

1999-2001 MAX OT Validation Table
State: AZ

| Measure | Expected Range | 1999 | | 2000 | | 2001 | | % Change 1999-2000 | % Change 2000 - 2001 | Cross Year Change Within Expected Range (+/-15%) |
|--|----------------|------------|--------------|------------|--------------|------------|--------------|--------------------|----------------------|--|
| | | Value | Within Range | Value | Within Range | Value | Within Range | | | |
| All OT Claims | | | | | | | | | | |
| Total Number of Claims | N/A | 19,889,617 | N/A | 20,656,856 | N/A | 25,357,511 | N/A | 3.86 | 22.76 | No |
| | N/A | 40.62 | N/A | 39.23 | N/A | 39.32 | N/A | -3.43 | 0.24 | Yes |
| % Encounter Claims (Claim Type=3) * | N/A | 0.03 | N/A | 0.03 | N/A | 0.03 | N/A | -1.26 | 29.50 | No |
| % Supplemental Claims | | | | | | | | | | |
| % Claims (Claim Type=2, and MAX TOS 20, 21, 22) | N/A | 53.90 | N/A | 54.75 | N/A | 55.72 | N/A | 1.57 | 1.78 | Yes |
| Total FFS Claims Excluding Capitation Payments | N/A | 1,084,682 | N/A | 1,239,455 | N/A | 1,248,814 | N/A | 14.27 | 0.76 | Yes |
| | 5-20 | 17.94 | Yes | 23.67 | No | 20.04 | No | 31.90 | -15.34 | No |
| % Crossover | > 1% | 14.09 | Yes | 12.85 | Yes | 14.91 | Yes | -8.82 | 16.08 | No |
| % Adjusted Claims | N/A | . | N/A | 16.11 | N/A | 32.04 | N/A | N/A | 98.88 | No |
| % Standard Adjustments | N/A | \$195 | N/A | \$234 | N/A | \$225 | N/A | 19.90 | -3.96 | Yes |
| Average Paid per Adjusted Claim | N/A | 42.93 | N/A | 44.12 | N/A | 41.32 | N/A | 2.76 | -6.33 | Yes |
| % Claims(TOC 1,2) TOS 21: PHP Cap Payments | N/A | 47.88 | N/A | 46.01 | N/A | 50.56 | N/A | -3.92 | 9.89 | N/A |
| % Claims(TOC 1,2) TOS 22: PCCM Cap Pay. | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | N/A | N/A | N/A |
| Average Paid per HMO Cap Clms (TOS 20) | \$75-\$300 | \$283 | Yes | \$290 | Yes | \$294 | Yes | 2.47 | 1.42 | Yes |
| Average Paid per PHP Cap Clms (TOS 21) | \$20-\$250 | \$25 | Yes | \$26 | Yes | \$30 | Yes | 0.66 | 16.01 | N/A |
| Average Paid per PCCM Cap Clms (TOS 22) | 3-5 | . | No | . | No | . | No | N/A | N/A | N/A |
| S Non-Crossover Claims (Type of Claim=1, Crossover Claim Indicator=0, excluding capitation claims) **capitation claims were included in 1998 | | | | | | | | | | |
| Total Number of Claims | N/A | 890,067 | N/A | 946,131 | N/A | 998,606 | N/A | 6.30 | 5.55 | Yes |
| % Claims with> \$0 Paid | >95% | 100.00 | Yes | 100.00 | Yes | 100.00 | Yes | 0.00 | 0.00 | Yes |
| % Claims with< \$0 Paid | 0 | 0.00 | Yes | 0.00 | Yes | 0.00 | Yes | N/A | N/A | N/A |
| % Claims with Span Bill | N/A | 4.37 | N/A | 4.76 | N/A | 5.24 | N/A | 9.01 | 10.10 | Yes |
| % OPD Claims with Span Bill/ All OPD Claims(TOS 11) | N/A | 17.27 | N/A | 11.52 | N/A | 6.13 | N/A | -33.27 | -46.80 | No |
| % HH Claims with Span Bill/All HH Claims (TOS 13) | N/A | 4.05 | N/A | 7.97 | N/A | 10.76 | N/A | 96.62 | 35.07 | No |
| % Other Claims with Span Bills/All Other Claims | N/A | 1.87 | N/A | 2.11 | N/A | 4.72 | N/A | 12.76 | 123.74 | No |
| % Claims W/ Service Place 11- Office | 50-90 | 31.58 | No | 29.61 | No | 27.80 | No | -6.25 | -6.11 | Yes |
| % Claims W/ Service Place 12 - Home | >0-5 | 3.42 | Yes | 2.49 | Yes | 2.32 | Yes | -27.31 | -6.68 | Yes |
| % Claims W/ Service Place 21 - Hospital | >0-5 | 10.64 | No | 12.86 | No | 14.76 | No | 20.95 | 14.77 | Yes |
| % Claims W/ Service Place 32 - NF | >0-5 | 0.09 | Yes | 0.09 | Yes | 0.08 | Yes | -1.11 | -6.29 | Yes |
| % Claims W/ Service Place 23 - ER | 1-10 | 2.13 | Yes | 2.80 | Yes | 4.19 | Yes | 31.45 | 49.58 | No |
| % Claims w/ Service Place 22 - OPD | >0-10 | 44.27 | No | 45.91 | No | 43.90 | No | 3.70 | -4.37 | Yes |
| % Claims W/ Service Place 99 - Unknown/Other | <5 | 0.00 | Yes | 0.00 | Yes | 0.00 | Yes | N/A | N/A | N/A |
| % Claims with TPL | >0 - 15 | 0.00 | No | 0.00 | No | 0.00 | No | N/A | N/A | N/A |
| Aver. TPL Paid -claims with TPL | N/A | . | N/A | . | N/A | . | N/A | N/A | N/A | N/A |
| PERCENT CLAIMS/MAX TOS | | | | | | | | | | Yes |
| % claims MAX TOS 08: Physicians | 10-35 | 12.86 | Yes | 11.99 | Yes | 10.12 | Yes | -6.79 | -15.59 | No |
| % claims MAX TOS 09: Dental | 2-20 | 8.00 | Yes | 6.94 | Yes | 7.03 | Yes | -13.26 | 1.35 | Yes |
| % claims MAX TOS 10: Other Practitioner | 0.5-8 | 0.60 | Yes | 0.63 | Yes | 0.83 | Yes | 5.21 | 31.96 | No |
| % claims MAX TOS 11: OPD | 3-25 | 16.17 | Yes | 28.08 | No | 36.76 | No | 73.63 | 30.90 | No |
| % claims MAX TOS 12: Clinic | 2-25 | 10.54 | Yes | 10.99 | Yes | 11.82 | Yes | 4.32 | 7.49 | Yes |
| % claims MAX TOS 13: HH | >0-25 | 0.35 | Yes | 0.15 | Yes | 0.09 | Yes | -56.64 | -40.13 | No |
| % claims MAX TOS 15: Lab/Xray | 4-20 | 7.71 | Yes | 6.57 | Yes | 12.76 | Yes | -14.88 | 94.30 | No |
| % claims MAX TOS 16: Drugs | <3 | 0.00 | Yes | 0.00 | Yes | 0.26 | Yes | N/A | N/A | N/A |
| % claims MAX TOS 19: Other Services | <25 | 25.84 | No | 16.05 | Yes | 0.32 | Yes | -37.89 | -98.01 | No |

* Cross year change for encounter claims is expected to be +15%, no negative.

1999-2001 MAX OT Validation Table
State: AZ

| Measure | Expected Range | 1999 | | 2000 | | 2001 | | % Change 1999-2000 | % Change 2000-2001 | Cross Year Change Within Expected Range (+/-15%) |
|--|----------------|-------|--------------|---------|--------------|---------|--------------|--------------------|--------------------|--|
| | | Value | Within Range | Value | Within Range | Value | Within Range | | | |
| | >3 | 2.43 | No | 2.32 | No | 3.99 | Yes | -4.50 | -71.80 | No |
| % claims MAX TOS 51: DME | >1 | 14.66 | Yes | 15.48 | Yes | 15.20 | Yes | 5.62 | -1.84 | Yes |
| % claims MAX TOS 26: Transportation | N/A | 0.02 | N/A | 0.00 | N/A | 0.00 | N/A | -74.95 | -100.00 | No |
| % claims MAX TOS 24: Sterilizations | N/A | 0.02 | N/A | 0.02 | N/A | 0.02 | N/A | 43.29 | -14.32 | Yes |
| % claims MAX TOS 25: Abortions | >0 | 0.25 | Yes | 0.34 | Yes | 0.36 | Yes | 34.30 | 6.29 | Yes |
| % claims MAX TOS 30: PCS | >0 | 0.00 | No | 0.00 | No | 0.00 | No | N/A | N/A | N/A |
| % claims MAX TOS 31: TCM | >0 | 0.09 | Yes | 0.08 | Yes | 0.12 | Yes | -17.74 | 51.28 | No |
| % claims MAX TOS 33: Rehabilitation | >1 | 0.02 | No | 0.01 | No | 0.02 | No | -36.91 | 26.33 | N/A |
| % claims MAX TOS 34: PT/OT/hear/speech | >0 | 0.00 | No | 0.00 | No | 0.00 | No | N/A | N/A | N/A |
| % claims MAX TOS 35: Hospice | N/A | 0.27 | N/A | 0.18 | N/A | 0.21 | N/A | -33.64 | 15.64 | N/A |
| % claims MAX TOS 36: Nurse Midwife | N/A | 0.13 | N/A | 0.10 | N/A | 0.08 | N/A | -20.98 | -17.22 | N/A |
| % claims MAX TOS 37: Nurse Practitioner | N/A | 0.01 | N/A | 0.01 | N/A | 0.00 | N/A | -0.47 | -100.00 | N/A |
| % claims MAX TOS 38: Private Nursing | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | N/A | N/A | N/A |
| % claims MAX TOS 39: Religious Non-Med. | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | N/A | 1510.67 | No |
| % claims MAX TOS 52: Residential Care | >1 | 0.02 | No | 0.05 | No | 0.02 | No | 130.91 | -51.29 | No |
| % claims MAX TOS 53: Psych. Services | >0 | 0.00 | Yes | 0.00 | Yes | 0.00 | Yes | 17.59 | 70.54 | No |
| % claims MAX TOS 54: Adult Day Care | <1 | 0.00 | Yes | 0.00 | Yes | 0.00 | Yes | N/A | N/A | N/A |
| % claims MAX TOS 99: Unknown | | | | | | | | | | |
| Average Medicaid Amount Paid For Selected MAX TOS (excluding claims with <=\$0 paid) | N/A | \$222 | N/A | \$237 | N/A | \$248 | N/A | 6.57 | 4.71 | Yes |
| Total | \$20-90 | \$198 | No | \$179 | No | \$142 | No | -9.52 | -20.60 | No |
| 08: Physicians | \$10-60 | \$53 | Yes | \$51 | Yes | \$52 | Yes | -4.36 | 1.67 | Yes |
| 09: Dental | \$10-100 | \$66 | Yes | \$99 | Yes | \$102 | No | 48.43 | 3.34 | Yes |
| 10: Other Practioner | \$20-100 | \$654 | No | \$491 | No | \$375 | No | -24.98 | -23.57 | No |
| 11: OPD | \$20-100 | \$169 | No | \$186 | No | \$209 | No | 9.80 | 12.58 | Yes |
| 12: Clinic | N/A | \$87 | N/A | \$104 | N/A | \$138 | N/A | 20.18 | 32.36 | No |
| 13: HH | 10-60 | \$30 | Yes | \$58 | Yes | \$274 | No | 95.60 | 371.16 | No |
| 15: Lab/Xray | 10-60 | . | No | . | No | \$13 | Yes | N/A | N/A | N/A |
| 16: Drugs | N/A | \$180 | N/A | \$179 | N/A | \$258 | N/A | -0.75 | 44.27 | No |
| 19: Other Services | N/A | \$100 | N/A | \$115 | N/A | \$286 | N/A | 14.72 | 148.67 | No |
| 51: DME | N/A | \$106 | N/A | \$106 | N/A | \$117 | N/A | -0.28 | 9.93 | Yes |
| 26: Transportation | N/A | \$81 | N/A | \$128 | N/A | \$149 | N/A | 59.49 | 16.32 | No |
| 30: PCS | N/A | . | N/A | . | N/A | . | N/A | N/A | N/A | N/A |
| 31: Targeted Case Management | N/A | \$152 | N/A | \$131 | N/A | \$152 | N/A | -14.15 | 16.58 | No |
| 33: Rehabilitation | N/A | \$120 | N/A | \$184 | N/A | \$273 | N/A | 52.88 | 48.18 | N/A |
| 34: PT/OT/speech/hear | N/A | . | N/A | . | N/A | . | N/A | N/A | N/A | N/A |
| 35: Hospice | N/A | . | N/A | \$800 | N/A | \$1,187 | N/A | N/A | 48.42 | No |
| 52: Residential Care | N/A | \$199 | N/A | \$214 | N/A | \$101 | N/A | 7.57 | -52.93 | No |
| 53: Psych. Services | N/A | \$842 | N/A | \$1,121 | N/A | \$1,680 | N/A | 33.10 | 49.86 | No |
| PERCENT OF CLAIMS BY PROGRAM TYPE (claim type 1) | | | | | | | | | | |
| % Family Planning (code 2) | N/A | 0.01 | N/A | 0.02 | N/A | 0.03 | N/A | 50.69 | 58.82 | No |
| % RHC (code 3) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | N/A | N/A | N/A |
| % FQHC (code 4) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | N/A | N/A | N/A |
| % FQHC (code 5) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | N/A | 373.73 | N/A |
| % IHS Waiver (code 6,7) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | N/A | N/A | N/A |
| AVERAGE EXPENDITURES BY PROGRAM | | | | | | | | | | |

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|--|----------------|---------|--------------|---------|--------------|---------|--------------|--------------------|--------------------|--|
| | | Value | Within Range | Value | Within Range | Value | Within Range | | | |
| (code 2) | N/A | \$263 | N/A | \$521 | N/A | \$540 | N/A | 97.98 | 3.80 | Yes |
| Family Planning (code 3) | N/A | . | N/A | . | N/A | . | N/A | N/A | N/A | N/A |
| RHC (code 4) | N/A | . | N/A | . | N/A | . | N/A | N/A | N/A | N/A |
| FGHC (code 5) | N/A | . | N/A | \$88 | N/A | \$16 | N/A | N/A | -82.05 | N/A |
| IHS (code 6, 7) | N/A | . | N/A | . | N/A | . | N/A | N/A | N/A | N/A |
| Waiver (code 6, 7) | > 60 | 100.00 | Yes | 100.00 | Yes | 100.00 | Yes | 0.00 | 0.00 | Yes |
| % Claims with DX | 85-100 | 100.00 | Yes | 100.00 | Yes | 100.00 | Yes | 0.00 | 0.00 | Yes |
| % Claims with DX (MAX TOS 8, 11, 12) | N/A | 26.42 | N/A | 30.84 | N/A | 34.47 | N/A | 16.76 | 11.75 | Yes |
| % Claims with 1 DX that have 2 DX | 5-25 | 12.46 | Yes | 11.82 | Yes | 11.50 | Yes | -5.11 | -2.71 | Yes |
| % Claims with DX, where length=3 | 40-70 | 59.76 | Yes | 58.20 | Yes | 57.45 | Yes | -2.61 | -1.28 | Yes |
| % Claims with DX, where length=4 | 20-55 | 27.78 | Yes | 29.98 | Yes | 31.05 | Yes | 7.91 | 3.55 | Yes |
| % Claims with DX, where length=5 | | | | | | | | | | |
| % OPD Claims with Service Code or UB-92/OPD Claims (TOS 11) | N/A | 100.00 | N/A | 100.00 | N/A | 100.00 | N/A | 0.00 | 0.00 | Yes |
| % HH Claims with Service Code or UB-92/HH Claims (TOS13) | N/A | 100.00 | N/A | 100.00 | N/A | 100.00 | N/A | 0.00 | 0.00 | Yes |
| % Other Claims with Service Codes /All Other Claims (Excluding OPD/HH) | 98-100 | 100.00 | Yes | 100.00 | Yes | 86.74 | No | 0.00 | -13.26 | Yes |
| % CPT-4 Service Code Indicator (code 01)/Claims with Service Codes | N/A | 25.89 | N/A | 25.19 | N/A | 25.16 | N/A | -2.70 | -0.13 | Yes |
| % HCPCS (II & III) Service Codes Indicator (code 06)/Claims with Service Codes | N/A | 17.39 | N/A | 16.04 | N/A | 15.92 | N/A | -7.75 | -0.72 | Yes |
| % Other National Code Indicator (codes 2-5, 7-9)/Claims with Service Codes | N/A | 0.00 | N/A | 1.64 | N/A | 3.87 | N/A | N/A | 136.04 | No |
| % State Specific Serv. Indicator (10-87)/Claims with Service Codes | N/A | 56.72 | N/A | 57.13 | N/A | 55.05 | N/A | 0.72 | -3.64 | N/A |
| % CPT-4 Format Codes- 5n/Claims with CPT-4 | 98-100 | 100.00 | Yes | 100.00 | Yes | 100.00 | Yes | 0.00 | 0.00 | Yes |
| % HCPCS Format Codes Cnnnnn or Cnnnn /Claims with HCPCS | 98-100 | 100.00 | Yes | 100.00 | Yes | 100.00 | Yes | 0.00 | 0.00 | Yes |
| % Claims with TOS 08 with Physician Specialty | N/A | 99.91 | N/A | 99.53 | N/A | 98.94 | N/A | -0.38 | -0.60 | Yes |
| FFS Crossover Claims (Type of Claim=1), Crossover Claim Indicator=1, excluding capitation claims) | | | | | | | | | | |
| Total Number of Claims | N/A | 194,615 | N/A | 293,324 | N/A | 250,208 | N/A | 50.72 | -14.70 | Yes |
| % Claims with > \$0 Paid | >95% | 100.00 | Yes | 100.00 | Yes | 100.00 | Yes | 0.00 | 0.00 | Yes |
| % Claims with < \$0 Paid | 0 | 0.00 | Yes | 0.00 | Yes | 0.00 | Yes | N/A | N/A | N/A |
| % Claims with Span Bill | N/A | 17.29 | N/A | 14.14 | N/A | 16.80 | N/A | -18.21 | 18.77 | No |
| % OPD Claims with Span Bill/ All OPD Claims(TOS 11) | N/A | 33.72 | N/A | 20.53 | N/A | 19.95 | N/A | -39.13 | -2.81 | Yes |
| % HH Claims with Span Bill/All HH Claims (TOS 13) | N/A | 7.06 | N/A | 16.53 | N/A | 17.25 | N/A | 134.19 | 4.39 | N/A |
| % Other Claims with Span Bills/All Other Claims | N/A | 10.67 | N/A | 9.57 | N/A | 15.03 | N/A | -10.32 | 57.17 | No |
| PERCENT CLAIMS/MAX TOS (excluding 20-22) | | | | | | | | | | |
| % claims MAX TOS 08: Physicians | N/A | 21.97 | N/A | 12.97 | N/A | 7.94 | N/A | -40.96 | -38.77 | No |
| % claims MAX TOS 10: Other Practitioner | N/A | 1.28 | N/A | 0.83 | N/A | 0.38 | N/A | -35.14 | -54.67 | No |
| % claims MAX TOS 11: OPD | N/A | 29.19 | N/A | 41.00 | N/A | 35.41 | N/A | 40.46 | -13.63 | Yes |
| % claims MAX TOS 12: Clinic | N/A | 1.34 | N/A | 5.20 | N/A | 7.40 | N/A | 286.98 | 42.30 | No |
| % claims MAX TOS 13: HH | N/A | 2.85 | N/A | 1.21 | N/A | 1.05 | N/A | -57.54 | -13.18 | N/A |
| % claims MAX TOS 15: Lab/Xray | N/A | 6.23 | N/A | 9.16 | N/A | 12.85 | N/A | 47.07 | 40.29 | No |

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| Measure | Expected Range | 1999 | | 2000 | | 2001 | | % Change 1999-2000 | % Change 2000-2001 | Cross Year Change Within Expected Range (+/-15%) |
|--|----------------|--------|--------------|--------|--------------|--------|--------------|--------------------|--------------------|--|
| | | Value | Within Range | Value | Within Range | Value | Within Range | | | |
| % claims MAX TOS 19: Other Services | N/A | 10.59 | N/A | 8.92 | N/A | 10.62 | N/A | -15.74 | 19.08 | No |
| % claims MAX TOS 51: DME | N/A | 7.36 | N/A | 4.94 | N/A | 7.34 | N/A | -32.87 | 48.51 | N/A |
| % claims MAX TOS 26: Transportation | N/A | 9.83 | N/A | 7.86 | N/A | 9.19 | N/A | -20.05 | 16.97 | No |
| % claims MAX TOS 30: PCS | N/A | 7.36 | N/A | 4.37 | N/A | 5.83 | N/A | -40.62 | 33.41 | N/A |
| % claims MAX TOS 31: TCM | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | N/A | N/A | N/A |
| % claims MAX TOS 33: Rehabilitation | N/A | 0.25 | N/A | 0.24 | N/A | 0.20 | N/A | -4.63 | -15.93 | No |
| % claims MAX TOS 34: PT/OT/hear/speech | N/A | 0.05 | N/A | 0.08 | N/A | 0.06 | N/A | 45.21 | -19.66 | N/A |
| % claims MAX TOS 35: Hospice | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | N/A | N/A | N/A |
| % claims MAX TOS 52: Residential Care | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | N/A | N/A | N/A |
| % claims MAX TOS 53: Psych. Services | N/A | 1.16 | N/A | 2.30 | N/A | 1.23 | N/A | 98.54 | -46.39 | N/A |
| % claims MAX TOS 54: Adult Day Care | N/A | 0.00 | N/A | 0.02 | N/A | 0.02 | N/A | 483.86 | 1.25 | N/A |
| Average Amount Paid | N/A | \$121 | N/A | \$108 | N/A | \$114 | N/A | -10.93 | 5.85 | Yes |
| % Claims with DX | N/A | 99.96 | N/A | 99.94 | N/A | 99.99 | N/A | -0.02 | 0.05 | Yes |
| % Claims with DX (MAX TOS 8, 11, 12) | 85-100 | 99.94 | Yes | 99.98 | Yes | 99.99 | Yes | 0.04 | 0.01 | Yes |
| % Claims with 1 DX that have 2 DX | N/A | 36.02 | N/A | 32.58 | N/A | 34.27 | N/A | -9.56 | 5.19 | Yes |
| % Claims with DX, where length=3 | 5-25 | 19.94 | Yes | 17.53 | Yes | 19.66 | Yes | -12.12 | 12.19 | Yes |
| % Claims with DX, where length=4 | 40-70 | 52.35 | Yes | 48.51 | Yes | 49.14 | Yes | -7.33 | 1.29 | Yes |
| % Claims with DX, where length=5 | 20-55 | 27.71 | Yes | 33.96 | Yes | 31.20 | Yes | 22.56 | -8.13 | Yes |
| % OPD Claims with Service Code or UB-92/OPD Claims (TOS 11) | N/A | 100.00 | N/A | 100.00 | N/A | 100.00 | N/A | 0.00 | 0.00 | N/A |
| % HH Claims with Service Code or UB-92/HH Claims (TOS13) | N/A | 100.00 | N/A | 100.00 | N/A | 100.00 | N/A | 0.00 | 0.00 | N/A |
| % Other Claims with Service Codes/All Other Claims (Excluding OPD/HH) | 98-100 | 99.99 | Yes | 100.00 | Yes | 90.82 | No | 0.01 | -9.18 | N/A |
| % CPT-4 Service Code Indicator (code 01)/Claims with Service Codes | N/A | 42.15 | N/A | 60.06 | N/A | 48.42 | N/A | 42.49 | -19.38 | N/A |
| % HCPCS (II & III) Service Codes Indicator (code 06)/Claims with Service Codes | N/A | 21.35 | N/A | 16.30 | N/A | 16.78 | N/A | -23.66 | 2.97 | N/A |
| % Other Codes Indicator /Claims with Service Codes | N/A | 36.50 | N/A | 23.64 | N/A | 34.80 | N/A | -35.22 | 47.18 | N/A |

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