case Management	02 Case Management	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MSCAS-CF	Crisis Support/Emergency	04 Crisis Support/Emergency	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MSCAS-CF	In-Home and On-Site Services	08 In-Home & Onsite	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MSCAS-CF	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MSCAS-CF	Outreach	15 Outreach	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MSCAS-CF	Outreach - Monthly	B1 Network Eval. & Dvlpmt.	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MSCAS-CF	Supported Housing/Living	26 Supportive Housing/Living	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MSCAS-CF	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MSCAS-CF	Intervention - Group	42 Intervention (Group)	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MSCAS-CF	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MSCAS-CF	Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MSCAS-CF	Care Coordination	A4 Care Coordination	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MSCAS-CF	Network Evaluation & Development	B1 Network Eval. & Dvlpmt.	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MSCAS-CF	Cost Reimbursement	B3 Cost Reimbursement	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MSCAS-CF	Wraparound	B7 Wraparound	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
TOTAL	MSCAS-CF									\$	-	\$	-	\$	-

SPECIAL FUNDED PROJECTS															
ASA	MSCBS-CF	Assessment	01 Assessment	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MSCBS-CF	Case Management	02 Case Management	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MSCBS-CF	Crisis Stabilization	04 Crisis Support/Emergency	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MSCBS-CF	Day Care	05 Day Care	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MSCBS-CF	Day Treatment	06 Day Treatment	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MSCBS-CF	In-Home and On-Site Services	08 In-Home & Onsite	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MSCBS-CF	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MSCBS-CF	Medical Services	12 Medical Services	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MSCBS-CF	Medication-Assisted Treatment	13 Medication-Assisted Tx;	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MSCBS-CF	Medication-Assisted Treatment - Weekly	A7 Federal Project Grant	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MSCBS-CF	Medication-Assisted Treatment - Weekly Methadone	A7 Federal Project Grant	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MSCBS-CF	Medication-Assisted Treatment - Weekly Buprenephrine	A7 Federal Project Grant	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MSCBS-CF	Outpatient - Individual	14 Outpatient (Indiv.)	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MSCBS-CF	Outreach	15 Outreach	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MSCBS-CF	Outreach - Monthly	B1 Network Eval. & Dvlpmt.	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MSCBS-CF	Residential Level I	18 Residential I	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MSCBS-CF	Residential Level II	19 Residential II	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MSCBS-CF	Residential Level III	20 Residential III	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MSCBS-CF	Residential Level IV	21 Residential IV	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MSCBS-CF	Respite Services	22 Respite Services	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MSCBS-CF	Detoxification Services - SA Detox Beds	24 Inpatient Detoxification	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MSCBS-CF	Supported Employment	25 Supported Employment	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MSCBS-CF	Supported Housing/Living	26 Supportive Housing/Living	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MSCBS-CF	TASC	27 TASC	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MSCBS-CF	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MSCBS-CF	Aftercare - Individual	29 Aftercare (Indiv.)	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MSCBS-CF	Information & Referral	30 Information and Referral	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-
ASA	MSCBS-CF	Outpatient Detoxification	32 Outpatient Detoxification	N/A		0.00		0.00	0.00	\$	-	\$	-	\$	-

Adult Substance Abuse - Carry Forward

ASA	MSCBS-CF	Outpatient - Group	35 Outpatient (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
ASA	MSCBS-CF	Room and Board Level I	36 R&B with Sup. I	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
ASA	MSCBS-CF	Room and Board Level II	37 R&B with Sup. II	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
ASA	MSCBS-CF	Room & Board Level II STGC	37a R&B with Sup. II STGC	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
ASA	MSCBS-CF	Room & Board Level II STGC - B	37b R&B with Sup. II STGC - B	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
ASA	MSCBS-CF	Room & Board Level II STGC - L	37c R&B with Sup. II STGC - L	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
ASA	MSCBS-CF	Room & Board Level II STGC - N	37d R&B with Sup. II STGC - N	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
ASA	MSCBS-CF	Room & Board Level II PIL	37e R&B with Sup. II PIL	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
ASA	MSCBS-CF	Room and Board with Supervision - Level II OTRP	37f R&B with Sup. II OTRP	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
ASA	MSCBS-CF	Room and Board Level III	38 R&B with Sup. III	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
ASA	MSCBS-CF	Room and Board with Supervision - Level III (Enhance Rate)	38a R&B with Sup. III (Enhanced Rate)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
ASA	MSCBS-CF	Intervention - Group	42 Intervention (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
ASA	MSCBS-CF	Aftercare - Group	43 Aftercare (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
ASA	MSCBS-CF	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
ASA	MSCBS-CF	Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
TOTAL	MSCBS-CF									\$ -	\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS

ASA	MSTRV-CF	Assessment	01 Assessment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
ASA	MSTRV-CF	Case Management	02 Case Management	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
ASA	MSTRV-CF	Day Care	05 Day Care	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
ASA	MSTRV-CF	Day Treatment	06 Day Treatment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
ASA	MSTRV-CF	In-Home and On-Site Services	08 In-Home & Onsite	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
ASA	MSTRV-CF	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
ASA	MSTRV-CF	Medical Services	12 Medical Services	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
ASA	MSTRV-CF	Outpatient - Individual	14 Outpatient (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
ASA	MSTRV-CF	Respite Services	22 Respite Services	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
ASA	MSTRV-CF	Supported Employment	25 Supported Employment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
ASA	MSTRV-CF	Supported Housing/Living	26 Supportive Housing/Living	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
ASA	MSTRV-CF	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
ASA	MSTRV-CF	Aftercare - Individual	29 Aftercare (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
ASA	MSTRV-CF	Outpatient - Group	35 Outpatient (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
ASA	MSTRV-CF	Aftercare - Group	43 Aftercare (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
ASA	MSTRV-CF	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
ASA	MSTRV-CF	Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
TOTAL	MSTRV-CF									\$ -	\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS - UNCONTRACTED

ASA	MSTRV-CF	Incidental Expenses [Uncontracted]	28 Incidental Expenses [Uncontracted]			0.00		0.00	1.00	\$ -	\$ -	\$ -		\$ -
TOTAL	MSTRV-CF									\$ -	\$ -	\$ -	\$ -	\$ -

FIXED RATE

ASA	MS091-CF	Fixed Rate - FIT	A2 FIT Team	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
ASA	MS091-CF	Fixed Rate - FIT - St. Johns and Putnam	A2 FIT Team [St. Johns & Putnam]	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
ASA				N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
ASA				N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
ASA				N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
ASA				N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
ASA				N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
ASA				N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
ASA				N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
ASA				N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
ASA				N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
ASA				N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
ASA				N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
ASA				N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
TOTAL										\$ -	\$ -	\$ -	\$ -	\$ -

Summary	
Total Payment Approved	\$ -



2021-22 SAMH Monthly Expenditure Report

Provider Name:	0
Contract #:	0
Month/Yr:	July 2021
Program	Children's Mental Health
Months Completed	1

State Program Component (SPC) Grouping	OCA	Covered Services	Projectr Code	Units to be Paid this Month	Total Contract Amount	Total YTD Number of Units	Total YTD Less Unit Adjustments/Third Party Unit Payments (Enter as a positive #)	Total Lutheran YTD Units Produced	Unit Rate	Total YTD earned	Total YTD paid	Total YTD earned, but not paid	Prorata	Total Payment Due
--	-----	------------------	---------------	-----------------------------	-----------------------	---------------------------	---	-----------------------------------	-----------	------------------	----------------	--------------------------------	---------	-------------------

AVAILABILITY SERVICES														
CMH	MHC18-CF	Crisis Stabilization Units	03 Crisis Stabilization	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
TOTAL	MHC18-CF									\$ -	\$ -	\$ -	\$ -	\$ -

RESIDENTIAL SERVICES														
CMH	MHC01-CF	Residential Level I	18 Residential I	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC01-CF	Residential Level II	19 Residential II	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC01-CF	Residential Level III	20 Residential III	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC01-CF	Residential Level IV	21 Residential IV	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC01-CF	Room and Board Level I	36 R&B with Sup. I	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC01-CF	Room and Board Level II	37 R&B with Sup. II	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC01-CF	Room & Board Level II STGC	37a R&B with Sup. II STGC	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC01-CF	Room & Board Level II STGC - B	37b R&B with Sup. II STGC - B	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC01-CF	Room & Board Level II STGC - L	37c R&B with Sup. II STGC - L	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC01-CF	Room & Board Level II STGC - N	37d R&B with Sup. II STGC - N	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC01-CF	Room & Board Level II PIL	37e R&B with Sup. II PIL	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC01-CF	Room and Board with Supervision - Level II OTPR	37f R&B with Sup. II OTPR	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC01-CF	Room and Board Level III	38 R&B with Sup. III	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC01-CF	Room and Board with Supervision - Level III (Enhance Rate)	38a R&B with Sup. III (Enhanced Rate)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -

NON-RESIDENTIAL SERVICES														
CMH	MHC09-CF	Assessment	01 Assessment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC09-CF	Case Management	02 Case Management	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC18-CF	Crisis Support/Emergency	04 Crisis Support/Emergency	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC09-CF	Day Treatment	06 Day Treatment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC09-CF	In-Home and On-site Services	08 In-Home & Onsite	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC18-CF	Inpatient	09 Inpatient	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC09-CF	Intensive Case Management	10 Intensive Case Mgmt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC09-CF	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC09-CF	Medical Services	12 Medical Services	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC09-CF	Outpatient - Individual	14 Outpatient (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC09-CF	Respite Services	22 Respite Services	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC09-CF	Supported Employment	25 Supported Employment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC09-CF	Supported Housing/Living	26 Supportive Housing/Living	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC09-CF	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC09-CF	Aftercare - Individual	29 Aftercare (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC09-CF	Outpatient - Group	35 Outpatient (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC18-CF	Short-Term Residential Treatment	39 Short-term Residential	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC09-CF	Intervention - Group	42 Intervention (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC09-CF	Aftercare - Group	43 Aftercare (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC09-CF	Comprehensive Community Service Team - Individual	44 CCST (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC09-CF	Comprehensive Community Service Team - Group	45 CCST (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC09-CF	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC09-CF	Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -

NON PERSON SPECIFIC SERVICES														
CMH	MHC09-CF	Outreach	15 Outreach	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC09-CF	Outreach - Monthly	B1 Network Eval. & Dvlpmnt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC09-CF	Information & Referral	30 Information and Referral	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -
CMH	MHC09-CF	Mental Health Clubhouse Services	40 MH Clubhouse	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -		\$ -

TOTAL	MHC00-CF									\$ -	\$ -	\$ -	\$ -	\$ -
--------------	-----------------	--	--	--	--	--	--	--	--	------	------	------	------	------

FAMILY SERVICES PLANNING TEAM

CMH	MHC09-CF	FSPT - Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHC09-CF	FSPT - Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHC09-CF	FSPT - Information & Referral	30 Information and Referral	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHC09-CF	FSPT - Intervention - Group	42 Intervention (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHC09-CF	FSPT - Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHC09-CF	FSPT - Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	MHC00-CF									\$ -	\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS

CMH	MHCA2-CF	Assessment	01 Assessment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCA2-CF	Case Management	02 Case Management	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCA2-CF	Crisis Support/Emergency	04 Crisis Support/Emergency	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCA2-CF	In-Home and On-Site Services	08 In-Home & Onsite	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCA2-CF	Intensive Case Management	10 Intensive Case Mgmt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCA2-CF	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCA2-CF	Medical Services	12 Medical Services	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCA2-CF	Outpatient - Individual	14 Outpatient (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCA2-CF	Outreach	15 Outreach	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCA2-CF	Outreach - Monthly	B1 Network Eval. & Dvlpmt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCA2-CF	Respite Services	22 Respite Services	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCA2-CF	Supported Employment	25 Supported Employment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCA2-CF	Supported Housing/Living	26 Supportive Housing/Living	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCA2-CF	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCA2-CF	Information & Referral	30 Information and Referral	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCA2-CF	FSPT - Information & Referral	30 Information and Referral	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCA2-CF	Outpatient Detoxification	32 Outpatient Detoxification	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCA2-CF	Outpatient - Group	35 Outpatient (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCA2-CF	Intervention - Group	42 Intervention (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCA2-CF	FSPT - Intervention - Group	42 Intervention (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCA2-CF	Aftercare - Group	43 Aftercare (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCA2-CF	Comprehensive Community Service Team - Individual	44 CCST (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCA2-CF	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCA2-CF	FSPT - Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCA2-CF	Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCA2-CF	FSPT - Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCA2-CF	Cost Reimbursement	B3 Cost Reimbursement	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCA2-CF	Wraparound	B7 Wraparound	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	MHCA2-CF									\$ -	\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS

CMH	MHCAS-CF	Assessment	01 Assessment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAS-CF	Case Management	02 Case Management	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAS-CF	Crisis Support/Emergency	04 Crisis Support/Emergency	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAS-CF	In-Home and On-Site Services	08 In-Home & Onsite	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAS-CF	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAS-CF	Outreach	15 Outreach	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAS-CF	Outreach - Monthly	B1 Network Eval. & Dvlpmt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAS-CF	Supported Housing/Living	26 Supportive Housing/Living	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAS-CF	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAS-CF	FSPT - Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAS-CF	Intervention - Group	42 Intervention (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAS-CF	FSPT - Intervention - Group	42 Intervention (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAS-CF	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAS-CF	FSPT - Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAS-CF	Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAS-CF	FSPT - Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAS-CF	Care Coordination	A4 Care Coordination	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAS-CF	Network Evaluation & Development	B1 Network Eval. & Dvlpmt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAS-CF	Cost Reimbursement	B3 Cost Reimbursement	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
CMH	MHCAS-CF	Wraparound	B7 Wraparound	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	MHCAS-CF									\$ -	\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS													
CMH	MHCAT-CF	Assessment	01 Assessment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHCAT-CF	Case Management	02 Case Management	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHCAT-CF	Crisis Support/Emergency	04 Crisis Support/Emergency	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHCAT-CF	In-Home and On-Site Services	08 In-Home & Onsite	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHCAT-CF	Intensive Case Management	10 Intensive Case Mgmt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHCAT-CF	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHCAT-CF	Medical Services	12 Medical Services	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHCAT-CF	Outpatient - Individual	14 Outpatient (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHCAT-CF	Outreach	15 Outreach	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHCAT-CF	Outreach - Monthly	B1 Network Eval. & Dvlpm.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHCAT-CF	Respite Services	22 Respite Services	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHCAT-CF	Supported Employment	25 Supported Employment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHCAT-CF	Supported Housing/Living	26 Supportive Housing/Living	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHCAT-CF	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHCAT-CF	Information & Referral	30 Information and Referral	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHCAT-CF	Outpatient Detoxification	32 Outpatient Detoxification	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHCAT-CF	Outpatient - Group	35 Outpatient (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHCAT-CF	Mental Health Clubhouse Services	40 MH Clubhouse	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHCAT-CF	Aftercare - Group	43 Aftercare (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHCAT-CF	Comprehensive Community Service Team - Individual	44 CCST (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHCAT-CF	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHCAT-CF	Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
TOTAL	MHCAT-CF									\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS													
CMH	MHCCN-CF	Assessment	01 Assessment	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHCCN-CF	Case Management	02 Case Management	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHCCN-CF	Crisis Support/Emergency	04 Crisis Support/Emergency	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHCCN-CF	In-Home and On-Site Services	08 In-Home & Onsite	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHCCN-CF	Intensive Case Management	10 Intensive Case Mgmt.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHCCN-CF	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHCCN-CF	Outreach	15 Outreach	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHCCN-CF	Outreach - Monthly	B1 Network Eval. & Dvlpm.	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHCCN-CF	Supported Housing/Living	26 Supportive Housing/Living	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHCCN-CF	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHCCN-CF	Intervention - Group	42 Intervention (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHCCN-CF	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHCCN-CF	Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
TOTAL	MHCCN-CF									\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS													
CMH	MHMCT-CF	Crisis Support/Emergency	04 Crisis Support/Emergency	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHMCT-CF	Medical Services	12 Medical Services	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHMCT-CF	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHMCT-CF	Information & Referral	30 Information and Referral	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
TOTAL	MHMCT-CF									\$ -	\$ -	\$ -	\$ -

FIXED RATE													
CMH	MHCAT-CF	Fixed Rate - Community Action Team	B4 CAT Team	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHMCT-CF	Fixed Rate - Mobile Crisis Teams	C0 Other Bundled Projects	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH	MHCA2-CF	Fixed Rate - Community Action Team	B4 CAT Team	N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH				N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH				N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH				N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH				N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH				N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH				N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH				N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH				N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
CMH				N/A		0.00		0.00	0.00	\$ -	\$ -	\$ -	\$ -
TOTAL										\$ -	\$ -	\$ -	\$ -

Summary		
Total Payment Approved	\$	-

2021-22 SAMH Monthly Expenditure Report

Provider Name:	0
Contract #:	0
Month/Yr:	July 2021
Program	Children's Substance Abuse
Months Completed	1

State Program Component (SPC) Grouping	OCA	Covered Services	Project Code	Units to be Paid this Month	Total Contract Amount	Total YTD Number of Units	Total YTD Less Unit Adjustments/Third Party Unit Payments (Enter as a positive #)	Total Lutheran YTD Units Produced	Unit Rate	Total YTD earned	Total YTD paid	Total YTD earned, but not paid	Prorata	Total Payment Due
AVAILABILITY SERVICES														
CSA	MSC21-CF	Detoxification Services - SA Detox Beds	24 Inpatient Detoxification	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
TOTAL	MSC21-CF									\$ -	\$ -	\$ -	\$ -	\$ -
RESIDENTIAL SERVICES														
CSA	MSC03-CF	Residential Level I	18 Residential I	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC03-CF	Residential Level II	19 Residential II	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC03-CF	Residential Level III	20 Residential III	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC03-CF	Residential Level IV	21 Residential IV	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC03-CF	Room and Board Level I	36 R&B with Sup. I	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC03-CF	Room and Board Level II	37 R&B with Sup. II	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC03-CF	Room & Board Level II STGC	37a R&B with Sup. II STGC	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC03-CF	Room & Board Level II STGC - B	37b R&B with Sup. II STGC - B	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC03-CF	Room & Board Level II STGC - L	37c R&B with Sup. II STGC - L	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC03-CF	Room & Board Level II STGC - N	37d R&B with Sup. II STGC - N	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC03-CF	Room & Board Level II PIL	37e R&B with Sup. II PIL	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC03-CF	Room and Board with Supervision - Level II OTPR	37f R&B with Sup. II OTPR	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC03-CF	Room and Board Level III	38 R&B with Sup. III	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC03-CF	Room and Board with Supervision - Level III (Enhance Rate)	38a R&B with Sup. III (Enhanced Rate)	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
NON-RESIDENTIAL SERVICES														
CSA	MSC11-CF	Assessment	01 Assessment	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC11-CF	Case Management	02 Case Management	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC21-CF	Crisis Support/Emergency	04 Crisis Support/Emergency	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC11-CF	Day Care	05 Day Care	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC11-CF	Day Treatment	06 Day Treatment	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC11-CF	In-Home and On-Site Services	08 In-Home & Onsite	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC21-CF	Inpatient	09 Inpatient	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC11-CF	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC11-CF	Medical Services	12 Medical Services	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC11-CF	Medication-Assisted Treatment	13 Medication-Assisted Tx;	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC11-CF	Outpatient - Individual	14 Outpatient (Indiv.)	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC11-CF	Outreach	15 Outreach	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC11-CF	Outreach - Monthly	B1 Network Eval. & Dvlpmnt.	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC11-CF	Respite Services	22 Respite Services	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC11-CF	Supported Employment	25 Supported Employment	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC11-CF	Supported Housing/Living	26 Supportive Housing/Living	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC11-CF	TASC	27 TASC	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC11-CF	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC11-CF	Aftercare - Individual	29 Aftercare (Indiv.)	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC11-CF	Information & Referral	30 Information and Referral	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC11-CF	Outpatient Detoxification	32 Outpatient Detoxification	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC11-CF	Outpatient - Group	35 Outpatient (Group)	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC21-CF	Short-Term Residential Treatment	39 Short-term Residential	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC11-CF	Intervention - Group	42 Intervention (Group)	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC11-CF	Aftercare - Group	43 Aftercare (Group)	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC11-CF	Comprehensive Community Service Team - Individual	44 CCST (Indiv.)	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC11-CF	Comprehensive Community Service Team - Group	45 CCST (Group)	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -
CSA	MSC11-CF	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	-	\$ -	\$ -	\$ -		\$ -

CSA	MSC11-CF	Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	-	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	MSC00-CF									\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

SPECIAL FUNDED PROJECTS															
CSA	MSCCN-CF	Assessment	01 Assessment	N/A		0.00		0.00	-	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
CSA	MSCCN-CF	Case Management	02 Case Management	N/A		0.00		0.00	-	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
CSA	MSCCN-CF	Crisis Support/Emergency	04 Crisis Support/Emergency	N/A		0.00		0.00	-	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
CSA	MSCCN-CF	In-Home and On-Site Services	08 In-Home & Onsite	N/A		0.00		0.00	-	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
CSA	MSCCN-CF	Intervention - Individual	11 Intervention (Indiv.)	N/A		0.00		0.00	-	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
CSA	MSCCN-CF	Outreach	15 Outreach	N/A		0.00		0.00	-	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
CSA	MSCCN-CF	Outreach - Monthly	B1 Network Eval. & Dvlpmt.	N/A		0.00		0.00	-	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
CSA	MSCCN-CF	Supported Housing/Living	26 Supportive Housing/Living	N/A		0.00		0.00	-	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
CSA	MSCCN-CF	Incidental Expenses	28 Incidental Expenses	N/A		0.00		0.00	-	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
CSA	MSCCN-CF	Intervention - Group	42 Intervention (Group)	N/A		0.00		0.00	-	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
CSA	MSCCN-CF	Recovery Support - Individual	46 Recovery Support (Indiv.)	N/A		0.00		0.00	-	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
CSA	MSCCN-CF	Recovery Support - Group	47 Recovery Support (Group)	N/A		0.00		0.00	-	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	MSCCN-CF									\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

Summary	
Total Payment Approved	\$ -