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**MEDICAID ANALYTIC EXTRACT
STATE-SPECIFIC VALIDATION
TABLES (2007)**

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ABBREVIATIONS AND ACRONYMS IN THE VALIDATION TABLES

Abbreviations

| | |
|-------|------------------|
| Avg | average |
| Dups | duplicate counts |
| Pharm | pharmacy |
| Psych | psychiatric |
| Tech | technologically |

Acronyms

| | |
|--------------|--|
| AAA | Social Security area number (first 3 digits of a Social Security number) |
| AFDC | Aid to Families with Dependent Children |
| AFDC-U | AFDC for Unemployed Parents |
| ASD | Autism Spectrum Disorder |
| BHO | behavioral health organization |
| CLTC | community long-term care |
| CLTC FLAG | CLTC flag |
| CPT-4 | Current Procedural Terminology, 4th Edition |
| DIV | division |
| DOB | date of birth |
| EDB | Medicare Enrollment Database |
| EDB DUAL | EDB dual status (annual) |
| EXT SSN SRCE | external source of the Social Security number |
| FFS | fee-for-service |
| FP | family planning |
| FQHC | Federally Qualified Health Center |
| GG | Social Security group number (middle 2 digits of a Social Security number) |
| HCPCS | Health Care Common Procedure Coding System |
| HGT FLAG | high group test flag |
| HIC | Health Insurance Claim number |
| HIFA | Health Insurance Flexibility and Accountability |
| HIO | health insuring organization |
| HIV/AIDS | human immunodeficiency virus/acquired immunodeficiency syndrome |
| HMO | health maintenance organization |
| ICF/MR | intermediate care facility for the mentally retarded |
| ICD-9-CM | International Classification of Diseases, 9th Edition |
| IHS | Indian Health Service |
| ILTC | institutional long-term care |
| IP | inpatient hospital claims file; inpatient |
| LT | institutionalized long-term care claims file |
| LTC | long-term care |
| MAX | Medicaid Analytic Extract |
| MAX ELIG CD | MAX eligibility code |
| MAX TOS | MAX type of service |

ABBREVIATIONS AND ACRONYMS IN THE VALIDATION TABLES

Acronyms (continued)

| | |
|-------------------|---|
| MC | managed care |
| MC COMBO | MC combination code |
| MC TYPE | MC type |
| MDCR ORIG REAS CD | Medicare original reason code |
| MH | mental hospital |
| MI/SED | mental illness/serious emotional disturbance |
| MR/DD | mentally retardation/development disability |
| MSIS | Medicaid Statistical Information System |
| M-CHIP | Medicaid State Children's Health Insurance Program |
| N/A | not applicable or not available |
| NF | nursing facility |
| OT | other, non-institutional claims file; occupational therapy |
| PACE | Program of All-Inclusive Care for the Elderly |
| PCCM | primary care case management |
| PGM TYPE | program type |
| PHP | prepaid health plan |
| PRFT | Psychiatric Residential Treatment Facilities |
| PT | physical therapy |
| PVT INS CD | private insurance code |
| RBF | restricted benefits flag |
| QDWI | Qualified Disabled and Working Individuals |
| QI-1 | Qualified Individuals 1 |
| QI-2 | Qualified Individuals 2 |
| QMB | Qualified Medicare Beneficiary |
| RCPNT IND | recipient indicator |
| RHC | Rural Health Clinic |
| RX | prescription drug claims file |
| SLMB | Specified Low-Income Medicare Beneficiary |
| S-CHIP | state-financed State Children's Health Insurance Program |
| SCHIP | SCHIP code |
| SSSS | Social Security serial number (last 4 digits of a Social Security number) |
| TANF | Temporary Assistance for Needy Families |
| TANF FLAG | TANF flag |
| TOS | type of service |
| TPL | Third-Party Liability |
| WVR TYPE | waiver type |

2005-2007 MAX IP VALIDATION TABLE
STATE: DC

| Measure | Expected Range | 2005 Value | 2005 Value Within Range | 2006 Value | 2006 Value Within Range | 2007 Value | 2007 Value Within Range | % Change 2005 - 2006 | % Change 2006 - 2007 | Cross Year Change Within Expected Range |
|--|----------------|------------|-------------------------|------------|-------------------------|------------|-------------------------|----------------------|----------------------|---|
| All IP Claims | | | | | | | | | | |
| Total Number of Claims | N/A | 24,864 | N/A | 25,798 | N/A | 26,856 | N/A | 3.76 | 4.10 | Yes |
| % Encounter Claims | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |
| % Supplemental Claims | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | N/A |
| Total FFS Claims | N/A | 24,864 | N/A | 25,798 | N/A | 26,856 | N/A | 3.76 | 4.10 | Yes |
| % Crossover | 5-20 | 22.88 | No | 23.96 | No | 23.00 | No | 4.71 | -4.02 | Yes |
| % Adjusted Claims | N/A | 2.52 | N/A | 1.72 | N/A | 1.39 | N/A | -31.90 | -18.90 | No |
| % Standard Adjustments | >1% | 64.11 | Yes | 69.07 | Yes | 81.82 | Yes | 7.74 | 18.45 | No |
| Avg Medicaid Paid, Adjusted Claims (Include \$0) | N/A | \$12,435 | N/A | \$14,697 | N/A | \$15,118 | N/A | 18.19 | 2.87 | Yes |
| # of Claims with Missing Medicaid Eligibility and > \$0 Paid (Excludes S-CHIP Only) | N/A | 96 | N/A | 59 | N/A | 90 | N/A | -38.5 | 52.54 | No |
| Avg Medicaid Paid for Claims with Missing Medicaid Eligibility and > \$0 Paid (Excludes S-CHIP Only) | N/A | N/A | N/A | \$16,950 | N/A | \$16,435 | N/A | N/A | -3.04 | Yes |
| # Claims with > \$1 Million Paid | 0 | N/A | N/A | 0 | Yes | 0 | Yes | N/A | Div by 0 | N/A |
| % Section 1915(c) Waiver Claims (PGM TYPE = 6, 7) | 0 | N/A | N/A | N/A | N/A | 0.00 | Yes | N/A | N/A | N/A |
| Total Medicaid Paid among Section 1915(c) Waiver Claims (PGM TYPE = 6, 7) | 0 | N/A | N/A | N/A | N/A | \$0 | Yes | N/A | N/A | N/A |
| FFS Non-Crossover Claims (Type of Claim = 1, Crossover Claim Indicator = 0) | | | | | | | | | | |
| Total Number of Claims | N/A | 19,174 | N/A | 19,616 | N/A | 20,679 | N/A | 2.31 | 5.42 | Yes |
| % Claims with > \$0 Paid | 95-100 | 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 | Div by 0 | Div by 0 | N/A |
| Avg Medicaid Paid (Claims with > \$0 Paid) | \$2000-\$7000 | \$13,825 | No | \$13,699 | No | \$14,463 | No | -0.92 | 5.58 | Yes |
| Avg Medicaid Paid per Covered Day (> \$0 Paid and > 0 Days) | N/A | \$1,790 | N/A | \$1,856 | N/A | \$1,916 | N/A | 3.71 | 3.24 | Yes |
| % Claims with TPL | >0 - 10 | 0.16 | Yes | 0.08 | Yes | 0.06 | Yes | -51.10 | -24.10 | No |
| Avg TPL Paid for Claims with TPL | N/A | \$11,019 | N/A | \$21,020 | N/A | \$6,119 | N/A | 90.75 | -70.90 | No |
| % Claims with UB-92 Accommodation Codes | 95-100 | 99.94 | Yes | 99.92 | Yes | 99.97 | Yes | -0.01 | 0.05 | Yes |
| Avg # of UB-92 Accommodation Codes (> 0 Codes) | >1 | 1.21 | Yes | 1.20 | Yes | 1.20 | Yes | -0.45 | 0.22 | Yes |
| % Claims with UB-92 Ancillary Codes | 95-100 | 99.00 | Yes | 98.88 | Yes | 98.81 | Yes | -0.12 | -0.07 | Yes |
| Avg # of UB-92 Ancillary Codes (> 0 Codes) | >3 | 11.52 | Yes | 11.31 | Yes | 11.38 | Yes | -1.81 | 0.63 | Yes |
| Avg Length of Stay | 2-<8 | 7.72 | Yes | 7.38 | Yes | 7.52 | Yes | -4.45 | 1.87 | Yes |
| Avg Covered Days (> 0 Days) | 2-<8 | 7.73 | Yes | 7.38 | Yes | 7.55 | Yes | -4.46 | 2.26 | Yes |
| % Begin Date = Admission Date | 95-100 | 99.57 | Yes | 99.59 | Yes | 99.78 | Yes | 0.01 | 0.20 | Yes |
| % IP Claims (MAX TOS = 01) | 95-100 | 99.68 | Yes | 99.69 | Yes | 99.82 | Yes | 0.01 | 0.12 | Yes |
| % Family Planning Claims (PGM TYPE = 2) | >0-5 | 0.63 | Yes | 0.57 | Yes | 0.37 | Yes | -8.77 | -34.80 | No |
| % Claims with Primary Diagnosis Code | 98-100 | 100.00 | Yes | 100.00 | Yes | 100.00 | Yes | 0.00 | 0.00 | Yes |
| Avg # of Diagnosis Codes (> 0 Codes) | >=2 | 5.91 | Yes | 6.15 | Yes | 6.18 | Yes | 4.16 | 0.41 | Yes |
| % Primary Diagnosis Code Claims with Length = 3 | 5-30 | 8.88 | Yes | 8.25 | Yes | 7.79 | Yes | -7.02 | -5.67 | Yes |
| % Primary Diagnosis Code Claims with Length = 4 | 15-75 | 29.20 | Yes | 27.21 | Yes | 26.50 | Yes | -6.81 | -2.62 | Yes |
| % Primary Diagnosis Code Claims with Length = 5 | 25-70 | 61.93 | Yes | 64.54 | Yes | 65.72 | Yes | 4.22 | 1.83 | Yes |
| % Claims with a Procedure Code | 35-70 | 53.32 | Yes | 55.97 | Yes | 56.47 | Yes | 4.99 | 0.89 | Yes |
| Avg # of Procedure Codes (> 0 Codes) | >1 | 2.13 | Yes | 2.15 | Yes | 2.16 | Yes | 1.28 | 0.38 | Yes |
| % Claims with Procedure Code with CPT-4 Indicator | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |
| % Claims with Procedure Code with ICD-9 Indicator | N/A | 99.99 | N/A | 100.00 | N/A | 99.84 | N/A | 0.01 | -0.16 | Yes |
| % CPT-4 Indicator Claims with CPT-4 Format = 5 Digits | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | Div by 0 | N/A |
| % ICD-9-CM Indicator Claims with ICD-9-CM Format = 3 or 4 Digits | N/A | 100.00 | N/A | 100.00 | N/A | 100.00 | N/A | 0.00 | 0.00 | Yes |
| % Claims with Diagnosis Related Group | >=90 | 99.31 | Yes | 99.90 | Yes | 99.78 | Yes | 0.60 | -0.12 | Yes |
| % Claims Maternal Delivery Indicator | N/A | 7.98 | N/A | 9.09 | N/A | 9.90 | N/A | 13.90 | 8.84 | Yes |
| % Claims Newborn Delivery Indicator (Only for Separate Infant Delivery Claims Using Mother's ID) | N/A | 8.37 | N/A | 9.77 | N/A | 10.49 | N/A | 16.76 | 7.44 | Yes |

2005-2007 MAX IP VALIDATION TABLE
STATE: DC

| Measure | Expected Range | 2005 Value | 2005 Value Within Range | 2006 Value | 2006 Value Within Range | 2007 Value | 2007 Value Within Range | % Change 2005 - 2006 | % Change 2006 - 2007 | Cross Year Change Within Expected Range |
|--|----------------|------------|-------------------------|------------|-------------------------|------------|-------------------------|----------------------|----------------------|---|
| PATIENT STATUS | | | | | | | | | | |
| % Home | 75-90 | 82.07 | Yes | 82.67 | Yes | 83.71 | Yes | 0.73 | 1.27 | Yes |
| % Transferred | 1-10 | 13.41 | No | 13.14 | No | 12.86 | No | -1.99 | -2.12 | Yes |
| % Still a Patient | >0-2 | 0.26 | Yes | 0.19 | Yes | 0.13 | Yes | -24.20 | -32.60 | No |
| % Died | >0-3 | 2.41 | Yes | 2.24 | Yes | 2.05 | Yes | -7.12 | -8.38 | Yes |
| FFS Crossover Claims (Type of Claim = 1, Crossover Claim Indicator = 1) | | | | | | | | | | |
| Total Number of Claims | N/A | 5,690 | N/A | 6,182 | N/A | 6,177 | N/A | 8.65 | -0.08 | Yes |
| % Claims with > \$0 Paid | N/A | 100.00 | N/A | 100.00 | N/A | 100.00 | N/A | 0.00 | 0.00 | Yes |
| % Claims with < \$0 Paid | 0 | 0.00 | Yes | 0.00 | Yes | 0.00 | Yes | Div by 0 | Div by 0 | N/A |
| Avg Medicaid Paid (Claims with > \$0 Paid) | N/A | \$1,756 | N/A | \$1,953 | N/A | \$2,162 | N/A | 11.24 | 10.70 | Yes |
| % Claims with TPL | N/A | 0.18 | N/A | 0.13 | N/A | 0.08 | N/A | -26.40 | -37.40 | No |
| Avg TPL Paid for Claims with TPL | N/A | \$1,273 | N/A | \$400 | N/A | \$246 | N/A | -68.60 | -38.50 | No |
| % Claims with UB-92 Accommodation Codes | 95-100 | 94.09 | No | 95.86 | Yes | 98.01 | Yes | 1.88 | 2.24 | Yes |
| Avg # of UB-92 Accommodation Codes (> 0 Codes) | >1 | 1.14 | Yes | 1.31 | Yes | 1.32 | Yes | 15.21 | 0.92 | Yes |
| % Claims with UB-92 Ancillary Codes | 95-100 | 31.93 | No | 63.73 | No | 91.52 | No | 99.58 | 43.59 | No |
| Avg # of UB-92 Ancillary Codes (> 0 Codes) | >3 | 11.69 | Yes | 11.92 | Yes | 12.95 | Yes | 1.94 | 8.63 | Yes |
| Avg Length of Stay | 2-<8 | 8.84 | No | 8.16 | No | 8.24 | No | -7.64 | 1.02 | Yes |
| % Begin Date = Admission Date | 95-100 | 99.54 | Yes | 99.64 | Yes | 99.66 | Yes | 0.10 | 0.02 | Yes |
| % IP Claims (MAX TOS = 01) | 95-100 | 100.00 | Yes | 100.00 | Yes | 100.00 | Yes | 0.00 | 0.00 | Yes |
| % Claims with Primary Diagnosis Code | 98-100 | 99.98 | Yes | 100.00 | Yes | 100.00 | Yes | 0.02 | 0.00 | Yes |
| Avg # of Diagnosis Codes (> 0 Codes) | >=2 | 7.14 | Yes | 7.40 | Yes | 7.60 | Yes | 3.58 | 2.73 | Yes |
| % Primary Diagnosis Code Claims with Length = 3 | 5-30 | 7.44 | Yes | 6.63 | Yes | 6.15 | Yes | -10.80 | -7.24 | Yes |
| % Primary Diagnosis Code Claims with Length = 4 | 15-75 | 40.45 | Yes | 38.58 | Yes | 38.77 | Yes | -4.62 | 0.50 | Yes |
| % Primary Diagnosis Code Claims with Length = 5 | 25-70 | 52.12 | Yes | 54.79 | Yes | 55.08 | Yes | 5.12 | 0.52 | Yes |
| % Claims with a Procedure Code | 35-70 | 1.09 | No | 1.54 | No | 2.14 | No | 41.03 | 39.06 | No |
| Avg # of Procedure Codes (> 0 Codes) | >1 | 2.44 | Yes | 2.22 | Yes | 2.17 | Yes | -8.80 | -2.45 | Yes |
| % Claims with Procedure Code with CPT-4 Indicator | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |
| % Claims with Procedure Code with ICD-9 Indicator | N/A | 100.00 | N/A | 100.00 | N/A | 99.24 | N/A | 0.00 | -0.76 | Yes |
| % CPT-4 Indicator Claims with CPT-4 Format = 5 Digits | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | Div by 0 | N/A |

2005-2007 MAX LT VALIDATION TABLE
STATE: DC

| Measure | Expected Range | 2005 Value | 2005 Value Within Range | 2006 Value | 2006 Value Within Range | 2007 Value | 2007 Value Within Range | % Change 2005 - 2006 | % Change 2006 - 2007 | Cross Year Change Within Expected Range |
|---|----------------|------------|-------------------------|------------|-------------------------|------------|-------------------------|----------------------|----------------------|---|
| All LT Claims | | | | | | | | | | |
| Total Number of Claims | N/A | 45,298 | N/A | 41,889 | N/A | 40,028 | N/A | -7.53 | -4.44 | Yes |
| % Encounter Claims | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |
| % Supplemental Claims | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |
| Total FFS Claims | N/A | 45,298 | N/A | 41,889 | N/A | 40,028 | N/A | -7.53 | -4.44 | Yes |
| % Crossover | 5-20 | 3.13 | No | 2.94 | No | 2.43 | No | -6.27 | -17.10 | No |
| % Adjusted Claims | > 1% | 10.66 | Yes | 32.04 | Yes | 15.09 | Yes | 200.40 | -52.90 | No |
| % Standard Adjustments | N/A | 93.46 | N/A | 97.71 | N/A | 92.07 | N/A | 4.55 | -5.78 | Yes |
| Avg Medicaid Paid, Adjusted Claims (Include \$0) | N/A | \$5,430 | N/A | \$5,395 | N/A | \$7,502 | N/A | -0.65 | 39.04 | No |
| # of Claims with Missing Medicaid Eligibility and > \$0 Paid (Excludes S-CHIP Only) | N/A | 88 | N/A | 60 | N/A | 35 | N/A | -31.8 | -41.70 | No |
| Avg Medicaid Paid for Claims with Missing Medicaid Eligibility and > \$0 Paid (Excludes S-CHIP Only) | N/A | N/A | N/A | \$6,243 | N/A | \$4,532 | N/A | N/A | -27.40 | No |
| # Claims with > \$200,000 Paid | 0 | N/A | N/A | 0 | Yes | 1 | No | N/A | Div by 0 | N/A |
| % Section 1915(c) Waiver Claims (PGM TYPE = 6, 7) | 0 | N/A | N/A | N/A | N/A | 0.00 | Yes | N/A | N/A | N/A |
| Total Medicaid Paid among Section 1915(c) Waiver Claims (PGM TYPE = 6, 7) | 0 | N/A | N/A | N/A | N/A | \$0 | Yes | N/A | N/A | N/A |
| FFS Non-Crossover Claims (Type of Claim = 1, Crossover Claim Indicator = 0) | | | | | | | | | | |
| Total Number of Claims | N/A | 43,879 | N/A | 40,659 | N/A | 39,054 | N/A | -7.34 | -3.95 | Yes |
| % Claims with > \$0 Paid | N/A | 100.00 | N/A | 100.00 | N/A | 100.00 | N/A | 0.00 | 0.00 | Yes |
| % Claims with < \$0 Paid | 0 | 0.00 | Yes | 0.00 | Yes | 0.00 | Yes | Div by 0 | Div by 0 | N/A |
| AVERAGE MEDICAID AMOUNT PAID PER COVERED DAY BY MAX TYPE OF SERVICE (CLAIMS WITH >\$0 PAID) | | | | | | | | | | |
| NF (MAX TOS = 07) | \$50-\$100 | \$173 | No | \$185 | No | \$185 | No | 6.73 | -0.07 | Yes |
| ICF/MR (MAX TOS = 05) | N/A | \$306 | N/A | \$316 | N/A | \$334 | N/A | 3.12 | 5.80 | Yes |
| MH Aged (MAX TOS = 02) | N/A | \$433 | N/A | \$557 | N/A | \$617 | N/A | 28.57 | 10.68 | Yes |
| IP Psych, Age < 21 (MAX TOS = 04) | N/A | \$621 | N/A | \$685 | N/A | \$679 | N/A | 10.28 | -0.92 | Yes |
| TYPE OF SERVICE | | | | | | | | | | |
| % NF (MAX TOS = 07) | 75-99 | 78.58 | Yes | 78.67 | Yes | 78.56 | Yes | 0.11 | -0.14 | Yes |
| % NF claims with NF Covered Days | N/A | 99.94 | N/A | 100.00 | N/A | 99.42 | N/A | 0.06 | -0.58 | Yes |
| Avg days for NF claims with Covered Days | N/A | 28 | N/A | 28 | N/A | 28 | N/A | 0.64 | 0.89 | Yes |
| % ICF/MR (MAX TOS = 05) | >0-20 | 19.60 | Yes | 19.52 | Yes | 19.75 | Yes | -0.44 | 1.18 | Yes |
| % ICF/MR claims with ICF/MR Covered Days | N/A | 100.00 | N/A | 100.00 | N/A | 99.91 | N/A | 0.00 | -0.09 | Yes |
| Avg days for ICF/MR claims with Covered Days | N/A | 30 | N/A | 30 | N/A | 30 | N/A | 0.61 | -0.38 | Yes |
| % MH Aged (MAX TOS = 02) | >0-10 | 0.15 | Yes | 0.30 | Yes | 0.27 | Yes | 98.12 | -11.10 | Yes |
| % MH Aged claims with MH Aged Covered Days | N/A | 100.00 | N/A | 100.00 | N/A | 100.00 | N/A | 0.00 | 0.00 | Yes |
| Avg days for MH Aged claims with Covered Days | N/A | 22 | N/A | 10 | N/A | 9 | N/A | -52.50 | -16.30 | No |
| % IP Psych, Age < 21 (MAX TOS = 04) | >0-5 | 1.67 | Yes | 1.51 | Yes | 1.42 | Yes | -9.21 | -6.05 | Yes |
| % IP Psych, Age < 21 Claims with IP Psych Covered Days | N/A | 100.00 | N/A | 100.00 | N/A | 100.00 | N/A | 0.00 | 0.00 | Yes |
| Avg days for IP Psych, Age < 21 Claims with Covered Days | N/A | 12 | N/A | 11 | N/A | 9 | N/A | -11.70 | -14.50 | Yes |
| LEAVE DAYS | | | | | | | | | | |
| % Claims with Leave Days | 1-20 | 1.06 | Yes | 6.48 | Yes | 6.08 | Yes | 508.90 | -6.16 | Yes |
| ADMISSION DATE | | | | | | | | | | |
| % Claims with Admission Date | 95-100 | N/A | No | N/A | No | 100.00 | Yes | N/A | N/A | N/A |
| DIAGNOSIS CODES | | | | | | | | | | |
| % Claims with Primary Diagnosis Code | 95-100 | 6.15 | No | 9.52 | No | 10.70 | No | 54.82 | 12.48 | Yes |
| % Primary Diagnosis Code Claims with Length = 3 | 5-30 | 12.83 | Yes | 10.65 | Yes | 9.95 | Yes | -17.00 | -6.54 | Yes |
| % Primary Diagnosis Code Claims with Length = 4 | 15-75 | 52.50 | Yes | 55.39 | Yes | 55.91 | Yes | 5.50 | 0.94 | Yes |
| % Primary Diagnosis Code Claims with Length = 5 | 25-70 | 34.67 | Yes | 33.96 | Yes | 34.14 | Yes | -2.04 | 0.52 | Yes |
| PATIENT STATUS | | | | | | | | | | |

2005-2007 MAX LT VALIDATION TABLE
STATE: DC

| Measure | Expected Range | 2005 Value | 2005 Value Within Range | 2006 Value | 2006 Value Within Range | 2007 Value | 2007 Value Within Range | % Change 2005 - 2006 | % Change 2006 - 2007 | Cross Year Change Within Expected Range |
|--|----------------|------------|-------------------------|------------|-------------------------|------------|-------------------------|----------------------|----------------------|---|
| % Claims with Patient Status | 95-100 | N/A | No | N/A | No | 100.00 | Yes | N/A | N/A | N/A |
| % Home | 1-5 | 1.69 | Yes | 1.65 | Yes | 0.89 | No | -2.13 | -46.10 | No |
| % Still a Patient | 8-98 | 96.20 | Yes | 96.50 | Yes | 97.46 | Yes | 0.31 | 1.00 | Yes |
| % Died | >0-5 | 0.30 | Yes | 0.24 | Yes | 0.24 | Yes | -19.50 | -0.18 | Yes |
| FFS Crossover Claims (Type of Claim = 1, Crossover Claim Indicator = 1) | | | | | | | | | | |
| Total Number of Claims | N/A | 1,419 | N/A | 1,230 | N/A | 974 | N/A | -13.30 | -20.80 | No |
| % Claims with > \$0 Paid | N/A | 100.00 | N/A | 100.00 | N/A | 100.00 | N/A | 0.00 | 0.00 | Yes |
| % Claims with < \$0 Paid | 0 | 0.00 | Yes | 0.00 | Yes | 0.00 | Yes | Div by 0 | Div by 0 | N/A |
| Avg Medicaid Paid (Claims with > \$0 Paid) | N/A | \$1,556 | N/A | \$1,460 | N/A | \$1,614 | N/A | -6.16 | 10.55 | Yes |
| TYPE OF SERVICE | | | | | | | | | | |
| % NF (MAX TOS = 07) | 75-99 | 94.57 | Yes | 91.71 | Yes | 87.37 | Yes | -3.03 | -4.73 | Yes |
| % ICF/MR (MAX TOS = 05) | >0-20 | 0.00 | No | 0.00 | No | 0.00 | No | Div by 0 | Div by 0 | N/A |
| % MH Aged (MAX TOS = 02) | >0-10 | 5.36 | Yes | 8.29 | Yes | 12.53 | No | 54.83 | 51.04 | No |
| % IP Psych, Age < 21 (MAX TOS = 04) | >0-5 | 0.07 | Yes | 0.00 | No | 0.10 | Yes | -100.00 | Div by 0 | N/A |
| ADMISSION DATE | | | | | | | | | | |
| % Claims with Admission Date | 95-100 | N/A | No | N/A | No | 100.00 | Yes | N/A | N/A | N/A |
| DIAGNOSIS CODES | | | | | | | | | | |
| % Claims with Primary Diagnosis Code | 95-100 | 5.43 | No | 10.41 | No | 16.94 | No | 91.78 | 62.79 | No |

2005-2007 MAX OT VALIDATION TABLE
STATE: DC

| Measure | Expected Range | 2005 Value | 2005 Value Within Range | 2006 Value | 2006 Value Within Range | 2007 Value | 2007 Value Within Range | % Change 2005 - 2006 | % Change 2006 - 2007 | Cross Year Change Within Expected Range |
|--|----------------|------------|-------------------------|------------|-------------------------|------------|-------------------------|----------------------|----------------------|---|
| All OT Claims | | | | | | | | | | |
| Total Number of Claims | N/A | 4,458,951 | N/A | 4,919,598 | N/A | 5,387,387 | N/A | 10.33 | 9.51 | Yes |
| % Encounter Claims | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |
| % Supplemental Claims | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |
| % Capitation Claims ** | N/A | 23.69 | N/A | 22.55 | N/A | 19.35 | N/A | -4.81 | -14.20 | Yes |
| Total FFS Claims Excluding Capitation Payments | N/A | 3,402,456 | N/A | 3,810,066 | N/A | 4,345,048 | N/A | 11.98 | 14.04 | Yes |
| % Crossover | 5-20 | 6.27 | Yes | 8.52 | Yes | 10.48 | Yes | 36.04 | 22.90 | No |
| % Adjusted Claims | >1% | 2.45 | Yes | 4.08 | Yes | 4.45 | Yes | 66.40 | 9.20 | Yes |
| % Standard Adjustments | N/A | 40.32 | N/A | 65.03 | N/A | 42.90 | N/A | 61.29 | -34.00 | No |
| Avg Medicaid Paid, Adjusted Claims (Include \$0) | N/A | \$109 | N/A | \$128 | N/A | \$302 | N/A | 17.33 | 136.80 | No |
| % Claims with HMO Capitation Payment | N/A | 23.69 | N/A | 22.55 | N/A | 19.35 | N/A | -4.81 | -14.20 | Yes |
| % Claims with PHP Capitation Payment | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |
| % Claims with PCCM Capitation Payment | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |
| Avg Medicaid Paid per HMO Capitation Claim | \$75-\$300 | \$268 | Yes | \$263 | Yes | \$276 | Yes | -2.01 | 4.93 | Yes |
| Avg Medicaid Paid per PHP Capitation Claim | \$20-\$250 | Div by 0 | No | Div by 0 | No | Div by 0 | No | Div by 0 | Div by 0 | N/A |
| Avg Medicaid Paid per PCCM Capitation Claim | 3-5 | Div by 0 | No | Div by 0 | No | Div by 0 | No | Div by 0 | Div by 0 | N/A |
| # of Claims with Missing Medicaid Eligibility and > \$0 Paid (Excludes S-CHIP Only) | N/A | 32,178 | N/A | 36,076 | N/A | 35,679 | N/A | 12.11 | -1.10 | Yes |
| Avg Medicaid Paid for Claims with Missing Medicaid Eligibility and > \$0 Paid (Excludes S-CHIP Only) | N/A | N/A | N/A | \$127 | N/A | \$123 | N/A | N/A | -3.65 | Yes |
| # Claims with > \$200,000 Paid | 0 | N/A | N/A | 0 | Yes | 0 | Yes | N/A | Div by 0 | N/A |
| # Encounter Claims | N/A | N/A | N/A | N/A | N/A | 0 | N/A | N/A | N/A | N/A |
| % Encounter Claims for HMO or PACE | N/A | N/A | N/A | N/A | N/A | Div by 0 | N/A | N/A | N/A | N/A |
| % Encounter Claims for PHP | N/A | N/A | N/A | N/A | N/A | Div by 0 | N/A | N/A | N/A | N/A |
| FFS Non-Crossover Claims (Type of Claim = 1, Crossover Claim Indicator = 0) | | | | | | | | | | |
| Total Number of Claims | N/A | 3,189,276 | N/A | 3,485,313 | N/A | 3,889,900 | N/A | 9.28 | 11.61 | 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 | Div by 0 | Div by 0 | N/A |
| % Claims with Span Bill | N/A | 3.11 | N/A | 1.93 | N/A | 4.73 | N/A | -37.90 | 144.90 | No |
| % Outpatient Claims with Span Bill | N/A | 3.74 | N/A | 3.38 | N/A | 2.88 | N/A | -9.64 | -14.70 | Yes |
| % Home Health Claims with Span Bill | N/A | 0.03 | N/A | 0.02 | N/A | 0.01 | N/A | -23.20 | -35.20 | No |
| % Other Claims with Span Bill | N/A | 3.49 | N/A | 2.17 | N/A | 5.62 | N/A | -37.70 | 158.60 | No |
| % Waiver Claims (PGM TYPE = 6,7) with Span Bill | N/A | N/A | N/A | N/A | N/A | 0.36 | N/A | N/A | N/A | N/A |
| % CLTC Claims (Excluding CLTC Flag = 16-20) with Span Bill | N/A | N/A | N/A | N/A | N/A | 0.20 | N/A | N/A | N/A | N/A |
| % Claims with Servicing Provider ID = Billing Provider ID | N/A | N/A | N/A | N/A | N/A | 66.58 | N/A | N/A | N/A | N/A |
| PLACE OF SERVICE | | | | | | | | | | |
| % Claims with Place of Service | >95 | N/A | Yes | N/A | Yes | 90.13 | No | N/A | N/A | N/A |
| % Claims with Place of Service = Office (PLC OF SVC CD = 11) | 50-90 | 7.17 | No | 6.96 | No | 11.73 | No | -2.93 | 68.60 | No |
| % Claims with Place of Service = Home (PLC OF SVC CD = 12) | >0-5 | 18.33 | No | 22.97 | No | 29.19 | No | 25.28 | 27.07 | No |
| % Claims with Place of Service = Hospital (PLC OF SVC CD = 21) | >0-5 | 6.08 | No | 5.68 | No | 4.95 | Yes | -6.66 | -12.80 | Yes |
| % Claims with Place of Service = Nursing Facility (PLC OF SVC CD = 32) | >0-5 | 0.22 | Yes | 0.19 | Yes | 0.17 | Yes | -17.10 | -8.51 | Yes |
| % Claims with Place of Service = Inpatient Psychiatric (PLC OF SVC CD = 51) | N/A | N/A | N/A | N/A | N/A | 0.00 | N/A | N/A | N/A | N/A |
| % Claims with Place of Service = ICF/MR (PLC OF SVC CD = 54) | N/A | N/A | N/A | N/A | N/A | 0.11 | N/A | N/A | N/A | N/A |
| % Claims with Place of Service = Psychiatric Residential (PLC OF SVC CD = 56) | N/A | N/A | N/A | N/A | N/A | 0.04 | N/A | N/A | N/A | N/A |
| % Claims with Place of Service = Emergency Room (PLC OF SVC CD = 23) | 1-10 | 1.23 | Yes | 1.28 | Yes | 1.30 | Yes | 4.53 | 1.49 | Yes |
| % Claims with Place of Service = Outpatient (PLC OF SVC CD = 22) | >0-10 | 9.76 | Yes | 9.15 | Yes | 8.58 | Yes | -6.27 | -6.18 | Yes |
| % Claims with Place of Service = Unknown/Other (PLC OF SVC CD = 99) | <5 | 11.67 | No | 12.47 | No | 9.87 | No | 6.81 | -20.90 | No |
| THIRD-PARTY LIABILITY | | | | | | | | | | |

2005-2007 MAX OT VALIDATION TABLE
STATE: DC

| Measure | Expected Range | 2005 Value | 2005 Value Within Range | 2006 Value | 2006 Value Within Range | 2007 Value | 2007 Value Within Range | % Change 2005 - 2006 | % Change 2006 - 2007 | Cross Year Change Within Expected Range |
|---|----------------|------------|-------------------------|------------|-------------------------|------------|-------------------------|----------------------|----------------------|---|
| % Claims with TPL | >0 - 15 | 0.00 | Yes | 0.00 | Yes | 0.00 | Yes | -25.70 | -19.00 | No |
| Avg TPL Paid for Claims with TPL | N/A | \$92 | N/A | \$125 | N/A | \$37 | N/A | 35.86 | -70.60 | No |
| PERCENT OF CLAIMS BY MAX TYPE OF SERVICE | | | | | | | | | | |
| Physician Services (MAX TOS = 08) | 10-35 | 9.06 | No | 8.51 | No | 7.70 | No | -6.00 | -9.52 | Yes |
| Dental Services (MAX TOS = 09) | 2-20 | 0.36 | No | 0.39 | No | 1.04 | No | 5.84 | 168.60 | No |
| Other Practitioner Services (MAX TOS = 10) | 0.5-8 | 0.53 | Yes | 0.50 | Yes | 0.48 | No | -4.09 | -3.96 | Yes |
| Outpatient Services (MAX TOS = 11) | 3-25 | 2.88 | No | 2.90 | No | 2.78 | No | 0.74 | -4.08 | Yes |
| Clinic Services (MAX TOS = 12) | 2-25 | 4.87 | Yes | 4.91 | Yes | 4.49 | Yes | 0.70 | -8.51 | Yes |
| Home Health Services (MAX TOS = 13) | >0-25 | 11.18 | Yes | 12.91 | Yes | 14.57 | Yes | 15.48 | 12.91 | Yes |
| Lab/Xray Services (MAX TOS = 15) | 4-20 | 10.04 | Yes | 9.45 | Yes | 8.87 | Yes | -5.89 | -6.09 | Yes |
| Drugs (MAX TOS = 16) | <3 | 0.11 | Yes | 0.10 | Yes | 0.10 | Yes | -10.40 | 6.46 | Yes |
| Other Services (MAX TOS = 19) | <25 | 19.39 | Yes | 22.85 | Yes | 27.03 | No | 17.83 | 18.34 | No |
| Durable Medical Equipment (MAX TOS = 51) | >3 | 4.16 | Yes | 4.07 | Yes | 4.04 | Yes | -2.13 | -0.67 | Yes |
| Transportation Services (MAX TOS = 26) | >1 | 17.45 | Yes | 15.70 | Yes | 12.21 | Yes | -10.00 | -22.20 | No |
| Sterilizations (MAX TOS = 24) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | -83.40 | 258.40 | No |
| Abortions (MAX TOS = 25) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | -100.00 | Div by 0 | N/A |
| Personal Care Services (MAX TOS = 30) | >0 | 0.00 | No | 0.00 | No | 0.00 | No | Div by 0 | Div by 0 | N/A |
| Targeted Case Management (MAX TOS = 31) | >0 | 0.00 | No | 0.00 | No | 0.00 | No | Div by 0 | Div by 0 | N/A |
| Rehabilitation Services (MAX TOS = 33) | >0 | 0.08 | Yes | 0.08 | Yes | 0.06 | Yes | -3.64 | -27.70 | No |
| PT/OT/Hearing/Speech Services (MAX TOS = 34) | >1 | 0.00 | No | 0.00 | No | 0.00 | No | Div by 0 | Div by 0 | N/A |
| Hospice Services (MAX TOS = 35) | >0 | 0.01 | Yes | 0.02 | Yes | 0.02 | Yes | 29.02 | -0.95 | Yes |
| Nurse Midwife Services (MAX TOS = 36) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |
| Nurse Practitioner Services (MAX TOS = 37) | N/A | 0.11 | N/A | 0.06 | N/A | 0.06 | N/A | -46.20 | -3.44 | Yes |
| Private Nursing Services (MAX TOS = 38) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |
| Religious Non-Medical Services (MAX TOS = 39) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |
| Residential Care Services (MAX TOS = 52) | N/A | 0.00 | N/A | 0.00 | N/A | 0.42 | N/A | Div by 0 | Div by 0 | N/A |
| Psychiatric Services (MAX TOS = 53) | >1 | 19.77 | Yes | 17.57 | Yes | 16.10 | Yes | -11.10 | -8.32 | Yes |
| Adult Day Care (MAX TOS = 54) | >0 | 0.00 | No | 0.00 | No | 0.00 | No | Div by 0 | Div by 0 | N/A |
| Unknown Services (MAX TOS = 99) | <1 | 0.00 | Yes | 0.00 | Yes | 0.00 | Yes | Div by 0 | 53.19 | No |
| AVERAGE MEDICAID AMOUNT PAID BY MAX TYPE OF SERVICE (CLAIMS WITH >\$0 PAID) | | | | | | | | | | |
| Total | N/A | \$90 | N/A | \$93 | N/A | \$97 | N/A | 4.10 | 3.57 | Yes |
| Physician Services (MAX TOS = 08) | \$20-90 | \$61 | Yes | \$65 | Yes | \$68 | Yes | 7.59 | 3.88 | Yes |
| Dental Services (MAX TOS = 09) | \$10-60 | \$63 | No | \$76 | No | \$96 | No | 21.35 | 25.85 | No |
| Other Practitioner Services (MAX TOS = 10) | \$10-100 | \$38 | Yes | \$37 | Yes | \$37 | Yes | -0.99 | -0.19 | Yes |
| Outpatient Services (MAX TOS = 11) | \$20-100 | \$129 | No | \$126 | No | \$121 | No | -2.34 | -4.40 | Yes |
| Clinic Services (MAX TOS = 12) | \$20-100 | \$298 | No | \$256 | No | \$236 | No | -14.10 | -7.95 | Yes |
| Home Health Services (MAX TOS = 13) | N/A | \$87 | N/A | \$106 | N/A | \$111 | N/A | 21.69 | 4.21 | Yes |
| Lab/Xray Services (MAX TOS = 15) | 10-60 | \$27 | Yes | \$27 | Yes | \$26 | Yes | -0.53 | -3.86 | Yes |
| Drugs (MAX TOS = 16) | 10-60 | \$44 | Yes | \$44 | Yes | \$52 | Yes | 0.29 | 17.83 | No |
| Other Services (MAX TOS = 19) | N/A | \$111 | N/A | \$116 | N/A | \$117 | N/A | 4.63 | 0.66 | Yes |
| Durable Medical Equipment (MAX TOS = 51) | N/A | \$99 | N/A | \$99 | N/A | \$99 | N/A | 0.23 | -0.45 | Yes |
| Transportation Services (MAX TOS = 26) | N/A | \$47 | N/A | \$45 | N/A | \$38 | N/A | -2.89 | -15.70 | No |
| Personal Care Services (MAX TOS = 30) | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | Div by 0 | N/A |
| Targeted Case Management (MAX TOS = 31) | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | Div by 0 | N/A |
| Rehabilitation Services (MAX TOS = 33) | N/A | \$46 | N/A | \$42 | N/A | \$42 | N/A | -7.17 | -1.42 | Yes |
| PT/OT/Hearing/Speech Services (MAX TOS = 34) | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | Div by 0 | N/A |
| Hospice Services (MAX TOS = 35) | N/A | \$3,124 | N/A | \$3,601 | N/A | \$3,872 | N/A | 15.27 | 7.52 | Yes |

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STATE: DC

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|--|----------------|------------|-------------------------|------------|-------------------------|------------|-------------------------|----------------------|----------------------|---|
| Residential Care Services (MAX TOS = 52) | N/A | Div by 0 | N/A | Div by 0 | N/A | \$357 | N/A | Div by 0 | Div by 0 | N/A |
| Psychiatric Services (MAX TOS = 53) | N/A | \$94 | N/A | \$93 | N/A | \$95 | N/A | -1.30 | 2.11 | Yes |
| Adult Day Care (MAX TOS = 54) | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | Div by 0 | N/A |
| PERCENT OF CLAIMS BY PROGRAM TYPE | | | | | | | | | | |
| Family Planning (PGM TYPE = 2) | N/A | 0.03 | N/A | 0.02 | N/A | 0.02 | N/A | -32.50 | -10.30 | Yes |
| Rural Health Clinic (PGM TYPE = 3) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |
| Federally Qualified Health Center (PGM TYPE = 4) | N/A | 1.28 | N/A | 1.29 | N/A | 1.19 | N/A | 0.80 | -7.88 | Yes |
| Indian Health Services (PGM TYPE = 5) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |
| Home and Community Based Waiver (PGM TYPE = 6,7) | N/A | 7.10 | N/A | 11.74 | N/A | 17.42 | N/A | 65.51 | 48.37 | No |
| AVERAGE EXPENDITURES BY PROGRAM TYPE | | | | | | | | | | |
| Family Planning (PGM TYPE = 2) | N/A | \$86 | N/A | \$103 | N/A | \$103 | N/A | 19.76 | 0.55 | Yes |
| Rural Health Clinic (PGM TYPE = 3) | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | Div by 0 | N/A |
| Federally Qualified Health Center (PGM TYPE = 4) | N/A | \$121 | N/A | \$124 | N/A | \$133 | N/A | 2.70 | 7.54 | Yes |
| Indian Health Services (PGM TYPE = 5) | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | Div by 0 | N/A |
| Home and Community Based Waiver (PGM TYPE = 6,7) | N/A | \$99 | N/A | \$112 | N/A | \$122 | N/A | 13.12 | 9.17 | Yes |
| DIAGNOSIS AND PROCEDURE CODES | | | | | | | | | | |
| % Claims with Primary Diagnosis Code | >60 | 99.62 | Yes | 99.58 | Yes | 98.91 | Yes | -0.04 | -0.68 | Yes |
| % Physician, Outpatient, or Clinic Claims with Primary Diagnosis Code | 85-100 | 100.00 | Yes | 100.00 | Yes | 99.87 | Yes | 0.00 | -0.13 | Yes |
| % Primary Diagnosis Claims with Secondary Diagnosis Code | N/A | 4.54 | N/A | 4.58 | N/A | 4.50 | N/A | 0.96 | -1.91 | Yes |
| % Primary Diagnosis Code Claims with Length = 3 | 5-25 | 14.61 | Yes | 13.49 | Yes | 14.73 | Yes | -7.67 | 9.17 | Yes |
| % Primary Diagnosis Code Claims with Length = 4 | 40-70 | 56.54 | Yes | 58.91 | Yes | 53.36 | Yes | 4.20 | -9.42 | Yes |
| % Primary Diagnosis Code Claims with Length = 5 | 20-55 | 28.85 | Yes | 27.59 | Yes | 31.91 | Yes | -4.35 | 15.63 | No |
| % Claims with Procedure Code | >95 | N/A | Yes | N/A | Yes | 99.15 | Yes | N/A | N/A | N/A |
| % Outpatient Claims with Procedure Code or UB-92 Revenue Code | N/A | 100.00 | N/A | 100.00 | N/A | 100.00 | N/A | 0.00 | 0.00 | Yes |
| % Home Health Claims with Procedure Code or UB-92 Revenue Code | N/A | 100.00 | N/A | 100.00 | N/A | 100.00 | N/A | 0.00 | 0.00 | Yes |
| % Waiver Claims (PGM TYPE = 6,7) with Procedure Code | N/A | N/A | N/A | N/A | N/A | 100.00 | N/A | N/A | N/A | N/A |
| % CLTC Claims (Excluding CLTC Flag = 16-20) with Procedure Code | N/A | N/A | N/A | N/A | N/A | 100.00 | N/A | N/A | N/A | N/A |
| % Other Claims with Procedure Code | 98-100 | 99.39 | Yes | 99.74 | Yes | 99.76 | Yes | 0.34 | 0.03 | Yes |
| % Claims with Procedure Code with CPT-4 Indicator | N/A | 28.06 | N/A | 28.08 | N/A | 27.09 | N/A | 0.08 | -3.53 | Yes |
| % Claims with Procedure Code with HCPCS (II & III) Indicator | N/A | 71.94 | N/A | 71.92 | N/A | 72.91 | N/A | -0.03 | 1.38 | Yes |
| % with Procedure Code with Other National Indicator | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |
| % with Procedure Code with State-Specific Indicator | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | -98.30 | -100.00 | No |
| % CPT-4 Indicator Claims with CPT-4 Format = 5 Digits | 98-100 | 100.00 | Yes | 100.00 | Yes | 100.00 | Yes | 0.00 | 0.00 | Yes |
| % HCPCS (II & III) Indicator Claims with HCPCS Format = Either 1 Character and 4 Digits or 2 Characters and 3 Digits | 98-100 | 100.00 | Yes | 100.00 | Yes | 100.00 | Yes | 0.00 | 0.00 | Yes |
| PHYSICIAN SPECIALTY | | | | | | | | | | |
| % Physician Claims with Physician Specialty | N/A | 100.00 | N/A | 99.97 | N/A | 99.85 | N/A | -0.03 | -0.12 | Yes |
| PERCENT OF CLAIMS BY CLTC CODE | | | | | | | | | | |
| Not a CLTC Claim (CLTC FLAG = 00) | N/A | 65.40 | N/A | 60.31 | N/A | 53.49 | N/A | -7.78 | -11.30 | Yes |
| CLTC Non-Waiver Claims (CLTC FLAG = 11-20) | N/A | 27.51 | N/A | 27.95 | N/A | 29.08 | N/A | 1.597 | 4.07 | Yes |
| CLTC Non-Waiver Personal Care (CLTC FLAG = 11) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |
| CLTC Non-Waiver Private Duty Nurse (CLTC FLAG = 12) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |
| CLTC Non-Waiver Adult Day Care (CLTC FLAG = 13) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |
| CLTC Non-Waiver Home Health (CLTC FLAG = 14) | N/A | 11.18 | N/A | 12.90 | N/A | 14.57 | N/A | 15.40 | 13.00 | Yes |
| CLTC Non-Waiver Residential Care (CLTC FLAG = 15) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |
| CLTC Non-Waiver Rehabilitation (CLTC FLAG = 16) | N/A | 0.05 | N/A | 0.05 | N/A | 0.04 | N/A | 11.51 | -16.50 | No |
| CLTC Non-Waiver Targeted Case Management (CLTC FLAG = 17) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |

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|--|----------------|------------|-------------------------|------------|-------------------------|------------|-------------------------|----------------------|----------------------|---|
| CLTC Non-Waiver Transportation (CLTC FLAG = 18) | N/A | 12.60 | N/A | 11.39 | N/A | 10.75 | N/A | -9.58 | -5.63 | Yes |
| CLTC Non-Waiver Hospice (CLTC FLAG = 19) | N/A | 0.01 | N/A | 0.02 | N/A | 0.02 | N/A | 29.67 | -0.06 | Yes |
| CLTC Non-Waiver Durable Medical Equipment (CLTC FLAG = 20) | N/A | 3.67 | N/A | 3.59 | N/A | 3.70 | N/A | -2.29 | 3.11 | Yes |
| CLTC Waiver Claims (CLTC FLAG = 30-40) | N/A | 7.09 | N/A | 11.74 | N/A | 17.42 | N/A | 65.54 | 48.37 | No |
| CLTC Other Waiver (CLTC FLAG = 30) | N/A | 6.99 | N/A | 11.60 | N/A | 16.85 | N/A | 66.00 | 45.18 | No |
| CLTC Waiver Personal Care (CLTC FLAG = 31) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |
| CLTC Waiver Private Duty Nurse (CLTC FLAG = 32) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |
| CLTC Waiver Adult Day Care (CLTC FLAG = 33) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |
| CLTC Waiver Home Health (CLTC FLAG = 34) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |
| CLTC Waiver Residential Care (CLTC FLAG = 35) | N/A | 0.00 | N/A | 0.00 | N/A | 0.42 | N/A | Div by 0 | Div by 0 | N/A |
| CLTC Waiver Rehabilitation (CLTC FLAG = 36) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |
| CLTC Waiver Targeted Case Management (CLTC FLAG = 37) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |
| CLTC Waiver Transportation (CLTC FLAG = 38) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |
| CLTC Waiver Hospice (CLTC FLAG = 39) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |
| CLTC Waiver Durable Medical Equipment (CLTC FLAG = 40) | N/A | 0.10 | N/A | 0.14 | N/A | 0.15 | N/A | 34.11 | 10.62 | Yes |
| FFS Crossover Claims (Type of Claim = 1, Crossover Claim Indicator = 1) | | | | | | | | | | |
| Total Number of Claims | N/A | 213,180 | N/A | 324,753 | N/A | 455,148 | N/A | 52.34 | 40.15 | No |
| % 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 | Div by 0 | Div by 0 | N/A |
| Avg Medicaid Paid (Claims with > \$0 Paid) | N/A | \$164 | N/A | \$197 | N/A | \$298 | N/A | 20.55 | 50.97 | No |
| % Claims with Span Bill | N/A | 23.67 | N/A | 27.62 | N/A | 43.01 | N/A | 16.68 | 55.69 | No |
| % Outpatient Claims with Span Bill | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | Div by 0 | N/A |
| % Home Health Claims with Span Bill | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | Div by 0 | N/A |
| % Other Claims with Span Bill | N/A | 23.67 | N/A | 27.62 | N/A | 43.01 | N/A | 16.68 | 55.69 | No |
| PERCENT OF CLAIMS BY MAX TYPE OF SERVICE (EXCLUDING 20-22) | | | | | | | | | | |
| Physician Services (MAX TOS = 08) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |
| Other Practitioner Services (MAX TOS = 10) | N/A | 5.35 | N/A | 3.86 | N/A | 2.96 | N/A | -27.80 | -23.30 | No |
| Outpatient Services (MAX TOS = 11) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |
| Clinic Services (MAX TOS = 12) | N/A | 0.82 | N/A | 2.61 | N/A | 2.25 | N/A | 220.60 | -13.70 | Yes |
| Home Health Services (MAX TOS = 13) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |
| Lab/Xray Services (MAX TOS = 15) | N/A | 24.27 | N/A | 25.30 | N/A | 22.01 | N/A | 4.23 | -13.00 | Yes |
| Other Services (MAX TOS = 19) | N/A | 47.92 | N/A | 50.24 | N/A | 55.10 | N/A | 4.84 | 9.67 | Yes |
| Durable Medical Equipment (MAX TOS = 51) | N/A | 19.58 | N/A | 15.47 | N/A | 15.55 | N/A | -21.00 | 0.49 | Yes |
| Transportation Services (MAX TOS = 26) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |
| Personal Care Services (MAX TOS = 30) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |
| Targeted Case Management (MAX TOS = 31) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |
| Rehabilitation Services (MAX TOS = 33) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |
| PT/OT/Hearing/Speech Services (MAX TOS = 34) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |
| Hospice Services (MAX TOS = 35) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |
| Residential Care Services (MAX TOS = 52) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |
| Psychiatric Services (MAX TOS = 53) | N/A | 2.03 | N/A | 2.36 | N/A | 2.03 | N/A | 16.25 | -14.10 | Yes |
| Adult Day Care (MAX TOS = 54) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |

2005-2007 MAX RX VALIDATION TABLE
STATE: DC

| Measure | Expected Range | 2005 Value | 2005 Value Within Range | 2006 Value | 2006 Value Within Range | 2007 Value | 2007 Value Within Range | % Change 2005 - 2006 | % Change 2006 - 2007 | Cross Year Change Within Expected Range |
|--|----------------|------------|-------------------------|------------|-------------------------|------------|-------------------------|----------------------|----------------------|---|
| All RX Claims | | | | | | | | | | |
| Total Number of Claims | N/A | 1,366,571 | N/A | 780,761 | N/A | 753,473 | N/A | -42.90 | -3.50 | Yes |
| % Encounter Claims | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |
| % Supplemental Claims | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |
| Total FFS Claims | N/A | 1,366,571 | N/A | 780,761 | N/A | 753,473 | N/A | -42.90 | -3.50 | Yes |
| % Adjusted Claims | N/A | 0.43 | N/A | 0.48 | N/A | 0.27 | N/A | 10.66 | -44.30 | No |
| % Standard Adjustments | >1% | 99.90 | Yes | 100.00 | Yes | 100.00 | Yes | 0.10 | 0.00 | Yes |
| Avg Medicaid Paid, Adjusted Claims (Include \$0) | N/A | \$151 | N/A | \$121 | N/A | \$151 | N/A | -19.60 | 24.44 | No |
| # of Claims with Missing Medicaid Eligibility and > \$0 Paid (Excludes S-CHIP Only) | N/A | 7,769 | N/A | 7,802 | N/A | 6,965 | N/A | .4248 | -10.70 | Yes |
| Avg Medicaid Paid for Claims with Missing Medicaid Eligibility and > \$0 Paid (Excludes S-CHIP Only) | N/A | N/A | N/A | \$118 | N/A | \$127 | N/A | N/A | 7.13 | Yes |
| # Claims with > \$200,000 Paid | 0 | N/A | N/A | 0 | Yes | 0 | Yes | N/A | Div by 0 | N/A |
| % Section 1915(c) Waiver Claims (PGM TYPE = 6, 7) | N/A | N/A | N/A | N/A | N/A | 0.00 | N/A | N/A | N/A | N/A |
| Total Medicaid Paid among Section 1915(c) Waiver Claims (PGM TYPE = 6, 7) | N/A | N/A | N/A | N/A | N/A | \$0 | N/A | N/A | N/A | N/A |
| FFS Claims (Type of Claim = 1) | | | | | | | | | | |
| Total Number of Claims | N/A | 1,366,571 | N/A | 780,761 | N/A | 753,473 | N/A | -42.90 | -3.50 | Yes |
| % Claims with > \$0 Paid | 95-100 | 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 | Div by 0 | Div by 0 | N/A |
| Avg Medicaid Paid (Claims with > \$0 Paid) | \$15-\$60 | \$82 | No | \$92 | No | \$98 | No | 12.64 | 6.39 | Yes |
| % Claims with TPL | >0-15 | 2.24 | Yes | 1.41 | Yes | 1.26 | Yes | -36.90 | -11.00 | Yes |
| Avg TPL Paid for Claims with TPL | N/A | \$11 | N/A | \$19 | N/A | \$20 | N/A | 75.53 | 3.46 | Yes |
| % Family Planning Claims (PGM TYPE = 2) | N/A | 0.03 | N/A | 0.02 | N/A | 0.01 | N/A | -9.06 | -43.20 | No |
| % Drug Claims (MAX TOS = 16) | 95-99 | 100.00 | No | 100.00 | No | 100.00 | No | 0.00 | 0.00 | Yes |
| % Durable Medical Equipment Claims (MAX TOS = 51) | >0 - 6 | 0.00 | No | 0.00 | No | 0.00 | No | Div by 0 | Div by 0 | N/A |
| % Drug Claims with Prescribing Physician | N/A | N/A | N/A | N/A | N/A | 99.88 | N/A | N/A | N/A | N/A |
| % Drug Claims with Date Prescribed | >98 | N/A | Yes | N/A | Yes | 100.00 | Yes | N/A | N/A | N/A |
| % Drug Claims with Quantity | >98 | 99.99 | Yes | 99.97 | Yes | 99.98 | Yes | -0.02 | 0.01 | Yes |
| % Drug Claims with Days Supply | >98 | 100.00 | Yes | 100.00 | Yes | 100.00 | Yes | 0.00 | 0.00 | Yes |
| DRUG CLASSIFICATION | | | | | | | | | | |
| % Claims with Medispan | 98-100 | 99.82 | Yes | 99.70 | Yes | 99.78 | Yes | -0.12 | 0.08 | Yes |
| % Claims with Generic Therapeutic Class | 98-100 | 99.94 | Yes | 99.95 | Yes | 99.95 | Yes | 0.01 | -0.01 | Yes |
| % Claims with Specific Therapeutic Class | 98-100 | 99.94 | Yes | 99.95 | Yes | 99.95 | Yes | 0.01 | -0.01 | Yes |
| NDC CONFIGURATION INDICATOR | | | | | | | | | | |
| % Prescription (NDC FMT IND = 0-3) | N/A | 74.76 | N/A | 73.11 | N/A | 71.81 | N/A | -2.20 | -1.78 | Yes |
| % Products (NDC FMT IND = 4-6) | N/A | 25.13 | N/A | 26.78 | N/A | 28.09 | N/A | 6.60 | 4.90 | Yes |
| % Health Related Item (NDC FMT IND = 7) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |
| % Claims with Clinical Formulation Identifier | N/A | N/A | N/A | N/A | N/A | 99.95 | N/A | N/A | N/A | N/A |
| % Claims with Ingredient List Identifier | N/A | N/A | N/A | N/A | N/A | 99.95 | N/A | N/A | N/A | N/A |
| % Claims with Hierarchical Specific Therapeutic Class Code Sequence Number | N/A | N/A | N/A | N/A | N/A | 99.95 | N/A | N/A | N/A | N/A |

2005-2007 MAX PSF VALIDATION TABLE
STATE: DC

| Measure | Expected Range | 2005 Value | 2005 Value Within Range | 2006 Value | 2006 Value Within Range | 2007 Value | 2007 Value Within Range | % Change 2005 - 2006 | % Change 2006 - 2007 | Cross Year Expected Range | Cross Year Within Range |
|---|----------------|-----------------|-------------------------|-----------------|-------------------------|-----------------|-------------------------|----------------------|----------------------|---------------------------|-------------------------|
| All Records | | | | | | | | | | | |
| Total Number of Records | N/A | 167,845 | N/A | 169,814 | N/A | 171,417 | N/A | 1.17 | 0.94 | 10% (+/-) | Yes |
| Total Medicaid Paid | N/A | \$1,245,454,907 | N/A | \$1,282,662,637 | N/A | \$1,429,296,738 | N/A | 2.99 | 11.43 | 15% (+/-) | Yes |
| % with No Services (RCPNT IND = 0) | N/A | 7.21 | N/A | 6.99 | N/A | 4.78 | N/A | -3.12 | -31.50 | N/A | N/A |
| % with FFS Only Claims (RCPNT IND = 1) | N/A | 25.81 | N/A | 25.69 | N/A | 29.37 | N/A | -0.48 | 14.36 | N/A | N/A |
| % with Only Capitation Claims (RCPNT IND = 2) | N/A | 57.23 | N/A | 58.54 | N/A | 56.10 | N/A | 2.28 | -4.16 | N/A | N/A |
| % with Only Encounter Claims (RCPNT IND = 3) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A | N/A |
| % with FFS and Capitation Claims (RCPNT IND = 4) | N/A | 9.75 | N/A | 8.79 | N/A | 9.74 | N/A | -9.81 | 10.74 | N/A | N/A |
| % with Capitation and Encounter Claims Only (RCPNT IND = 5) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A | N/A |
| % with FFS and Encounter Claims Only (RCPNT IND = 6) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A | N/A |
| % with FFS, Capitation, and Encounter Claims (RCPNT IND = 7) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A | N/A |
| # with Claims and Missing Medicaid Eligibility (Excludes S-CHIP Only) | N/A | 1,331 | N/A | 2,640 | N/A | 1,805 | N/A | 98.35 | -31.60 | N/A | N/A |
| % with Claims and Missing Medicaid Eligibility (Excludes S-CHIP Only) | <2% | 0.79 | Yes | 1.55 | Yes | 1.05 | Yes | 96.05 | -32.30 | N/A | N/A |
| Total Medicaid Paid for People Missing Medicaid Eligibility (Excludes S-CHIP Only Enrollees) | N/A | \$6,947,491 | N/A | \$6,889,791 | N/A | \$6,896,122 | N/A | -0.83 | 0.09 | N/A | N/A |
| Avg Medicaid Paid for People Missing Medicaid Eligibility (Excludes S-CHIP Only Enrollees) | N/A | N/A | N/A | \$2,610 | N/A | \$3,821 | N/A | N/A | 46.39 | N/A | N/A |
| # with FFS Claims and Missing Medicaid Eligibility (Excludes S-CHIP Only) | N/A | 1,274 | N/A | 1,209 | N/A | 1,686 | N/A | -5.10 | 39.45 | N/A | N/A |
| % with FFS Claims and Missing Medicaid Eligibility (Excludes S-CHIP Only) | N/A | 0.76 | N/A | 0.71 | N/A | 0.98 | N/A | -6.20 | 38.15 | N/A | N/A |
| Total Medicaid Paid for People with FFS Claims and Missing Medicaid Eligibility (Excludes S-CHIP Only) | N/A | \$6,676,429 | N/A | \$6,215,618 | N/A | \$6,177,260 | N/A | -6.90 | -0.62 | N/A | N/A |
| Avg Medicaid Paid for People with FFS Claims and Missing Medicaid Eligibility (Excludes S-CHIP Only) | N/A | N/A | N/A | \$5,141 | N/A | \$3,664 | N/A | N/A | -28.70 | N/A | N/A |
| S-CHIP ENROLLMENT | | | | | | | | | | | |
| # with ONLY S-CHIP Enrollment | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | N/A | N/A |
| % with ONLY S-CHIP Enrollment | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A | N/A |
| # with ANY S-CHIP Enrollment | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | N/A | N/A |
| % with ANY S-CHIP Enrollment | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A | N/A |
| Total Person-Years of Enrollment with ANY S-CHIP Enrollment | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | N/A | N/A |
| Total Medicaid Enrollees (excludes people with missing Medicaid eligibility information or S-CHIP only) | | | | | | | | | | | |
| Total Medicaid Enrollees | N/A | 166,514 | N/A | 167,174 | N/A | 169,612 | N/A | 0.40 | 1.46 | 10% (+/-) | Yes |
| Total Medicaid Person-Years of Enrollment | N/A | 142,871 | N/A | 143,797 | N/A | 144,269 | N/A | 0.65 | 0.33 | 10% (+/-) | Yes |
| # with Any M-CHIP Enrollment | N/A | 6,921 | N/A | 6,445 | N/A | 7,597 | N/A | -6.88 | 17.87 | N/A | N/A |
| Total Person-Years of Enrollment Any M-CHIP | N/A | 4,458 | N/A | 4,444 | N/A | 4,647 | N/A | -0.32 | 4.56 | N/A | N/A |
| Demographic Characteristics | | | | | | | | | | | |
| % Records with Valid SSN Format | >=95% | 97.34 | Yes | 96.67 | Yes | 95.67 | Yes | -0.69 | -1.03 | 10% (+/-) | Yes |
| % Records Whose MSIS SSN Passed High Group Test (HGT FLAG = 1) | >95% | 97.24 | No | 96.38 | No | 95.65 | No | -0.88 | -0.76 | 10% (+/-) | Yes |
| % Records Whose MSIS SSN Failed High Group Test Due to Invalid AAA (HGT FLAG = 2) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A | N/A |
| % Records Whose MSIS SSN Failed High Group Test Due to GG = 00 (HGT FLAG = 3) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A | N/A |
| % Records Whose MSIS SSN Failed High Group Test Due to SSSS = 0000 (HGT FLAG = 4) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A | N/A |
| % Records Whose MSIS SSN Failed High Group Test Due to GG Not Yet Issued (HGT FLAG = 5) | N/A | 0.09 | N/A | 0.28 | N/A | 0.02 | N/A | 204.60 | -93.10 | N/A | N/A |
| % Records Whose MSIS SSN Failed High Group Test Due to Railroad Retirement Number with Invalid DOB (HGT FLAG = 6) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A | N/A |
| # Records Without Valid SSN | N/A | N/A | N/A | N/A | N/A | 7,375 | N/A | N/A | N/A | N/A | N/A |
| % Records Without Valid SSN | <5% | N/A | No | N/A | No | 4.35 | Yes | N/A | N/A | N/A | N/A |
| % for Children Under Age 21 | N/A | N/A | N/A | N/A | N/A | 80.35 | N/A | N/A | N/A | N/A | N/A |

2005-2007 MAX PSF VALIDATION TABLE
STATE: DC

| Measure | Expected Range | 2005 Value | 2005 Value Within Range | 2006 Value | 2006 Value Within Range | 2007 Value | 2007 Value Within Range | % Change 2005 - 2006 | % Change 2006 - 2007 | Cross Year Expected Range | Cross Year Within Range |
|---|----------------|------------|-------------------------|------------|-------------------------|------------|-------------------------|----------------------|----------------------|---------------------------|-------------------------|
| % for Infants Under Age 1 | N/A | N/A | N/A | N/A | N/A | 36.64 | N/A | N/A | N/A | N/A | N/A |
| % Ever Aliens Eligible for Only Emergency Services | N/A | N/A | N/A | N/A | N/A | 18.40 | N/A | N/A | N/A | N/A | N/A |
| # SSNs with More Than One MSIS ID | 0 | 75 | No | 91 | No | 79 | No | 21.33 | -13.20 | N/A | N/A |
| % Records with Duplicated SSNs | <10% | N/A | No | N/A | No | 0.09 | Yes | N/A | N/A | N/A | N/A |
| % for Children Under Age 21 | N/A | N/A | N/A | N/A | N/A | 67.92 | N/A | N/A | N/A | N/A | N/A |
| % for Infants Under Age 1 | N/A | N/A | N/A | N/A | N/A | 5.66 | N/A | N/A | N/A | N/A | N/A |
| % Ever Aliens Eligible for Only Emergency Services | N/A | N/A | N/A | N/A | N/A | 0.63 | N/A | N/A | N/A | N/A | N/A |
| % with External SSN from EDB (EXT SSN SRCE = 1) | N/A | 14.32 | N/A | 14.74 | N/A | 14.63 | N/A | 2.92 | -0.74 | 10% (+/-) | Yes |
| % with External SSN from State-Provided Cross-Reference File (EXT SSN SRCE = 2) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | 10% (+/-) | N/A |
| % with County Code | >=98% | 99.76 | Yes | 99.75 | Yes | 99.70 | Yes | 0.00 | -0.05 | 10% (+/-) | Yes |
| % with Valid 5 Digit Zip Code Format | >=95% | 100.00 | Yes | 100.00 | Yes | 100.00 | Yes | 0.00 | 0.00 | 10% (+/-) | Yes |
| % White | N/A | 1.65 | N/A | 1.66 | N/A | 1.66 | N/A | .4032 | 0.27 | 10% (+/-) | Yes |
| % Black | N/A | 86.51 | N/A | 86.03 | N/A | 85.65 | N/A | -.548 | -0.45 | 10% (+/-) | Yes |
| % Native American/Alaskan Native | N/A | 0.03 | N/A | 0.03 | N/A | 0.04 | N/A | 8.660 | 33.47 | 10% (+/-) | No |
| % Asian | N/A | 0.87 | N/A | 0.86 | N/A | 0.84 | N/A | -1.22 | -2.26 | N/A | N/A |
| % Native Hawaiian or Other Pacific Islander | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A | N/A |
| % More Than One Race | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A | N/A |
| % Unknown Race | <5% | 10.95 | No | 11.43 | No | 11.82 | No | 4.347 | 3.43 | 10% (+/-) | Yes |
| % Hispanic/Latino (Included with Race Categories Prior to 2005) | N/A | 8.38 | N/A | 8.85 | N/A | 9.16 | N/A | 5.519 | 3.53 | 10% (+/-) | Yes |
| % of Hispanic/Latino with Unknown Race | N/A | 100.00 | N/A | 100.00 | N/A | 100.00 | N/A | .0000 | 0.00 | 10% (+/-) | Yes |
| % Age 0 | 2-8% | 3.17 | Yes | 3.43 | Yes | 3.54 | Yes | 8.38 | 3.15 | 10% (+/-) | Yes |
| % Age 0-20 Years | 49-74% | 53.04 | Yes | 52.80 | Yes | 52.32 | Yes | -0.45 | -0.92 | 10% (+/-) | Yes |
| % Age > 64 Years | 5-18% | 8.65 | Yes | 8.75 | Yes | 8.71 | Yes | 1.20 | -0.48 | 10% (+/-) | Yes |
| % with Century of Birth '18' , '19', '20' | N/A | 99.98 | N/A | 99.99 | N/A | 100.00 | N/A | 0.01 | 0.00 | N/A | N/A |
| % with Gender Code 'M' or 'F' | N/A | 100.00 | N/A | 100.00 | N/A | 100.00 | N/A | 0.00 | 0.00 | N/A | N/A |
| % Enrollees with 12 Months Enrollment | 40-70% | 70.68 | No | 71.28 | No | 68.67 | Yes | 0.84 | -3.65 | 10% (+/-) | Yes |
| % Aged Enrollees with 12 Months Enrollment | N/A | N/A | N/A | N/A | N/A | 72.54 | N/A | N/A | N/A | N/A | N/A |
| % Disabled Enrollees with 12 Months Enrollment | N/A | N/A | N/A | N/A | N/A | 73.26 | N/A | N/A | N/A | N/A | N/A |
| % Child Enrollees with 12 Months Enrollment | N/A | N/A | N/A | N/A | N/A | 69.38 | N/A | N/A | N/A | N/A | N/A |
| % Adult Enrollees with 12 Months Enrollment | N/A | N/A | N/A | N/A | N/A | 61.91 | N/A | N/A | N/A | N/A | N/A |
| % Enrollees with MSIS Date of Death During Year | N/A | N/A | N/A | N/A | N/A | 0.95 | N/A | N/A | N/A | N/A | N/A |
| % Enrollees with SSA Date of Death During Year | N/A | N/A | N/A | N/A | N/A | 1.19 | N/A | N/A | N/A | N/A | N/A |
| % Enrollees with MSIS, SSA, or EDB Date of Death During Year | N/A | N/A | N/A | N/A | N/A | 1.37 | N/A | N/A | N/A | N/A | N/A |
| # with MSIS Date of Death ≠ SSA Date of Death | N/A | N/A | N/A | N/A | N/A | 1,376 | N/A | N/A | N/A | N/A | N/A |
| # with MSIS Date of Death Prior to 2007 | 0 | N/A | No | N/A | No | 52 | No | N/A | N/A | N/A | N/A |
| # with SSA Date of Death Prior to 2007 | 0 | N/A | No | N/A | No | 235 | No | N/A | N/A | N/A | N/A |
| EDB Dual Eligibles | | | | | | | | | | | |
| Total EDB Duals (Duals Confirmed by EDB) | N/A | 20,260 | N/A | 21,291 | N/A | 21,829 | N/A | 5.09 | 2.53 | 10% (+/-) | Yes |
| Total EDB Dual Person-Years of Enrollment | N/A | 17,905 | N/A | 18,927 | N/A | 19,374 | N/A | 5.71 | 2.36 | 15% (+/-) | Yes |
| % Age > 64 Years Who Are EDB Duals | >=90% | 87.43 | No | 88.42 | No | 88.53 | No | 1.13 | 0.13 | 10% (+/-) | Yes |
| % Aged Groups (MAX ELIG CD = 11,21,31,41,51) Who Are EDB Duals | >=90% | 88.41 | No | 89.50 | No | 90.14 | Yes | 1.22 | 0.72 | 10% (+/-) | Yes |
| % Disabled Groups (MAX ELIG CD = 12,22,32,3A,42,52) Who Are EDB Duals | 30-55% | 30.09 | Yes | 31.26 | Yes | 29.42 | No | 3.89 | -5.90 | 10% (+/-) | Yes |
| % EDB Only (EDB DUAL = 50) | <5% | 1.13 | Yes | 1.55 | Yes | 2.00 | Yes | 38.15 | 28.77 | N/A | N/A |
| % EDB QMB Only (EDB DUAL = 51) | N/A | 6.73 | N/A | 11.60 | N/A | 13.61 | N/A | 72.44 | 17.36 | N/A | N/A |
| % EDB QMB Plus (EDB DUAL = 52) | N/A | 86.94 | N/A | 86.71 | N/A | 84.37 | N/A | -0.26 | -2.70 | N/A | N/A |
| % EDB SLMB Only (EDB DUAL = 53) | N/A | 0.69 | N/A | 0.07 | N/A | 0.01 | N/A | -89.70 | -80.50 | N/A | N/A |
| % EDB SLMB Plus (EDB DUAL = 54) | N/A | 1.04 | N/A | 0.01 | N/A | 0.00 | N/A | -99.10 | -100.00 | N/A | N/A |

2005-2007 MAX PSF VALIDATION TABLE
STATE: DC

| Measure | Expected Range | 2005 Value | 2005 Value Within Range | 2006 Value | 2006 Value Within Range | 2007 Value | 2007 Value Within Range | % Change 2005 - 2006 | % Change 2006 - 2007 | Cross Year Expected Range | Cross Year Within Range |
|--|----------------|------------|-------------------------|------------|-------------------------|------------|-------------------------|----------------------|----------------------|---------------------------|-------------------------|
| % EDB QDWI (EDB DUAL = 55) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A | N/A |
| % EDB QI-1 (EDB DUAL = 56) | N/A | 0.29 | N/A | 0.05 | N/A | 0.00 | N/A | -82.30 | -100.00 | N/A | N/A |
| % EDB QI-2 (EDB DUAL = 57) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | -100.00 | Div by 0 | N/A | N/A |
| % EDB Other (EDB DUAL = 58) | N/A | 3.19 | N/A | 0.00 | N/A | 0.00 | N/A | -100.00 | Div by 0 | N/A | N/A |
| % EDB Dual Type Unknown (EDB DUAL = 59) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A | N/A |
| % EDB Dual Status Unknown (EDB DUAL = 98) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A | N/A |
| % EDB Duals with Full Benefits (EDB DUAL = 50,52,54,58) | N/A | N/A | N/A | N/A | N/A | 86.37 | N/A | N/A | N/A | N/A | N/A |
| % EDB Duals with Restricted Benefits (EDB DUAL = 51,53,55,56,57) | N/A | N/A | N/A | N/A | N/A | 13.63 | N/A | N/A | N/A | N/A | N/A |
| Total Non-EDB Duals (Duals Reported in MSIS, Not Found in EDB) | N/A | 819 | N/A | 739 | N/A | 640 | N/A | -9.77 | -13.40 | 10% (+/-) | No |
| % Non-EDB Duals Without Valid SSN | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | 10% (+/-) | N/A |
| % Non-EDB Duals Who Are Children/Adults | N/A | 9.04 | N/A | 6.63 | N/A | 5.00 | N/A | -26.60 | -24.60 | 10% (+/-) | No |
| % EDB Duals with Spanish Language | N/A | 1.07 | N/A | 1.29 | N/A | 1.37 | N/A | 20.59 | 5.69 | 15% (+/-) | Yes |
| % EDB Duals with EDB Date of Death During Year | 6-10% | 6.92 | Yes | 6.58 | Yes | 6.46 | Yes | -4.77 | -1.84 | 15% (+/-) | Yes |
| % EDB Duals with MSIS Date of Death During Year | 6-10% | N/A | No | N/A | No | 4.42 | No | N/A | N/A | 15% (+/-) | No |
| % EDB Duals with SSA Date of Death During Year | 6-10% | N/A | No | N/A | No | 5.64 | No | N/A | N/A | 15% (+/-) | No |
| % EDB Duals with EDB, MSIS, or SSA Date of Death During Year | 6-10% | N/A | No | N/A | No | 6.49 | Yes | N/A | N/A | 15% (+/-) | No |
| # EDB Duals with EDB Date of Death ≠ MSIS Date of Death | N/A | N/A | N/A | N/A | N/A | 744 | N/A | N/A | N/A | 10% (+/-) | No |
| # EDB Duals with EDB Date of Death ≠ SSA Date of Death | N/A | N/A | N/A | N/A | N/A | 245 | N/A | N/A | N/A | 10% (+/-) | No |
| % EDB Duals with Medicaid Reported HIC | N/A | 99.46 | N/A | 99.48 | N/A | 99.21 | N/A | 0.02 | -0.27 | 15% (+/-) | Yes |
| % EDB Duals with Medicaid Reported HIC = Medicare HIC | N/A | 97.47 | N/A | 97.63 | N/A | 97.63 | N/A | 0.17 | -0.01 | 15% (+/-) | Yes |
| Total EDB Dual Enrollees in June | N/A | 18,949 | N/A | 19,987 | N/A | 20,598 | N/A | 5.48 | 3.06 | 10% (+/-) | Yes |
| JUNE MEDICARE ELIGIBILITY GROUP | | | | | | | | | | | |
| June % with Part A Medicare only | N/A | 3.39 | N/A | 4.08 | N/A | 4.38 | N/A | 20.17 | 7.51 | 15% (+/-) | Yes |
| June % with Part B Medicare only | N/A | 3.32 | N/A | 4.46 | N/A | 4.39 | N/A | 34.30 | -1.55 | 15% (+/-) | Yes |
| June % Part A/B Medicare | N/A | 93.29 | N/A | 91.46 | N/A | 91.23 | N/A | -1.95 | -0.26 | 15% (+/-) | Yes |
| ORIGINAL REASON FOR MEDICARE ENTITLEMENT | | | | | | | | | | | |
| % Aged (MDCR ORIG REAS CD = 0) | N/A | 51.15 | N/A | 50.04 | N/A | 49.02 | N/A | -2.18 | -2.03 | 15% (+/-) | Yes |
| % Disabled (MDCR ORIG REAS CD = 1) | N/A | 45.44 | N/A | 46.69 | N/A | 47.86 | N/A | 2.75 | 2.52 | 15% (+/-) | Yes |
| % End Stage Renal Disease (MDCR ORIG REAS CD = 2) | N/A | 1.69 | N/A | 1.56 | N/A | 1.48 | N/A | -7.62 | -4.81 | 15% (+/-) | Yes |
| % Disabled with End Stage Renal Disease (MDCR ORIG REAS CD = 3) | N/A | 1.72 | N/A | 1.72 | N/A | 1.63 | N/A | -0.21 | -5.13 | 15% (+/-) | Yes |
| Other Eligibility Characteristics (All Enrollees) | | | | | | | | | | | |
| % Aged Groups (MAX ELIG CD = 11,21,31,41,51) Who Are > 64 Years | >=99% | 99.39 | Yes | 99.28 | Yes | 99.31 | Yes | -0.11 | 0.04 | 10% (+/-) | Yes |
| % Disabled Groups (MAX ELIG CD = 12,22,32,3A,42,52) Who Are > 64 Years | N/A | 11.90 | N/A | 12.05 | N/A | 8.99 | N/A | 1.32 | -25.40 | 10% (+/-) | No |
| % Child Groups (MAX ELIG CD = 14,16, 24, 34, 44, 48, 54) Who Are < 21 Years | >=98% | 99.69 | Yes | 99.57 | Yes | 99.46 | Yes | -0.12 | -0.11 | 10% (+/-) | Yes |
| % Adult Groups (MAX ELIG CD = 15,17,25,35,45,55) Who Are > 20 Years | >=80% | 95.19 | Yes | 95.24 | Yes | 95.01 | Yes | 0.05 | -0.24 | 10% (+/-) | Yes |
| % MAX 1115 Expansion Enrollees (MAX ELIG CD = 51,52,54,55) with 1115 Waiver Enrollment (WVR TYPE = 1,5,6,A,F) | 100% | 100.00 | Yes | 100.00 | Yes | 100.00 | Yes | 0.00 | 0.00 | 25% (+/-) | Yes |
| JUNE % MAX 1115 Expansion Group (MAX ELIG CD = 51,52,54,55) with 1115 Waiver Enrollment (WVR TYPE = 1,5,6,A,F) | 100% | N/A | Yes | N/A | Yes | 100.00 | Yes | N/A | N/A | 25% (+/-) | No |
| % MAX 1115 Waiver Enrollees (WVR TYPE = 1,5,6,A,F) in MAX 1115 Expansion Group (MAX ELIG CD = 51,52,54,55) | N/A | 91.08 | N/A | 85.14 | N/A | 91.18 | N/A | -6.52 | 7.09 | 25% (+/-) | Yes |
| Aged Total | N/A | 10,116 | N/A | 10,111 | N/A | 11,229 | N/A | -0.05 | 11.06 | 10% (+/-) | No |
| Aged, Cash (MAX ELIG CD = 11) | N/A | 2,642 | N/A | 2,541 | N/A | 2,418 | N/A | -3.82 | -4.84 | 10% (+/-) | Yes |
| Aged, Medically Needy (MAX ELIG CD = 21) | N/A | 2,980 | N/A | 2,656 | N/A | 2,285 | N/A | -10.90 | -14.00 | 10% (+/-) | No |
| Aged, Poverty (MAX ELIG CD = 31) | N/A | 3,246 | N/A | 3,627 | N/A | 3,742 | N/A | 11.74 | 3.17 | 10% (+/-) | Yes |
| Other Aged (MAX ELIG CD = 41) | N/A | 1,207 | N/A | 1,282 | N/A | 2,784 | N/A | 6.21 | 117.20 | 10% (+/-) | No |
| 1115 Aged (MAX ELIG CD = 51) | N/A | 41 | N/A | 5 | N/A | 0 | N/A | -87.80 | -100.00 | 10% (+/-) | No |

2005-2007 MAX PSF VALIDATION TABLE
STATE: DC

| Measure | Expected Range | 2005 Value | 2005 Value Within Range | 2006 Value | 2006 Value Within Range | 2007 Value | 2007 Value Within Range | % Change 2005 - 2006 | % Change 2006 - 2007 | Cross Year Expected Range | Cross Year Within Range |
|---|----------------|------------|-------------------------|------------|-------------------------|------------|-------------------------|----------------------|----------------------|---------------------------|-------------------------|
| Disabled Total | N/A | 34,150 | N/A | 35,596 | N/A | 37,543 | N/A | 4.23 | 5.47 | 10% (+/-) | Yes |
| Disabled, Cash (MAX ELIG CD = 12) | N/A | 24,002 | N/A | 24,927 | N/A | 23,536 | N/A | 3.85 | -5.58 | 10% (+/-) | Yes |
| Disabled, Medically Needy (MAX ELIG CD = 22) | N/A | 6,271 | N/A | 6,366 | N/A | 7,067 | N/A | 1.52 | 11.01 | 10% (+/-) | No |
| Disabled, Poverty (MAX ELIG CD = 32, 3A) | N/A | 3,346 | N/A | 3,766 | N/A | 4,121 | N/A | 12.55 | 9.43 | 10% (+/-) | Yes |
| Other Disabled (MAX ELIG CD = 42) | N/A | 466 | N/A | 531 | N/A | 2,819 | N/A | 13.95 | 430.90 | 10% (+/-) | No |
| 1115 Disabled (MAX ELIG CD = 52) | N/A | 65 | N/A | 6 | N/A | 0 | N/A | -90.80 | -100.00 | 10% (+/-) | No |
| Child Total | N/A | 80,409 | N/A | 80,275 | N/A | 80,638 | N/A | -0.17 | 0.45 | 10% (+/-) | Yes |
| AFDC Child, Cash (MAX ELIG CD = 14) | N/A | 33,421 | N/A | 32,798 | N/A | 30,187 | N/A | -1.86 | -7.96 | 10% (+/-) | Yes |
| AFDC-U Child, Cash (MAX ELIG CD = 16) | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | 10% (+/-) | N/A |
| AFDC Child, Medically Needy (MAX ELIG CD = 24) | N/A | 18,149 | N/A | 19,297 | N/A | 21,571 | N/A | 6.33 | 11.78 | 10% (+/-) | No |
| Child Poverty (MAX ELIG CD = 34) | N/A | 22,686 | N/A | 22,704 | N/A | 24,105 | N/A | 0.08 | 6.17 | 10% (+/-) | Yes |
| Other Child (MAX ELIG CD = 44) | N/A | 1,358 | N/A | 1,150 | N/A | 651 | N/A | -15.30 | -43.40 | 10% (+/-) | No |
| Foster Care Child (MAX ELIG CD = 48) | N/A | 4,609 | N/A | 4,283 | N/A | 4,124 | N/A | -7.07 | -3.71 | 10% (+/-) | Yes |
| 1115 Child (MAX ELIG CD = 54) | N/A | 186 | N/A | 43 | N/A | 0 | N/A | -76.90 | -100.00 | 10% (+/-) | No |
| Adult Total | N/A | 41,839 | N/A | 41,192 | N/A | 40,202 | N/A | -1.55 | -2.40 | 10% (+/-) | Yes |
| AFDC Adult, Cash (MAX ELIG CD = 15) | N/A | 24,242 | N/A | 23,403 | N/A | 21,722 | N/A | -3.46 | -7.18 | 10% (+/-) | Yes |
| AFDC-U Adult, Cash (MAX ELIG CD = 17) | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | 10% (+/-) | N/A |
| AFDC Adult, Medically Needy (MAX ELIG CD = 25) | N/A | 12,531 | N/A | 13,215 | N/A | 12,947 | N/A | 5.46 | -2.03 | 10% (+/-) | Yes |
| Adult, Poverty (MAX ELIG CD = 35) | N/A | 621 | N/A | 522 | N/A | 594 | N/A | -15.90 | 13.79 | 10% (+/-) | No |
| Other Adult (MAX ELIG CD = 45) | N/A | 2,480 | N/A | 2,622 | N/A | 2,728 | N/A | 5.73 | 4.04 | 10% (+/-) | Yes |
| 1115 Adult (MAX ELIG CD = 55) | N/A | 1,965 | N/A | 1,430 | N/A | 2,211 | N/A | -27.20 | 54.62 | 10% (+/-) | No |
| Long-Term Care Enrollees | | | | | | | | | | | |
| INSTITUTIONAL STATUS | | | | | | | | | | | |
| # Enrollees with Any ILTC Claims (Includes NF, ICF/MR, Aged Mental Hospital, IP Psych Age < 21 years, MAX TOS = 02, 04, 05, 07) | N/A | 5,259 | N/A | 4,892 | N/A | 4,452 | N/A | -6.98 | -8.99 | 15% (+/-) | Yes |
| % Enrollees with Any ILTC Claims | N/A | 3.16 | N/A | 2.93 | N/A | 2.62 | N/A | -7.35 | -10.30 | 15% (+/-) | Yes |
| % Aged Enrollees with Any ILTC Claims | N/A | 29.02 | N/A | 27.11 | N/A | 22.50 | N/A | -6.60 | -17.00 | 15% (+/-) | No |
| % Disabled Enrollees with Any ILTC Claims | N/A | 5.99 | N/A | 5.48 | N/A | 4.68 | N/A | -8.57 | -14.50 | 15% (+/-) | Yes |
| % Child Enrollees with Any ILTC Claims | N/A | 0.20 | N/A | 0.15 | N/A | 0.14 | N/A | -22.20 | -11.10 | 15% (+/-) | Yes |
| % Adult Enrollees with Any ILTC Claims | N/A | 0.29 | N/A | 0.19 | N/A | 0.15 | N/A | -32.80 | -23.20 | 15% (+/-) | No |
| COMMUNITY LONG-TERM CARE STATUS | | | | | | | | | | | |
| # Enrollees with Any CLTC Claims (Excludes CLTC FLAG = 16-20) | N/A | 3,771 | N/A | 4,538 | N/A | 5,307 | N/A | 20.34 | 16.95 | 15% (+/-) | No |
| % Enrollees with Any CLTC Claims (Excludes CLTC FLAG = 16-20) | N/A | 2.26 | N/A | 2.71 | N/A | 3.13 | N/A | 19.86 | 15.26 | 15% (+/-) | No |
| % Aged Enrollees with Any CLTC Claims (Excludes CLTC FLAG = 16-20) | N/A | 6.14 | N/A | 6.42 | N/A | 17.57 | N/A | 4.56 | 173.70 | 15% (+/-) | No |
| % Disabled Enrollees with Any CLTC Claims (Excludes CLTC FLAG = 16-20) | N/A | 6.88 | N/A | 8.08 | N/A | 8.78 | N/A | 17.42 | 8.67 | 15% (+/-) | Yes |
| % Child Enrollees with Any CLTC Claims (Excludes CLTC FLAG = 16-20) | N/A | 0.17 | N/A | 0.22 | N/A | 0.01 | N/A | 27.75 | -94.30 | 15% (+/-) | No |
| % Adult Enrollees with Any CLTC Claims (Excludes CLTC FLAG = 16-20) | N/A | 1.58 | N/A | 2.03 | N/A | 0.07 | N/A | 28.38 | -96.50 | 15% (+/-) | No |
| # Enrollees with ILTC Claims and CLTC Claims (Excludes CLTC FLAG = 16-20) | N/A | 435 | N/A | 403 | N/A | 429 | N/A | -7.36 | 6.45 | 15% (+/-) | Yes |
| # Ever Enrolled in Section 1915(c) Waiver or with Any CLTC Claims (Excludes CLTC FLAG = 16-20) | N/A | N/A | N/A | 4,812 | N/A | 5,612 | N/A | N/A | 16.63 | 15% (+/-) | No |
| SECTION 1915(c) WAIVER ENROLLMENT - MOST RECENT | | | | | | | | | | | |
| # Ever Enrolled in Any Section 1915(c) Waiver (WVR TYPE = G-P) | N/A | 1,863 | N/A | 2,559 | N/A | 3,292 | N/A | 37.36 | 28.64 | 15% (+/-) | No |
| % Enrolled in Any Section 1915(c) Waiver | N/A | 1.12 | N/A | 1.53 | N/A | 1.94 | N/A | 36.82 | 26.79 | 15% (+/-) | No |
| % Aged Enrollees in Section 1915(c) Waiver | N/A | 0.66 | N/A | 0.88 | N/A | 13.83 | N/A | 32.90 | 1,471.00 | 15% (+/-) | No |
| % Disabled Enrollees in Section 1915(c) Waiver | N/A | 3.05 | N/A | 4.38 | N/A | 4.63 | N/A | 43.31 | 5.71 | 15% (+/-) | Yes |
| % Child Enrollees in Section 1915(c) Waiver | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| % Adult Enrollees in Section 1915(c) Waiver | N/A | 1.80 | N/A | 2.21 | N/A | 0.00 | N/A | 23.02 | -99.80 | 15% (+/-) | No |

2005-2007 MAX PSF VALIDATION TABLE
STATE: DC

| Measure | Expected Range | 2005 Value | 2005 Value Within Range | 2006 Value | 2006 Value Within Range | 2007 Value | 2007 Value Within Range | % Change 2005 - 2006 | % Change 2006 - 2007 | Cross Year Expected Range | Cross Year Within Range |
|---|----------------|------------|-------------------------|------------|-------------------------|------------|-------------------------|----------------------|----------------------|---------------------------|-------------------------|
| # Aged, EDB Dual | N/A | N/A | N/A | N/A | N/A | 1,431 | N/A | N/A | N/A | 15% (+/-) | No |
| # Aged, Non-Dual | N/A | N/A | N/A | N/A | N/A | 122 | N/A | N/A | N/A | 15% (+/-) | No |
| # Disabled, EDB Dual | N/A | N/A | N/A | N/A | N/A | 811 | N/A | N/A | N/A | 15% (+/-) | No |
| # Disabled, Non-Dual | N/A | N/A | N/A | N/A | N/A | 926 | N/A | N/A | N/A | 15% (+/-) | No |
| # Other (Child or Adult) | N/A | N/A | N/A | N/A | N/A | 2 | N/A | N/A | N/A | 15% (+/-) | No |
| # with Section 1915(c) Waiver for Aged and Disabled (WVR TYPE = G) | N/A | 1,099 | N/A | 1,627 | N/A | 2,163 | N/A | 48.04 | 32.94 | 15% (+/-) | No |
| # Aged, EDB Dual | N/A | N/A | N/A | 82 | N/A | 1,430 | N/A | N/A | 1,644.00 | 15% (+/-) | No |
| # Aged, Non-Dual | N/A | N/A | N/A | 4 | N/A | 121 | N/A | N/A | 2,925.00 | 15% (+/-) | No |
| # Disabled, EDB Dual | N/A | N/A | N/A | 1,221 | N/A | 293 | N/A | N/A | -76.00 | 15% (+/-) | No |
| # Disabled, Non-Dual | N/A | N/A | N/A | 320 | N/A | 318 | N/A | N/A | -0.63 | 15% (+/-) | Yes |
| # Other (Child or Adult) | N/A | N/A | N/A | 0 | N/A | 1 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| # with Section 1915(c) Waiver for Aged (WVR TYPE = H) | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| # Aged, EDB Dual | N/A | N/A | N/A | 0 | N/A | 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| # Aged, Non-Dual | N/A | N/A | N/A | 0 | N/A | 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| # Disabled, EDB Dual | N/A | N/A | N/A | 0 | N/A | 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| # Disabled, Non-Dual | N/A | N/A | N/A | 0 | N/A | 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| # Other (Child or Adult) | N/A | N/A | N/A | 0 | N/A | 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| # with Section 1915(c) Waiver for Physically Disabled (WVR TYPE = I) | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| # Aged, EDB Dual | N/A | N/A | N/A | 0 | N/A | 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| # Aged, Non-Dual | N/A | N/A | N/A | 0 | N/A | 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| # Disabled, EDB Dual | N/A | N/A | N/A | 0 | N/A | 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| # Disabled, Non-Dual | N/A | N/A | N/A | 0 | N/A | 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| # Other (Child or Adult) | N/A | N/A | N/A | 0 | N/A | 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| # with Section 1915(c) Waiver for People with Brain Injuries (WVR TYPE = J) | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| # Aged, EDB Dual | N/A | N/A | N/A | 0 | N/A | 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| # Aged, Non-Dual | N/A | N/A | N/A | 0 | N/A | 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| # Disabled, EDB Dual | N/A | N/A | N/A | 0 | N/A | 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| # Disabled, Non-Dual | N/A | N/A | N/A | 0 | N/A | 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| # Other (Child or Adult) | N/A | N/A | N/A | 0 | N/A | 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| # with Section 1915(c) Waiver for People with HIV/AIDS (WVR TYPE = K) | N/A | 0 | N/A | 2 | N/A | 2 | N/A | Div by 0 | 0.00 | 15% (+/-) | Yes |
| # Aged, EDB Dual | N/A | N/A | N/A | 0 | N/A | 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| # Aged, Non-Dual | N/A | N/A | N/A | 0 | N/A | 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| # Disabled, EDB Dual | N/A | N/A | N/A | 0 | N/A | 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| # Disabled, Non-Dual | N/A | N/A | N/A | 2 | N/A | 2 | N/A | N/A | 0.00 | 15% (+/-) | Yes |
| # Other (Child or Adult) | N/A | N/A | N/A | 0 | N/A | 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| # with Section 1915(c) Waiver for People with MR/DD (WVR TYPE = L) | N/A | 760 | N/A | 930 | N/A | 1,127 | N/A | 22.37 | 21.18 | 15% (+/-) | No |
| # Aged, EDB Dual | N/A | N/A | N/A | 2 | N/A | 1 | N/A | N/A | -50.00 | 15% (+/-) | No |
| # Aged, Non-Dual | N/A | N/A | N/A | 1 | N/A | 1 | N/A | N/A | 0.00 | 15% (+/-) | Yes |
| # Disabled, EDB Dual | N/A | N/A | N/A | 7 | N/A | 518 | N/A | N/A | 7,300.00 | 15% (+/-) | No |
| # Disabled, Non-Dual | N/A | N/A | N/A | 8 | N/A | 606 | N/A | N/A | 7,475.00 | 15% (+/-) | No |
| # Other (Child or Adult) | N/A | N/A | N/A | 912 | N/A | 1 | N/A | N/A | -99.90 | 15% (+/-) | No |
| # with Section 1915(c) Waiver for People with MI/SED (WVR TYPE = M) | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| # Aged, EDB Dual | N/A | N/A | N/A | 0 | N/A | 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| # Aged, Non-Dual | N/A | N/A | N/A | 0 | N/A | 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| # Disabled, EDB Dual | N/A | N/A | N/A | 0 | N/A | 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| # Disabled, Non-Dual | N/A | N/A | N/A | 0 | N/A | 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| # Other (Child or Adult) | N/A | N/A | N/A | 0 | N/A | 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |

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| Measure | Expected Range | 2005 Value | 2005 Value Within Range | 2006 Value | 2006 Value Within Range | 2007 Value | 2007 Value Within Range | % Change 2005 - 2006 | % Change 2006 - 2007 | Cross Year Expected Range | Cross Year Within Range |
|--|----------------|------------|-------------------------|------------|-------------------------|------------|-------------------------|----------------------|----------------------|---------------------------|-------------------------|
| # with Section 1915(c) Waiver for Tech Dependent/Medically Fragile (WVR TYPE = N) | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| # Aged, EDB Dual | N/A | N/A | N/A | 0 | N/A | 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| # Aged, Non-Dual | N/A | N/A | N/A | 0 | N/A | 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| # Disabled, EDB Dual | N/A | N/A | N/A | 0 | N/A | 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| # Disabled, Non-Dual | N/A | N/A | N/A | 0 | N/A | 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| # Other (Child or Adult) | N/A | N/A | N/A | 0 | N/A | 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| # with Section 1915(c) Waiver for People with Autism/ASD (WVR TYPE = P) | N/A | N/A | N/A | 0 | N/A | 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| # Aged, EDB Dual | N/A | N/A | N/A | 0 | N/A | 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| # Aged, Non-Dual | N/A | N/A | N/A | 0 | N/A | 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| # Disabled, EDB Dual | N/A | N/A | N/A | 0 | N/A | 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| # Disabled, Non-Dual | N/A | N/A | N/A | 0 | N/A | 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| # Other (Child or Adult) | N/A | N/A | N/A | 0 | N/A | 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| # with Section 1915(c) Waiver for Unspecified or Unknown Populations (WVR TYPE = O) | N/A | 4 | N/A | 0 | N/A | 0 | N/A | -100.00 | Div by 0 | 15% (+/-) | N/A |
| # Aged, EDB Dual | N/A | N/A | N/A | 0 | N/A | 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| # Aged, Non-Dual | N/A | N/A | N/A | 0 | N/A | 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| # Disabled, EDB Dual | N/A | N/A | N/A | 0 | N/A | 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| # Disabled, Non-Dual | N/A | N/A | N/A | 0 | N/A | 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| # Other (Child or Adult) | N/A | N/A | N/A | 0 | N/A | 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| % of Section 1915(c) Waiver Enrollees with No Waiver claim (PGM TYPE = 6 or 7) | <15% | 15.14 | No | 15.44 | No | 16.80 | No | 1.97 | 8.83 | 15% (+/-) | Yes |
| % of Section 1915(c) Claim (PGM TYPE = 6 or 7) Recipients with No Waiver Enrollment | <10% | 12.17 | No | 13.16 | No | 6.29 | Yes | 8.18 | -52.20 | 15% (+/-) | No |
| % of Section 1915(c) Waiver Enrollees with Any HMO/HIO Enrollment | N/A | 1.23 | N/A | 0.74 | N/A | 0.82 | N/A | -39.90 | 10.46 | 15% (+/-) | Yes |
| % of Section 1915(c) Waiver Enrollees not Enrolled in HMOs/HIOs with No Waiver claim (PGM TYPE = 6 or 7) | <15% | N/A | No | N/A | No | 16.52 | No | N/A | N/A | 15% (+/-) | No |
| # Section 1915(c) Waiver Enrollees Enrolled in More Than One Section 1915(c) Waiver During the Year | N/A | N/A | N/A | N/A | N/A | 3 | N/A | N/A | N/A | 15% (+/-) | No |
| Other Waiver Enrollment (Enrolled Any Time During the Year) | | | | | | | | | | | |
| # with Any 1115 Waiver (WVR TYPE = 1,5,6,A,F) | N/A | 2,478 | N/A | 1,743 | N/A | 2,425 | N/A | -29.70 | 39.13 | 25% (+/-) | No |
| % Aged Enrollees with Any 1115 Waiver | N/A | 0.46 | N/A | 0.34 | N/A | 0.10 | N/A | -27.60 | -70.90 | 15% (+/-) | No |
| % Disabled Enrollees with Any 1115 Waiver | N/A | 0.80 | N/A | 0.52 | N/A | 0.52 | N/A | -35.00 | -0.06 | 15% (+/-) | Yes |
| % Child Enrollees with Any 1115 Waiver | N/A | 0.23 | N/A | 0.08 | N/A | 0.00 | N/A | -66.10 | -100.00 | 15% (+/-) | No |
| % Adult Enrollees with Any 1115 Waiver | N/A | 4.71 | N/A | 3.55 | N/A | 5.52 | N/A | -24.70 | 55.62 | 15% (+/-) | No |
| % with Any HMO/HIO Enrollment | N/A | 65.66 | N/A | 78.43 | N/A | 89.65 | N/A | 19.45 | 14.31 | 15% (+/-) | Yes |
| # with Any 1915(b) Waiver (WVR TYPE = 2) | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | 25% (+/-) | N/A |
| % Aged Enrollees with Any 1915(b) Waiver | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| % Disabled Enrollees with Any 1915(b) Waiver | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| % Child Enrollees with Any 1915(b) Waiver | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| % Adult Enrollees with Any 1915(b) Waiver | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| % with Any HMO/HIO Enrollment | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| # with Any Combined 1915(b)(c) Waiver (WVR TYPE = 4) | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | 25% (+/-) | N/A |
| % Aged Enrollees with Any Combined 1915(b)(c) Waiver | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| % Disabled Enrollees with Any Combined 1915(b)(c) Waiver | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| % Child Enrollees with Any Combined 1915(b)(c) Waiver | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| % Adult Enrollees with Any Combined 1915(b)(c) Waiver | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| % with Any HMO/HIO Enrollment | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| # with 1115 HIFA Waiver (WVR TYPE = 5) | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | 25% (+/-) | N/A |
| # with 1115 Pharmacy Waiver Coverage (WVR TYPE = 6) | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | 25% (+/-) | N/A |
| % Aged Enrollees with Pharmacy Waiver Coverage | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |

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|--|----------------|------------|-------------------------|------------|-------------------------|------------|-------------------------|----------------------|----------------------|---------------------------|-------------------------|
| % Disabled Enrollees with Any Pharmacy Waiver Coverage | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| % Child Enrollees with Any Pharmacy Waiver Coverage | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| % Adult Enrollees with Any Pharmacy Waiver Coverage | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| % with Any HMO/HIO Enrollment | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| # with Other Type of Waiver (WVR TYPE = 7) | N/A | 599 | N/A | 0 | N/A | 0 | N/A | -100.00 | Div by 0 | 25% (+/-) | N/A |
| # with Unknown Type of Waiver (WVR TYPE = 9) | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | 25% (+/-) | N/A |
| # with 1115 Disaster-Related Waiver (WVR TYPE = A) | N/A | 408 | N/A | 126 | N/A | 0 | N/A | -69.10 | -100.00 | 25% (+/-) | No |
| # with 1115 Family Planning Only Waiver (WVR TYPE = F) | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | 25% (+/-) | N/A |
| # of Waiver IDs with More than One Waiver Type | N/A | N/A | N/A | N/A | N/A | 0 | N/A | N/A | N/A | 25% (+/-) | No |
| # of Waiver IDs with Reporting in January but Not December | 0 | N/A | No | N/A | No | 0 | Yes | N/A | N/A | 25% (+/-) | No |
| # of Waiver IDs with Reporting in December but Not January | 0 | N/A | No | N/A | No | 0 | Yes | N/A | N/A | 25% (+/-) | No |
| Enrollees with Restricted Benefits | | | | | | | | | | | |
| <i>Family Planning enrollees with Restricted Benefits (RBF = 6)</i> | | | | | | | | | | | |
| # with ONLY Family Planning Only Enrollment | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | N/A | N/A |
| # with ANY Family Planning Only Enrollment | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | N/A | N/A |
| # Person-Years of Enrollment ANY Family Planning Only Enrollment | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | N/A | N/A |
| <i>Aliens with Restricted Benefits (RBF = 2)</i> | | | | | | | | | | | |
| # Aliens with ONLY Restricted Benefits | N/A | 1,450 | N/A | 1,758 | N/A | 1,969 | N/A | 21.24 | 12.00 | N/A | N/A |
| # Aliens with ANY Restricted Benefits | N/A | 1,481 | N/A | 1,774 | N/A | 2,007 | N/A | 19.78 | 13.13 | N/A | N/A |
| # Person-Years of Enrollment Aliens with ANY Restricted Benefits | N/A | 260 | N/A | 266 | N/A | 283 | N/A | 2.60 | 6.29 | N/A | N/A |
| <i>EDB Duals with Restricted Benefits (Medicare Cost Sharing Only - RBF = 3)</i> | | | | | | | | | | | |
| # EDB Duals with ONLY Restricted Benefits Enrollment | N/A | 518 | N/A | 1,830 | N/A | 2,513 | N/A | 253.30 | 37.32 | N/A | N/A |
| # EDB Duals with ANY Restricted Benefits Enrollment | N/A | 2,089 | N/A | 2,758 | N/A | 3,256 | N/A | 32.02 | 18.06 | N/A | N/A |
| # Person-Years of Enrollment EDB Duals with ANY Restricted Benefits | N/A | 1,224 | N/A | 1,888 | N/A | 2,371 | N/A | 54.19 | 25.60 | N/A | N/A |
| % EDB Duals with ONLY Restricted Benefits Enrollment | <=40% | 2.56 | Yes | 8.60 | Yes | 11.51 | No | 236.20 | 33.94 | 15% (+/-) | No |
| <i>Prescription Drug Enrollees (RBF = X, Y, or Z)</i> | | | | | | | | | | | |
| # with ONLY Prescription Drug Enrollment (May Have a Month or More of RBF = 3) | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | N/A | N/A |
| # with ANY Prescription Drug Enrollment | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | N/A | N/A |
| # Person-Years of ANY Prescription Drug Enrollment | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | N/A | N/A |
| <i>Dual Prescription Drug Enrollees</i> | | | | | | | | | | | |
| # with ONLY Prescription Drugs Who Are EDB Duals | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | N/A | N/A |
| June Eligibility Profile | | | | | | | | | | | |
| Total Enrollees in June | N/A | 142,098 | N/A | 143,109 | N/A | 144,800 | N/A | 0.71 | 1.18 | 15% (+/-) | Yes |
| June % Full Scope Benefits (RBF = 1) | >80% | 98.47 | Yes | 98.15 | Yes | 97.81 | Yes | -0.32 | -0.35 | 15% (+/-) | Yes |
| June % Restricted Benefits Alien (RBF = 2) | <5% | 0.17 | Yes | 0.18 | Yes | 0.21 | Yes | 8.43 | 15.87 | 15% (+/-) | No |
| June % Restricted Benefits Dual (RBF = 3) | <5% | 1.01 | Yes | 1.36 | Yes | 1.66 | Yes | 35.19 | 21.67 | 15% (+/-) | No |
| June % Restricted Benefits Pregnant (RBF = 4) | <5% | 0.36 | Yes | 0.31 | Yes | 0.33 | Yes | -14.20 | 6.02 | 15% (+/-) | Yes |
| June % Restricted Benefits Other (RBF = 5) | 0% | 0.00 | Yes | 0.00 | Yes | 0.00 | Yes | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| June % Restricted Benefits Family Planning (RBF = 6) | <5% | 0.00 | Yes | 0.00 | Yes | 0.00 | Yes | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| June % Restricted Benefits Benchmark-Equivalent (RBF = 7) | 0% | N/A | No | N/A | No | 0.00 | Yes | N/A | N/A | 15% (+/-) | No |
| June % Money Follows the Person Enrollee (RBF = 8) | 0% | N/A | No | N/A | No | 0.00 | Yes | N/A | N/A | 15% (+/-) | No |
| June % Unknown Benefits (RBF = 9) | 0% | 0.00 | Yes | 0.00 | Yes | 0.00 | Yes | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| June % PRTF Enrollee (RBF = A) | 0% | N/A | No | N/A | No | 0.00 | Yes | N/A | N/A | 15% (+/-) | No |
| June % Health Opportunity Account (RBF = B) | 0% | N/A | No | N/A | No | 0.00 | Yes | N/A | N/A | 15% (+/-) | No |
| June % Restricted Benefits Pharm Plus Non-Dual Enrollee (RBF = X) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| June % Restricted Benefits Pharm Plus Dual Receiving Medicare Cost Sharing (RBF = Y) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |

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|--|----------------|-----------------|-------------------------|-----------------|-------------------------|-----------------|-------------------------|----------------------|----------------------|---------------------------|-------------------------|
| June % Restricted Benefits Pharm Plus Dual Not Receiving Medicare Cost Sharing (RBF = Z) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| June % Private Health Insurance (PVT INS CD = 2-4) | 2-15% | 2.32 | Yes | 2.30 | Yes | 2.18 | Yes | -1.04 | -4.99 | 15% (+/-) | Yes |
| June Total Enrollees with TANF Flag (TANF FLAG = 2) | N/A | 42,148 | N/A | 39,710 | N/A | 37,631 | N/A | -5.78 | -5.24 | 15% (+/-) | Yes |
| June # with M-CHIP (SCHIP = 2) - Child (Age < 19 Years) | N/A | 4,247 | N/A | 4,275 | N/A | 4,158 | N/A | 0.66 | -2.74 | 15% (+/-) | Yes |
| June # with M-CHIP (SCHIP = 2) - Adult (Age > 18 Years) | N/A | 193 | N/A | 190 | N/A | 176 | N/A | -1.55 | -7.37 | 15% (+/-) | Yes |
| June # with S-CHIP (SCHIP = 3) - Child (Age < 19 Years) | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| June # with S-CHIP (SCHIP = 3) - Adult (Age > 18 Years) | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Medicaid Expenditures | | | | | | | | | | | |
| Total Medicaid Paid | N/A | \$1,238,507,416 | N/A | \$1,275,772,846 | N/A | \$1,422,400,616 | N/A | 3.01 | 11.49 | 15% (+/-) | Yes |
| Avg Medicaid Paid per Enrollee | N/A | \$7,438 | N/A | \$7,631 | N/A | \$8,386 | N/A | 2.60 | 9.89 | 15% (+/-) | Yes |
| 25th Percentile | N/A | \$1,174 | N/A | \$1,198 | N/A | \$1,137 | N/A | 2.04 | -5.09 | 15% (+/-) | Yes |
| 50th Percentile (Median) | N/A | \$1,656 | N/A | \$1,659 | N/A | \$1,584 | N/A | 0.18 | -4.52 | 15% (+/-) | Yes |
| 75th Percentile | N/A | \$4,026 | N/A | \$4,148 | N/A | \$4,392 | N/A | 3.03 | 5.88 | 15% (+/-) | Yes |
| 95th Percentile | N/A | \$36,484 | N/A | \$38,179 | N/A | \$41,588 | N/A | 4.65 | 8.93 | 15% (+/-) | Yes |
| 99th Percentile | N/A | \$100,248 | N/A | \$105,467 | N/A | \$124,022 | N/A | 5.21 | 17.59 | 15% (+/-) | No |
| Maximum Medicaid Paid | N/A | N/A | N/A | \$632,083 | N/A | \$1,134,262 | N/A | N/A | 79.45 | 25% (+/-) | No |
| PERCENT OF ENROLLEES WITH ZERO EXPENDITURES | | | | | | | | | | | |
| % of Enrollees with Total Medicaid Paid = \$0 | N/A | N/A | N/A | N/A | N/A | 4.84 | N/A | N/A | N/A | 15% (+/-) | No |
| Aged | N/A | N/A | N/A | N/A | N/A | 10.52 | N/A | N/A | N/A | 15% (+/-) | No |
| Disabled | N/A | N/A | N/A | N/A | N/A | 7.25 | N/A | N/A | N/A | 15% (+/-) | No |
| Child | N/A | N/A | N/A | N/A | N/A | 3.29 | N/A | N/A | N/A | 15% (+/-) | No |
| Adult | N/A | N/A | N/A | N/A | N/A | 4.10 | N/A | N/A | N/A | 15% (+/-) | No |
| NUMBER OF HIGH-COST ENROLLEES | | | | | | | | | | | |
| # of Enrollees with Total Medicaid Paid > \$1,000,000 | N/A | N/A | N/A | 0 | N/A | 2 | N/A | N/A | Div by 0 | N/A | N/A |
| # of Enrollees with Total Medicaid Paid > \$500,000 | N/A | N/A | N/A | 5 | N/A | 21 | N/A | N/A | 320.00 | N/A | N/A |
| AVERAGE MEDICAID AMOUNT PAID PER ENROLLEE BY MAX ELIGIBILITY GROUP | | | | | | | | | | | |
| Avg Medicaid Paid per Enrollee | N/A | \$7,438 | N/A | \$7,631 | N/A | \$8,386 | N/A | 2.60 | 9.89 | 15% (+/-) | Yes |
| Aged | N/A | \$17,677 | N/A | \$17,806 | N/A | \$22,491 | N/A | 0.73 | 26.31 | 15% (+/-) | No |
| Disabled | N/A | \$19,361 | N/A | \$19,064 | N/A | \$21,218 | N/A | -1.53 | 11.30 | 10% (+/-) | No |
| Child | N/A | \$2,792 | N/A | \$2,837 | N/A | \$2,664 | N/A | 1.62 | -6.10 | 10% (+/-) | Yes |
| Adult | N/A | \$4,160 | N/A | \$4,598 | N/A | \$3,941 | N/A | 10.53 | -14.30 | 10% (+/-) | No |
| AVERAGE MEDICAID AMOUNT PAID PER EDB DUAL ENROLLEE | | | | | | | | | | | |
| Avg Medicaid Paid per EDB Dual Enrollee | N/A | \$16,379 | N/A | \$16,283 | N/A | \$20,629 | N/A | -0.59 | 26.69 | 15% (+/-) | No |
| Aged | N/A | \$17,218 | N/A | \$17,460 | N/A | \$22,202 | N/A | 1.41 | 27.16 | 10% (+/-) | No |
| Disabled | N/A | \$15,577 | N/A | \$15,087 | N/A | \$19,873 | N/A | -3.15 | 31.72 | 10% (+/-) | No |
| EDB Only (EDB DUAL = 50) | N/A | N/A | N/A | N/A | N/A | \$22,223 | N/A | N/A | N/A | 10% (+/-) | No |
| EDB QMB Only (EDB DUAL = 51) | N/A | N/A | N/A | N/A | N/A | \$6,027 | N/A | N/A | N/A | 10% (+/-) | No |
| EDB QMB Plus (EDB DUAL = 52) | N/A | N/A | N/A | N/A | N/A | \$22,951 | N/A | N/A | N/A | 10% (+/-) | No |
| EDB SLMB Only (EDB DUAL = 53) | N/A | N/A | N/A | N/A | N/A | \$151 | N/A | N/A | N/A | 10% (+/-) | No |
| EDB SLMB Plus (EDB DUAL = 54) | N/A | N/A | N/A | N/A | N/A | Div by 0 | N/A | N/A | N/A | 10% (+/-) | No |
| EDB QDWI (EDB DUAL = 55) | N/A | N/A | N/A | N/A | N/A | Div by 0 | N/A | N/A | N/A | 10% (+/-) | No |
| EDB QI-1 (EDB DUAL = 56) | N/A | N/A | N/A | N/A | N/A | Div by 0 | N/A | N/A | N/A | 10% (+/-) | No |
| EDB QI-2 (EDB DUAL = 57) | N/A | N/A | N/A | N/A | N/A | Div by 0 | N/A | N/A | N/A | 10% (+/-) | No |
| EDB Other (EDB DUAL = 58) | N/A | N/A | N/A | N/A | N/A | Div by 0 | N/A | N/A | N/A | 10% (+/-) | No |
| EDB Dual Type Unknown (EDB DUAL = 59) | N/A | N/A | N/A | N/A | N/A | Div by 0 | N/A | N/A | N/A | 10% (+/-) | No |
| EDB Dual Status Unknown (EDB DUAL = 98) | N/A | N/A | N/A | N/A | N/A | Div by 0 | N/A | N/A | N/A | 10% (+/-) | No |

2005-2007 MAX PSF VALIDATION TABLE
STATE: DC

| Measure | Expected Range | 2005 Value | 2005 Value Within Range | 2006 Value | 2006 Value Within Range | 2007 Value | 2007 Value Within Range | % Change 2005 - 2006 | % Change 2006 - 2007 | Cross Year Expected Range | Cross Year Within Range |
|---|----------------|--------------|-------------------------|--------------|-------------------------|--------------|-------------------------|----------------------|----------------------|---------------------------|-------------------------|
| Avg Medicaid Paid per EDB Duals with Full Benefits (EDB DUAL = 50,52,54,58) | N/A | N/A | N/A | N/A | N/A | \$22,934 | N/A | N/A | N/A | 10% (+/-) | No |
| Avg Medicaid Paid per EDB Duals with Restricted Benefits (EDB DUAL = 51,53,55,56,57) | N/A | N/A | N/A | N/A | N/A | \$6,022 | N/A | N/A | N/A | 10% (+/-) | No |
| AVERAGE MEDICAID AMOUNT PAID PER LONG-TERM CARE ENROLLEE | | | | | | | | | | | |
| Avg Medicaid Paid per Enrollee with ILTC Claims (MAX TOS = 02, 04, 05, 07) | N/A | \$68,396 | N/A | \$71,946 | N/A | \$78,851 | N/A | 5.19 | 9.60 | 15% (+/-) | Yes |
| Avg Medicaid Paid per Enrollee with CLTC Claims (Excluding CLTC FLAG = 16-20) | N/A | \$44,802 | N/A | \$45,625 | N/A | \$54,674 | N/A | 1.84 | 19.83 | 15% (+/-) | No |
| Avg Medicaid Paid per Enrollee with ILTC (MAX TOS = 02, 04, 05, 07) and CLTC Claims (Excluding CLTC FLAG = 16-20) | N/A | \$82,699 | N/A | \$75,794 | N/A | \$91,310 | N/A | -8.35 | 20.47 | 15% (+/-) | No |
| AVERAGE MEDICAID AMOUNT PAID PER ENROLLEE IN 1915(c) WAIVER - MOST RECENT | | | | | | | | | | | |
| Avg Medicaid Paid per Section 1915(c) Enrollee | N/A | \$36,118 | N/A | \$40,583 | N/A | \$51,231 | N/A | 12.36 | 26.24 | 15% (+/-) | No |
| Section 1915(c) Waiver for Aged and Disabled (WVR TYPE = G) | N/A | \$37,049 | N/A | \$41,877 | N/A | \$48,567 | N/A | 13.03 | 15.98 | 15% (+/-) | No |
| Section 1915(c) Waiver for Aged (WVR TYPE = H) | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Section 1915(c) Waiver for Physically Disabled (WVR TYPE = I) | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Section 1915(c) Waiver for People with Brain Injuries (WVR TYPE = J) | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Section 1915(c) Waiver for People with HIV/AIDS (WVR TYPE = K) | N/A | Div by 0 | N/A | \$3,047 | N/A | \$12,865 | N/A | Div by 0 | 322.20 | 15% (+/-) | No |
| Section 1915(c) Waiver for People with MR/DD (WVR TYPE = L) | N/A | \$34,774 | N/A | \$38,399 | N/A | \$56,413 | N/A | 10.43 | 46.91 | 15% (+/-) | No |
| Section 1915(c) Waiver for People with MI/SED (WVR TYPE = M) | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Section 1915(c) Waiver for Tech Dependent/Medically Fragile (WVR TYPE = N) | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Section 1915(c) Waiver for People with Autism/ASD (WVR TYPE = P) | N/A | N/A | N/A | Div by 0 | N/A | Div by 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| Section 1915(c) Waiver for None of the Above (WVR TYPE = O) | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| AVERAGE 1915(c) WAIVER AMOUNT PAID (PROGRAM TYPES 6 OR 7) PER ENROLLEE IN ANY 1915(c) WAIVER - MOST RECENT | | | | | | | | | | | |
| Avg 1915(c) Waiver Amount Paid per Section 1915(c) Enrollee | N/A | \$11,373 | N/A | \$17,241 | N/A | \$24,578 | N/A | 51.59 | 42.55 | 15% (+/-) | No |
| Section 1915(c) Waiver for Aged and Disabled (WVR TYPE = G) | N/A | \$9,329 | N/A | \$14,595 | N/A | \$17,531 | N/A | 56.45 | 20.11 | 15% (+/-) | No |
| Section 1915(c) Waiver for Aged (WVR TYPE = H) | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Section 1915(c) Waiver for Physically Disabled (WVR TYPE = I) | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Section 1915(c) Waiver for People with Brain Injuries (WVR TYPE = J) | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Section 1915(c) Waiver for People with HIV/AIDS (WVR TYPE = K) | N/A | Div by 0 | N/A | \$0 | N/A | \$0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Section 1915(c) Waiver for People with MR/DD (WVR TYPE = L) | N/A | \$14,389 | N/A | \$21,907 | N/A | \$38,147 | N/A | 52.25 | 74.13 | 15% (+/-) | No |
| Section 1915(c) Waiver for People with MI/SED (WVR TYPE = M) | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Section 1915(c) Waiver for Tech Dependent/Medically Fragile (WVR TYPE = N) | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Section 1915(c) Waiver for People with Autism/ASD (WVR TYPE = P) | N/A | N/A | N/A | Div by 0 | N/A | Div by 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| Section 1915(c) Waiver for None of the Above (WVR TYPE = O) | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| EXPENDITURES FOR RESTRICTED BENEFIT ENROLLEES | | | | | | | | | | | |
| <i>Expenditures for Family Planning Enrollees with Restricted Benefits (RBF = 6)</i> | | | | | | | | | | | |
| Total Medicaid Paid for ONLY Family Planning Only Enrollees | N/A | \$0 | N/A | \$0 | N/A | \$0 | N/A | Div by 0 | Div by 0 | N/A | N/A |
| Avg Medicaid Paid per ONLY Family Planning Only Enrollee | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | Div by 0 | N/A | N/A |
| <i>Expenditures for Aliens with Restricted Benefits (RBF = 2)</i> | | | | | | | | | | | |
| Total Medicaid Paid for Aliens with Restricted Benefits ONLY Enrollment | N/A | \$13,635,835 | N/A | \$16,056,748 | N/A | \$22,193,625 | N/A | 17.75 | 38.22 | N/A | N/A |
| Avg Medicaid Paid per Alien Enrollee with Restricted Benefits ONLY | N/A | \$9,404 | N/A | \$9,134 | N/A | \$11,272 | N/A | -2.88 | 23.41 | N/A | N/A |
| <i>Expenditures for EDB Duals with Restricted Benefits (Medicare Cost Sharing Only - RBF = 3)</i> | | | | | | | | | | | |
| Total Medicaid Paid for EDB Duals with Only Restricted Benefits Enrollment | N/A | \$361,091 | N/A | \$1,393,552 | N/A | \$9,692,023 | N/A | 285.90 | 595.50 | N/A | N/A |
| Avg Medicaid Paid per EDB Dual with Only Restricted Benefits Enrollment | N/A | \$697 | N/A | \$762 | N/A | \$3,857 | N/A | 9.24 | 406.50 | N/A | N/A |
| <i>Expenditures for Prescription Drug Enrollees (RBF = X, Y, or Z)</i> | | | | | | | | | | | |
| Total Medicaid Paid for Prescription Drug ONLY Enrollees (May Have a Month or More of RBF = 3) | N/A | \$0 | N/A | \$0 | N/A | \$0 | N/A | Div by 0 | Div by 0 | N/A | N/A |
| Avg Medicaid Paid per Prescription Drug ONLY Enrollee | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | Div by 0 | N/A | N/A |
| <i>Expenditures for Dual Prescription Drug Enrollees</i> | | | | | | | | | | | |
| Total Medicaid Paid for Prescription Drug ONLY Enrollees Who Are EDB Duals | N/A | \$0 | N/A | \$0 | N/A | \$0 | N/A | Div by 0 | Div by 0 | N/A | N/A |

2005-2007 MAX PSF VALIDATION TABLE
STATE: DC

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|--|----------------|-----------------|-------------------------|-----------------|-------------------------|-----------------|-------------------------|----------------------|----------------------|---------------------------|-------------------------|
| MEDICAID ENROLLEES - EXCLUDING SELECT RESTRICTED BENEFIT GROUPS (excludes people with missing eligibility information, S-CHIP only, FP Only, Aliens with only restricted benefits, duals with restricted benefits only, and prescription drug only enrollees) ---- NOTE: S-CHIP only, FP Only, duals with restricted benefits, and Aliens with restricted benefits were NOT excluded prior to 2001. Prescription drug only enrollees were NOT excluded prior to 2003. | | | | | | | | | | | |
| Total Medicaid Enrollees | N/A | 164,546 | N/A | 163,586 | N/A | 165,130 | N/A | -0.58 | 0.94 | 10% (+/-) | Yes |
| Aged Total | N/A | 9,767 | N/A | 8,959 | N/A | 9,778 | N/A | -8.27 | 9.14 | 10% (+/-) | Yes |
| Disabled Total | N/A | 33,982 | N/A | 34,918 | N/A | 36,481 | N/A | 2.75 | 4.48 | 10% (+/-) | Yes |
| Child Total | N/A | 80,409 | N/A | 80,275 | N/A | 80,638 | N/A | -0.17 | 0.45 | 10% (+/-) | Yes |
| Adult Total | N/A | 40,388 | N/A | 39,434 | N/A | 38,233 | N/A | -2.36 | -3.05 | 10% (+/-) | Yes |
| Total Medicaid Person-Years of Enrollment | N/A | 142,386 | N/A | 142,086 | N/A | 141,979 | N/A | -0.21 | -0.08 | 10% (+/-) | Yes |
| Total EDB Duals | N/A | 19,737 | N/A | 19,455 | N/A | 19,313 | N/A | -1.43 | -0.73 | 10% (+/-) | Yes |
| Aged | N/A | 8,595 | N/A | 7,897 | N/A | 8,671 | N/A | -8.12 | 9.80 | 10% (+/-) | Yes |
| Disabled | N/A | 10,109 | N/A | 10,451 | N/A | 9,983 | N/A | 3.38 | -4.48 | 10% (+/-) | Yes |
| TOTAL MEDICAID AMOUNT PAID | | | | | | | | | | | |
| Total Medicaid Paid | N/A | \$1,224,510,490 | N/A | \$1,258,322,546 | N/A | \$1,390,514,968 | N/A | 2.76 | 10.51 | 15% (+/-) | Yes |
| AVERAGE MEDICAID AMOUNT PAID PER ENROLLEE BY MAX ELIGIBILITY GROUP | | | | | | | | | | | |
| Avg Medicaid Paid per Enrollee | N/A | \$7,442 | N/A | \$7,692 | N/A | \$8,421 | N/A | 3.36 | 9.47 | 15% (+/-) | Yes |
| Aged | N/A | \$18,301 | N/A | \$20,023 | N/A | \$25,413 | N/A | 9.41 | 26.92 | 15% (+/-) | No |
| Disabled | N/A | \$19,448 | N/A | \$19,413 | N/A | \$21,682 | N/A | -0.18 | 11.69 | 10% (+/-) | No |
| Child | N/A | \$2,792 | N/A | \$2,837 | N/A | \$2,664 | N/A | 1.62 | -6.10 | 10% (+/-) | Yes |
| Adult | N/A | \$3,972 | N/A | \$4,396 | N/A | \$3,564 | N/A | 10.68 | -18.90 | 10% (+/-) | No |
| AVERAGE MEDICAID AMOUNT PAID PER EDB DUAL ENROLLEE | | | | | | | | | | | |
| Avg Medicaid Paid per EDB Dual Enrollee | N/A | \$16,790 | N/A | \$17,741 | N/A | \$22,812 | N/A | 5.66 | 28.59 | 15% (+/-) | No |
| Aged | N/A | \$17,909 | N/A | \$19,924 | N/A | \$25,448 | N/A | 11.25 | 27.72 | 10% (+/-) | No |
| Disabled | N/A | \$15,807 | N/A | \$15,995 | N/A | \$21,423 | N/A | 1.19 | 33.94 | 10% (+/-) | No |
| Managed CARE PLAN INFORMATION (Enrollees in Capitated Plans - PCCM, HMO, HIO, & PHPs, excludes people with missing eligibility information, S-CHIP only, FP Only, Aliens with only restricted benefits, duals with restricted benefits only, and prescription drug only enrollees) ---- NOTE: FP Only, duals with restricted benefits, and Aliens with restricted benefits were NOT excluded prior to 2003. Prescription drug only enrollees were NOT excluded prior to 2003. PACE enrollees are grouped with HMO/HIO rather than PHP enrollees as of 2007. | | | | | | | | | | | |
| % Total Enrollees in MC Anytime During Year | N/A | 68.84 | N/A | 69.28 | N/A | 91.98 | N/A | 0.64 | 32.76 | 25% (+) | No |
| Total MC Enrollees | N/A | 113,275 | N/A | 113,335 | N/A | 151,882 | N/A | 0.05 | 34.01 | 25% (+) | No |
| Aged | N/A | 17 | N/A | 40 | N/A | 7,899 | N/A | 135.30 | 19,648.00 | 25% (+) | No |
| Disabled | N/A | 4,262 | N/A | 4,343 | N/A | 30,693 | N/A | 1.90 | 606.70 | 25% (+) | No |
| Child | N/A | 72,977 | N/A | 73,293 | N/A | 77,019 | N/A | 0.43 | 5.08 | 25% (+) | Yes |
| Adult | N/A | 36,019 | N/A | 35,659 | N/A | 36,271 | N/A | -1.00 | 1.72 | 25% (+) | Yes |
| % of MC Enrollees in HMO/HIO (MC TYPE = 1) | N/A | 100.00 | N/A | 100.00 | N/A | 75.02 | N/A | 0.00 | -25.00 | 25% (+) | Yes |
| % of MC Enrollees in Dental (MC TYPE = 2) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | 25% (+) | N/A |
| % of MC Enrollees in BHO (MC TYPE = 3) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | 25% (+) | N/A |
| % of MC Enrollees in Prenatal (MC TYPE = 4) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | 25% (+) | N/A |
| % of MC Enrollees in LTC (MC TYPE = 5) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | 25% (+) | N/A |
| % of MC Enrollees in PACE (MC TYPE = 6) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | 25% (+) | N/A |
| % of MC Enrollees in PCCM (MC TYPE = 7) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | 25% (+) | N/A |
| % of MC Enrollees in Other MC (MC TYPE = 8) | N/A | 0.00 | N/A | 0.00 | N/A | 25.88 | N/A | Div by 0 | Div by 0 | 25% (+) | N/A |
| % EDB Duals Ever Enrolled in HMO/HIOs | <20% | 2.37 | Yes | 2.62 | Yes | 2.31 | Yes | 10.34 | -11.50 | 25% (+) | Yes |
| % EDB Duals in PHP Only or PHP/PCCM Only | N/A | 0.00 | N/A | 0.00 | N/A | 80.00 | N/A | Div by 0 | Div by 0 | 25% (+) | N/A |
| % EDB Duals in PCCM Only | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | 25% (+) | N/A |
| % Section 1915(c) Waiver Enrollees Ever Enrolled in HMO/HIOs | N/A | 1.24 | N/A | 0.74 | N/A | 0.82 | N/A | -40.00 | 10.46 | 25% (+) | Yes |
| % Section 1915(c) Waiver Enrollees in PHP Only or PHP and PCCM Only | N/A | 0.00 | N/A | 0.00 | N/A | 83.90 | N/A | Div by 0 | Div by 0 | 25% (+) | N/A |

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STATE: DC

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|---|----------------|---------------|-------------------------|---------------|-------------------------|---------------|-------------------------|----------------------|----------------------|---------------------------|-------------------------|
| % Section 1915(c) Waiver Enrollees in PCCM Only | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | 25% (+) | N/A |
| Total Enrollees in June | N/A | 141,652 | N/A | 141,389 | N/A | 142,492 | N/A | -0.19 | 0.78 | 25% (+) | Yes |
| June % HMO/HIO Only (MC COMBO = 01) | N/A | 66.88 | N/A | 67.11 | N/A | 66.57 | N/A | 0.34 | -0.80 | 25% (+) | Yes |
| June % Dental Plan Only (MC COMBO = 02) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | 25% (+) | N/A |
| June % BHO Only (MC COMBO = 03) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | 25% (+) | N/A |
| June % PCCM Only (MC COMBO = 04) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | 25% (+) | N/A |
| June % Other MC Only (MC COMBO = 05) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | 25% (+) | N/A |
| June % HMO/HIO & Dental (MC COMBO = 06) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | 25% (+) | N/A |
| June % HMO/HIO & BHO (MC COMBO = 07) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | 25% (+) | N/A |
| June % HMO/HIO & Other MC (MC COMBO = 08) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | 25% (+) | N/A |
| June % HMO/HIO & Dental & BHO (MC COMBO = 09) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | 25% (+) | N/A |
| June % Dental & PCCM (MC COMBO = 10) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | 25% (+) | N/A |
| June % BHO & PCCM (MC COMBO = 11) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | 25% (+) | N/A |
| June % Other MC & PCCM (MC COMBO = 12) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | 25% (+) | N/A |
| June % Dental & BHO & PCCM (MC COMBO = 13) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | 25% (+) | N/A |
| June % Dental & BHO (MC COMBO = 14) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | 25% (+) | N/A |
| June % Other Combinations (MC COMBO = 15) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | 25% (+) | N/A |
| June % FFS Only (MC COMBO = 16) | N/A | 33.12 | N/A | 32.89 | N/A | 33.43 | N/A | -0.69 | 1.64 | 25% (+) | Yes |
| June % MC Status Unknown (MC COMBO = 99) | <5% | 0.00 | Yes | 0.00 | Yes | 0.00 | Yes | Div by 0 | Div by 0 | 25% (+) | N/A |
| CAPITATION CLAIMS | | | | | | | | | | | |
| Total Capitation Payments | N/A | \$282,874,079 | N/A | \$290,204,077 | N/A | \$286,256,130 | N/A | 2.59 | -1.36 | 15% (+/-) | Yes |
| HMO/HIO | N/A | \$282,874,079 | N/A | \$290,204,077 | N/A | \$286,256,130 | N/A | 2.59 | -1.36 | 15% (+/-) | Yes |
| PHP | N/A | \$0 | N/A | \$0 | N/A | \$0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| PCCM | N/A | \$0 | N/A | \$0 | N/A | \$0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Ratio of Capitation Claims to Person-Month Enrollment in MC | .9-2 | 0.93 | Yes | 0.97 | Yes | 0.84 | No | 4.60 | -13.80 | 15% (+/-) | Yes |
| HMO/HIO | .9-2 | 0.93 | Yes | 0.97 | Yes | 0.92 | Yes | 4.60 | -4.99 | 15% (+/-) | Yes |
| PHP | .9-2 | Div by 0 | No | Div by 0 | No | 0.00 | No | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| PCCM | .9-2 | Div by 0 | No | Div by 0 | No | Div by 0 | No | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Avg Capitation Payment per Person-Month Enrollment in MC | N/A | \$249 | N/A | \$255 | N/A | \$230 | N/A | 2.38 | -9.61 | 15% (+/-) | Yes |
| HMO/HIO | N/A | \$249 | N/A | \$255 | N/A | \$254 | N/A | 2.38 | -0.41 | 15% (+/-) | Yes |
| PHP | N/A | Div by 0 | N/A | Div by 0 | N/A | \$0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| PCCM | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| PERSONS ENROLLED IN PHP ONLY OR PHP AND PCCM ONLY | | | | | | | | | | | |
| Total Capitation Payments | N/A | \$0 | N/A | \$0 | N/A | \$108,864 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Total Medicaid Paid | N/A | \$0 | N/A | \$0 | N/A | \$825,845,382 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Count of Enrollees | N/A | 0 | N/A | 0 | N/A | 37,939 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| PERSONS ENROLLED IN PCCM ONLY | | | | | | | | | | | |
| Total Capitation Payments | N/A | \$0 | N/A | \$0 | N/A | \$0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Count of Enrollees | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| PERSONS EVER ENROLLED IN HMO OR HIO DURING YEAR | | | | | | | | | | | |
| Count of Enrollees | N/A | 113,275 | N/A | 113,335 | N/A | 113,943 | N/A | 0.05 | 0.54 | 15% (+/-) | Yes |
| Aged | N/A | 17 | N/A | 40 | N/A | 27 | N/A | 135.30 | -32.50 | 25% (+) | No |
| Disabled | N/A | 4,262 | N/A | 4,343 | N/A | 4,461 | N/A | 1.90 | 2.72 | 25% (+) | Yes |
| Child | N/A | 72,977 | N/A | 73,293 | N/A | 73,650 | N/A | 0.43 | 0.49 | 25% (+) | Yes |
| Adult | N/A | 36,019 | N/A | 35,659 | N/A | 35,805 | N/A | -1.00 | 0.41 | 25% (+) | Yes |
| Total Ever Enrolled in HMO/HIO Person-Years of Enrollment | N/A | 94,691 | N/A | 94,887 | N/A | 93,980 | N/A | 0.21 | -0.96 | 25% (+) | Yes |
| Total Capitation Payments | N/A | \$282,874,079 | N/A | \$290,204,077 | N/A | \$286,147,266 | N/A | 2.59 | -1.40 | 15% (+/-) | Yes |

2005-2007 MAX PSF VALIDATION TABLE
STATE: DC

| Measure | Expected Range | 2005 Value | 2005 Value Within Range | 2006 Value | 2006 Value Within Range | 2007 Value | 2007 Value Within Range | % Change 2005 - 2006 | % Change 2006 - 2007 | Cross Year Expected Range | Cross Year Within Range |
|---|----------------|--------------|-------------------------|--------------|-------------------------|--------------|-------------------------|----------------------|----------------------|---------------------------|-------------------------|
| Avg Capitation Payments | N/A | \$2,497 | N/A | \$2,561 | N/A | \$2,511 | N/A | 2.54 | -1.92 | 15% (+/-) | Yes |
| Aged | N/A | \$2,084 | N/A | \$3,075 | N/A | \$1,745 | N/A | 47.59 | -43.30 | 15% (+/-) | No |
| Disabled | N/A | \$15,426 | N/A | \$13,505 | N/A | \$13,109 | N/A | -12.40 | -2.93 | 15% (+/-) | Yes |
| Child | N/A | \$1,535 | N/A | \$1,622 | N/A | \$1,526 | N/A | 5.68 | -5.94 | 15% (+/-) | Yes |
| Adult | N/A | \$2,917 | N/A | \$3,156 | N/A | \$3,218 | N/A | 8.18 | 1.99 | 15% (+/-) | Yes |
| Total FFS Payments | N/A | \$70,575,880 | N/A | \$69,838,812 | N/A | \$69,411,983 | N/A | -1.04 | -0.61 | 15% (+/-) | Yes |
| Avg FFS Payments per Enrollee | N/A | \$623 | N/A | \$616 | N/A | \$609 | N/A | -1.10 | -1.14 | 15% (+/-) | Yes |
| Aged | N/A | \$1,966 | N/A | \$1,274 | N/A | \$6,871 | N/A | -35.20 | 439.20 | 15% (+/-) | No |
| Disabled | N/A | \$5,790 | N/A | \$5,912 | N/A | \$6,334 | N/A | 2.10 | 7.14 | 15% (+/-) | Yes |
| Child | N/A | \$482 | N/A | \$495 | N/A | \$434 | N/A | 2.83 | -12.40 | 15% (+/-) | Yes |
| Adult | N/A | \$297 | N/A | \$219 | N/A | \$252 | N/A | -26.40 | 15.18 | 15% (+/-) | No |
| Total FFS Payments by Type of Service | | | | | | | | | | | |
| IP (MAX TOS = 01) | N/A | \$24,894,271 | N/A | \$26,794,108 | N/A | \$28,488,651 | N/A | 7.63 | 6.32 | 15% (+/-) | Yes |
| ILTC (MAX TOS = 02, 04, 05, 07) | N/A | \$1,561,422 | N/A | \$1,037,201 | N/A | \$846,270 | N/A | -33.60 | -18.40 | 15% (+/-) | No |
| Drug (MAX TOS = 16) | N/A | \$2,288,355 | N/A | \$1,834,437 | N/A | \$1,897,821 | N/A | -19.80 | 3.46 | 15% (+/-) | Yes |
| All Other (Excluding Capitation Payments) | N/A | \$41,831,832 | N/A | \$40,173,066 | N/A | \$38,179,241 | N/A | -3.97 | -4.96 | 15% (+/-) | Yes |
| Average FFS Payments by Type of Service | | | | | | | | | | | |
| IP (MAX TOS = 01) | N/A | \$220 | N/A | \$236 | N/A | \$250 | N/A | 7.58 | 5.76 | 15% (+/-) | Yes |
| ILTC (MAX TOS = 02, 04, 05, 07) | N/A | \$14 | N/A | \$9 | N/A | \$7 | N/A | -33.60 | -18.80 | 15% (+/-) | No |
| Drug (MAX TOS = 16) | N/A | \$20 | N/A | \$16 | N/A | \$17 | N/A | -19.90 | 2.90 | 15% (+/-) | Yes |
| All Other (Excluding Capitation Payments) | N/A | \$369 | N/A | \$354 | N/A | \$335 | N/A | -4.02 | -5.47 | 15% (+/-) | Yes |
| FFS INFORMATION FOR NON-DUAL MEDICAID ENROLLEES (excludes EDB Duals, people ever enrolled in HMO/HIOS or PACE, with missing eligibility information, S-CHIP only, FP Only, Aliens with restricted benefits only, and prescription drug only enrollees) ---- NOTE: S-CHIP only, FP Only, and Aliens with restricted benefits were NOT excluded prior to 2001. Prescription drug only enrollees were NOT excluded prior to 2003. PACE enrollees were not excluded prior to 2007. | | | | | | | | | | | |
| Total Non-Dual FFS Enrollees | N/A | 32,002 | N/A | 31,305 | N/A | 32,321 | N/A | -2.18 | 3.25 | 15% (+/-) | Yes |
| Total Non-Dual FFS Recipients | N/A | 23,907 | N/A | 23,587 | N/A | 27,268 | N/A | -1.34 | 15.61 | 15% (+/-) | No |
| Total Non-Dual FFS Person-Years of Enrollment | N/A | 24,284 | N/A | 24,299 | N/A | 24,802 | N/A | 0.06 | 2.07 | 15% (+/-) | Yes |
| Aged Total | N/A | 1,170 | N/A | 1,055 | N/A | 1,104 | N/A | -9.83 | 4.65 | 10% (+/-) | Yes |
| Aged, Cash (MAX ELIG CD = 11) | N/A | 285 | N/A | 237 | N/A | 212 | N/A | -16.80 | -10.50 | 10% (+/-) | No |
| Aged, Medically Needy (MAX ELIG CD = 21) | N/A | 333 | N/A | 295 | N/A | 236 | N/A | -11.40 | -20.00 | 10% (+/-) | No |
| Aged, Poverty (MAX ELIG CD = 31) | N/A | 192 | N/A | 182 | N/A | 173 | N/A | -5.21 | -4.95 | 10% (+/-) | Yes |
| Other Aged (MAX ELIG CD = 41) | N/A | 351 | N/A | 340 | N/A | 483 | N/A | -3.13 | 42.06 | 10% (+/-) | No |
| 1115 Aged (MAX ELIG CD = 51) | N/A | 9 | N/A | 1 | N/A | 0 | N/A | -88.90 | -100.00 | 10% (+/-) | No |
| Disabled Total | N/A | 19,689 | N/A | 20,218 | N/A | 22,129 | N/A | 2.69 | 9.45 | 10% (+/-) | Yes |
| Disabled, Cash (MAX ELIG CD = 12) | N/A | 14,112 | N/A | 14,427 | N/A | 14,279 | N/A | 2.23 | -1.03 | 10% (+/-) | Yes |
| Disabled, Medically Needy (MAX ELIG CD = 22) | N/A | 4,933 | N/A | 5,221 | N/A | 5,950 | N/A | 5.84 | 13.96 | 10% (+/-) | No |
| Disabled, Poverty (MAX ELIG CD = 32, 3A) | N/A | 566 | N/A | 531 | N/A | 483 | N/A | -6.18 | -9.04 | 10% (+/-) | Yes |
| Other Disabled (MAX ELIG CD = 42) | N/A | 47 | N/A | 35 | N/A | 1,417 | N/A | -25.50 | 3,949.00 | 10% (+/-) | No |
| 1115 Disabled (MAX ELIG CD = 52) | N/A | 31 | N/A | 4 | N/A | 0 | N/A | -87.10 | -100.00 | 10% (+/-) | No |
| Child Total | N/A | 7,430 | N/A | 6,981 | N/A | 6,987 | N/A | -6.04 | 0.09 | 10% (+/-) | Yes |
| AFDC Child, Cash (MAX ELIG CD = 14) | N/A | 976 | N/A | 905 | N/A | 875 | N/A | -7.27 | -3.31 | 10% (+/-) | Yes |
| AFDC-U Child, Cash (MAX ELIG CD = 16) | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | 10% (+/-) | N/A |
| AFDC Child, Medically Needy (MAX ELIG CD = 24) | N/A | 1,255 | N/A | 1,129 | N/A | 1,366 | N/A | -10.00 | 20.99 | 10% (+/-) | No |
| Child Poverty (MAX ELIG CD = 34) | N/A | 1,033 | N/A | 991 | N/A | 984 | N/A | -4.07 | -0.71 | 10% (+/-) | Yes |
| Other Child (MAX ELIG CD = 44) | N/A | 50 | N/A | 53 | N/A | 9 | N/A | 6.00 | -83.00 | 10% (+/-) | No |
| Foster Care Child (MAX ELIG CD = 48) | N/A | 3,932 | N/A | 3,860 | N/A | 3,753 | N/A | -1.83 | -2.77 | 10% (+/-) | Yes |

2005-2007 MAX PSF VALIDATION TABLE
STATE: DC

| Measure | Expected Range | 2005 Value | 2005 Value Within Range | 2006 Value | 2006 Value Within Range | 2007 Value | 2007 Value Within Range | % Change 2005 - 2006 | % Change 2006 - 2007 | Cross Year Expected Range | Cross Year Within Range |
|---|----------------|---------------|-------------------------|---------------|-------------------------|---------------|-------------------------|----------------------|----------------------|---------------------------|-------------------------|
| 1115 Child (MAX ELIG CD = 54) | N/A | 184 | N/A | 43 | N/A | 0 | N/A | -76.60 | -100.00 | 10% (+/-) | No |
| Adult Total | N/A | 3,713 | N/A | 3,051 | N/A | 2,101 | N/A | -17.80 | -31.10 | 10% (+/-) | No |
| AFDC Adult, Cash (MAX ELIG CD = 15) | N/A | 2,110 | N/A | 1,885 | N/A | 976 | N/A | -10.70 | -48.20 | 10% (+/-) | No |
| AFDC-U Adult, Cash (MAX ELIG CD = 17) | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | 10% (+/-) | N/A |
| AFDC Adult, Medically Needy (MAX ELIG CD = 25) | N/A | 969 | N/A | 767 | N/A | 774 | N/A | -20.80 | 0.91 | 10% (+/-) | Yes |
| Adult, Poverty (MAX ELIG CD = 35) | N/A | 139 | N/A | 108 | N/A | 122 | N/A | -22.30 | 12.96 | 10% (+/-) | No |
| Other Adult (MAX ELIG CD = 45) | N/A | 42 | N/A | 29 | N/A | 15 | N/A | -31.00 | -48.30 | 10% (+/-) | No |
| 1115 Adult (MAX ELIG CD = 55) | N/A | 453 | N/A | 262 | N/A | 214 | N/A | -42.20 | -18.30 | 10% (+/-) | No |
| # Non-Dual FFS Enrollees with MSIS Dual Code but No EDB Confirmation | N/A | 780 | N/A | 713 | N/A | 616 | N/A | -8.59 | -13.60 | 10% (+/-) | No |
| Total FFS Medicaid Paid | N/A | \$542,371,558 | N/A | \$555,539,843 | N/A | \$596,943,020 | N/A | 2.43 | 7.45 | 15% (+/-) | Yes |
| Avg FFS Medicaid Paid per Non-Dual FFS Enrollee | N/A | \$16,948 | N/A | \$17,746 | N/A | \$18,469 | N/A | 4.71 | 4.08 | 15% (+/-) | Yes |
| Avg FFS Medicaid Paid per Non-Dual FFS Recipient (User of Any service) | N/A | \$22,687 | N/A | \$23,553 | N/A | \$21,892 | N/A | 3.82 | -7.05 | 15% (+/-) | Yes |
| Total Capitation Payments | N/A | N/A | N/A | N/A | N/A | \$156,051 | N/A | N/A | N/A | 15% (+/-) | No |
| # Enrollees with HMO/HIO Payments but No Enrollment in HMO/HIO or PACE | 0 | N/A | No | N/A | No | 48 | No | N/A | N/A | 10% (+/-) | No |
| Total HMO/HIO Payments (Among People not Enrolled) | N/A | N/A | N/A | N/A | N/A | \$156,051 | N/A | N/A | N/A | 15% (+/-) | No |
| AVERAGE FFS MEDICAID AMOUNT PAID PER NON-DUAL FFS ENROLLEE BY MAX ELIGIBILITY GROUP | | | | | | | | | | | |
| Aged | N/A | \$21,202 | N/A | \$20,865 | N/A | \$25,199 | N/A | -1.59 | 20.77 | 15% (+/-) | No |
| Aged, Cash (MAX ELIG CD = 11) | N/A | \$29,055 | N/A | \$27,894 | N/A | \$30,398 | N/A | -3.99 | 8.98 | 15% (+/-) | Yes |
| Aged, Medically Needy (MAX ELIG CD = 21) | N/A | \$38,458 | N/A | \$43,057 | N/A | \$52,233 | N/A | 11.96 | 21.31 | 15% (+/-) | No |
| Aged, Poverty (MAX ELIG CD = 31) | N/A | \$4,346 | N/A | \$3,069 | N/A | \$4,585 | N/A | -29.40 | 49.39 | 15% (+/-) | No |
| Other Aged (MAX ELIG CD = 41) | N/A | \$8,203 | N/A | \$6,296 | N/A | \$17,092 | N/A | -23.20 | 171.50 | 15% (+/-) | No |
| 1115 Aged (MAX ELIG CD = 51) | N/A | \$680 | N/A | \$0 | N/A | Div by 0 | N/A | -100.00 | Div by 0 | 15% (+/-) | N/A |
| Disabled | N/A | \$20,919 | N/A | \$21,132 | N/A | \$22,201 | N/A | 1.02 | 5.06 | 15% (+/-) | Yes |
| Disabled, Cash (MAX ELIG CD = 12) | N/A | \$21,088 | N/A | \$21,423 | N/A | \$20,890 | N/A | 1.59 | -2.49 | 15% (+/-) | Yes |
| Disabled, Medically Needy (MAX ELIG CD = 22) | N/A | \$21,578 | N/A | \$21,208 | N/A | \$20,634 | N/A | -1.71 | -2.71 | 15% (+/-) | Yes |
| Disabled, Poverty (MAX ELIG CD = 32, 3A) | N/A | \$12,939 | N/A | \$13,093 | N/A | \$11,964 | N/A | 1.19 | -8.62 | 15% (+/-) | Yes |
| Other Disabled (MAX ELIG CD = 42) | N/A | \$9,535 | N/A | \$14,094 | N/A | \$45,480 | N/A | 47.81 | 222.70 | 15% (+/-) | No |
| 1115 Disabled (MAX ELIG CD = 52) | N/A | \$1,776 | N/A | \$12 | N/A | Div by 0 | N/A | -99.30 | Div by 0 | 15% (+/-) | N/A |
| Child | N/A | \$10,394 | N/A | \$10,382 | N/A | \$10,084 | N/A | -0.12 | -2.87 | 15% (+/-) | Yes |
| AFDC Child, Cash (MAX ELIG CD = 14) | N/A | \$5,536 | N/A | \$3,466 | N/A | \$3,248 | N/A | -37.40 | -6.31 | 15% (+/-) | Yes |
| AFDC-U Child, Cash (MAX ELIG CD = 16) | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| AFDC Child, Medically Needy (MAX ELIG CD = 24) | N/A | \$6,353 | N/A | \$5,988 | N/A | \$8,186 | N/A | -5.74 | 36.70 | 15% (+/-) | No |
| Child Poverty (MAX ELIG CD = 34) | N/A | \$2,639 | N/A | \$3,227 | N/A | \$2,212 | N/A | 22.28 | -31.40 | 15% (+/-) | No |
| Other Child (MAX ELIG CD = 44) | N/A | \$5,119 | N/A | \$2,834 | N/A | \$192 | N/A | -44.60 | -93.20 | 15% (+/-) | No |
| Foster Care Child (MAX ELIG CD = 48) | N/A | \$15,472 | N/A | \$15,344 | N/A | \$14,455 | N/A | -0.83 | -5.79 | 15% (+/-) | Yes |
| 1115 Child (MAX ELIG CD = 54) | N/A | \$160 | N/A | \$18 | N/A | Div by 0 | N/A | -88.90 | Div by 0 | 15% (+/-) | N/A |
| Adult | N/A | \$7,668 | N/A | \$11,084 | N/A | \$3,517 | N/A | 44.53 | -68.30 | 15% (+/-) | No |
| AFDC Adult, Cash (MAX ELIG CD = 15) | N/A | \$10,317 | N/A | \$14,055 | N/A | \$1,950 | N/A | 36.23 | -86.10 | 15% (+/-) | No |
| AFDC-U Adult, Cash (MAX ELIG CD = 17) | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| AFDC Adult, Medically Needy (MAX ELIG CD = 25) | N/A | \$4,242 | N/A | \$5,573 | N/A | \$4,929 | N/A | 31.39 | -11.60 | 15% (+/-) | Yes |
| Adult, Poverty (MAX ELIG CD = 35) | N/A | \$1,500 | N/A | \$2,498 | N/A | \$1,105 | N/A | 66.51 | -55.80 | 15% (+/-) | No |
| Other Adult (MAX ELIG CD = 45) | N/A | \$4,185 | N/A | \$1,338 | N/A | \$5,356 | N/A | -68.00 | 300.20 | 15% (+/-) | No |
| 1115 Adult (MAX ELIG CD = 55) | N/A | \$4,876 | N/A | \$10,455 | N/A | \$6,801 | N/A | 114.40 | -34.90 | 15% (+/-) | No |
| FFS EXPENDITURES AND USERS BY MAX TYPE OF SERVICE | | | | | | | | | | | |
| IP: Total Medicaid Paid (MAX TOS = 01) | N/A | \$213,918,111 | N/A | \$214,458,758 | N/A | \$235,757,428 | N/A | 0.25 | 9.93 | 15% (+/-) | Yes |
| IP: Number of Users | N/A | 6,996 | N/A | 7,078 | N/A | 7,168 | N/A | 1.17 | 1.27 | 15% (+/-) | Yes |
| IP: Avg Medicaid Paid per User | N/A | \$30,577 | N/A | \$30,299 | N/A | \$32,890 | N/A | -0.91 | 8.55 | 15% (+/-) | Yes |

2005-2007 MAX PSF VALIDATION TABLE
STATE: DC

| Measure | Expected Range | 2005 Value | 2005 Value Within Range | 2006 Value | 2006 Value Within Range | 2007 Value | 2007 Value Within Range | % Change 2005 - 2006 | % Change 2006 - 2007 | Cross Year Expected Range | Cross Year Within Range |
|--|----------------|--------------|-------------------------|--------------|-------------------------|--------------|-------------------------|----------------------|----------------------|---------------------------|-------------------------|
| IP: Avg Medicaid Covered Days Per User | N/A | 17 | N/A | 16 | N/A | 17 | N/A | -4.14 | 5.11 | 15% (+/-) | Yes |
| MH Aged: Total Medicaid Paid (MAX TOS = 02) | N/A | \$442,295 | N/A | \$639,331 | N/A | \$440,506 | N/A | 44.55 | -31.10 | 15% (+/-) | No |
| MH Aged: Number of Users | N/A | 11 | N/A | 61 | N/A | 53 | N/A | 454.50 | -13.10 | 15% (+/-) | Yes |
| MH Aged: Avg Medicaid Paid per User | N/A | \$40,209 | N/A | \$10,481 | N/A | \$8,311 | N/A | -73.90 | -20.70 | 15% (+/-) | No |
| IP Psych, Age < 21: Total Medicaid Paid (MAX TOS = 04) | N/A | \$3,893,122 | N/A | \$3,593,587 | N/A | \$2,731,753 | N/A | -7.69 | -24.00 | 15% (+/-) | No |
| IP Psych, Age < 21: Number of Users | N/A | 186 | N/A | 163 | N/A | 143 | N/A | -12.40 | -12.30 | 15% (+/-) | Yes |
| IP Psych, Age < 21: Avg Medicaid Paid per User | N/A | \$20,931 | N/A | \$22,047 | N/A | \$19,103 | N/A | 5.33 | -13.40 | 15% (+/-) | Yes |
| ICF/MR: Total Medicaid Paid (MAX TOS = 05) | N/A | \$49,415,015 | N/A | \$47,008,746 | N/A | \$47,742,927 | N/A | -4.87 | 1.56 | 15% (+/-) | Yes |
| ICF/MR: Number of Users | N/A | 458 | N/A | 423 | N/A | 408 | N/A | -7.64 | -3.55 | 15% (+/-) | Yes |
| ICF/MR: Avg Medicaid Paid per User | N/A | \$107,893 | N/A | \$111,132 | N/A | \$117,017 | N/A | 3.00 | 5.30 | 15% (+/-) | Yes |
| NF: Total Medicaid Paid (MAX TOS = 07) | N/A | \$48,567,506 | N/A | \$43,460,584 | N/A | \$41,126,222 | N/A | -10.50 | -5.37 | 15% (+/-) | Yes |
| NF: Number of Users | N/A | 1,174 | N/A | 982 | N/A | 822 | N/A | -16.40 | -16.30 | 15% (+/-) | No |
| NF: Avg Medicaid Paid per User | N/A | \$41,369 | N/A | \$44,257 | N/A | \$50,032 | N/A | 6.98 | 13.05 | 15% (+/-) | Yes |
| Physician: Total Medicaid Paid (MAX TOS = 08) | N/A | \$13,687,612 | N/A | \$15,228,068 | N/A | \$15,893,603 | N/A | 11.25 | 4.37 | 15% (+/-) | Yes |
| Physician: Number of Users | N/A | 15,402 | N/A | 15,383 | N/A | 15,892 | N/A | -0.12 | 3.31 | 15% (+/-) | Yes |
| Physician: Avg Medicaid Paid per User | N/A | \$889 | N/A | \$990 | N/A | \$1,000 | N/A | 11.39 | 1.03 | 15% (+/-) | Yes |
| Dental: Total Medicaid Paid (MAX TOS = 09) | N/A | \$496,275 | N/A | \$724,873 | N/A | \$2,145,993 | N/A | 46.06 | 196.10 | 15% (+/-) | No |
| Dental: Number of Users | N/A | 1,837 | N/A | 1,887 | N/A | 3,898 | N/A | 2.72 | 106.60 | 15% (+/-) | No |
| Dental: Avg Medicaid Paid per User | N/A | \$270 | N/A | \$384 | N/A | \$551 | N/A | 42.19 | 43.32 | 15% (+/-) | No |
| Other Practitioner: Total Medicaid Paid (MAX TOS = 10) | N/A | \$425,165 | N/A | \$437,361 | N/A | \$478,808 | N/A | 2.87 | 9.48 | 15% (+/-) | Yes |
| Other Practitioner: Number of Users | N/A | 3,024 | N/A | 3,049 | N/A | 3,084 | N/A | 0.83 | 1.15 | 15% (+/-) | Yes |
| Other Practitioner: Avg Medicaid Paid per User | N/A | \$141 | N/A | \$143 | N/A | \$155 | N/A | 2.03 | 8.23 | 15% (+/-) | Yes |
| Outpatient: Total Medicaid Paid (MAX TOS = 11) | N/A | \$9,569,764 | N/A | \$10,475,163 | N/A | \$10,670,071 | N/A | 9.46 | 1.86 | 15% (+/-) | Yes |
| Outpatient: Number of Users | N/A | 13,653 | N/A | 13,742 | N/A | 14,226 | N/A | 0.65 | 3.52 | 15% (+/-) | Yes |
| Outpatient: Avg Medicaid Paid per User | N/A | \$701 | N/A | \$762 | N/A | \$750 | N/A | 8.75 | -1.60 | 15% (+/-) | Yes |
| Clinic: Total Medicaid Paid (MAX TOS = 12) | N/A | \$33,087,874 | N/A | \$33,176,921 | N/A | \$31,486,431 | N/A | 0.27 | -5.10 | 15% (+/-) | Yes |
| Clinic: Number of Users | N/A | 9,760 | N/A | 9,939 | N/A | 10,695 | N/A | 1.83 | 7.61 | 15% (+/-) | Yes |
| Clinic: Avg Medicaid Paid per User | N/A | \$3,390 | N/A | \$3,338 | N/A | \$2,944 | N/A | -1.54 | -11.80 | 15% (+/-) | Yes |
| Home Health: Total Medicaid Paid (MAX TOS = 13) | N/A | \$8,743,496 | N/A | \$13,224,261 | N/A | \$19,056,259 | N/A | 51.25 | 44.10 | 15% (+/-) | No |
| Home Health: Number of Users | N/A | 1,044 | N/A | 1,121 | N/A | 1,344 | N/A | 7.38 | 19.89 | 15% (+/-) | No |
| Home Health: Avg Medicaid Paid per User | N/A | \$8,375 | N/A | \$11,797 | N/A | \$14,179 | N/A | 40.86 | 20.19 | 15% (+/-) | No |
| Lab/Xray: Total Medicaid Paid (MAX TOS = 15) | N/A | \$7,404,142 | N/A | \$8,018,352 | N/A | \$8,068,827 | N/A | 8.30 | 0.63 | 15% (+/-) | Yes |
| Lab/Xray: Number of Users | N/A | 16,530 | N/A | 16,433 | N/A | 16,969 | N/A | -0.59 | 3.26 | 15% (+/-) | Yes |
| Lab/Xray: Avg Medicaid Paid per User | N/A | \$448 | N/A | \$488 | N/A | \$476 | N/A | 8.94 | -2.55 | 15% (+/-) | Yes |
| Drugs: Total Medicaid Paid (MAX TOS = 16) | N/A | \$58,486,616 | N/A | \$64,284,470 | N/A | \$66,968,928 | N/A | 9.91 | 4.18 | 15% (+/-) | Yes |
| Drugs: Number of Users | N/A | 17,968 | N/A | 18,235 | N/A | 18,899 | N/A | 1.49 | 3.64 | 15% (+/-) | Yes |
| Drugs: Avg Medicaid Paid per User | N/A | \$3,255 | N/A | \$3,525 | N/A | \$3,544 | N/A | 8.30 | 0.52 | 15% (+/-) | Yes |
| Other Services: Total Medicaid Paid (MAX TOS = 19) | N/A | \$29,732,762 | N/A | \$37,851,898 | N/A | \$49,007,329 | N/A | 27.31 | 29.47 | 15% (+/-) | No |
| Other Services: Number of Users | N/A | 4,248 | N/A | 4,425 | N/A | 4,537 | N/A | 4.17 | 2.53 | 15% (+/-) | Yes |
| Other Services: Avg Medicaid Paid per User | N/A | \$6,999 | N/A | \$8,554 | N/A | \$10,802 | N/A | 22.21 | 26.28 | 15% (+/-) | No |
| Transportation: Total Medicaid Paid (MAX TOS = 26) | N/A | \$13,363,386 | N/A | \$12,684,194 | N/A | \$9,603,000 | N/A | -5.08 | -24.30 | 15% (+/-) | No |
| Transportation: Number of Users | N/A | 6,702 | N/A | 6,668 | N/A | 22,902 | N/A | -0.51 | 243.50 | 15% (+/-) | No |
| Transportation: Avg Medicaid Paid per User | N/A | \$1,994 | N/A | \$1,902 | N/A | \$419 | N/A | -4.60 | -78.00 | 15% (+/-) | No |
| Personal Care Services: Total Medicaid Paid (MAX TOS = 30) | N/A | \$0 | N/A | \$0 | N/A | \$0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Personal Care Services: Number of Users | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Personal Care Services: Avg Medicaid Paid per User | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Targeted Case Management: Total Medicaid Paid (MAX TOS = 31) | N/A | \$0 | N/A | \$0 | N/A | \$0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |

2005-2007 MAX PSF VALIDATION TABLE
STATE: DC

| Measure | Expected Range | 2005 Value | 2005 Value Within Range | 2006 Value | 2006 Value Within Range | 2007 Value | 2007 Value Within Range | % Change 2005 - 2006 | % Change 2006 - 2007 | Cross Year Expected Range | Cross Year Within Range |
|---|----------------|--------------|-------------------------|--------------|-------------------------|--------------|-------------------------|----------------------|----------------------|---------------------------|-------------------------|
| Targeted Case Management: Number of Users | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Targeted Case Management: Avg Medicaid Paid per User | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Rehabilitation Services: Total Medicaid Paid (MAX TOS = 33) | N/A | \$59,333 | N/A | \$52,860 | N/A | \$45,701 | N/A | -10.90 | -13.50 | 15% (+/-) | Yes |
| Rehabilitation Services: Number of Users | N/A | 26 | N/A | 32 | N/A | 33 | N/A | 23.08 | 3.13 | 15% (+/-) | Yes |
| Rehabilitation Services: Avg Medicaid Paid per User | N/A | \$2,282 | N/A | \$1,652 | N/A | \$1,385 | N/A | -27.60 | -16.20 | 15% (+/-) | No |
| PT/OT/Speech/Hearing: Total Medicaid Paid (MAX TOS = 34) | N/A | \$0 | N/A | \$0 | N/A | \$0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| PT/OT/Speech/Hearing: Number of Users | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| PT/OT/Speech/Hearing: Avg Medicaid Paid per User | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Hospice: Total Medicaid Paid (MAX TOS = 35) | N/A | \$785,537 | N/A | \$1,005,873 | N/A | \$1,232,124 | N/A | 28.05 | 22.49 | 15% (+/-) | No |
| Hospice: Number of Users | N/A | 97 | N/A | 113 | N/A | 110 | N/A | 16.49 | -2.65 | 15% (+/-) | Yes |
| Hospice: Avg Medicaid Paid per User | N/A | \$8,098 | N/A | \$8,902 | N/A | \$11,201 | N/A | 9.92 | 25.83 | 15% (+/-) | No |
| Durable Medical Equipment: Total Medicaid Paid (MAX TOS = 51) | N/A | \$8,187,402 | N/A | \$9,667,538 | N/A | \$10,861,728 | N/A | 18.08 | 12.35 | 15% (+/-) | Yes |
| Durable Medical Equipment: Number of Users | N/A | 9,122 | N/A | 8,936 | N/A | 9,535 | N/A | -2.04 | 6.70 | 15% (+/-) | Yes |
| Durable Medical Equipment: Avg Medicaid Paid per User | N/A | \$898 | N/A | \$1,082 | N/A | \$1,139 | N/A | 20.54 | 5.29 | 15% (+/-) | Yes |
| Residential Care: Total Medicaid Paid (MAX TOS = 52) | N/A | \$0 | N/A | \$0 | N/A | \$2,987,387 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Residential Care: Number of Users | N/A | 0 | N/A | 0 | N/A | 242 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Residential Care: Avg Medicaid Paid per User | N/A | Div by 0 | N/A | Div by 0 | N/A | \$12,345 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Psych Services: Total Medicaid Paid (MAX TOS = 53) | N/A | \$41,541,150 | N/A | \$39,143,170 | N/A | \$40,292,059 | N/A | -5.77 | 2.94 | 15% (+/-) | Yes |
| Psych Services: Number of Users | N/A | 9,020 | N/A | 8,685 | N/A | 8,954 | N/A | -3.71 | 3.10 | 15% (+/-) | Yes |
| Psych Services: Avg Medicaid Paid per User | N/A | \$4,605 | N/A | \$4,507 | N/A | \$4,500 | N/A | -2.14 | -0.16 | 15% (+/-) | Yes |
| Adult Day Care: Total Medicaid Paid (MAX TOS = 54) | N/A | \$0 | N/A | \$0 | N/A | \$0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Adult Day Care: Number of Users | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Adult Day Care: Avg Medicaid Paid per User | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| AVERAGE FFS MEDICAID AMOUNT PAID PER NON-DUAL FFS ENROLLEE BY MAX TYPE OF SERVICE | | | | | | | | | | | |
| Inpatient Hospital (MAX TOS = 01) | N/A | \$6,685 | N/A | \$6,851 | N/A | \$7,294 | N/A | 2.49 | 6.48 | 15% (+/-) | Yes |
| Aged | N/A | \$5,190 | N/A | \$4,295 | N/A | \$5,703 | N/A | -17.30 | 32.78 | 15% (+/-) | No |
| Disabled | N/A | \$9,380 | N/A | \$9,329 | N/A | \$9,412 | N/A | -0.55 | 0.89 | 15% (+/-) | Yes |
| Child | N/A | \$2,283 | N/A | \$2,292 | N/A | \$2,631 | N/A | 0.39 | 14.78 | 15% (+/-) | Yes |
| Adult | N/A | \$1,669 | N/A | \$1,742 | N/A | \$1,337 | N/A | 4.35 | -23.30 | 15% (+/-) | No |
| ILTC (MAX TOS = 02,04,05,07) | N/A | \$3,197 | N/A | \$3,025 | N/A | \$2,848 | N/A | -5.38 | -5.86 | 15% (+/-) | Yes |
| Aged | N/A | \$12,900 | N/A | \$13,005 | N/A | \$12,045 | N/A | 0.81 | -7.38 | 15% (+/-) | Yes |
| Disabled | N/A | \$4,193 | N/A | \$3,815 | N/A | \$3,416 | N/A | -9.02 | -10.50 | 15% (+/-) | Yes |
| Child | N/A | \$390 | N/A | \$376 | N/A | \$330 | N/A | -3.74 | -12.10 | 15% (+/-) | Yes |
| Adult | N/A | \$475 | N/A | \$403 | N/A | \$405 | N/A | -15.30 | 0.69 | 15% (+/-) | Yes |
| Drugs (MAX TOS = 16) | N/A | \$1,828 | N/A | \$2,053 | N/A | \$2,072 | N/A | 12.36 | 0.90 | 15% (+/-) | Yes |
| Aged | N/A | \$927 | N/A | \$1,096 | N/A | \$1,130 | N/A | 18.28 | 3.12 | 15% (+/-) | Yes |
| Disabled | N/A | \$2,475 | N/A | \$2,629 | N/A | \$2,781 | N/A | 6.20 | 5.81 | 15% (+/-) | Yes |
| Child | N/A | \$352 | N/A | \$361 | N/A | \$350 | N/A | 2.65 | -2.94 | 15% (+/-) | Yes |
| Adult | N/A | \$1,630 | N/A | \$2,445 | N/A | \$820 | N/A | 49.96 | -66.50 | 15% (+/-) | No |
| All Other Services | N/A | \$5,239 | N/A | \$5,817 | N/A | \$6,255 | N/A | 11.03 | 7.54 | 15% (+/-) | Yes |
| Aged | N/A | \$2,186 | N/A | \$2,469 | N/A | \$6,321 | N/A | 12.96 | 156.00 | 15% (+/-) | No |
| Disabled | N/A | \$4,870 | N/A | \$5,359 | N/A | \$6,592 | N/A | 10.04 | 23.01 | 15% (+/-) | No |
| Child | N/A | \$7,369 | N/A | \$7,353 | N/A | \$6,773 | N/A | -0.21 | -7.90 | 15% (+/-) | Yes |
| Adult | N/A | \$3,894 | N/A | \$6,495 | N/A | \$955 | N/A | 66.79 | -85.30 | 15% (+/-) | No |
| PERCENT OF NON-DUAL FFS ENROLLEES WITH CLAIMS BY SELECTED MAX TYPE OF SERVICE | | | | | | | | | | | |
| % Non-Dual FFS Enrollees with IP Claims (MAX TOS = 01) | N/A | 21.86 | N/A | 22.61 | N/A | 22.18 | N/A | 3.43 | -1.91 | 15% (+/-) | Yes |
| Aged | N/A | 19.32 | N/A | 17.16 | N/A | 19.93 | N/A | -11.20 | 16.15 | 15% (+/-) | No |

2005-2007 MAX PSF VALIDATION TABLE
STATE: DC

| Measure | Expected Range | 2005 Value | 2005 Value Within Range | 2006 Value | 2006 Value Within Range | 2007 Value | 2007 Value Within Range | % Change 2005 - 2006 | % Change 2006 - 2007 | Cross Year Expected Range | Cross Year Within Range |
|--|----------------|------------|-------------------------|------------|-------------------------|-------------|-------------------------|----------------------|----------------------|---------------------------|-------------------------|
| Disabled | N/A | 28.42 | N/A | 27.65 | N/A | 26.12 | N/A | -2.70 | -5.55 | 15% (+/-) | Yes |
| Child | N/A | 10.85 | N/A | 14.24 | N/A | 13.74 | N/A | 31.26 | -3.50 | 15% (+/-) | Yes |
| Adult | N/A | 9.94 | N/A | 10.26 | N/A | 9.95 | N/A | 3.23 | -3.03 | 15% (+/-) | Yes |
| % Non-Dual FFS Enrollees with ILTC Claims (MAX TOS = 02,04,05,07) | N/A | 5.67 | N/A | 5.18 | N/A | 4.40 | N/A | -8.69 | -15.10 | 15% (+/-) | No |
| Aged | N/A | 27.26 | N/A | 26.16 | N/A | 23.01 | N/A | -4.05 | -12.10 | 15% (+/-) | Yes |
| Disabled | N/A | 6.78 | N/A | 6.05 | N/A | 4.83 | N/A | -10.80 | -20.10 | 15% (+/-) | No |
| Child | N/A | 1.64 | N/A | 1.42 | N/A | 1.22 | N/A | -13.60 | -14.20 | 15% (+/-) | Yes |
| Adult | N/A | 1.08 | N/A | 0.79 | N/A | 0.67 | N/A | -27.00 | -15.30 | 15% (+/-) | No |
| % with Ratio of ILTC Days/Enrollment Days > 1 | N/A | 0.55 | N/A | 0.31 | N/A | 0.98 | N/A | -44.00 | 219.40 | 15% (+/-) | No |
| % Non-Dual FFS Enrollees with Drug Claims (MAX TOS = 16) | N/A | 56.15 | N/A | 58.25 | N/A | 58.47 | N/A | 3.75 | 0.38 | 15% (+/-) | Yes |
| Aged | N/A | 45.90 | N/A | 55.07 | N/A | 54.71 | N/A | 19.99 | -0.66 | 15% (+/-) | Yes |
| Disabled | N/A | 67.76 | N/A | 68.26 | N/A | 68.97 | N/A | 0.74 | 1.04 | 15% (+/-) | Yes |
| Child | N/A | 32.83 | N/A | 34.02 | N/A | 34.71 | N/A | 3.64 | 2.02 | 15% (+/-) | Yes |
| Adult | N/A | 44.47 | N/A | 48.44 | N/A | 28.94 | N/A | 8.95 | -40.30 | 15% (+/-) | No |
| % Non-Dual FFS Enrollees with All Other Claims | N/A | 71.48 | N/A | 72.22 | N/A | 82.81 | N/A | 1.03 | 14.66 | 15% (+/-) | Yes |
| Aged | N/A | 66.07 | N/A | 69.19 | N/A | 82.79 | N/A | 4.73 | 19.65 | 15% (+/-) | No |
| Disabled | N/A | 80.39 | N/A | 78.95 | N/A | 90.47 | N/A | -1.79 | 14.59 | 15% (+/-) | Yes |
| Child | N/A | 58.65 | N/A | 59.79 | N/A | 70.45 | N/A | 1.94 | 17.82 | 15% (+/-) | No |
| Adult | N/A | 51.63 | N/A | 57.13 | N/A | 43.27 | N/A | 10.65 | -24.30 | 15% (+/-) | No |
| Avg # IP Days per Non-Dual FFS User | N/A | 17 | N/A | 16 | N/A | 17 | N/A | -4.14 | 5.11 | 15% (+/-) | Yes |
| Aged | N/A | 17 | N/A | 13 | N/A | 17 | N/A | -20.00 | 26.02 | 15% (+/-) | No |
| Disabled | N/A | 18 | N/A | 18 | N/A | 19 | N/A | -1.18 | 3.53 | 15% (+/-) | Yes |
| Child | N/A | 12 | N/A | 10 | N/A | 11 | N/A | -18.70 | 6.38 | 15% (+/-) | Yes |
| Adult | N/A | 10 | N/A | 8 | N/A | 7 | N/A | -14.70 | -19.30 | 15% (+/-) | No |
| Avg # ILTC Days per Non-Dual FFS User | N/A | 216 | N/A | 223 | N/A | 245 | N/A | 3.35 | 9.90 | 15% (+/-) | Yes |
| Aged | N/A | 265 | N/A | 272 | N/A | 278 | N/A | 2.55 | 2.31 | 15% (+/-) | Yes |
| Disabled | N/A | 221 | N/A | 227 | N/A | 253 | N/A | 2.67 | 11.52 | 15% (+/-) | Yes |
| Child | N/A | 42 | N/A | 42 | N/A | 46 | N/A | 0.85 | 10.14 | 15% (+/-) | Yes |
| Adult | N/A | 190 | N/A | 225 | N/A | 272 | N/A | 18.63 | 20.93 | 15% (+/-) | No |
| % Non-Dual FFS Enrollees with Maternal Delivery | N/A | N/A | N/A | 0.78 | N/A | 0.79 | N/A | N/A | 0.81 | 15% (+/-) | Yes |
| HIGH-COST FFS NON-DUALS AND EXPENDITURES BY SELECTED MAX TYPE OF SERVICE | | | | | | | | | | | |
| Number of FFS Non-Duals with FFS Medicaid Paid > \$1,000,000 | N/A | N/A | N/A | 0 | N/A | 1 | N/A | N/A | Div by 0 | N/A | N/A |
| Number of FFS Non-Duals with FFS Medicaid Paid > \$500,000 | N/A | N/A | N/A | 2 | N/A | 11 | N/A | N/A | 450.00 | N/A | N/A |
| Inpatient Hospital (MAX TOS = 01) > \$500,000 | N/A | N/A | N/A | 1 | N/A | 6 | N/A | N/A | 500.00 | N/A | N/A |
| ILTC (MAX TOS = 02,04,05,07) > \$200,000 | N/A | N/A | N/A | 5 | N/A | 5 | N/A | N/A | 0.00 | N/A | N/A |
| Drugs (MAX TOS = 16) > \$200,000 | N/A | N/A | N/A | 0 | N/A | 0 | N/A | N/A | Div by 0 | N/A | N/A |
| All Other Services > \$200,000 | N/A | N/A | N/A | 7 | N/A | 6 | N/A | N/A | -14.30 | N/A | N/A |
| Maximum FFS Medicaid Paid | N/A | N/A | N/A | \$632,083 | N/A | \$1,051,546 | N/A | N/A | 66.36 | N/A | N/A |
| Inpatient Hospital (MAX TOS = 01) | N/A | N/A | N/A | \$614,644 | N/A | \$782,688 | N/A | N/A | 27.34 | N/A | N/A |
| ILTC (MAX TOS = 02,04,05,07) | N/A | N/A | N/A | \$231,303 | N/A | \$1,004,890 | N/A | N/A | 334.40 | N/A | N/A |
| Drugs (MAX TOS = 16) | N/A | N/A | N/A | \$107,350 | N/A | \$132,959 | N/A | N/A | 23.86 | N/A | N/A |
| All Other Services | N/A | N/A | N/A | \$307,389 | N/A | \$309,574 | N/A | N/A | 0.71 | N/A | N/A |
| FFS EXPENDITURES AND USERS BY MAX PROGRAM TYPE | | | | | | | | | | | |
| FP: Total Medicaid Paid (PGM TYPE = 2) | N/A | \$848,847 | N/A | \$718,480 | N/A | \$479,633 | N/A | -15.40 | -33.20 | 15% (+/-) | No |
| FP: Number of Users | N/A | 333 | N/A | 286 | N/A | 245 | N/A | -14.10 | -14.30 | 15% (+/-) | Yes |
| FP: Avg Medicaid Paid per User | N/A | \$2,549 | N/A | \$2,512 | N/A | \$1,958 | N/A | -1.45 | -22.10 | 15% (+/-) | No |
| RHC: Total Medicaid Paid (PGM TYPE = 3) | N/A | \$0 | N/A | \$0 | N/A | \$0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |

2005-2007 MAX PSF VALIDATION TABLE
STATE: DC

| Measure | Expected Range | 2005 Value | 2005 Value Within Range | 2006 Value | 2006 Value Within Range | 2007 Value | 2007 Value Within Range | % Change 2005 - 2006 | % Change 2006 - 2007 | Cross Year Expected Range | Cross Year Within Range |
|---|----------------|--------------|-------------------------|--------------|-------------------------|--------------|-------------------------|----------------------|----------------------|---------------------------|-------------------------|
| RHC: Number of Users | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| RHC: Avg Medicaid Paid per User | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| FQHC: Total Medicaid Paid (PGM TYPE = 4) | N/A | \$3,673,754 | N/A | \$4,080,104 | N/A | \$4,633,272 | N/A | 11.06 | 13.56 | 15% (+/-) | Yes |
| FQHC: Number of Users | N/A | 5,097 | N/A | 5,532 | N/A | 6,729 | N/A | 8.53 | 21.64 | 15% (+/-) | No |
| FQHC: Avg Medicaid Paid per User | N/A | \$721 | N/A | \$738 | N/A | \$689 | N/A | 2.33 | -6.64 | 15% (+/-) | Yes |
| IHS: Total Medicaid Paid (PGM TYPE = 5) | N/A | \$0 | N/A | \$0 | N/A | \$0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| IHS: Number of Users | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| IHS: Avg Medicaid Paid per User | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Section 1915(c) Waiver: Total Medicaid Paid (PGM TYPE = 6,7) | N/A | \$8,189,641 | N/A | \$16,335,030 | N/A | \$30,007,880 | N/A | 99.46 | 83.70 | 15% (+/-) | No |
| Section 1915(c) Waiver: Number of Users | N/A | 624 | N/A | 884 | N/A | 906 | N/A | 41.67 | 2.49 | 15% (+/-) | Yes |
| Section 1915(c) Waiver: Avg Medicaid Paid per User | N/A | \$13,124 | N/A | \$18,479 | N/A | \$33,121 | N/A | 40.80 | 79.24 | 15% (+/-) | No |
| FFS COMMUNITY-BASED LONG-TERM CARE EXPENDITURES AND USERS | | | | | | | | | | | |
| Total FFS CLTC Medicaid Paid (Excludes CLTC FLAG = 16-20) | N/A | \$16,933,137 | N/A | \$29,559,291 | N/A | \$49,064,139 | N/A | 74.56 | 65.99 | 15% (+/-) | No |
| Number of Non-Dual CLTC Users (Excludes CLTC FLAG = 16-20) | N/A | 1,471 | N/A | 1,722 | N/A | 1,926 | N/A | 17.06 | 11.85 | 15% (+/-) | Yes |
| Avg FFS CLTC Medicaid Paid per Non-Dual User (Excludes CLTC FLAG = 16-20) | N/A | \$11,511 | N/A | \$17,166 | N/A | \$25,475 | N/A | 49.12 | 48.40 | 15% (+/-) | No |
| Aged | N/A | \$8,149 | N/A | \$9,714 | N/A | \$32,057 | N/A | 19.20 | 230.00 | 15% (+/-) | No |
| Disabled | N/A | \$10,233 | N/A | \$16,156 | N/A | \$25,204 | N/A | 57.89 | 56.00 | 15% (+/-) | No |
| Child | N/A | \$3,166 | N/A | \$675 | N/A | \$1,578 | N/A | -78.70 | 133.80 | 15% (+/-) | No |
| Adult | N/A | \$17,520 | N/A | \$25,193 | N/A | \$2,520 | N/A | 43.80 | -90.00 | 15% (+/-) | No |
| % Non-Dual FFS Enrollees with CLTC Claims (Excludes CLTC FLAG = 16-20) | N/A | 4.60 | N/A | 5.50 | N/A | 5.96 | N/A | 19.67 | 8.33 | 15% (+/-) | Yes |
| Aged | N/A | 4.19 | N/A | 3.32 | N/A | 10.87 | N/A | -20.80 | 227.60 | 15% (+/-) | No |
| Disabled | N/A | 5.14 | N/A | 5.52 | N/A | 8.10 | N/A | 7.49 | 46.66 | 15% (+/-) | No |
| Child | N/A | 0.94 | N/A | 1.86 | N/A | 0.10 | N/A | 97.66 | -94.60 | 15% (+/-) | No |
| Adult | N/A | 9.16 | N/A | 14.42 | N/A | 0.29 | N/A | 57.49 | -98.00 | 15% (+/-) | No |
| Total FFS CLTC Medicaid Paid (Section 1915(c) Claims Only - Excludes CLTC FLAG = 11-20) | N/A | \$8,189,641 | N/A | \$16,335,030 | N/A | \$30,007,880 | N/A | 99.46 | 83.70 | 15% (+/-) | No |
| # Non-Dual CLTC Users (Section 1915(c) Claims Only - Excludes CLTC FLAG = 11-20) | N/A | 624 | N/A | 884 | N/A | 907 | N/A | 41.67 | 2.60 | 15% (+/-) | Yes |
| Avg FFS CLTC Medicaid Paid per Non-Dual User (Section 1915(c) Claims Only - Excludes CLTC FLAG = 11-20) | N/A | \$13,124 | N/A | \$18,479 | N/A | \$33,085 | N/A | 40.80 | 79.04 | 15% (+/-) | No |
| Aged | N/A | \$8,602 | N/A | \$4,321 | N/A | \$25,093 | N/A | -49.80 | 480.70 | 15% (+/-) | No |
| Disabled | N/A | \$9,579 | N/A | \$16,086 | N/A | \$34,061 | N/A | 67.93 | 111.70 | 15% (+/-) | No |
| Child | N/A | \$209 | N/A | \$230 | N/A | \$390 | N/A | 10.41 | 69.17 | 15% (+/-) | No |
| Adult | N/A | \$17,452 | N/A | \$25,460 | N/A | \$9,687 | N/A | 45.88 | -62.00 | 15% (+/-) | No |
| % Non-Dual FFS Enrollees with CLTC Claims (Section 1915(c) Claims Only - Excludes CLTC FLAG = 11-20) | N/A | 1.95 | N/A | 2.82 | N/A | 2.81 | N/A | 44.82 | -0.62 | 15% (+/-) | Yes |
| Aged | N/A | 0.68 | N/A | 0.47 | N/A | 7.34 | N/A | -30.70 | 1,448.00 | 15% (+/-) | No |
| Disabled | N/A | 1.28 | N/A | 1.70 | N/A | 3.71 | N/A | 32.03 | 118.70 | 15% (+/-) | No |
| Child | N/A | 0.50 | N/A | 1.62 | N/A | 0.06 | N/A | 225.00 | -96.50 | 15% (+/-) | No |
| Adult | N/A | 8.78 | N/A | 13.86 | N/A | 0.05 | N/A | 57.91 | -99.70 | 15% (+/-) | No |
| FFS INFORMATION FOR DUAL MEDICAID ENROLLEES (excludes non-EDB duals, duals ever enrolled in HMO/HIOS or PACE, duals with only restricted benefits, duals with missing eligibility information, and prescription drug only enrollees)---NOTE: non-EDB duals and duals with restricted benefits were not excluded prior to 2001. Prescription drug only enrollees were NOT excluded prior to 2003. PACE enrollees were not excluded prior to 2007. | | | | | | | | | | | |
| Total EDB Dual FFS Enrollees | N/A | 19,269 | N/A | 18,946 | N/A | 18,866 | N/A | -1.68 | -0.42 | 15% (+/-) | Yes |
| Number of EDB Dual FFS Recipients | N/A | 16,781 | N/A | 16,485 | N/A | 17,947 | N/A | -1.76 | 8.87 | 15% (+/-) | Yes |
| Total EDB Dual FFS Person-Years of Enrollment | N/A | 17,233 | N/A | 17,003 | N/A | 16,955 | N/A | -1.34 | -0.28 | 15% (+/-) | Yes |
| % EDB Only Dual (EDB DUAL = 50) | N/A | 1.08 | N/A | 1.63 | N/A | 2.16 | N/A | 50.60 | 32.70 | 15% (+/-) | No |
| % QMB Only (EDB DUAL = 51) | N/A | 5.31 | N/A | 3.47 | N/A | 2.42 | N/A | -34.60 | -30.30 | 15% (+/-) | No |

2005-2007 MAX PSF VALIDATION TABLE
STATE: DC

| Measure | Expected Range | 2005 Value | 2005 Value Within Range | 2006 Value | 2006 Value Within Range | 2007 Value | 2007 Value Within Range | % Change 2005 - 2006 | % Change 2006 - 2007 | Cross Year Expected Range | Cross Year Within Range |
|--|----------------|---------------|-------------------------|---------------|-------------------------|---------------|-------------------------|----------------------|----------------------|---------------------------|-------------------------|
| % QMB Plus (EDB DUAL = 52) | N/A | 89.23 | N/A | 94.89 | N/A | 95.42 | N/A | 6.34 | 0.56 | 15% (+/-) | Yes |
| % SLMB Only (EDB DUAL = 53) | N/A | 0.13 | N/A | 0.00 | N/A | 0.00 | N/A | -100.00 | Div by 0 | 15% (+/-) | N/A |
| % SLMB Plus (EDB DUAL = 54) | N/A | 1.00 | N/A | 0.01 | N/A | 0.00 | N/A | -98.90 | -100.00 | 15% (+/-) | No |
| % QDWI (EDB DUAL = 55) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| % QI 1 (EDB DUAL = 56) | N/A | 0.05 | N/A | 0.00 | N/A | 0.00 | N/A | -100.00 | Div by 0 | 15% (+/-) | N/A |
| % QI 2 (EDB DUAL = 57) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| % Other Type Dual (EDB DUAL = 58) | N/A | 3.19 | N/A | 0.00 | N/A | 0.00 | N/A | -100.00 | Div by 0 | 15% (+/-) | N/A |
| % Dual Type Unknown (EDB DUAL = 59) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| % EDB Duals with Full Benefits (EDB DUAL = 50,52,54,58) | N/A | N/A | N/A | N/A | N/A | 97.58 | N/A | N/A | N/A | 15% (+/-) | No |
| % EDB Duals with Restricted Benefits (EDB DUAL = 51,53,55,56,57) | N/A | N/A | N/A | N/A | N/A | 2.42 | N/A | N/A | N/A | 15% (+/-) | No |
| Aged EDB Dual FFS Total | N/A | 8,580 | N/A | 7,864 | N/A | 8,647 | N/A | -8.34 | 9.96 | 10% (+/-) | Yes |
| Aged, Cash (MAX ELIG CD = 11) | N/A | 2,351 | N/A | 2,292 | N/A | 2,202 | N/A | -2.51 | -3.93 | 10% (+/-) | Yes |
| Aged, Medically Needy (MAX ELIG CD = 21) | N/A | 2,638 | N/A | 2,359 | N/A | 2,047 | N/A | -10.60 | -13.20 | 10% (+/-) | No |
| Aged, Poverty (MAX ELIG CD = 31) | N/A | 2,706 | N/A | 2,284 | N/A | 2,107 | N/A | -15.60 | -7.75 | 10% (+/-) | Yes |
| Other Aged (MAX ELIG CD = 41) | N/A | 853 | N/A | 925 | N/A | 2,291 | N/A | 8.44 | 147.70 | 10% (+/-) | No |
| 1115 Aged (MAX ELIG CD = 51) | N/A | 32 | N/A | 4 | N/A | 0 | N/A | -87.50 | -100.00 | 10% (+/-) | No |
| Disabled EDB Dual FFS Total | N/A | 10,031 | N/A | 10,357 | N/A | 9,891 | N/A | 3.25 | -4.50 | 10% (+/-) | Yes |
| Disabled, Cash (MAX ELIG CD = 12) | N/A | 5,832 | N/A | 6,388 | N/A | 5,111 | N/A | 9.53 | -20.00 | 10% (+/-) | No |
| Disabled, Medically Needy (MAX ELIG CD = 22) | N/A | 1,182 | N/A | 970 | N/A | 888 | N/A | -17.90 | -8.45 | 10% (+/-) | Yes |
| Disabled, Poverty (MAX ELIG CD = 32, 3A) | N/A | 2,569 | N/A | 2,510 | N/A | 2,528 | N/A | -2.30 | 0.72 | 10% (+/-) | Yes |
| Other Disabled (MAX ELIG CD = 42) | N/A | 414 | N/A | 487 | N/A | 1,364 | N/A | 17.63 | 180.10 | 10% (+/-) | No |
| 1115 Disabled (MAX ELIG CD = 52) | N/A | 34 | N/A | 2 | N/A | 0 | N/A | -94.10 | -100.00 | 10% (+/-) | No |
| Total FFS Medicaid Paid | N/A | \$328,670,839 | N/A | \$342,345,446 | N/A | \$437,820,357 | N/A | 4.16 | 27.89 | 15% (+/-) | No |
| Avg FFS Medicaid Paid per FFS Dual | N/A | \$17,057 | N/A | \$18,070 | N/A | \$23,207 | N/A | 5.94 | 28.43 | 15% (+/-) | No |
| Avg FFS Medicaid Paid per FFS Dual Recipient (User of Any Service) | N/A | \$19,586 | N/A | \$20,767 | N/A | \$24,395 | N/A | 6.03 | 17.47 | 15% (+/-) | No |
| Total Capitation Payments | N/A | N/A | N/A | N/A | N/A | \$36,291 | N/A | N/A | N/A | 15% (+/-) | No |
| # Enrollees with HMO/HIO Payments but No Enrollment in HMO/HIO or PACE | 0 | N/A | No | N/A | No | 12 | No | N/A | N/A | 10% (+/-) | No |
| Total HMO/HIO Payments (Among People not Enrolled) | N/A | N/A | N/A | N/A | N/A | \$36,291 | N/A | N/A | N/A | 15% (+/-) | No |
| AVERAGE FFS MEDICAID AMOUNT PAID PER FFS DUAL BY MAX ELIGIBILITY GROUP | | | | | | | | | | | |
| Aged | N/A | \$17,934 | N/A | \$19,990 | N/A | \$25,493 | N/A | 11.46 | 27.53 | 15% (+/-) | No |
| Aged, Cash (MAX ELIG CD = 11) | N/A | \$12,278 | N/A | \$12,869 | N/A | \$14,142 | N/A | 4.82 | 9.89 | 15% (+/-) | Yes |
| Aged, Medically Needy (MAX ELIG CD = 21) | N/A | \$40,929 | N/A | \$47,111 | N/A | \$53,938 | N/A | 15.10 | 14.49 | 15% (+/-) | Yes |
| Aged, Poverty (MAX ELIG CD = 31) | N/A | \$4,608 | N/A | \$5,527 | N/A | \$8,325 | N/A | 19.95 | 50.61 | 15% (+/-) | No |
| Other Aged (MAX ELIG CD = 41) | N/A | \$5,340 | N/A | \$4,263 | N/A | \$26,776 | N/A | -20.20 | 528.10 | 15% (+/-) | No |
| 1115 Aged (MAX ELIG CD = 51) | N/A | \$361 | N/A | \$194 | N/A | Div by 0 | N/A | -46.10 | Div by 0 | 15% (+/-) | N/A |
| Disabled | N/A | \$15,810 | N/A | \$16,024 | N/A | \$21,515 | N/A | 1.35 | 34.27 | 15% (+/-) | No |
| Disabled, Cash (MAX ELIG CD = 12) | N/A | \$14,475 | N/A | \$14,985 | N/A | \$16,235 | N/A | 3.52 | 8.34 | 15% (+/-) | Yes |
| Disabled, Medically Needy (MAX ELIG CD = 22) | N/A | \$41,237 | N/A | \$47,476 | N/A | \$53,864 | N/A | 15.13 | 13.46 | 15% (+/-) | Yes |
| Disabled, Poverty (MAX ELIG CD = 32, 3A) | N/A | \$8,351 | N/A | \$8,355 | N/A | \$12,905 | N/A | 0.05 | 54.45 | 15% (+/-) | No |
| Other Disabled (MAX ELIG CD = 42) | N/A | \$9,549 | N/A | \$6,598 | N/A | \$36,197 | N/A | -30.90 | 448.60 | 15% (+/-) | No |
| 1115 Disabled (MAX ELIG CD = 52) | N/A | \$730 | N/A | \$143 | N/A | Div by 0 | N/A | -80.40 | Div by 0 | 15% (+/-) | N/A |
| FFS EXPENDITURES AND USERS BY MAX TYPE OF SERVICE | | | | | | | | | | | |
| IP: Total Medicaid Paid (MAX TOS = 01) | N/A | \$23,380,823 | N/A | \$25,119,009 | N/A | \$27,626,391 | N/A | 7.43 | 9.98 | 15% (+/-) | Yes |
| IP: Number of Users | N/A | 4,326 | N/A | 4,546 | N/A | 4,365 | N/A | 5.09 | -3.98 | 15% (+/-) | Yes |
| IP: Avg Medicaid Paid per User | N/A | \$5,405 | N/A | \$5,526 | N/A | \$6,329 | N/A | 2.24 | 14.54 | 15% (+/-) | Yes |
| IP: Avg Medicaid Covered Days Per User | N/A | 13 | N/A | 2 | N/A | 2 | N/A | -87.50 | 20.86 | 15% (+/-) | No |
| MH Aged: Total Medicaid Paid (MAX TOS = 02) | N/A | \$286,151 | N/A | \$140,498 | N/A | \$256,212 | N/A | -50.90 | 82.36 | 15% (+/-) | No |

2005-2007 MAX PSF VALIDATION TABLE
STATE: DC

| Measure | Expected Range | 2005 Value | 2005 Value Within Range | 2006 Value | 2006 Value Within Range | 2007 Value | 2007 Value Within Range | % Change 2005 - 2006 | % Change 2006 - 2007 | Cross Year Expected Range | Cross Year Within Range |
|--|----------------|---------------|-------------------------|---------------|-------------------------|---------------|-------------------------|----------------------|----------------------|---------------------------|-------------------------|
| MH Aged: Number of Users | N/A | 74 | N/A | 85 | N/A | 108 | N/A | 14.86 | 27.06 | 15% (+/-) | No |
| MH Aged: Avg Medicaid Paid per User | N/A | \$3,867 | N/A | \$1,653 | N/A | \$2,372 | N/A | -57.30 | 43.52 | 15% (+/-) | No |
| IP Psych, Age < 21: Total Medicaid Paid (MAX TOS = 04) | N/A | \$912 | N/A | \$11,502 | N/A | \$5,728 | N/A | 1,161.00 | -50.20 | 15% (+/-) | No |
| IP Psych, Age < 21: Number of Users | N/A | 1 | N/A | 2 | N/A | 2 | N/A | 100.00 | 0.00 | 15% (+/-) | Yes |
| IP Psych, Age < 21: Avg Medicaid Paid per User | N/A | \$912 | N/A | \$5,751 | N/A | \$2,864 | N/A | 530.60 | -50.20 | 15% (+/-) | No |
| ICF/MR: Total Medicaid Paid (MAX TOS = 05) | N/A | \$28,978,583 | N/A | \$28,114,697 | N/A | \$29,311,694 | N/A | -2.98 | 4.26 | 15% (+/-) | Yes |
| ICF/MR: Number of Users | N/A | 288 | N/A | 280 | N/A | 281 | N/A | -2.78 | 0.36 | 15% (+/-) | Yes |
| ICF/MR: Avg Medicaid Paid per User | N/A | \$100,620 | N/A | \$100,410 | N/A | \$104,312 | N/A | -0.21 | 3.89 | 15% (+/-) | Yes |
| NF: Total Medicaid Paid (MAX TOS = 07) | N/A | \$120,604,802 | N/A | \$124,747,804 | N/A | \$121,617,578 | N/A | 3.44 | -2.51 | 15% (+/-) | Yes |
| NF: Number of Users | N/A | 3,007 | N/A | 2,836 | N/A | 2,574 | N/A | -5.69 | -9.24 | 15% (+/-) | Yes |
| NF: Avg Medicaid Paid per User | N/A | \$40,108 | N/A | \$43,987 | N/A | \$47,248 | N/A | 9.67 | 7.41 | 15% (+/-) | Yes |
| Physician: Total Medicaid Paid (MAX TOS = 08) | N/A | \$990,539 | N/A | \$1,140,087 | N/A | \$968,080 | N/A | 15.10 | -15.10 | 15% (+/-) | No |
| Physician: Number of Users | N/A | 2,400 | N/A | 2,436 | N/A | 1,956 | N/A | 1.50 | -19.70 | 15% (+/-) | No |
| Physician: Avg Medicaid Paid per User | N/A | \$413 | N/A | \$468 | N/A | \$495 | N/A | 13.40 | 5.75 | 15% (+/-) | Yes |
| Dental: Total Medicaid Paid (MAX TOS = 09) | N/A | \$86,283 | N/A | \$116,126 | N/A | \$809,815 | N/A | 34.59 | 597.40 | 15% (+/-) | No |
| Dental: Number of Users | N/A | 298 | N/A | 293 | N/A | 1,227 | N/A | -1.68 | 318.80 | 15% (+/-) | No |
| Dental: Avg Medicaid Paid per User | N/A | \$290 | N/A | \$396 | N/A | \$660 | N/A | 36.88 | 66.52 | 15% (+/-) | No |
| Other Practitioner: Total Medicaid Paid (MAX TOS = 10) | N/A | \$285,398 | N/A | \$330,381 | N/A | \$336,455 | N/A | 15.76 | 1.84 | 15% (+/-) | Yes |
| Other Practitioner: Number of Users | N/A | 3,796 | N/A | 4,143 | N/A | 4,226 | N/A | 9.14 | 2.00 | 15% (+/-) | Yes |
| Other Practitioner: Avg Medicaid Paid per User | N/A | \$75 | N/A | \$80 | N/A | \$80 | N/A | 6.07 | -0.16 | 15% (+/-) | Yes |
| Outpatient: Total Medicaid Paid (MAX TOS = 11) | N/A | \$932,747 | N/A | \$980,434 | N/A | \$1,070,786 | N/A | 5.11 | 9.22 | 15% (+/-) | Yes |
| Outpatient: Number of Users | N/A | 1,766 | N/A | 1,827 | N/A | 2,148 | N/A | 3.45 | 17.57 | 15% (+/-) | No |
| Outpatient: Avg Medicaid Paid per User | N/A | \$528 | N/A | \$537 | N/A | \$499 | N/A | 1.60 | -7.11 | 15% (+/-) | Yes |
| Clinic: Total Medicaid Paid (MAX TOS = 12) | N/A | \$2,374,052 | N/A | \$2,277,083 | N/A | \$2,331,755 | N/A | -4.08 | 2.40 | 15% (+/-) | Yes |
| Clinic: Number of Users | N/A | 2,180 | N/A | 2,993 | N/A | 3,251 | N/A | 37.29 | 8.62 | 15% (+/-) | Yes |
| Clinic: Avg Medicaid Paid per User | N/A | \$1,089 | N/A | \$761 | N/A | \$717 | N/A | -30.10 | -5.73 | 15% (+/-) | Yes |
| Home Health: Total Medicaid Paid (MAX TOS = 13) | N/A | \$22,061,681 | N/A | \$34,236,476 | N/A | \$43,516,000 | N/A | 55.19 | 27.10 | 15% (+/-) | No |
| Home Health: Number of Users | N/A | 1,734 | N/A | 2,191 | N/A | 2,703 | N/A | 26.36 | 23.37 | 15% (+/-) | No |
| Home Health: Avg Medicaid Paid per User | N/A | \$12,723 | N/A | \$15,626 | N/A | \$16,099 | N/A | 22.82 | 3.03 | 15% (+/-) | Yes |
| Lab/Xray: Total Medicaid Paid (MAX TOS = 15) | N/A | \$8,860,162 | N/A | \$13,276,345 | N/A | \$19,042,241 | N/A | 49.84 | 43.43 | 15% (+/-) | No |
| Lab/Xray: Number of Users | N/A | 8,571 | N/A | 10,126 | N/A | 10,447 | N/A | 18.14 | 3.17 | 15% (+/-) | Yes |
| Lab/Xray: Avg Medicaid Paid per User | N/A | \$1,034 | N/A | \$1,311 | N/A | \$1,823 | N/A | 26.83 | 39.02 | 15% (+/-) | No |
| Drugs: Total Medicaid Paid (MAX TOS = 16) | N/A | \$50,099,535 | N/A | \$4,973,406 | N/A | \$4,081,301 | N/A | -90.10 | -17.90 | 15% (+/-) | No |
| Drugs: Number of Users | N/A | 13,315 | N/A | 8,270 | N/A | 6,662 | N/A | -37.90 | -19.40 | 15% (+/-) | No |
| Drugs: Avg Medicaid Paid per User | N/A | \$3,763 | N/A | \$601 | N/A | \$613 | N/A | -84.00 | 1.87 | 15% (+/-) | Yes |
| Other Services: Total Medicaid Paid (MAX TOS = 19) | N/A | \$43,230,820 | N/A | \$75,659,185 | N/A | \$142,800,539 | N/A | 75.01 | 88.74 | 15% (+/-) | No |
| Other Services: Number of Users | N/A | 11,976 | N/A | 13,131 | N/A | 13,050 | N/A | 9.64 | -0.62 | 15% (+/-) | Yes |
| Other Services: Avg Medicaid Paid per User | N/A | \$3,610 | N/A | \$5,762 | N/A | \$10,943 | N/A | 59.62 | 89.91 | 15% (+/-) | No |
| Transportation: Total Medicaid Paid (MAX TOS = 26) | N/A | \$8,695,065 | N/A | \$7,640,378 | N/A | \$5,530,338 | N/A | -12.10 | -27.60 | 15% (+/-) | No |
| Transportation: Number of Users | N/A | 5,331 | N/A | 4,855 | N/A | 15,914 | N/A | -8.93 | 227.80 | 15% (+/-) | No |
| Transportation: Avg Medicaid Paid per User | N/A | \$1,631 | N/A | \$1,574 | N/A | \$348 | N/A | -3.51 | -77.90 | 15% (+/-) | No |
| Personal Care Services: Total Medicaid Paid (MAX TOS = 30) | N/A | \$0 | N/A | \$0 | N/A | \$0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Personal Care Services: Number of Users | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Personal Care Services: Avg Medicaid Paid per User | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Targeted Case Management: Total Medicaid Paid (MAX TOS = 31) | N/A | \$0 | N/A | \$0 | N/A | \$0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Targeted Case Management: Number of Users | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Targeted Case Management: Avg Medicaid Paid per User | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |

2005-2007 MAX PSF VALIDATION TABLE
STATE: DC

| Measure | Expected Range | 2005 Value | 2005 Value Within Range | 2006 Value | 2006 Value Within Range | 2007 Value | 2007 Value Within Range | % Change 2005 - 2006 | % Change 2006 - 2007 | Cross Year Expected Range | Cross Year Within Range |
|---|----------------|--------------|-------------------------|--------------|-------------------------|--------------|-------------------------|----------------------|----------------------|---------------------------|-------------------------|
| Rehabilitation Services: Total Medicaid Paid (MAX TOS = 33) | N/A | \$0 | N/A | \$0 | N/A | \$0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Rehabilitation Services: Number of Users | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Rehabilitation Services: Avg Medicaid Paid per User | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| PT/OT/Speech/Hearing: Total Medicaid Paid (MAX TOS = 34) | N/A | \$0 | N/A | \$0 | N/A | \$0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| PT/OT/Speech/Hearing: Number of Users | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| PT/OT/Speech/Hearing: Avg Medicaid Paid per User | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Hospice: Total Medicaid Paid (MAX TOS = 35) | N/A | \$584,405 | N/A | \$1,215,366 | N/A | \$1,399,244 | N/A | 108.00 | 15.13 | 15% (+/-) | No |
| Hospice: Number of Users | N/A | 66 | N/A | 97 | N/A | 85 | N/A | 46.97 | -12.40 | 15% (+/-) | Yes |
| Hospice: Avg Medicaid Paid per User | N/A | \$8,855 | N/A | \$12,530 | N/A | \$16,462 | N/A | 41.50 | 31.38 | 15% (+/-) | No |
| Durable Medical Equipment: Total Medicaid Paid (MAX TOS = 51) | N/A | \$10,612,691 | N/A | \$15,388,030 | N/A | \$26,179,018 | N/A | 45.00 | 70.13 | 15% (+/-) | No |
| Durable Medical Equipment: Number of Users | N/A | 8,808 | N/A | 9,177 | N/A | 9,269 | N/A | 4.19 | 1.00 | 15% (+/-) | Yes |
| Durable Medical Equipment: Avg Medicaid Paid per User | N/A | \$1,205 | N/A | \$1,677 | N/A | \$2,824 | N/A | 39.17 | 68.44 | 15% (+/-) | No |
| Residential Care: Total Medicaid Paid (MAX TOS = 52) | N/A | \$0 | N/A | \$0 | N/A | \$2,864,066 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Residential Care: Number of Users | N/A | 0 | N/A | 0 | N/A | 227 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Residential Care: Avg Medicaid Paid per User | N/A | Div by 0 | N/A | Div by 0 | N/A | \$12,617 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Psych Services: Total Medicaid Paid (MAX TOS = 53) | N/A | \$6,574,775 | N/A | \$6,957,246 | N/A | \$8,069,469 | N/A | 5.82 | 15.99 | 15% (+/-) | No |
| Psych Services: Number of Users | N/A | 2,651 | N/A | 2,988 | N/A | 3,241 | N/A | 12.71 | 8.47 | 15% (+/-) | Yes |
| Psych Services: Avg Medicaid Paid per User | N/A | \$2,480 | N/A | \$2,328 | N/A | \$2,490 | N/A | -6.12 | 6.93 | 15% (+/-) | Yes |
| Adult Day Care: Total Medicaid Paid (MAX TOS = 54) | N/A | \$0 | N/A | \$0 | N/A | \$0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Adult Day Care: Number of Users | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Adult Day Care: Avg Medicaid Paid per User | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| AVERAGE FFS MEDICAID AMOUNT PAID PER FFS DUAL BY SELECTED MAX TYPE OF SERVICE | | | | | | | | | | | |
| Inpatient Hospital (MAX TOS = 01) | N/A | \$1,213 | N/A | \$1,326 | N/A | \$1,464 | N/A | 9.27 | 10.45 | 15% (+/-) | Yes |
| Aged | N/A | \$938 | N/A | \$1,031 | N/A | \$1,162 | N/A | 9.86 | 12.71 | 15% (+/-) | Yes |
| Disabled | N/A | \$1,491 | N/A | \$1,583 | N/A | \$1,765 | N/A | 6.18 | 11.51 | 15% (+/-) | Yes |
| ILTC (MAX TOS = 02,04,05,07) | N/A | \$7,778 | N/A | \$8,076 | N/A | \$8,014 | N/A | 3.84 | -0.77 | 15% (+/-) | Yes |
| Aged | N/A | \$12,832 | N/A | \$14,516 | N/A | \$12,805 | N/A | 13.12 | -11.80 | 15% (+/-) | Yes |
| Disabled | N/A | \$3,688 | N/A | \$3,534 | N/A | \$3,896 | N/A | -4.17 | 10.26 | 15% (+/-) | Yes |
| Drugs (MAX TOS = 16) | N/A | \$2,600 | N/A | \$263 | N/A | \$216 | N/A | -89.90 | -17.60 | 15% (+/-) | No |
| Aged | N/A | \$1,480 | N/A | \$100 | N/A | \$73 | N/A | -93.20 | -27.60 | 15% (+/-) | No |
| Disabled | N/A | \$3,529 | N/A | \$377 | N/A | \$345 | N/A | -89.30 | -8.51 | 15% (+/-) | Yes |
| All Other Services | N/A | \$5,466 | N/A | \$8,405 | N/A | \$13,512 | N/A | 53.77 | 60.77 | 15% (+/-) | No |
| Aged | N/A | \$2,683 | N/A | \$4,342 | N/A | \$11,453 | N/A | 61.81 | 163.80 | 15% (+/-) | No |
| Disabled | N/A | \$7,103 | N/A | \$10,530 | N/A | \$15,508 | N/A | 48.24 | 47.28 | 15% (+/-) | No |
| PERCENT OF FFS DUALS WITH CLAIMS BY SELECTED MAX TYPE OF SERVICE | | | | | | | | | | | |
| % FFS Duals with IP Claims (MAX TOS = 01) | N/A | 22.45 | N/A | 23.99 | N/A | 23.14 | N/A | 6.88 | -3.57 | 15% (+/-) | Yes |
| Aged | N/A | 21.36 | N/A | 23.55 | N/A | 23.60 | N/A | 10.24 | 0.23 | 15% (+/-) | Yes |
| Disabled | N/A | 23.85 | N/A | 25.05 | N/A | 22.93 | N/A | 5.03 | -8.45 | 15% (+/-) | Yes |
| % FFS Duals with ILTC Claims (MAX TOS = 02,04,05,07) | N/A | 17.45 | N/A | 16.88 | N/A | 15.69 | N/A | -3.26 | -7.02 | 15% (+/-) | Yes |
| Aged | N/A | 30.49 | N/A | 31.33 | N/A | 26.25 | N/A | 2.77 | -16.20 | 15% (+/-) | No |
| Disabled | N/A | 6.76 | N/A | 6.65 | N/A | 6.64 | N/A | -1.58 | -0.15 | 15% (+/-) | Yes |
| % FFS Duals with Drug Claims (MAX TOS = 16) | N/A | 69.10 | N/A | 43.65 | N/A | 35.31 | N/A | -36.80 | -19.10 | 15% (+/-) | No |
| Aged | N/A | 56.05 | N/A | 41.40 | N/A | 32.87 | N/A | -26.10 | -20.60 | 15% (+/-) | No |
| Disabled | N/A | 79.65 | N/A | 45.70 | N/A | 37.70 | N/A | -42.60 | -17.50 | 15% (+/-) | No |
| % FFS Duals with All Other Claims | N/A | 79.52 | N/A | 84.20 | N/A | 94.56 | N/A | 5.89 | 12.30 | 15% (+/-) | Yes |
| Aged | N/A | 75.00 | N/A | 81.75 | N/A | 95.04 | N/A | 9.00 | 16.25 | 15% (+/-) | No |
| Disabled | N/A | 82.95 | N/A | 85.68 | N/A | 94.32 | N/A | 3.29 | 10.08 | 15% (+/-) | Yes |

2005-2007 MAX PSF VALIDATION TABLE
STATE: DC

| Measure | Expected Range | 2005 Value | 2005 Value Within Range | 2006 Value | 2006 Value Within Range | 2007 Value | 2007 Value Within Range | % Change 2005 - 2006 | % Change 2006 - 2007 | Cross Year Expected Range | Cross Year Within Range |
|---|----------------|--------------|-------------------------|--------------|-------------------------|--------------|-------------------------|----------------------|----------------------|---------------------------|-------------------------|
| Avg # IP Days per FFS Dual User (MAX TOS = 01) | N/A | 13 | N/A | 2 | N/A | 2 | N/A | -87.50 | 20.86 | 15% (+/-) | No |
| Aged | N/A | 13 | N/A | 1 | N/A | 1 | N/A | -93.30 | 23.59 | 15% (+/-) | No |
| Disabled | N/A | 13 | N/A | 2 | N/A | 3 | N/A | -83.40 | 31.74 | 15% (+/-) | No |
| Avg # ILTC Days per FFS Dual User (MAX TOS = 02, 04, 05, 07) | N/A | 249 | N/A | 245 | N/A | 255 | N/A | -1.57 | 4.04 | 15% (+/-) | Yes |
| Aged | N/A | 255 | N/A | 253 | N/A | 262 | N/A | -0.70 | 3.54 | 15% (+/-) | Yes |
| Disabled | N/A | 227 | N/A | 213 | N/A | 227 | N/A | -6.05 | 6.77 | 15% (+/-) | Yes |
| HIGH-COST FFS DUALS AND EXPENDITURES BY SELECTED MAX TYPE OF SERVICE | | | | | | | | | | | |
| Number of FFS Duals with FFS Medicaid Paid > \$1,000,000 | N/A | N/A | N/A | 0 | N/A | 0 | N/A | N/A | Div by 0 | N/A | N/A |
| Number of FFS Duals with FFS Medicaid Paid > \$500,000 | N/A | N/A | N/A | 0 | N/A | 6 | N/A | N/A | Div by 0 | N/A | N/A |
| Inpatient Hospital (MAX TOS = 01) > \$500,000 | N/A | N/A | N/A | 0 | N/A | 0 | N/A | N/A | Div by 0 | N/A | N/A |
| ILTC (MAX TOS = 02,04,05,07) > \$200,000 | N/A | N/A | N/A | 1 | N/A | 3 | N/A | N/A | 200.00 | N/A | N/A |
| Drugs (MAX TOS = 16) > \$200,000 | N/A | N/A | N/A | 0 | N/A | 0 | N/A | N/A | Div by 0 | N/A | N/A |
| All Other Services > \$200,000 | N/A | N/A | N/A | 16 | N/A | 117 | N/A | N/A | 631.30 | N/A | N/A |
| Maximum FFS Medicaid Paid | N/A | N/A | N/A | \$470,525 | N/A | \$933,357 | N/A | N/A | 98.37 | N/A | N/A |
| Inpatient Hospital (MAX TOS = 01) | N/A | N/A | N/A | \$415,317 | N/A | \$405,994 | N/A | N/A | -2.24 | N/A | N/A |
| ILTC (MAX TOS = 02,04,05,07) | N/A | N/A | N/A | \$234,372 | N/A | \$243,009 | N/A | N/A | 3.69 | N/A | N/A |
| Drugs (MAX TOS = 16) | N/A | N/A | N/A | \$33,219 | N/A | \$76,134 | N/A | N/A | 129.20 | N/A | N/A |
| All Other Services | N/A | N/A | N/A | \$470,498 | N/A | \$919,212 | N/A | N/A | 95.37 | N/A | N/A |
| FFS EXPENDITURES AND USERS BY MAX PROGRAM TYPE | | | | | | | | | | | |
| FP: Total Medicaid Paid (PGM TYPE = 2) | N/A | \$28,854 | N/A | \$17,818 | N/A | \$13,407 | N/A | -38.20 | -24.80 | 15% (+/-) | No |
| FP: Number of Users | N/A | 40 | N/A | 15 | N/A | 19 | N/A | -62.50 | 26.67 | 15% (+/-) | No |
| FP: Avg Medicaid Paid per User | N/A | \$721 | N/A | \$1,188 | N/A | \$706 | N/A | 64.67 | -40.60 | 15% (+/-) | No |
| RHC: Total Medicaid Paid (PGM TYPE = 3) | N/A | \$0 | N/A | \$0 | N/A | \$0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| RHC: Number of Users | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| RHC: Avg Medicaid Paid per User | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| FQHC: Total Medicaid Paid (PGM TYPE = 4) | N/A | \$501,819 | N/A | \$557,060 | N/A | \$463,992 | N/A | 11.01 | -16.70 | 15% (+/-) | No |
| FQHC: Number of Users | N/A | 813 | N/A | 904 | N/A | 860 | N/A | 11.19 | -4.87 | 15% (+/-) | Yes |
| FQHC: Avg Medicaid Paid per User | N/A | \$617 | N/A | \$616 | N/A | \$540 | N/A | -0.17 | -12.40 | 15% (+/-) | Yes |
| IHS: Total Medicaid Paid (PGM TYPE = 5) | N/A | \$0 | N/A | \$0 | N/A | \$0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| IHS: Number of Users | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| IHS: Avg Medicaid Paid per User | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Section 1915(c) Waiver: Total Medicaid Paid (PGM TYPE = 6,7) | N/A | \$13,870,958 | N/A | \$29,131,412 | N/A | \$52,313,275 | N/A | 110.00 | 79.58 | 15% (+/-) | No |
| Section 1915(c) Waiver: Number of Users | N/A | 1,128 | N/A | 1,563 | N/A | 1,995 | N/A | 38.56 | 27.64 | 15% (+/-) | No |
| Section 1915(c) Waiver: Avg Medicaid Paid per User | N/A | \$12,297 | N/A | \$18,638 | N/A | \$26,222 | N/A | 51.57 | 40.69 | 15% (+/-) | No |
| FFS COMMUNITY-BASED LONG-TERM CARE EXPENDITURES AND USERS | | | | | | | | | | | |
| Total FFS CLTC Medicaid Paid (Excludes CLTC FLAG = 16-20) | N/A | \$35,932,639 | N/A | \$63,367,888 | N/A | \$95,829,275 | N/A | 76.35 | 51.23 | 15% (+/-) | No |
| Number of Dual CLTC Users (Excludes CLTC FLAG = 16-20) | N/A | 2,145 | N/A | 2,704 | N/A | 3,326 | N/A | 26.06 | 23.00 | 15% (+/-) | No |
| Avg FFS CLTC Medicaid Paid per Dual User (Excludes CLTC FLAG = 16-20) | N/A | \$16,752 | N/A | \$23,435 | N/A | \$28,812 | N/A | 39.89 | 22.95 | 15% (+/-) | No |
| Aged | N/A | \$10,820 | N/A | \$15,922 | N/A | \$28,891 | N/A | 47.16 | 81.45 | 15% (+/-) | No |
| Disabled | N/A | \$18,977 | N/A | \$25,604 | N/A | \$28,837 | N/A | 34.92 | 12.63 | 15% (+/-) | Yes |
| % FFS Dual Enrollees with CLTC Claims (Excludes CLTC FLAG = 16-20) | N/A | 11.13 | N/A | 14.27 | N/A | 17.63 | N/A | 28.21 | 23.52 | 15% (+/-) | No |
| Aged | N/A | 6.63 | N/A | 7.78 | N/A | 21.39 | N/A | 17.35 | 174.90 | 15% (+/-) | No |
| Disabled | N/A | 12.89 | N/A | 16.62 | N/A | 14.78 | N/A | 28.91 | -11.00 | 15% (+/-) | Yes |
| Total FFS CLTC Medicaid Paid (Section 1915(c) Claims Only - Excludes CLTC FLAG = 11-20) | N/A | \$13,870,958 | N/A | \$29,131,412 | N/A | \$52,313,275 | N/A | 110.00 | 79.58 | 15% (+/-) | No |
| # Dual CLTC Users (Section 1915(c) Claims Only - Excludes CLTC FLAG = 11-20) | N/A | 1,128 | N/A | 1,563 | N/A | 1,996 | N/A | 38.56 | 27.70 | 15% (+/-) | No |

2005-2007 MAX PSF VALIDATION TABLE
STATE: DC

| Measure | Expected Range | 2005 Value | 2005 Value Within Range | 2006 Value | 2006 Value Within Range | 2007 Value | 2007 Value Within Range | % Change 2005 - 2006 | % Change 2006 - 2007 | Cross Year Expected Range | Cross Year Within Range |
|--|----------------|---------------|-------------------------|---------------|-------------------------|-----------------|-------------------------|----------------------|----------------------|---------------------------|-------------------------|
| Avg CLTC Medicaid Paid per Dual User (Section 1915(c) Claims Only - Excludes CLTC FLAG = 11-20) | N/A | \$12,297 | N/A | \$18,638 | N/A | \$26,209 | N/A | 51.57 | 40.62 | 15% (+/-) | No |
| Aged | N/A | \$5,984 | N/A | \$11,682 | N/A | \$21,669 | N/A | 95.23 | 85.49 | 15% (+/-) | No |
| Disabled | N/A | \$10,728 | N/A | \$17,046 | N/A | \$33,397 | N/A | 58.89 | 95.92 | 15% (+/-) | No |
| % FFS Dual Enrollees with CLTC Claims (Section 1915(c) Claims Only - Excludes CLTC FLAG = 11-20) | N/A | 5.85 | N/A | 8.25 | N/A | 10.58 | N/A | 40.93 | 28.24 | 15% (+/-) | No |
| Aged | N/A | 0.86 | N/A | 1.26 | N/A | 14.09 | N/A | 45.96 | 1,019.00 | 15% (+/-) | No |
| Disabled | N/A | 7.80 | N/A | 10.60 | N/A | 7.83 | N/A | 35.99 | -26.20 | 15% (+/-) | No |
| FFS INFORMATION FOR TOTAL MEDICAID ENROLLEES (excludes people ever enrolled in HMO/HIOs or PACE, with missing eligibility information, S-CHIP only, FP Only, Aliens with only restricted benefits, duals with restricted benefits only, and prescription drug only enrollees) ---- NOTE: S-CHIP only, FP Only, duals with restricted benefits, and Aliens with restricted benefits were NOT excluded prior to 2001. Prescription drug only enrollees were NOT excluded prior to 2003. PACE enrollees were not excluded prior to 2007. | | | | | | | | | | | |
| Total FFS Enrollees | N/A | 51,271 | N/A | 50,251 | N/A | 51,187 | N/A | -1.99 | 1.86 | 15% (+/-) | Yes |
| # FFS Recipients | N/A | 40,688 | N/A | 40,072 | N/A | 45,215 | N/A | -1.51 | 12.83 | 15% (+/-) | Yes |
| % FFS Enrollees Who Are Recipients | 65-90% | 79.36 | Yes | 79.74 | Yes | 88.33 | Yes | 0.49 | 10.77 | 15% (+/-) | Yes |
| % Aged Who Are Recipients | 90-100% | 83.39 | No | 84.65 | No | 94.51 | Yes | 1.51 | 11.65 | 15% (+/-) | Yes |
| % Disabled Who Are Recipients | 85-100% | 85.10 | Yes | 83.84 | No | 92.69 | Yes | -1.48 | 10.55 | 15% (+/-) | Yes |
| % Child Who Are Recipients | 80-100% | 60.71 | No | 62.26 | No | 72.31 | No | 2.55 | 16.14 | 15% (+/-) | No |
| % Adults Who Are Recipients | 80-100% | 62.99 | No | 67.28 | No | 52.22 | No | 6.82 | -22.40 | 15% (+/-) | No |
| Total FFS Person-Years of Enrollment | N/A | 41,517 | N/A | 41,301 | N/A | 41,757 | N/A | -0.52 | 1.10 | 15% (+/-) | Yes |
| Aged Total | N/A | 9,750 | N/A | 8,919 | N/A | 9,751 | N/A | -8.52 | 9.33 | 10% (+/-) | Yes |
| Aged, Cash (MAX ELIG CD = 11) | N/A | 2,636 | N/A | 2,529 | N/A | 2,414 | N/A | -4.06 | -4.55 | 10% (+/-) | Yes |
| Aged, Medically Needy (MAX ELIG CD = 21) | N/A | 2,971 | N/A | 2,654 | N/A | 2,283 | N/A | -10.70 | -14.00 | 10% (+/-) | No |
| Aged, Poverty (MAX ELIG CD = 31) | N/A | 2,898 | N/A | 2,466 | N/A | 2,280 | N/A | -14.90 | -7.54 | 10% (+/-) | Yes |
| Other Aged (MAX ELIG CD = 41) | N/A | 1,204 | N/A | 1,265 | N/A | 2,774 | N/A | 5.07 | 119.30 | 10% (+/-) | No |
| 1115 Aged (MAX ELIG CD = 51) | N/A | 41 | N/A | 5 | N/A | 0 | N/A | -87.80 | -100.00 | 10% (+/-) | No |
| Disabled Total | N/A | 29,720 | N/A | 30,575 | N/A | 32,020 | N/A | 2.88 | 4.73 | 10% (+/-) | Yes |
| Disabled, Cash (MAX ELIG CD = 12) | N/A | 19,944 | N/A | 20,815 | N/A | 19,390 | N/A | 4.37 | -6.85 | 10% (+/-) | Yes |
| Disabled, Medically Needy (MAX ELIG CD = 22) | N/A | 6,115 | N/A | 6,191 | N/A | 6,838 | N/A | 1.24 | 10.45 | 10% (+/-) | No |
| Disabled, Poverty (MAX ELIG CD = 32, 3A) | N/A | 3,135 | N/A | 3,041 | N/A | 3,011 | N/A | -3.00 | -0.99 | 10% (+/-) | Yes |
| Other Disabled (MAX ELIG CD = 42) | N/A | 461 | N/A | 522 | N/A | 2,781 | N/A | 13.23 | 432.80 | 10% (+/-) | No |
| 1115 Disabled (MAX ELIG CD = 52) | N/A | 65 | N/A | 6 | N/A | 0 | N/A | -90.80 | -100.00 | 10% (+/-) | No |
| Child Total | N/A | 7,432 | N/A | 6,982 | N/A | 6,988 | N/A | -6.05 | 0.09 | 10% (+/-) | Yes |
| AFDC Child, Cash (MAX ELIG CD = 14) | N/A | 976 | N/A | 905 | N/A | 875 | N/A | -7.27 | -3.31 | 10% (+/-) | Yes |
| AFDC-U Child, Cash (MAX ELIG CD = 16) | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | 10% (+/-) | N/A |
| AFDC Child, Medically Needy (MAX ELIG CD = 24) | N/A | 1,256 | N/A | 1,130 | N/A | 1,366 | N/A | -10.00 | 20.88 | 10% (+/-) | No |
| Child Poverty (MAX ELIG CD = 34) | N/A | 1,033 | N/A | 991 | N/A | 984 | N/A | -4.07 | -0.71 | 10% (+/-) | Yes |
| Other Child (MAX ELIG CD = 44) | N/A | 50 | N/A | 53 | N/A | 9 | N/A | 6.00 | -83.00 | 10% (+/-) | No |
| Foster Care Child (MAX ELIG CD = 48) | N/A | 3,933 | N/A | 3,860 | N/A | 3,754 | N/A | -1.86 | -2.75 | 10% (+/-) | Yes |
| 1115 Child (MAX ELIG CD = 54) | N/A | 184 | N/A | 43 | N/A | 0 | N/A | -76.60 | -100.00 | 10% (+/-) | No |
| Adult Total | N/A | 4,369 | N/A | 3,775 | N/A | 2,428 | N/A | -13.60 | -35.70 | 10% (+/-) | No |
| AFDC Adult, Cash (MAX ELIG CD = 15) | N/A | 2,645 | N/A | 2,508 | N/A | 1,226 | N/A | -5.18 | -51.10 | 10% (+/-) | No |
| AFDC-U Adult, Cash (MAX ELIG CD = 17) | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | 10% (+/-) | N/A |
| AFDC Adult, Medically Needy (MAX ELIG CD = 25) | N/A | 1,070 | N/A | 851 | N/A | 838 | N/A | -20.50 | -1.53 | 10% (+/-) | Yes |
| Adult, Poverty (MAX ELIG CD = 35) | N/A | 139 | N/A | 109 | N/A | 123 | N/A | -21.60 | 12.84 | 10% (+/-) | No |
| Other Adult (MAX ELIG CD = 45) | N/A | 50 | N/A | 32 | N/A | 16 | N/A | -36.00 | -50.00 | 10% (+/-) | No |
| 1115 Adult (MAX ELIG CD = 55) | N/A | 465 | N/A | 275 | N/A | 225 | N/A | -40.90 | -18.20 | 10% (+/-) | No |
| Total FFS Medicaid Paid | N/A | \$871,042,397 | N/A | \$897,885,289 | N/A | \$1,034,763,377 | N/A | 3.08 | 15.24 | 15% (+/-) | No |

2005-2007 MAX PSF VALIDATION TABLE
STATE: DC

| Measure | Expected Range | 2005 Value | 2005 Value Within Range | 2006 Value | 2006 Value Within Range | 2007 Value | 2007 Value Within Range | % Change 2005 - 2006 | % Change 2006 - 2007 | Cross Year Expected Range | Cross Year Within Range |
|--|----------------|---------------|-------------------------|---------------|-------------------------|---------------|-------------------------|----------------------|----------------------|---------------------------|-------------------------|
| Avg FFS Medicaid Paid per FFS Enrollee | N/A | \$16,989 | N/A | \$17,868 | N/A | \$20,215 | N/A | 5.17 | 13.14 | 15% (+/-) | Yes |
| Avg FFS Medicaid Paid per FFS Recipient (User of Any Service) | N/A | \$21,408 | N/A | \$22,407 | N/A | \$22,885 | N/A | 4.67 | 2.14 | 15% (+/-) | Yes |
| Total Capitation Payments | N/A | N/A | N/A | N/A | N/A | \$192,342 | N/A | N/A | N/A | 15% (+/-) | No |
| # Enrollees with HMO/HIO Payments but No Enrollment in HMO/HIO or PACE | 0 | N/A | No | N/A | No | 60 | No | N/A | N/A | 10% (+/-) | No |
| Total HMO/HIO Payments (Among People not Enrolled) | N/A | N/A | N/A | N/A | N/A | \$192,342 | N/A | N/A | N/A | 15% (+/-) | No |
| AVERAGE FFS MEDICAID AMOUNT PAID PER FFS ENROLLEE BY MAX ELIGIBILITY GROUP | | | | | | | | | | | |
| Aged | N/A | \$18,326 | N/A | \$20,093 | N/A | \$25,459 | N/A | 9.64 | 26.71 | 15% (+/-) | No |
| Aged, Cash (MAX ELIG CD = 11) | N/A | \$14,092 | N/A | \$14,277 | N/A | \$15,570 | N/A | 1.32 | 9.05 | 15% (+/-) | Yes |
| Aged, Medically Needy (MAX ELIG CD = 21) | N/A | \$40,652 | N/A | \$46,660 | N/A | \$53,762 | N/A | 14.78 | 15.22 | 15% (+/-) | No |
| Aged, Poverty (MAX ELIG CD = 31) | N/A | \$4,591 | N/A | \$5,346 | N/A | \$8,041 | N/A | 16.45 | 50.42 | 15% (+/-) | No |
| Other Aged (MAX ELIG CD = 41) | N/A | \$6,175 | N/A | \$4,809 | N/A | \$25,089 | N/A | -22.10 | 421.70 | 15% (+/-) | No |
| 1115 Aged (MAX ELIG CD = 51) | N/A | \$431 | N/A | \$155 | N/A | Div by 0 | N/A | -63.90 | Div by 0 | 15% (+/-) | N/A |
| Disabled | N/A | \$19,195 | N/A | \$19,401 | N/A | \$21,989 | N/A | 1.08 | 13.34 | 15% (+/-) | Yes |
| Disabled, Cash (MAX ELIG CD = 12) | N/A | \$19,154 | N/A | \$19,447 | N/A | \$19,663 | N/A | 1.53 | 1.11 | 15% (+/-) | Yes |
| Disabled, Medically Needy (MAX ELIG CD = 22) | N/A | \$25,378 | N/A | \$25,324 | N/A | \$24,949 | N/A | -0.21 | -1.48 | 15% (+/-) | Yes |
| Disabled, Poverty (MAX ELIG CD = 32, 3A) | N/A | \$9,179 | N/A | \$9,183 | N/A | \$12,754 | N/A | 0.03 | 38.89 | 15% (+/-) | No |
| Other Disabled (MAX ELIG CD = 42) | N/A | \$9,548 | N/A | \$7,101 | N/A | \$40,927 | N/A | -25.60 | 476.40 | 15% (+/-) | No |
| 1115 Disabled (MAX ELIG CD = 52) | N/A | \$1,229 | N/A | \$56 | N/A | Div by 0 | N/A | -95.50 | Div by 0 | 15% (+/-) | N/A |
| Child | N/A | \$10,397 | N/A | \$10,380 | N/A | \$10,082 | N/A | -0.16 | -2.87 | 15% (+/-) | Yes |
| AFDC Child, Cash (MAX ELIG CD = 14) | N/A | \$5,536 | N/A | \$3,466 | N/A | \$3,248 | N/A | -37.40 | -6.31 | 15% (+/-) | Yes |
| AFDC-U Child, Cash (MAX ELIG CD = 16) | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| AFDC Child, Medically Needy (MAX ELIG CD = 24) | N/A | \$6,348 | N/A | \$5,983 | N/A | \$8,186 | N/A | -5.75 | 36.83 | 15% (+/-) | No |
| Child Poverty (MAX ELIG CD = 34) | N/A | \$2,639 | N/A | \$3,227 | N/A | \$2,212 | N/A | 22.28 | -31.40 | 15% (+/-) | No |
| Other Child (MAX ELIG CD = 44) | N/A | \$5,119 | N/A | \$2,834 | N/A | \$192 | N/A | -44.60 | -93.20 | 15% (+/-) | No |
| Foster Care Child (MAX ELIG CD = 48) | N/A | \$15,480 | N/A | \$15,344 | N/A | \$14,452 | N/A | -0.88 | -5.82 | 15% (+/-) | Yes |
| 1115 Child (MAX ELIG CD = 54) | N/A | \$160 | N/A | \$18 | N/A | Div by 0 | N/A | -88.90 | Div by 0 | 15% (+/-) | N/A |
| Adult | N/A | \$10,216 | N/A | \$14,040 | N/A | \$4,929 | N/A | 37.44 | -64.90 | 15% (+/-) | No |
| AFDC Adult, Cash (MAX ELIG CD = 15) | N/A | \$12,987 | N/A | \$17,071 | N/A | \$3,161 | N/A | 31.45 | -81.50 | 15% (+/-) | No |
| AFDC-U Adult, Cash (MAX ELIG CD = 17) | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| AFDC Adult, Medically Needy (MAX ELIG CD = 25) | N/A | \$7,049 | N/A | \$8,314 | N/A | \$7,644 | N/A | 17.93 | -8.05 | 15% (+/-) | Yes |
| Adult, Poverty (MAX ELIG CD = 35) | N/A | \$1,500 | N/A | \$2,475 | N/A | \$1,096 | N/A | 64.99 | -55.70 | 15% (+/-) | No |
| Other Adult (MAX ELIG CD = 45) | N/A | \$5,676 | N/A | \$1,288 | N/A | \$5,569 | N/A | -77.30 | 332.30 | 15% (+/-) | No |
| 1115 Adult (MAX ELIG CD = 55) | N/A | \$4,832 | N/A | \$10,187 | N/A | \$6,497 | N/A | 110.80 | -36.20 | 15% (+/-) | No |
| FFS EXPENDITURES AND USERS BY MAX TYPE OF SERVICE | | | | | | | | | | | |
| IP: Total Medicaid Paid (MAX TOS = 01) | N/A | \$237,298,934 | N/A | \$239,577,767 | N/A | \$263,383,819 | N/A | 0.96 | 9.94 | 15% (+/-) | Yes |
| IP: Number of Users | N/A | 11,322 | N/A | 11,624 | N/A | 11,533 | N/A | 2.67 | -0.78 | 15% (+/-) | Yes |
| IP: Avg Medicaid Paid per User | N/A | \$20,959 | N/A | \$20,611 | N/A | \$22,837 | N/A | -1.66 | 10.80 | 15% (+/-) | Yes |
| IP: Avg Medicaid Covered Days Per User | N/A | 16 | N/A | 11 | N/A | 11 | N/A | -32.10 | 7.88 | 15% (+/-) | Yes |
| MH Aged: Total Medicaid Paid (MAX TOS = 02) | N/A | \$728,446 | N/A | \$779,829 | N/A | \$696,718 | N/A | 7.05 | -10.70 | 15% (+/-) | Yes |
| MH Aged: Number of Users | N/A | 85 | N/A | 146 | N/A | 161 | N/A | 71.76 | 10.27 | 15% (+/-) | Yes |
| MH Aged: Avg Medicaid Paid per User | N/A | \$8,570 | N/A | \$5,341 | N/A | \$4,327 | N/A | -37.70 | -19.00 | 15% (+/-) | No |
| IP Psych, Age < 21: Total Medicaid Paid (MAX TOS = 04) | N/A | \$3,894,034 | N/A | \$3,605,089 | N/A | \$2,737,481 | N/A | -7.42 | -24.10 | 15% (+/-) | No |
| IP Psych, Age < 21: Number of Users | N/A | 187 | N/A | 165 | N/A | 145 | N/A | -11.80 | -12.10 | 15% (+/-) | Yes |
| IP Psych, Age < 21: Avg Medicaid Paid per User | N/A | \$20,824 | N/A | \$21,849 | N/A | \$18,879 | N/A | 4.92 | -13.60 | 15% (+/-) | Yes |
| ICF/MR: Total Medicaid Paid (MAX TOS = 05) | N/A | \$78,393,598 | N/A | \$75,123,443 | N/A | \$77,054,621 | N/A | -4.17 | 2.57 | 15% (+/-) | Yes |
| ICF/MR: Number of Users | N/A | 746 | N/A | 703 | N/A | 689 | N/A | -5.76 | -1.99 | 15% (+/-) | Yes |
| ICF/MR: Avg Medicaid Paid per User | N/A | \$105,085 | N/A | \$106,861 | N/A | \$111,835 | N/A | 1.69 | 4.66 | 15% (+/-) | Yes |

2005-2007 MAX PSF VALIDATION TABLE
STATE: DC

| Measure | Expected Range | 2005 Value | 2005 Value Within Range | 2006 Value | 2006 Value Within Range | 2007 Value | 2007 Value Within Range | % Change 2005 - 2006 | % Change 2006 - 2007 | Cross Year Expected Range | Cross Year Within Range |
|--|----------------|---------------|-------------------------|---------------|-------------------------|---------------|-------------------------|----------------------|----------------------|---------------------------|-------------------------|
| NF: Total Medicaid Paid (MAX TOS = 07) | N/A | \$169,172,308 | N/A | \$168,208,388 | N/A | \$162,743,800 | N/A | -0.57 | -3.25 | 15% (+/-) | Yes |
| NF: Number of Users | N/A | 4,181 | N/A | 3,818 | N/A | 3,396 | N/A | -8.68 | -11.10 | 15% (+/-) | Yes |
| NF: Avg Medicaid Paid per User | N/A | \$40,462 | N/A | \$44,057 | N/A | \$47,922 | N/A | 8.88 | 8.77 | 15% (+/-) | Yes |
| Physician: Total Medicaid Paid (MAX TOS = 08) | N/A | \$14,678,151 | N/A | \$16,368,155 | N/A | \$16,861,683 | N/A | 11.51 | 3.02 | 15% (+/-) | Yes |
| Physician: Number of Users | N/A | 17,802 | N/A | 17,819 | N/A | 17,848 | N/A | 0.10 | 0.16 | 15% (+/-) | Yes |
| Physician: Avg Medicaid Paid per User | N/A | \$825 | N/A | \$919 | N/A | \$945 | N/A | 11.41 | 2.85 | 15% (+/-) | Yes |
| Dental: Total Medicaid Paid (MAX TOS = 09) | N/A | \$582,558 | N/A | \$840,999 | N/A | \$2,955,808 | N/A | 44.36 | 251.50 | 15% (+/-) | No |
| Dental: Number of Users | N/A | 2,135 | N/A | 2,180 | N/A | 5,125 | N/A | 2.11 | 135.10 | 15% (+/-) | No |
| Dental: Avg Medicaid Paid per User | N/A | \$273 | N/A | \$386 | N/A | \$577 | N/A | 41.38 | 49.50 | 15% (+/-) | No |
| Other Practitioner: Total Medicaid Paid (MAX TOS = 10) | N/A | \$710,563 | N/A | \$767,742 | N/A | \$815,263 | N/A | 8.05 | 6.19 | 15% (+/-) | Yes |
| Other Practitioner: Number of Users | N/A | 6,820 | N/A | 7,192 | N/A | 7,310 | N/A | 5.46 | 1.64 | 15% (+/-) | Yes |
| Other Practitioner: Avg Medicaid Paid per User | N/A | \$104 | N/A | \$107 | N/A | \$112 | N/A | 2.46 | 4.48 | 15% (+/-) | Yes |
| Outpatient: Total Medicaid Paid (MAX TOS = 11) | N/A | \$10,502,511 | N/A | \$11,455,597 | N/A | \$11,740,857 | N/A | 9.08 | 2.49 | 15% (+/-) | Yes |
| Outpatient: Number of Users | N/A | 15,419 | N/A | 15,569 | N/A | 16,374 | N/A | 0.97 | 5.17 | 15% (+/-) | Yes |
| Outpatient: Avg Medicaid Paid per User | N/A | \$681 | N/A | \$736 | N/A | \$717 | N/A | 8.02 | -2.55 | 15% (+/-) | Yes |
| Clinic: Total Medicaid Paid (MAX TOS = 12) | N/A | \$35,461,926 | N/A | \$35,454,004 | N/A | \$33,818,186 | N/A | -0.02 | -4.61 | 15% (+/-) | Yes |
| Clinic: Number of Users | N/A | 11,940 | N/A | 12,932 | N/A | 13,946 | N/A | 8.31 | 7.84 | 15% (+/-) | Yes |
| Clinic: Avg Medicaid Paid per User | N/A | \$2,970 | N/A | \$2,742 | N/A | \$2,425 | N/A | -7.69 | -11.50 | 15% (+/-) | Yes |
| Home Health: Total Medicaid Paid (MAX TOS = 13) | N/A | \$30,805,177 | N/A | \$47,460,737 | N/A | \$62,572,259 | N/A | 54.07 | 31.84 | 15% (+/-) | No |
| Home Health: Number of Users | N/A | 2,778 | N/A | 3,312 | N/A | 4,047 | N/A | 19.22 | 22.19 | 15% (+/-) | No |
| Home Health: Avg Medicaid Paid per User | N/A | \$11,089 | N/A | \$14,330 | N/A | \$15,461 | N/A | 29.23 | 7.90 | 15% (+/-) | Yes |
| Lab/Xray: Total Medicaid Paid (MAX TOS = 15) | N/A | \$16,264,304 | N/A | \$21,294,697 | N/A | \$27,111,068 | N/A | 30.93 | 27.31 | 15% (+/-) | No |
| Lab/Xray: Number of Users | N/A | 25,101 | N/A | 26,559 | N/A | 27,416 | N/A | 5.81 | 3.23 | 15% (+/-) | Yes |
| Lab/Xray: Avg Medicaid Paid per User | N/A | \$648 | N/A | \$802 | N/A | \$989 | N/A | 23.74 | 23.33 | 15% (+/-) | No |
| Drugs: Total Medicaid Paid (MAX TOS = 16) | N/A | \$108,586,151 | N/A | \$69,257,876 | N/A | \$71,050,229 | N/A | -36.20 | 2.59 | 15% (+/-) | Yes |
| Drugs: Number of Users | N/A | 31,283 | N/A | 26,505 | N/A | 25,561 | N/A | -15.30 | -3.56 | 15% (+/-) | Yes |
| Drugs: Avg Medicaid Paid per User | N/A | \$3,471 | N/A | \$2,613 | N/A | \$2,780 | N/A | -24.70 | 6.38 | 15% (+/-) | Yes |
| Other Services: Total Medicaid Paid (MAX TOS = 19) | N/A | \$72,963,582 | N/A | \$113,511,083 | N/A | \$191,807,868 | N/A | 55.57 | 68.98 | 15% (+/-) | No |
| Other Services: Number of Users | N/A | 16,224 | N/A | 17,556 | N/A | 17,587 | N/A | 8.21 | 0.18 | 15% (+/-) | Yes |
| Other Services: Avg Medicaid Paid per User | N/A | \$4,497 | N/A | \$6,466 | N/A | \$10,906 | N/A | 43.77 | 68.68 | 15% (+/-) | No |
| Transportation: Total Medicaid Paid (MAX TOS = 26) | N/A | \$22,058,451 | N/A | \$20,324,572 | N/A | \$15,133,338 | N/A | -7.86 | -25.50 | 15% (+/-) | No |
| Transportation: Number of Users | N/A | 12,033 | N/A | 11,523 | N/A | 38,816 | N/A | -4.24 | 236.90 | 15% (+/-) | No |
| Transportation: Avg Medicaid Paid per User | N/A | \$1,833 | N/A | \$1,764 | N/A | \$390 | N/A | -3.78 | -77.90 | 15% (+/-) | No |
| Personal Care Services: Total Medicaid Paid (MAX TOS = 30) | N/A | \$0 | N/A | \$0 | N/A | \$0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Personal Care Services: Number of Users | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Personal Care Services: Avg Medicaid Paid per User | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Targeted Case Management: Total Medicaid Paid (MAX TOS = 31) | N/A | \$0 | N/A | \$0 | N/A | \$0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Targeted Case Management: Number of Users | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Targeted Case Management: Avg Medicaid Paid per User | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Rehabilitation Services: Total Medicaid Paid (MAX TOS = 33) | N/A | \$59,333 | N/A | \$52,860 | N/A | \$45,701 | N/A | -10.90 | -13.50 | 15% (+/-) | Yes |
| Rehabilitation Services: Number of Users | N/A | 26 | N/A | 32 | N/A | 33 | N/A | 23.08 | 3.13 | 15% (+/-) | Yes |
| Rehabilitation Services: Avg Medicaid Paid per User | N/A | \$2,282 | N/A | \$1,652 | N/A | \$1,385 | N/A | -27.60 | -16.20 | 15% (+/-) | No |
| PT/OT/Speech/Hearing: Total Medicaid Paid (MAX TOS = 34) | N/A | \$0 | N/A | \$0 | N/A | \$0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| PT/OT/Speech/Hearing: Number of Users | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| PT/OT/Speech/Hearing: Avg Medicaid Paid per User | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Hospice: Total Medicaid Paid (MAX TOS = 35) | N/A | \$1,369,942 | N/A | \$2,221,239 | N/A | \$2,631,368 | N/A | 62.14 | 18.46 | 15% (+/-) | No |
| Hospice: Number of Users | N/A | 163 | N/A | 210 | N/A | 195 | N/A | 28.83 | -7.14 | 15% (+/-) | Yes |

2005-2007 MAX PSF VALIDATION TABLE
STATE: DC

| Measure | Expected Range | 2005 Value | 2005 Value Within Range | 2006 Value | 2006 Value Within Range | 2007 Value | 2007 Value Within Range | % Change 2005 - 2006 | % Change 2006 - 2007 | Cross Year Expected Range | Cross Year Within Range |
|---|----------------|--------------|-------------------------|--------------|-------------------------|--------------|-------------------------|----------------------|----------------------|---------------------------|-------------------------|
| Hospice: Avg Medicaid Paid per User | N/A | \$8,405 | N/A | \$10,577 | N/A | \$13,494 | N/A | 25.85 | 27.58 | 15% (+/-) | No |
| Durable Medical Equipment: Total Medicaid Paid (MAX TOS = 51) | N/A | \$18,800,093 | N/A | \$25,055,568 | N/A | \$37,040,746 | N/A | 33.27 | 47.83 | 15% (+/-) | No |
| Durable Medical Equipment: Number of Users | N/A | 17,930 | N/A | 18,113 | N/A | 18,804 | N/A | 1.02 | 3.82 | 15% (+/-) | Yes |
| Durable Medical Equipment: Avg Medicaid Paid per User | N/A | \$1,049 | N/A | \$1,383 | N/A | \$1,970 | N/A | 31.93 | 42.40 | 15% (+/-) | No |
| Residential Care: Total Medicaid Paid (MAX TOS = 52) | N/A | \$0 | N/A | \$0 | N/A | \$5,851,453 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Residential Care: Number of Users | N/A | 0 | N/A | 0 | N/A | 469 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Residential Care: Avg Medicaid Paid per User | N/A | Div by 0 | N/A | Div by 0 | N/A | \$12,476 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Psych Services: Total Medicaid Paid (MAX TOS = 53) | N/A | \$48,115,925 | N/A | \$46,100,416 | N/A | \$48,361,528 | N/A | -4.19 | 4.91 | 15% (+/-) | Yes |
| Psych Services: Number of Users | N/A | 11,671 | N/A | 11,673 | N/A | 12,195 | N/A | 0.02 | 4.47 | 15% (+/-) | Yes |
| Psych Services: Avg Medicaid Paid per User | N/A | \$4,123 | N/A | \$3,949 | N/A | \$3,966 | N/A | -4.21 | 0.41 | 15% (+/-) | Yes |
| Adult Day Care: Total Medicaid Paid (MAX TOS = 54) | N/A | \$0 | N/A | \$0 | N/A | \$0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Adult Day Care: Number of Users | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Adult Day Care: Avg Medicaid Paid per User | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| AVERAGE FFS MEDICAID AMOUNT PAID PER FFS ENROLLEE BY SELECTED MAX TYPE OF SERVICE | | | | | | | | | | | |
| Inpatient Hospital (MAX TOS = 01) | N/A | \$4,628 | N/A | \$4,768 | N/A | \$5,146 | N/A | 3.01 | 7.93 | 15% (+/-) | Yes |
| Aged | N/A | \$1,449 | N/A | \$1,417 | N/A | \$1,676 | N/A | -2.18 | 18.28 | 15% (+/-) | No |
| Disabled | N/A | \$6,717 | N/A | \$6,705 | N/A | \$7,050 | N/A | -0.18 | 5.14 | 15% (+/-) | Yes |
| Child | N/A | \$2,282 | N/A | \$2,291 | N/A | \$2,630 | N/A | 0.41 | 14.78 | 15% (+/-) | Yes |
| Adult | N/A | \$1,504 | N/A | \$1,571 | N/A | \$1,206 | N/A | 4.45 | -23.20 | 15% (+/-) | No |
| ILTC (MAX TOS = 02,04,05,07) | N/A | \$4,919 | N/A | \$4,930 | N/A | \$4,752 | N/A | 0.22 | -3.61 | 15% (+/-) | Yes |
| Aged | N/A | \$12,840 | N/A | \$14,337 | N/A | \$12,719 | N/A | 11.66 | -11.30 | 15% (+/-) | Yes |
| Disabled | N/A | \$4,023 | N/A | \$3,720 | N/A | \$3,564 | N/A | -7.53 | -4.18 | 15% (+/-) | Yes |
| Child | N/A | \$390 | N/A | \$376 | N/A | \$330 | N/A | -3.73 | -12.10 | 15% (+/-) | Yes |
| Adult | N/A | \$1,040 | N/A | \$924 | N/A | \$1,146 | N/A | -11.20 | 23.97 | 15% (+/-) | No |
| Drugs (MAX TOS = 16) | N/A | \$2,118 | N/A | \$1,378 | N/A | \$1,388 | N/A | -34.90 | 0.71 | 15% (+/-) | Yes |
| Aged | N/A | \$1,414 | N/A | \$218 | N/A | \$192 | N/A | -84.60 | -11.80 | 15% (+/-) | Yes |
| Disabled | N/A | \$2,831 | N/A | \$1,866 | N/A | \$2,029 | N/A | -34.10 | 8.72 | 15% (+/-) | Yes |
| Child | N/A | \$352 | N/A | \$361 | N/A | \$350 | N/A | 2.61 | -2.94 | 15% (+/-) | Yes |
| Adult | N/A | \$1,844 | N/A | \$2,049 | N/A | \$725 | N/A | 11.10 | -64.60 | 15% (+/-) | No |
| All Other Services | N/A | \$5,324 | N/A | \$6,793 | N/A | \$8,930 | N/A | 27.58 | 31.47 | 15% (+/-) | No |
| Aged | N/A | \$2,624 | N/A | \$4,121 | N/A | \$10,872 | N/A | 57.05 | 163.90 | 15% (+/-) | No |
| Disabled | N/A | \$5,624 | N/A | \$7,110 | N/A | \$9,346 | N/A | 26.44 | 31.44 | 15% (+/-) | No |
| Child | N/A | \$7,373 | N/A | \$7,352 | N/A | \$6,772 | N/A | -0.28 | -7.90 | 15% (+/-) | Yes |
| Adult | N/A | \$5,827 | N/A | \$9,496 | N/A | \$1,852 | N/A | 62.96 | -80.50 | 15% (+/-) | No |
| PERCENT OF FFS ENROLLEES WITH CLAIMS BY SELECTED MAX TYPE OF SERVICE | | | | | | | | | | | |
| % FFS Enrollees with IP Claims (MAX TOS = 01) | N/A | 22.08 | N/A | 23.13 | N/A | 22.53 | N/A | 4.75 | -2.60 | 15% (+/-) | Yes |
| Aged | N/A | 21.12 | N/A | 22.79 | N/A | 23.19 | N/A | 7.94 | 1.73 | 15% (+/-) | Yes |
| Disabled | N/A | 26.87 | N/A | 26.77 | N/A | 25.13 | N/A | -0.40 | -6.11 | 15% (+/-) | Yes |
| Child | N/A | 10.84 | N/A | 14.24 | N/A | 13.74 | N/A | 31.27 | -3.50 | 15% (+/-) | Yes |
| Adult | N/A | 10.76 | N/A | 10.94 | N/A | 10.91 | N/A | 1.70 | -0.24 | 15% (+/-) | Yes |
| % FFS Enrollees with ILTC Claims (MAX TOS = 02,04,05,07) | N/A | 10.10 | N/A | 9.59 | N/A | 8.56 | N/A | -5.02 | -10.70 | 15% (+/-) | Yes |
| Aged | N/A | 30.10 | N/A | 30.72 | N/A | 25.88 | N/A | 2.05 | -15.70 | 15% (+/-) | No |
| Disabled | N/A | 6.77 | N/A | 6.25 | N/A | 5.39 | N/A | -7.67 | -13.80 | 15% (+/-) | Yes |
| Child | N/A | 1.64 | N/A | 1.42 | N/A | 1.22 | N/A | -13.60 | -14.20 | 15% (+/-) | Yes |
| Adult | N/A | 2.47 | N/A | 1.83 | N/A | 1.98 | N/A | -26.10 | 8.16 | 15% (+/-) | Yes |
| % FFS Enrollees with Drug Claims (MAX TOS = 16) | N/A | 61.01 | N/A | 52.75 | N/A | 49.94 | N/A | -13.60 | -5.33 | 15% (+/-) | Yes |
| Aged | N/A | 54.83 | N/A | 43.02 | N/A | 35.34 | N/A | -21.50 | -17.90 | 15% (+/-) | No |

2005-2007 MAX PSF VALIDATION TABLE
STATE: DC

| Measure | Expected Range | 2005 Value | 2005 Value Within Range | 2006 Value | 2006 Value Within Range | 2007 Value | 2007 Value Within Range | % Change 2005 - 2006 | % Change 2006 - 2007 | Cross Year Expected Range | Cross Year Within Range |
|----------|----------------|------------|-------------------------|------------|-------------------------|------------|-------------------------|----------------------|----------------------|---------------------------|-------------------------|
| Disabled | N/A | 71.77 | N/A | 60.62 | N/A | 59.31 | N/A | -15.50 | -2.16 | 15% (+/-) | Yes |