

**Medicaid Allowable Expenditure Report
Medical Staff Costs
July 1, 2008 through June 30, 2009**

District ISD Name:
District Code / LEA Code:

Sum of Section 52 and 53a Costs from the SE-4096, page 3, columns 3, 4, 5 and 8			Staff FTE Count	Salaries	Benefits 2100, 2800 & 2920	Purchased Services 3130, 3190, 4120 & 4220	Other Expend. 7410	Total
Function Code	TITLE AND OBJECT CODE		(3)	(4)	(5)	(8)	(9)	
1	213	Physician (1410)						\$0
2	213	RN/LPN (1450)						\$0
3	213	PT/PTA (1470)						\$0
4	213	OT/COTA (1480)						\$0
5	214	Psychologist/Psych (1430)						\$0
6	215	Speech Therapist (1280)						\$0
7	215	Audiologist (1490)						\$0
8	215	Supervised TSLI's (1240)						\$0
9	216	Social Worker (1440)						\$0
10	217	O&M Specialist (1290)						\$0
11		Total	0.00	\$0	\$0	\$0	\$0	\$0

If there are revised expenditures that affect the above lines, check the box to the left and contact MDCH Hospital and Health Plan Reimbursement Division, Special Program Section, at (517) 335-5330 with the details.

**Medicaid Allowable Expenditure Report
Transportation Costs
July 1, 2008 through June 30, 2009**

District ISD Name:

District Code / LEA Code:

Total number of One Way Trips

Sum of Section 52 and 53a Costs from the SE-4094, page 2, columns 4 & 6			FTE (1)	Expenditure (4)	Expenditure (6)	Total (9)
Line	Object Code	Title				
1	1610	Bus Driver				\$0
2	1630	Aides				\$0
3	2000	Employee Benefits				\$0
4	3310	Pupil Trans Common Carrier				\$0
5	3330	Pupil Trans Family Veh Cost				\$0
6	3310	Family Vehicle Contract Csts				\$0
7	3930	Pupil Transp. Fleet Insurance				\$0
8	4230	Contracted/Leased Buses				\$0
9	4XXX	Other Vehicle Related Costs				\$0
10	5710	Gasoline				\$0
11	5710	Oil/Grease				\$0
12	5720	Tires/Batteries				\$0
13	7000	Other Expenses/Adjustment (related to object codes listed above)				\$0
14		Bus Amortization				\$0
15	TOTAL EXPENDITURES			\$0	\$0	\$0