



# Mid-Ohio Psychological Services, Inc.

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## QA REPORT

**TO:** Bradley A. Hedges, Ph.D.  
Executive Director

**FROM:** Shawna Watts-Shumaker, MBA  
Quality Assurance Coordinator

**SUBJECT:** Quality Assurance Activities for January 2005  
Chart Reviews for November 2004

**SUBMITTED:** March 3, 2005

### I: MAJOR UNUSUAL INCIDENTS

There were two major unusual incidents for the month of January. The first incident occurred on 1/05/2005 and involved client #02112006. The client was transported to Fairfield Medical Center by agency staff at the request of the Lancaster Police Department due to the client admitting a suicide attempt the previous day and threatening to kill her mother. The client was evaluated at the hospital and release to her family. The incident was reported to the Fairfield County ADAMH Board on 1/10/2005. A weekend and delay in the written report caused the elapsed time.

The second incident occurred on 1/13/2005 and involved client #02111502. The client made a suicide threat to agency staff, threatening to overdose on medication. Agency staff went to the client's home and took all medication from the home and got a verbal contract for safety from the client. The client was seen by their therapist on 1/14/2005. The incident was reported to the Fairfield County ADAMH Board on 1/14/2005.

### II: TRANSFERS FROM STATE HOSPITALS

There was one transfer from a state hospital in January. Client #001013C1 was admitted to Twin Valley on 12/16/2004 and discharged on 01/17/2005. Joe Dunson saw the client on 01/18/2005.

There were two clients released from community hospitalization in January. Client #04042002 was admitted to Fairfield Medical Center on 1/5/2005 and discharged on 1/06/2005. Tricia Ostrander saw the client on 1/07/2005. Client# 02111502 was admitted to Fairfield Medical Center on 01/20/2005 and discharged on 01/22/2005. Robin Rippeth saw the client on 01/27/2005.



AN INDEPENDENT CONTRACT AGENCY OF THE FAIRFIELD COUNTY ADAMH BOARD

**III: PLANT/PHYSICAL HEALTH AND SAFETY**

No health or safety issues were identified by the building inspection in the month of January.

**IV: RECORDS COMPLETENESS REVIEW (November)**

Clinicians	Percent Compliant With Standard	Chart Included AOD Services	Chart Included CSP Services
<b>Chris Ray's Team</b>			
Dr. Chris Ray*	94*	NO	NO
Bonnie Daniels	86	NO	NO
Rick Gehlbach	100	NO	NO
Chris Johnson*	46	NO	NO
Tricia Ostrander	100	NO	NO
<b>Team Score</b>	<b>85*</b>		
<b>Robin Rippeth's Team</b>			
Dr. Robin Rippeth	98	NO	YES
Steve Ford	96	NO	NO
Mike Selegue*	91	NO	NO
Heather Stevens	97	NO	YES
Paula Moreland*	90	NO	NO
Karis Mason	95	NO	NO
Misty Coleman	99	NO	NO
Leasa Mowery	98	NO	NO
Adrienne Harris	95	NO	NO
<b>Team Score</b>	<b>95</b>		
<b>Scott Craft's Team</b>			
Dr. Scott Craft*	93	NO	NO
Joe Dunson	99	NO	YES
A.J. Bierly	99	NO	YES
Jodi Frazier	97	NO	YES
Amanda Moore	95	NO	YES
<b>Team Score</b>	<b>97</b>		
<b>Brad Hedges' Team</b>			
Dr. Brad Hedges	100	NO	NO
Claire Robitaille	96	NO	NO
Dean Bachelor	99	NO	NO
<b>Team Score</b>	<b>98</b>		
<b>Franklin County Team</b>			
Joni Grim	93*	NO	YES
<b>Team Score</b>	<b>93*</b>		

\*Denotes that the clinician did not meet the target threshold of 95% compliance with the standards.

Seventy-eight percent of the clinicians met the 95% threshold for the record review.

Reasons that clinicians did not meet the threshold and the percentage of records reviewed is as follows:

- Thirty-five percent of the records reviewed were missing a copy of the current medical card.
- Forty-three percent of the records reviewed were missing forms or had incomplete forms in the chart.
- Signatures were missing on some forms in the chart for 22% of the clinicians.
- In 22% percent of the records reviewed there was at least one session recorded that did not match the billing record.
- Twenty-two percent of the records reviewed had an Individual Service Plan on the chart that needed to be updated.
- Twenty-two percent of the records reviewed did not have a reviewed health assessment.
- Twenty-six percent of clinicians were missing case notes for billed services.

#### V: PEER REVIEW (November)

Clinicians	Percent Compliant With Standard	Chart Included AOD Services	Chart Included CSP Services
<b>Chris Ray's Team</b>			
Dr. Chris Ray	91	NO	NO
Bonnie Daniels	78	NO	NO
Rick Gehlbach	98	NO	NO
Chris Johnson*	24	NO	NO
Tricia Ostrander	99	NO	NO
<b>Team Score</b>	<b>78*</b>		
<b>Robin Rippeth's Team</b>			
Dr. Robin Rippeth	99	NO	NO
Steve Ford	98	NO	NO
Mike Selegue*	79	NO	NO
Heather Stevens	99	NO	YES
Paula Moreland*	88	NO	NO
Karis Mason	96	NO	NO
Misty Coleman	98	NO	NO
Leasa Mowery	96	NO	NO
Adrienne Harris	98	NO	NO
<b>Team Score</b>	<b>95</b>		
<b>Scott Craft's Team</b>			
Dr. Scott Craft	92	NO	NO
Joe Dunson	94	NO	YES
A.J. Bierly	99	NO	YES
Jodi Frazier*	85	NO	YES
Amanda Moore	99	NO	YES
<b>Team Score</b>	<b>94</b>		

<b>Brad Hedges' Team</b>			
Dr. Brad Hedges	100	NO	NO
Claire Robitaille*	86	NO	NO
Dean Bachelor	94	NO	NO
<b>Team Score</b>	<b>93</b>		
<b>Franklin County Team</b>			
Joni Grim	92	NO	YES
<b>Team Score</b>	<b>92</b>		

\*Denotes that the clinician did not meet the target threshold of 90% compliance with the standards.

Seventy-eight percent of the clinicians met the 90% threshold for peer review for the month of November.

- Twenty-six percent of the records reviewed for peer review showed that the clinician did not complete the required forms, or make the necessary referrals.
- Forty-eight percent of the records were not maintained consistently in that case notes were not completed and not billed for. Also, the client, clinician and the supervisor have not signed the progress note or other necessary documentation.

## VI: UTILIZATION REVIEW (January)

Clinician	Number of Clients Assigned	Number of Clients Seen	Average Number of Contacts Per Client Seen
Dean Bachelor	22	10	2
Dr. Brad Hedges	64	23	1.1
Dr. Chris Ray	62	33	1.5
Dr. Robin Rippeth	22	16	2.2
Dr. Scott Craft	99	31	2.2
Steve Ford	76	44	1.7
Bonnie Daniels	73	52	1.9
Joni Grim	95	33	3.2
Chris Johnson	133	38	1.9
Claire Robitaille	63	32	1.9
Rick Gehlbach	57	47	2.0
Mike Selegue	77	55	1.8
Heather Stevens	42	38	2.5
Joe Dunson	22	20	5.7
Misty Coleman	65	46	2.3
A.J. Bierly	31	29	3.6
Amanda Moore	38	28	4.9
Tricia Ostrander	70	28	1.5
Paula Moreland	38	32	3.3
Karis Mason	40	42	2.1
Adrienne Harris	50	47	2.4
Ellen Marshall	45	33	2.5
Jessica Mitchell	11	10	1.8

The No Show rate for January was 19%. When considering both the no show rate and the cancellation rate, this figure is 29%.

#### **VII: AOD UTILIZATION REVIEW**

There are currently no AOD groups active within the agency. AOD clients continue to be seen on an individual basis outside of the AOD program.

#### **VIII: INVOLUNTARY TERMINATIONS**

No involuntary terminations were conducted during the month of January 2005.

#### **IX: PROFESSIONAL STAFF ORGANIZATION**

The clinical staff maintains current licensure requirements.

However, no one attended training during the month of January.

#### **X: REVIEW OF WAITING LIST**

There were a total of 103 new clients seen in the month of January. Sixty-six percent of these new clients were from Fairfield County. The total number of clients seen in the month of January was 767.

#### **XI: REVIEW OF SERVICES UNDER CONTRACT**

Currently no services are provided under contract to this agency.

#### **XII: FOCUSED REVIEW AREA**

The focused area of review for January was to review trends and patterns of service, highlighting gaps of service. A review of services provided was processed by county for the prior four calendar years. Overall we have seen service growth in the following counties, Fairfield, Franklin, Licking-Knox, Muskingum, and Paint Valley County ADAMH Boards. It should be noted that our agency has a clinic in Franklin County. In addition, we continue to work with the Fairfield County ADAMH Board to monitor funding availability for our county's service growth.

The following trends have occurred in the agency's services over the past fiscal year, diagnostic intakes, individual counseling, medication management, and CSP services have shown an increase over last year, and group services and AOD services have decreased. The AOD group was eliminated during the past year and other groups were eliminated and restructured which may have resulted in the reported decrease.

The second area of review was to complete an annual safety review and forward it to the Board of Directors. This was done and reviewed in the February meeting of the Board.

The final area of review was to conduct the quarterly fire drill. The drill was conducted on January 28, 2005 using the telephone intercom system. The evacuation of all three-agency buildings was completed in 59 seconds.

### **XIII: RESPONSE TO LAST MONTHS FOCUS REVIEW**

The sex offender program review is still being conducted. The report also continues to be compiled.

### **XIV: CLIENT RIGHTS AND GRIEVANCES**

There were no client rights or grievance issues for January 2005.

cc: Fairfield County Mental Health and Recovery Services Board  
MOPS Board of Directors  
MOPS Staff  
QA Minutes Logbook

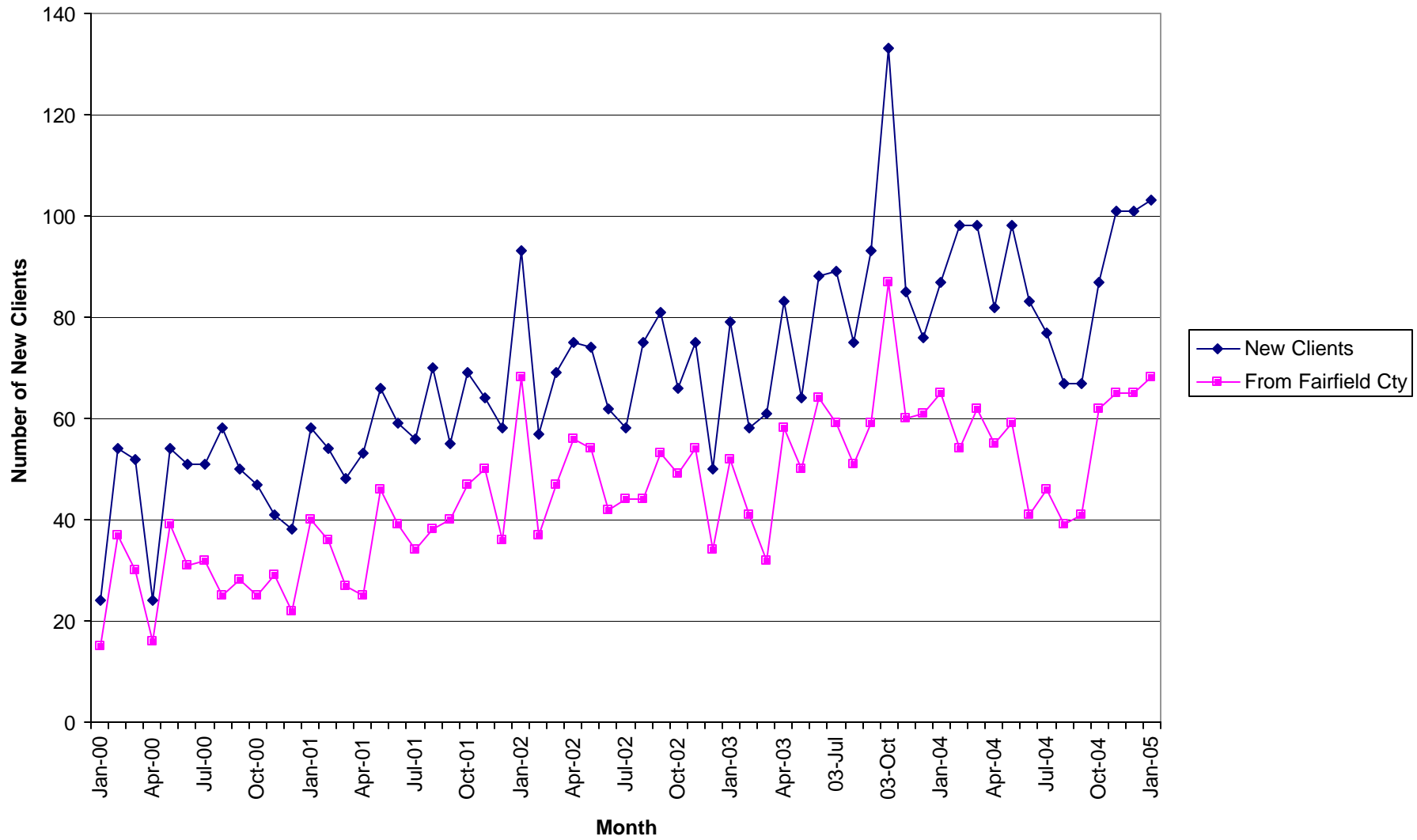
**Agency Service Budget Month of January 2005**

	Service Provided for Month		Budgeted for Month		Fiscal Y-T-D Provided		Fiscal Y-T-D Budgeted		Variance between Budgeted and Provided Y-T-D	
	Total For All of MOPS	Fairfield County Medicaid	Total For All of MOPS	Fairfield County Medicaid	Total For All of MOPS	Fairfield County Medicaid	Total For All of MOPS	Fairfield County Medicaid	Total For All of MOPS	Fairfield County Medicaid
Diagnostic/Assessment	232	120	167	81	1,190	502	1,169	567		
	\$30,171	\$15,534	\$21,708	\$10,529	\$154,645	\$65,229	\$151,958	\$73,704	\$2,687	(\$8,475)
Individual Counseling	984	574	833	531	5,754	3,433	5,831	3,717		
	\$88,542	\$51,687	\$74,970	\$47,790	\$517,815	\$308,970	\$524,790	\$334,530	(\$6,975)	(\$25,560)
Individual CSP	346	254	500	417	2,046	1,508	3,500	2,919		
	\$22,516	\$16,504	\$32,500	\$27,105	\$132,971	\$98,046	\$227,500	\$189,735	(\$94,530)	(\$91,689)
Group CSP	0	0	0	0	0	0	0	0		
	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Group	208	19	146	51	1,304	182	1,022	357		
	\$8,224	\$742	\$5,764	\$2,013	\$51,470	\$7,185	\$40,349	\$14,094	\$11,122	(\$6,909)
Medication	45	32	53	35	310	207	371	245		
	\$9,252	\$6,594	\$10,921	\$7,212	\$63,858	\$42,654	\$76,448	\$50,485	(\$12,590)	(\$7,830)
AOD Assessment	4	4	0	0	4	4	0	0		
	\$385	\$385	\$0	\$0	\$385	\$385	\$0	\$0	\$385	\$385
AOD Individual	0	0	1	1	0	0	7	7		
	\$0	\$0	\$87	\$87	\$0	\$0	\$611	\$611	(\$611)	(\$611)
AOD Group	0	0	13	17	0	0	91	119		
	\$0	\$0	\$495	\$647	\$0	\$0	\$3,465	\$4,532	(\$3,465)	(\$4,532)
Court Diversion	80	0	120	0	580	0	720	0		
	\$2,800	\$0	\$4,200	\$0	\$20,300	\$0	\$25,200	\$0	(\$4,900)	\$0
Jail Diversion	0	0	0	0	180	180	225	225		
	\$0	\$0	\$0	\$0	\$6,300	\$6,300	\$7,875	\$7,875	(\$1,575)	(\$1,575)
Sum \$	\$161,889	\$91,445	\$150,646	\$95,384	\$947,744	\$522,470	\$1,050,321	\$667,691	(\$102,578)	(\$145,221)

\* ( ) figures indicate that MOPS provided fewer services in this category than budgeted.

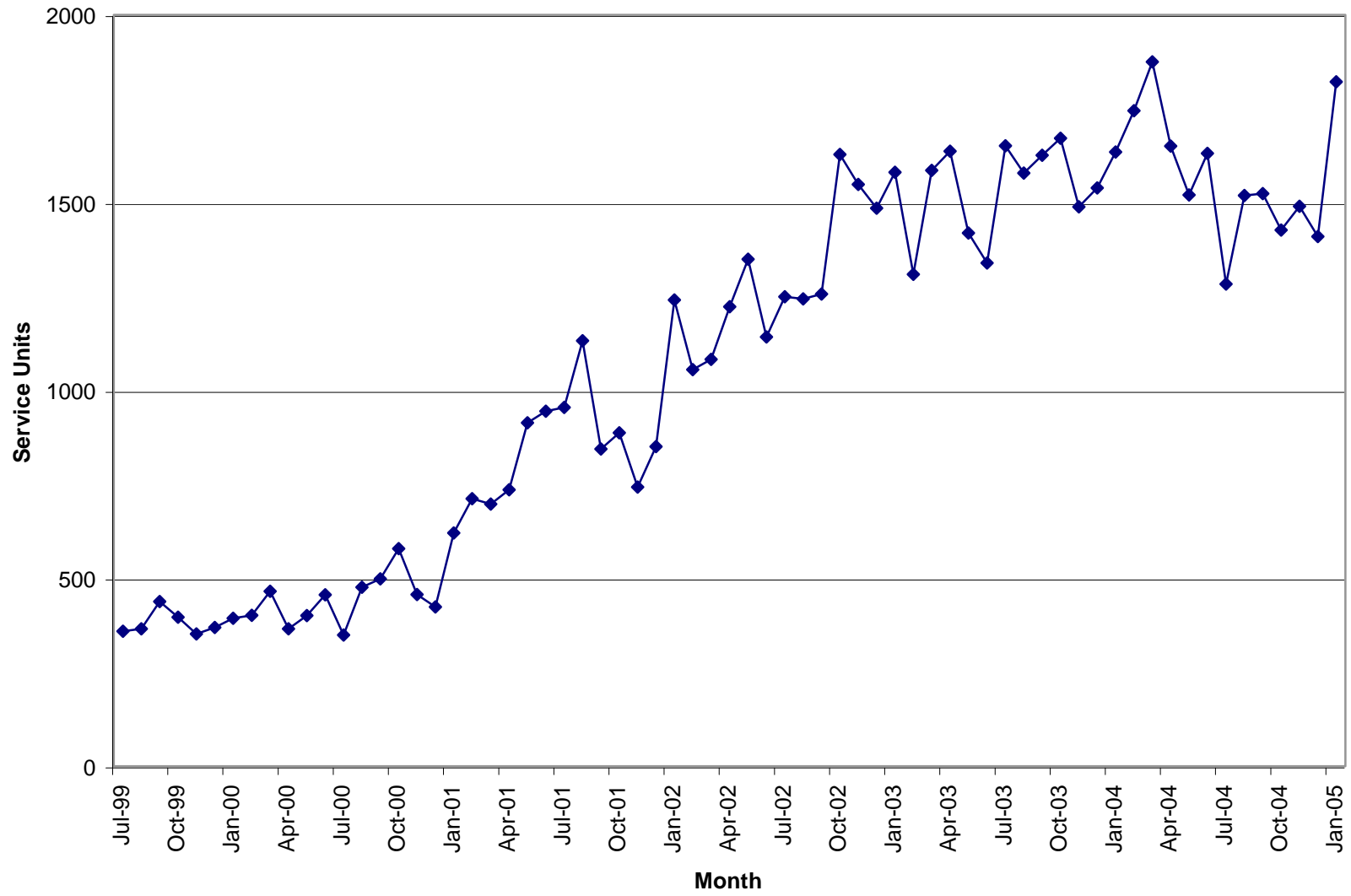
56% Percent of Services for Fairfield County  
 10% Percent Below Overall MOPS Budget  
 22% Percent Below Fairfield County Medicaid

# New Clients

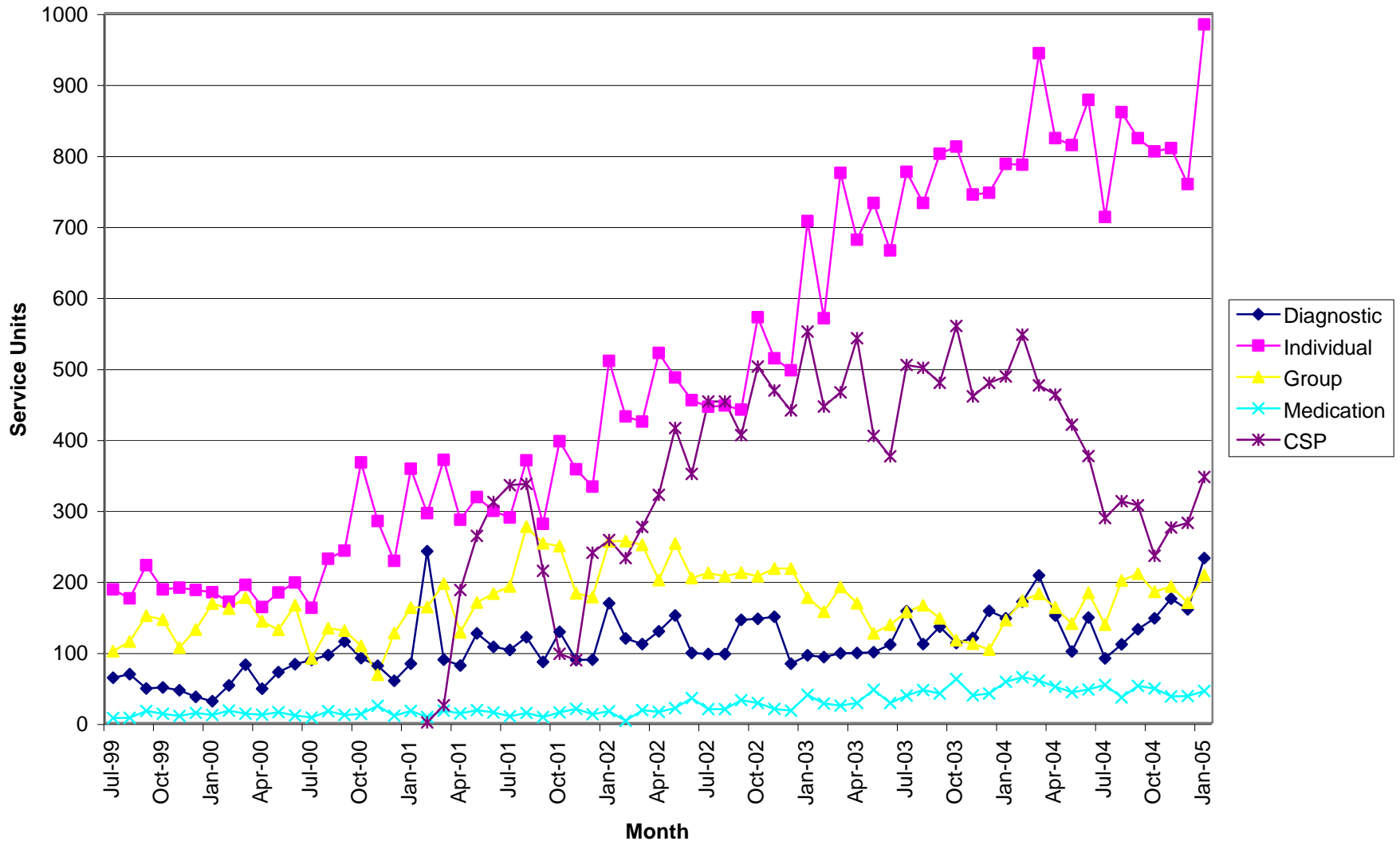




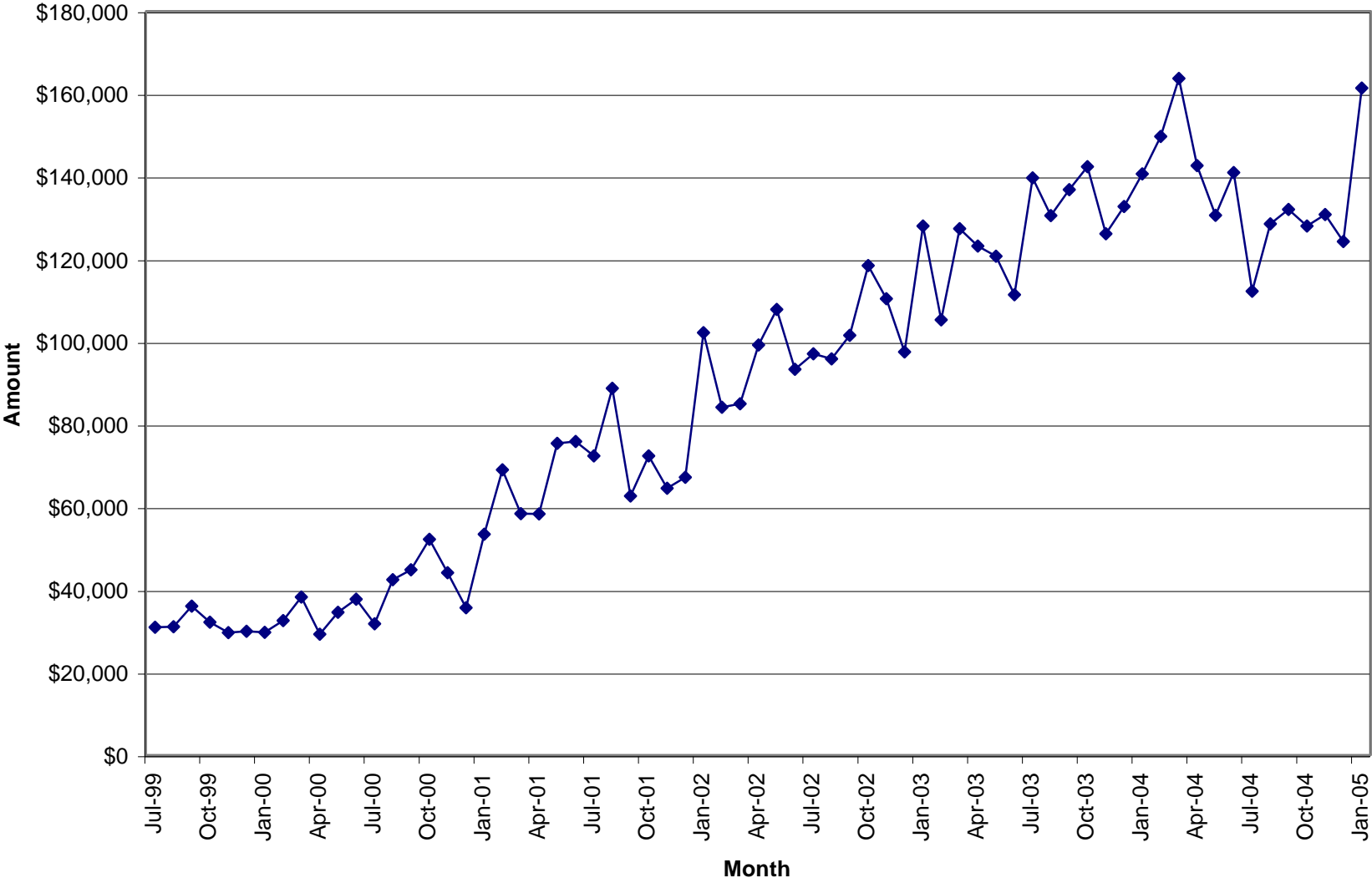
### Total Units of Service



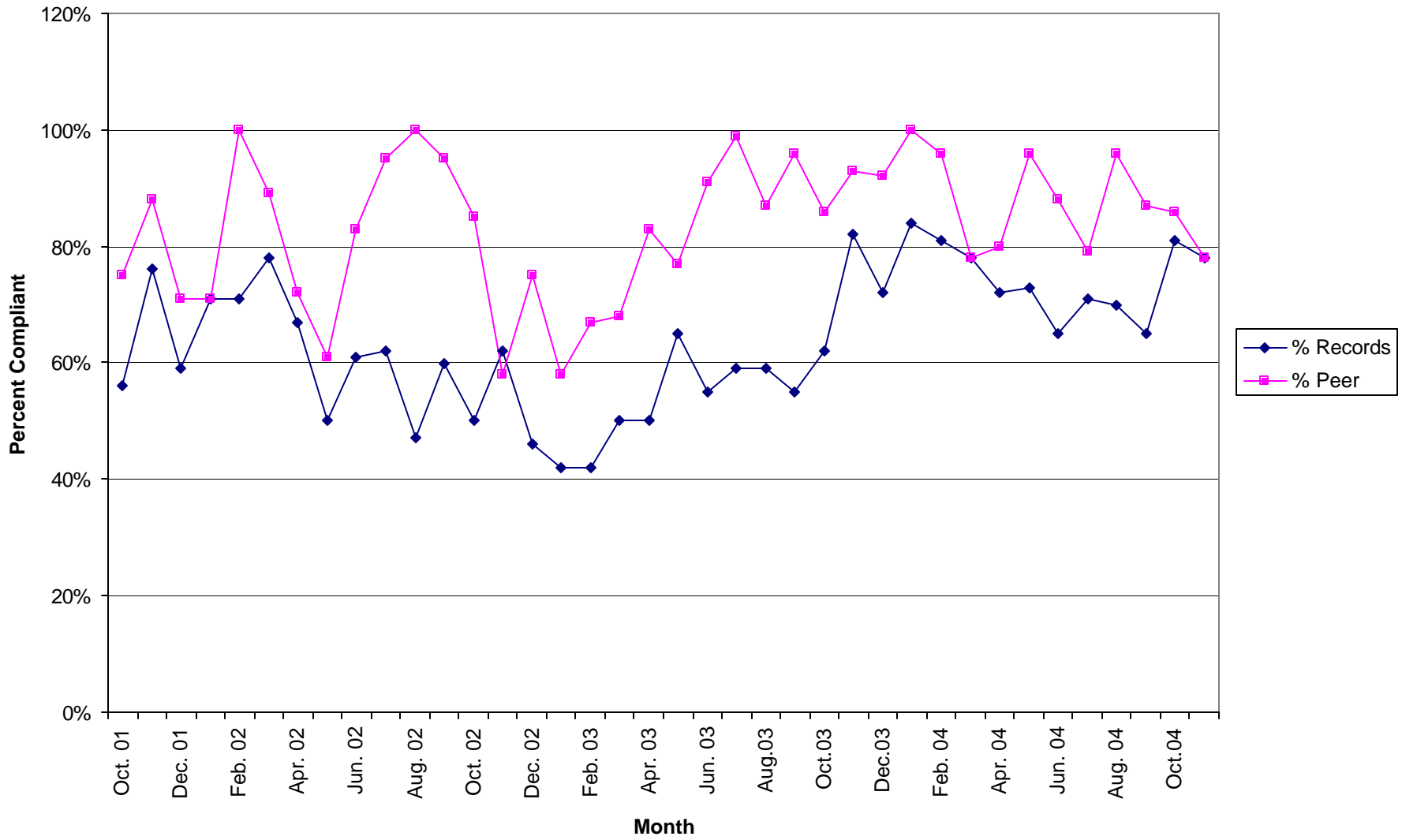
# Units of Service



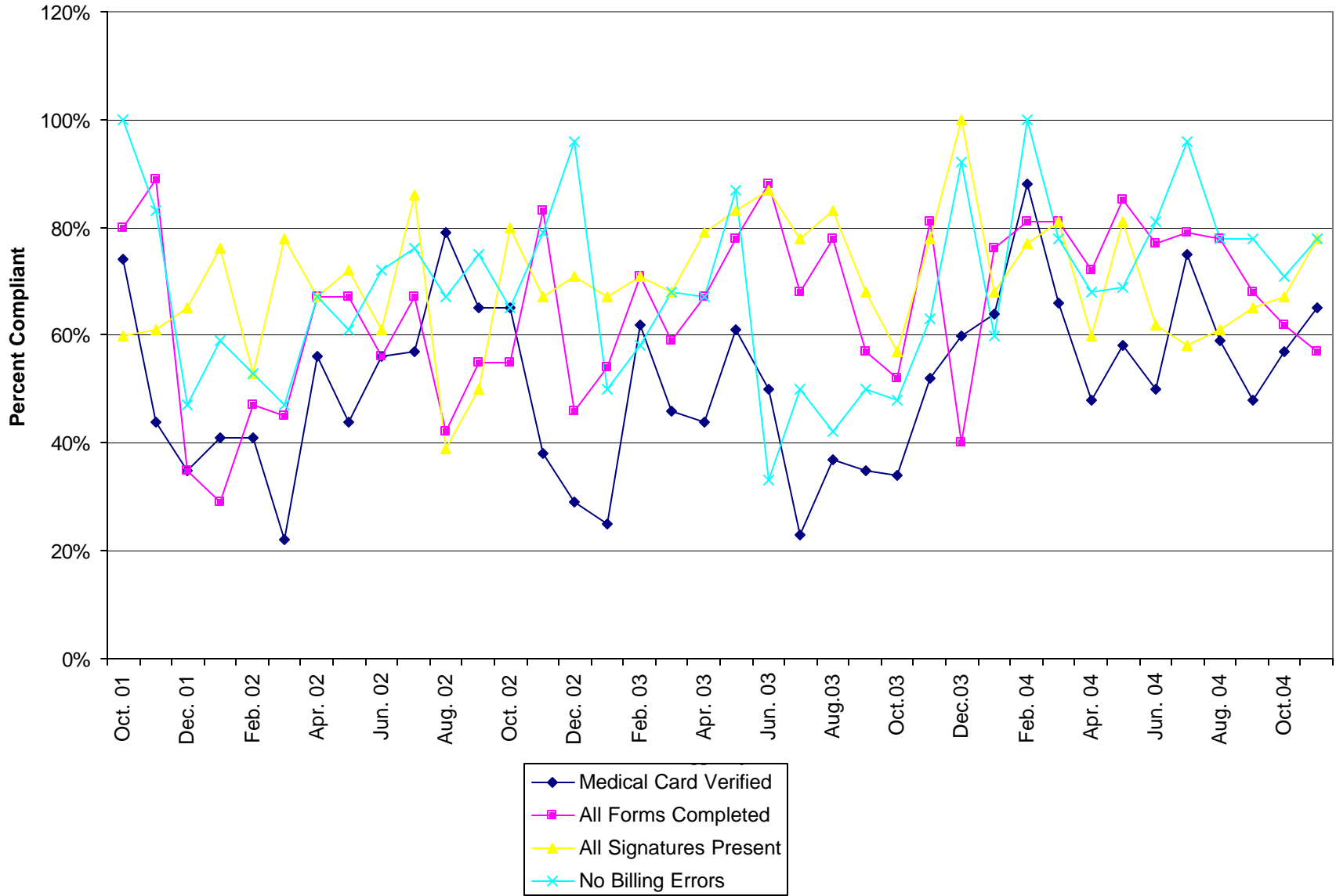
**Total Units \$**



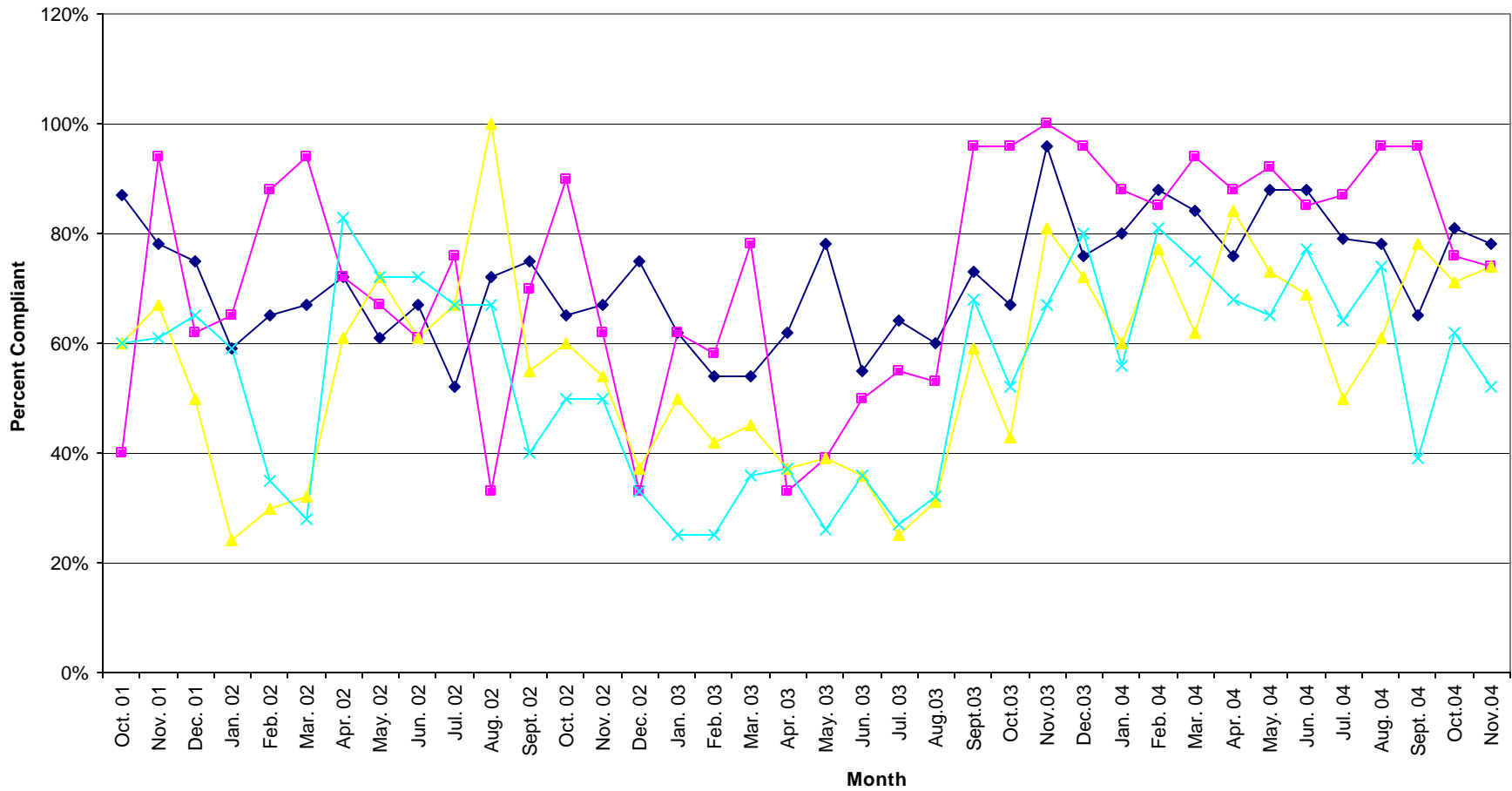
# Compliance Review



### Selected Record Review Issues



### Selected Record Review Issues



- ◆ ISP Completed and Updated
- Health Assessment Completed and Reviewed
- ▲ All Notes Present
- × Record Maintained Consistently

**Unit Production & Scheduling Proficiency by Clinician  
Mid Ohio Psychological Services**

January 2005

	Cancellations	Missed	Diagnostics	Evaluations	AOD Assessments	Individual	Group	Community Support	Medication	Other Units	Total Units	Billable Units	Units Billed+ Missed	Schedule Proficiency	% Canceled	% Missed	Lost Units due to C & M	% of Total Billable Units
<b>Unit Rate</b>			<b>129.99</b>	<b>129.99</b>	<b>96.24</b>	<b>90</b>	<b>39.48</b>	<b>65</b>	<b>195</b>	<b>35</b>								
Dean Bachelor	1	14	1.00	0.00	0.00	8.00	11.00	0.00	0.0		35.00	20.00	34.00	59%	3%	40%	43%	1%
A. J. Bierly*	0	0	0.00	0.00	0.00	0.00	0.00	88.30	0.0		88.30	88.30						5%
Scott Craft	11	22	0.00	0.00	0.00	26.30	50.60	3.80	0.0	80.0	193.70	160.70	182.70	83%	6%	11%	17%	8%
Misty Coleman	23	32	4.50	0.00	0.00	64.50	47.30	2.80	0.0		174.10	119.10	151.10	68%	13%	18%	32%	6%
Steve Ford	17	31	3.50	0.00	0.00	48.60	0.00	14.30	0.0		114.40	66.40	97.40	58%	15%	27%	42%	3%
Rick Gehlbach	14	44	15.30	0.00	0.00	65.90	0.00	4.70	0.0		143.90	85.90	129.90	60%	10%	31%	40%	5%
Joni Grim	9	25	6.10	0.00	0.00	52.20	71.40	2.20	0.0		165.90	131.90	156.90	80%	5%	15%	20%	7%
Adrienne Harris	8	36	12.00	0.00	0.00	79.50	26.00	5.60	0.0		167.10	123.10	159.10	74%	5%	22%	26%	6%
Jessica Mitchell	6	5	5.00	0.00	0.00	13.00	0.00	1.00	0.0		30.00	19.00	24.00	63%	20%	17%	37%	1%
Brad Hedges	3	4	4.30	19.60	0.00	8.30	0.00	0.30	0.0		39.50	32.50	36.50	82%	8%	10%	18%	2%
Chris Johnson	34	35	10.30	0.00	4.00	55.30	0.00	4.20	0.0		142.80	73.80	108.80	52%	24%	25%	48%	4%
Ellen Marshall	13	22	34.40	0.00	0.00	66.80	0.00	3.00	0.0		139.20	104.20	126.20	75%	9%	16%	25%	5%
Karis Mason	11	23	10.30	0.00	0.00	68.20	2.00	4.70	0.0		119.20	85.20	108.20	71%	9%	19%	29%	4%
Paula Moreland	6	13	6.80	0.00	0.00	57.70	0.00	14.60	0.0		98.10	79.10	92.10	81%	6%	13%	19%	4%
Tricia Ostrander	16	16	23.40	9.30	0.00	25.60	0.00	0.00	0.0		90.30	58.30	74.30	65%	18%	18%	35%	3%
Bonnie Daniels	29	36	4.00	0.00	0.00	75.10	0.00	11.30	0.0		155.40	90.40	126.40	58%	19%	23%	42%	5%
Chris Ray	12	36	16.20	6.50	0.00	31.40	0.00	1.10	0.0		103.20	55.20	91.20	53%	12%	35%	47%	3%
Robin Rippeth	0	2	18.10	0.00	0.00	23.40	0.00	2.90	0.0		46.40	44.40	46.40	0%	0%	0%	0%	2%
Claire Robitaille	20	25	5.00	3.00	0.00	58.00	0.00	0.00	0.0		111.00	66.00	91.00	59%	18%	23%	41%	3%
Mike Selegue	17	34	7.50	0.00	0.00	89.40	0.00	1.50	0.0		149.40	98.40	132.40	66%	11%	23%	34%	5%
Charles Snyder	26	57	0.00	0.00	0.00	0.00	0.00	0.00	44.9		127.90	44.90	101.90	35%	20%	45%	65%	2%
Heather Stevens	0	0	6.00	0.00	0.00	66.60	0.00	3.00	0.0		75.60	75.60	75.60	100%	0%	0%	0%	4%
Amanda Moore*	0	0	0.00	0.00	0.00	0.00	0.00	112.70	0.0		112.70	112.70	112.70		0%	0%	0%	6%
Joe Dunson *	0	0	0.00	0.00	0.00	0.00	0.00	64.40	0.0		64.40	64.40	64.40		0%	0%		3%
<b>Sum Totals</b>	<b>276</b>	<b>512</b>	<b>193.70</b>	<b>38.40</b>	<b>4.00</b>	<b>983.80</b>	<b>208.30</b>	<b>346.40</b>	<b>44.9</b>	<b>80.0</b>	<b>2687.50</b>	<b>1899.50</b>	<b>2323.20</b>					
<b>Average</b>														64%	10%	19%	30%	4%

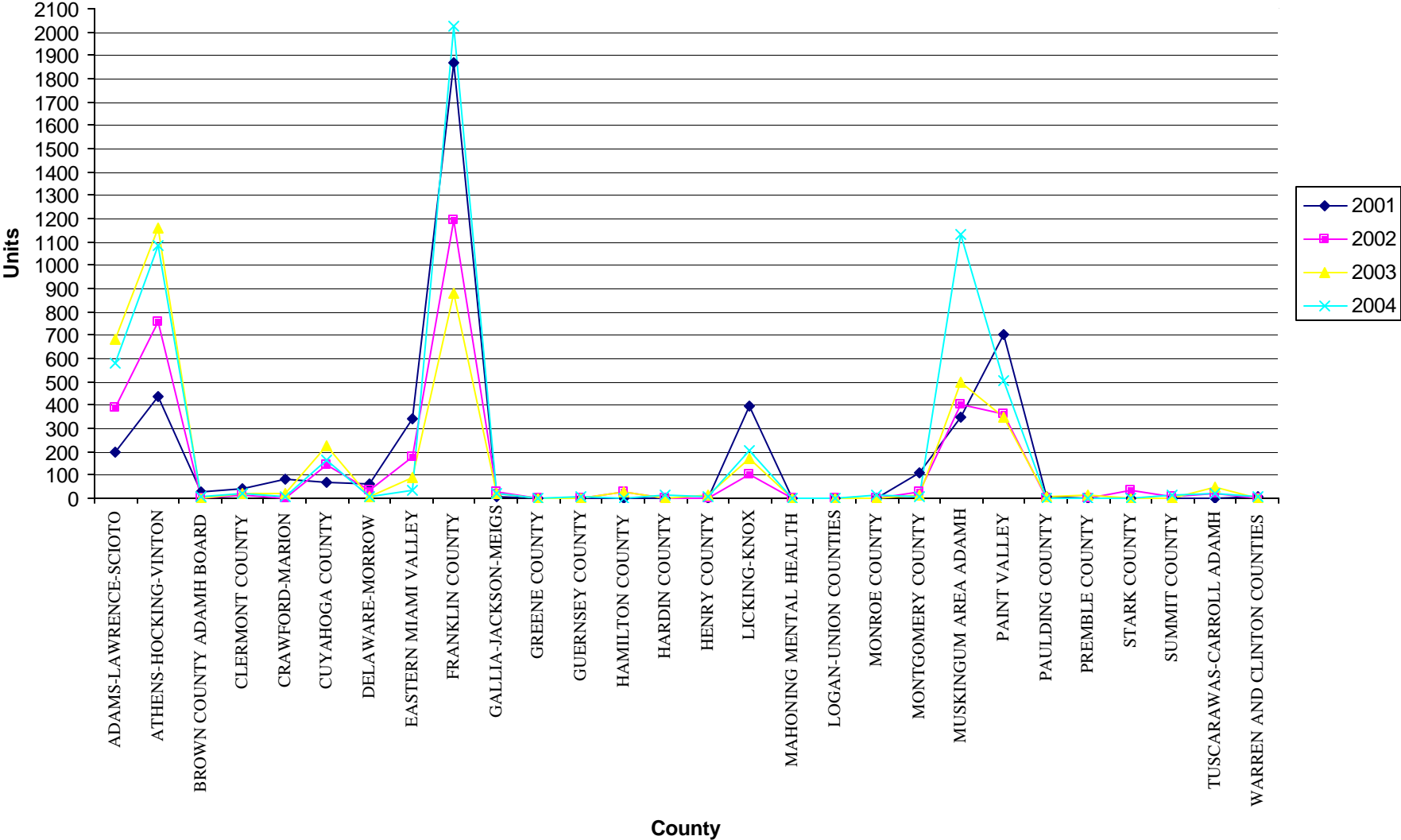
\* These clinicians do not have a daily scheduler therefore their totals are not reported in the missed or cancelled sessions.

**% of Agency \$ Billed by Clinician**

January	2005		Weighted							
	DA	EVAL	AOD	IND	Group	CSP	MED	Other	Tot Units	% of Tot
Unit Rate	\$ 129.99	\$ 129.99	\$ 96.24	\$ 90	\$ 39.48	\$ 65	\$ 195	\$ 35		
Dean Bachelor	1.00	0.00	0.00	8.00	11.00	0.00	0.0	0.0		
	\$130	\$0	\$0	\$720	\$434	\$0	\$0	\$0	\$ 1,284.27	1%
A.J. Bierly	0.00	0.00	0.00	0.00	0.00	88.30	0.00	0.00		
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$5,739.50	\$0.00	\$0.00	\$ 5,739.50	4%
Misty Coleman	4.50	0.00	0.00	64.50	47.30	2.80	0.00	0.00		
	\$584.96	\$0.00	\$0.00	\$5,805.00	\$1,867.40	\$182.00	\$0.00	\$0.00	\$ 8,439.36	5%
Scott Craft	0.00	0.00	0.00	26.30	50.60	3.80	0.0	80.0		
	\$0.00	\$0.00	\$0.00	\$2,367.00	\$1,997.69	\$247.00	\$0.00	\$2,800.00	\$ 7,411.69	5%
Steve Ford	3.50	0.00	0.00	48.60	34.00	14.30	0.00	0.00		
	\$454.97	\$0.00	\$0.00	\$4,374.00	\$1,342.32	\$929.50	\$0.00	\$0.00	\$ 7,100.79	4%
Rick Gehlbach	15.30	0.00	0.00	65.90	0.00	4.70	0.00	0.00		
	\$1,988.85	\$0.00	\$0.00	\$5,931.00	\$0.00	\$305.50	\$0.00	\$0.00	\$ 8,225.35	5%
Joni Grim	6.10	0.00	0.00	52.20	71.40	2.20	0.00	0.00		
	\$792.94	\$0.00	\$0.00	\$4,698.00	\$2,818.87	\$143.00	\$0.00	\$0.00	\$ 8,452.81	5%
Adrienne Harris	12.00	0.00	0.00	79.50	26.00	5.60	0.00	0.00		
	\$1,559.88	\$0.00	\$0.00	\$7,155.00	\$1,026.48	\$364.00	\$0.00	\$0.00	\$ 10,105.36	6%
Jessica Mitchell	5.00	0.00	0.00	13.00	0.00	1.00	0.00	0.00		
	\$649.95	\$0.00	\$0.00	\$1,170.00	\$0.00	\$65.00	\$0.00	\$0.00	\$1,884.95	1%
Brad Hedges	4.30	19.60	0.00	8.30	0.00	0.30	0.00	0.00		
	\$558.96	\$2,547.80	\$0.00	\$747.00	\$0.00	\$19.50	\$0.00	\$0.00	\$ 3,873.26	2%
Chris Johnson	10.30	0.00	4.00	55.30	0.00	4.20	0.00	0.00		
	\$1,338.90	\$0.00	\$384.96	\$4,977.00	\$0.00	\$273.00	\$0.00	\$0.00	\$ 6,973.86	4%
Ellen Marshall	34.40	0.00	0.00	66.80	0.00	3.00	0.00	0.00		
	\$4,471.66	\$0.00	\$0.00	\$6,012.00	\$0.00	\$195.00	\$0.00	\$0.00	\$10,678.66	7%
Karis Mason	10.30	0.00	0.00	68.20	2.00	14.60	0.00	0.00		
	\$1,338.90	\$0.00	\$0.00	\$6,138.00	\$78.96	\$949.00	\$0.00	\$0.00	\$ 8,504.86	5%
Paula Moreland	6.80	0.00	0.00	57.70	0.00	14.60	0.0	0.0		
	\$883.93	\$0.00	\$0.00	\$5,193.00	\$0.00	\$949.00	\$0.00	\$0.00	\$ 7,025.93	4%
Tricia Ostrander	23.40	9.30	0.00	25.60	0.00	0.00	0.0	0.0		
	\$3,041.77	\$1,208.91	\$0.00	\$2,304.00	\$0.00	\$0.00	\$0.00	\$0.00	\$ 6,554.67	4%
Bonnie Daniels	4.00	0.00	0.00	75.10	0.00	11.30	0.00	0.00		
	\$519.96	\$0.00	\$0.00	\$6,759.00	\$0.00	\$734.50	\$0.00	\$0.00	\$ 8,013.46	5%
Chris Ray	16.20	6.50	0.00	31.40	0.00	1.10	0.00	0.00		
	\$2,105.84	\$844.94	\$0.00	\$2,826.00	\$0.00	\$71.50	\$0.00	\$0.00	\$ 5,848.27	4%
Robin Rippeth	18.10	0.00	0.00	23.40	0.00	2.90	0.00	0.00		
	\$2,352.82	\$0.00	\$0.00	\$2,106.00	\$0.00	\$188.50	\$0.00	\$0.00	\$ 4,647.32	3%
Claire Robitaille	5.00	3.00	0.00	58.00	0.00	0.00	0.00	0.00		
	\$649.95	\$389.97	\$0.00	\$5,220.00	\$0.00	\$0.00	\$0.00	\$0.00	\$6,259.92	4%
Mike Selegue	7.50	0.00	0.00	89.40	0.00	1.50	0.00	0.00		
	\$974.93	\$0.00	\$0.00	\$8,046.00	\$0.00	\$97.50	\$0.00	\$0.00	\$9,118.43	6%
Charles Snyder	0.00	0.00	0.00	0.00	0.00	0.00	44.90	0.00		
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$8,755.50	\$0.00	\$8,755.50	5%
Heather Stevens	6.00	0.00	0.00	66.60	0.00	3.00	0.00	0.00		
	\$779.94	\$0.00	\$0.00	\$5,994.00	\$0.00	\$195.00	\$0.00	\$0.00	\$6,968.94	4%
Amanda Moore	0.00	0.00	0.00	0.00	0.00	112.70	0.00	0.00		
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$7,325.50	\$0.00	\$0.00	\$7,325.50	4%
Joe Dunson	0.00	0.00	0.00	0.00	0.00	64.40	0.00	0.00		
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$4,186.00	\$0.00	\$0.00	\$4,186.00	3%
Sum Totals	\$25,179.06	\$4,991.62	\$384.96	\$88,542.00	\$9,566.00	\$23,159.50	\$8,755.50	\$2,800.00	\$163,378.64	

This chart represents the percentage of the total dollars billed by clinician in January 2005.

# County Growth



FAIRFIELD COUNTY

