

SEQUENCE # 487
 REPORT DATE MAY 1996

IOWA DEPARTMENT OF HUMAN SERVICES
 H U M B O L D T C O U N T Y
 CLIENTS FOR CASE WORKER CMA2

PAGE 1
 RUN DATE 05/01/96

MEDICAID EPSDT ENROLLEES

CASE NAME		CASE NUMBER	ADDRESS LINE ONE		ADDRESS LINE TWO		CITY	ST	ZIP	TELEPHONE NUMBER
							RUTLAND	IA	50582	(000) 000-0000
RECIPIENT NAME LAST	FIRST	M'CAID ID NUMB	BIRTHDATE MM DD YY	AGE YY MM	M'CAID ELIG DT	AID TYPE	SCREENING DATES LAST	NEXT		
			05/05/1979	17 00	05/01/96	401	00/00/00	04/30/97		
CASE NAME		CASE NUMBER	ADDRESS LINE ONE		ADDRESS LINE TWO		CITY	ST	ZIP	TELEPHONE NUMBER
							HUMBOLDT	IA	50548	(000) 448-3203
RECIPIENT NAME LAST	FIRST	M'CAID ID NUMB	BIRTHDATE MM DD YY	AGE YY MM	M'CAID ELIG DT	AID TYPE	SCREENING DATES LAST	NEXT		
			04/04/1980	16 01	05/01/96	37E	00/00/00	03/31/98		
CASE NAME		CASE NUMBER	ADDRESS LINE ONE		ADDRESS LINE TWO		CITY	ST	ZIP	TELEPHONE NUMBER
							HUMBOLDT	IA	50548	(000) 000-0000
RECIPIENT NAME LAST	FIRST	M'CAID ID NUMB	BIRTHDATE MM DD YY	AGE YY MM	M'CAID ELIG DT	AID TYPE	SCREENING DATES LAST	NEXT		
			01/06/1977	19 04	05/01/96	37E	00/00/00	01/01/97		
CASE NAME		CASE NUMBER	ADDRESS LINE ONE		ADDRESS LINE TWO		CITY	ST	ZIP	TELEPHONE NUMBER
							FT DODGE	IA	50501	(000) 000-0000
RECIPIENT NAME LAST	FIRST	M'CAID ID NUMB	BIRTHDATE MM DD YY	AGE YY MM	M'CAID ELIG DT	AID TYPE	SCREENING DATES LAST	NEXT		
			07/25/1983	12 10	05/01/96	488	08/04/95	07/21/97		
CASE NAME		CASE NUMBER	ADDRESS LINE ONE		ADDRESS LINE TWO		CITY	ST	ZIP	TELEPHONE NUMBER
							HUMBOLDT	IA	50548	(000) 000-0000
RECIPIENT NAME LAST	FIRST	M'CAID ID NUMB	BIRTHDATE MM DD YY	AGE YY MM	M'CAID ELIG DT	AID TYPE	SCREENING DATES LAST	NEXT		
			10/02/1979	16 07	05/01/96	401	00/00/00	09/27/97		

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 H U M B O L D T C O U N T Y
 CLIENTS FOR CASE WORKER CMA2

MEDICAID EPSDT ENROLLEES
 09/07/1981 14 08 05/01/96 401 00/00/00 09/03/97

CASE NAME		CASE NUMBER	ADDRESS LINE ONE	ADDRESS LINE TWO	CITY	ST	ZIP	TELEPHONE NUMBER
					WEBSTER CITY	IA	50595	(000) Q00-0000
RECIPIENT NAME LAST	FIRST	M'CAID ID NUMB	BIRTHDATE MM DD YY	AGE YY MM	M'CAID ELIG DT	AID TYPE	SCREENING DATES LAST NEXT	
			03/14/1980	16 02	05/01/96	401	05/15/95	03/10/98

** REPORT TOTAL **

NUMBER OF CASES	6	NUMBER OF RECIPIENTS	7	NUMBER OF SCREENINGS DUE	0
*** CASE WORKER TOTAL					
NUMBER OF CASES	6	NUMBER OF RECIPIENTS	7	NUMBER OF SCREENINGS DUE	0