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2003-2005 MAX IP VALIDATION TABLE  
STATE: MD

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Change Within Expected Range
<b>All IP Claims</b>										
Total Number of Claims	N/A	141,254	N/A	135,033	N/A	161,123	N/A	-4.40	19.32	No
% Encounter Claims	N/A	49.08	N/A	46.19	N/A	50.50	N/A	-5.88	9.33	Yes
% 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	71,933	N/A	72,664	N/A	79,760	N/A	1.02	9.77	Yes
% Crossover	5-20	35.43	No	36.91	No	34.83	No	4.18	-5.64	Yes
% Adjusted Claims	N/A	1.65	N/A	2.02	N/A	5.17	N/A	22.51	155.80	No
% Standard Adjustments	> 1%	96.71	Yes	95.23	Yes	97.07	Yes	-1.53	1.92	Yes
Aver. Amt. Pd Adjust. ( include \$0)	N/A	\$12,284	N/A	\$17,724	N/A	\$11,135	N/A	44.28	-37.20	No
Total number of claims with missing Medicaid eligibility (excludes S-SCHIP only)	N/A	N/A	N/A	N/A	N/A	155	N/A	N/A	N/A	N/A
<b>FFS Non-Crossover Claims (Type of Claim=1, Crossover Claim Indicator=0)</b>										
Total Number of Claims	N/A	46,448	N/A	45,844	N/A	51,981	N/A	-1.30	13.39	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
Aver. Medicaid Amount Paid (claims with >\$0 paid)	\$2000 - \$7000	\$10,182	No	\$9,609	No	\$10,181	No	-5.63	5.96	Yes
Aver. Medicaid Amt Paid per Covered Day (>\$0 paid and >0 days claims)	N/A	\$1,395	N/A	\$1,532	N/A	\$1,615	N/A	9.81	5.46	Yes
% Claims with TPL	>0 - 10	1.01	Yes	1.08	Yes	1.14	Yes	6.93	5.30	Yes
Aver. TPL Paid for claims with TPL	N/A	\$4,625	N/A	\$5,375	N/A	\$6,504	N/A	16.23	21.00	No
% Claims with UB-92 Accommodation Codes	95-100	99.51	Yes	99.47	Yes	99.72	Yes	-0.04	0.26	Yes
Average # UB-92 Accom. Codes (at least 1 accom code)	>1	1.13	Yes	1.13	Yes	1.12	Yes	-0.39	-0.30	Yes
% Claims with UB-92 Ancillary Codes	95-100	94.52	No	91.99	No	96.69	Yes	-2.68	5.11	Yes
Average # UB-92 Ancillary Codes (at least 1 Ancillary code)	>3	9.49	Yes	9.74	Yes	9.70	Yes	2.55	-0.42	Yes
Average LOS	2-<8	6.43	Yes	5.42	Yes	5.43	Yes	-15.70	0.07	Yes
Average Covered Days (> 0 day)	2-<8	7.30	Yes	6.28	Yes	6.30	Yes	-14.10	0.42	Yes
% Begin Date = Admit Date	95-100	95.25	Yes	95.77	Yes	96.44	Yes	0.55	0.70	Yes
% IP Claims (MAX TOS 01)	95-100	99.77	Yes	99.82	Yes	99.78	Yes	0.05	-0.04	Yes
% Family Planning Claims (pgm type=2)	>0-5	0.16	Yes	0.10	Yes	0.15	Yes	-37.50	50.91	No
% Claims with PDX	98-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
Average Number of DX Codes (at least 1 DX)	>=2	2.86	Yes	3.45	Yes	4.20	Yes	20.64	21.81	No
% Claims with PDX, where length=3	5-30	6.43	Yes	6.17	Yes	6.00	Yes	-4.14	-2.67	Yes
% Claims with PDX, where length=4	15-75	25.65	Yes	26.38	Yes	24.57	Yes	2.83	-6.85	Yes
% Claims with PDX, where length=5	25-70	67.91	Yes	67.45	Yes	69.43	Yes	-0.68	2.92	Yes
% Claims with a procedure code	35-70	51.87	Yes	55.15	Yes	57.00	Yes	6.33	3.35	Yes
Average Number of Procedures for claims with at least 1 procedure code	>1	1.93	Yes	1.94	Yes	1.93	Yes	0.30	-0.36	Yes
% Claims with Procedures that have 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 Procedures that have ICD-9 Indicator	N/A	99.98	N/A	99.99	N/A	99.99	N/A	0.01	0.00	Yes
% Claims with Procedures that have CPT-4 Indicator & CPT-4 format of 5n	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

2003-2005 MAX IP VALIDATION TABLE  
STATE: MD

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Change Within Expected Range
% Claims with Procedures that have ICD-9-CM Indicator & ICD-9-CM Format 3n or 4n	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
% Claims with DRG	>=90	0.00	No	0.00	No	0.00	No	Div by 0	Div by 0	N/A
% Claims Maternal Delivery Indicator	N/A	11.41	N/A	11.90	N/A	12.54	N/A	4.26	5.42	Yes
% Claims Newborn Delivery Indicator (only for separate infant delivery claims using mother's ID)	N/A	13.86	N/A	14.33	N/A	14.50	N/A	3.38	1.20	Yes
<b>Patient Status</b>										
% Home	75-90	80.94	Yes	79.00	Yes	78.68	Yes	-2.39	-0.41	Yes
% Transferred	1-10	13.62	No	16.38	No	16.99	No	20.25	3.76	Yes
% Still a Patient	>0 - 2	3.82	No	2.96	No	2.67	No	-22.60	-9.59	Yes
% Died	>0 - 3	1.63	Yes	1.66	Yes	1.51	Yes	2.26	-8.91	Yes
<b>FFS Crossover Claims (Type of Claim=1, Crossover Claim Indicator=1)</b>										
Total Number of Claims	N/A	25,485	N/A	26,820	N/A	27,779	N/A	5.24	3.58	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
Aver. Medicaid Amount Paid (claims with >\$0 paid)	N/A	\$1,244	N/A	\$1,261	N/A	\$1,238	N/A	1.41	-1.80	Yes
% Claims with TPL	N/A	0.37	N/A	0.65	N/A	0.62	N/A	74.88	-4.57	Yes
Aver. TPL Paid -claims with TPL	N/A	\$474	N/A	\$534	N/A	\$610	N/A	12.49	14.40	Yes
% Claims with UB-92 Accommodation Codes	95-100	77.35	No	83.45	No	75.49	No	7.89	-9.53	Yes
Average # UB-92 Accom. Codes (at least 1 accom code)	>1	1.21	Yes	1.19	Yes	1.17	Yes	-1.73	-1.23	Yes
% Claims with UB-92 Ancillary Codes	95-100	77.95	No	83.49	No	75.89	No	7.11	-9.10	Yes
Average # UB-92 Ancillary Codes (at least 1 Ancillary code)	>3	13.26	Yes	13.19	Yes	13.37	Yes	-0.56	1.33	Yes
Average LOS	2-<8	5.89	Yes	5.87	Yes	5.79	Yes	-0.43	-1.27	Yes
% Begin Date = Admit Date	95-100	90.41	No	93.72	No	90.19	No	3.66	-3.77	Yes
% Claims with IP TOS	95-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with DX	98-100	99.71	Yes	99.75	Yes	99.96	Yes	0.04	0.21	Yes
Average Number of DX Codes (at least 1 DX)	>=2	3.65	Yes	3.86	Yes	5.41	Yes	5.75	40.06	No
% Claims with PDX, where length=3	5-30	7.65	Yes	7.15	Yes	6.62	Yes	-6.49	-7.53	Yes
% Claims with PDX, where length=4	15-75	41.56	Yes	40.28	Yes	39.74	Yes	-3.08	-1.33	Yes
% Claims with PDX, where length=5	25-70	50.79	Yes	52.57	Yes	53.64	Yes	3.50	2.05	Yes
% Claims with a procedure code	35-70	41.56	Yes	45.76	Yes	41.40	Yes	10.12	-9.53	Yes
Average Number of Procedures for claims with at least 1 procedure code	>1	2.35	Yes	2.46	Yes	2.43	Yes	4.78	-1.39	Yes
% Claims with Procedures that have 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 Procedures that have ICD-9 Indicator	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
% Claims with Procedures that have CPT-4 Indicator & CPT-4 format of 5n	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
% Claims with Procedures that have ICD-9-CM Indicator & ICD-9-CM Format 3n or 4n	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
% Claims with DRG	>=90	0.00	No	0.00	No	0.00	No	Div by 0	Div by 0	N/A

2003-2005 MAX LT VALIDATION TABLE  
STATE: MD

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Change Within Expected Range
<b>All LT Claims</b>										
Total Number of Claims	N/A	234,366	N/A	220,638	N/A	221,297	N/A	-5.86	0.30	Yes
% Encounter Claims	N/A	0.01	N/A	0.01	N/A	0.59	N/A	-5.58	5,292.00	No
% 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	234,339	N/A	220,614	N/A	219,999	N/A	-5.86	-0.28	Yes
% Crossover	5-20	0.00	No	0.00	No	0.00	No	Div by 0	Div by 0	N/A
% Adjusted Claims	> 1%	36.14	Yes	32.68	Yes	34.11	Yes	-9.56	4.36	Yes
% Standard Adjustments	N/A	99.03	N/A	98.75	N/A	98.73	N/A	-0.29	-0.02	Yes
Aver. Amt. Pd Adjust. ( include \$0)	N/A	\$4,452	N/A	\$4,786	N/A	\$4,931	N/A	7.52	3.03	Yes
Total number of claims with missing Medicaid eligibility (excludes S-SCHIP only)	N/A	N/A	N/A	N/A	N/A	68	N/A	N/A	N/A	N/A
<b>FFS Non-Crossover Claims (Type of Claim=1 Crossover Claim Indicator=0)</b>										
Total Number of Claims	N/A	234,339	N/A	220,614	N/A	219,999	N/A	-5.86	-0.28	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
<b>Average Medicaid Amount Paid Per Covered Day (claims with &gt;\$0 paid)</b>										
NF (TOS 07)	\$50-\$100	\$140	No	\$146	No	\$155	No	3.92	6.42	Yes
ICF/MR (TOS 05)	N/A	\$446	N/A	\$486	N/A	\$513	N/A	9.00	5.52	Yes
Aged/MH (TOS 02)	N/A	\$408	N/A	\$399	N/A	\$364	N/A	-2.24	-8.75	Yes
IP Psych. < 21 (TOS 04)	N/A	\$363	N/A	\$367	N/A	\$384	N/A	1.07	4.53	Yes
% NF (TOS 07)	75-99	91.48	Yes	91.60	Yes	92.00	Yes	0.13	0.44	Yes
% NF claims with NF Covered Days	N/A	99.36	N/A	100.00	N/A	99.99	N/A	0.64	0.00	Yes
Avg days for NF claims with Covered Days	N/A	27	N/A	29	N/A	29	N/A	5.90	-0.48	Yes
% ICF/MR (TOS 05)	>0-20	2.22	Yes	2.20	Yes	1.91	Yes	-1.06	-13.00	Yes
% ICF/MR claims with ICF/MR Covered Days	N/A	88.53	N/A	91.15	N/A	100.00	N/A	2.96	9.70	Yes
Avg days for ICF/MR claims with Covered Days	N/A	30	N/A	30	N/A	30	N/A	-0.75	-0.49	Yes
% Aged/MH (TOS 02)	>0-10	0.25	Yes	0.25	Yes	0.25	Yes	-0.49	1.56	Yes
% Aged/MH claims with Aged/MH Covered Days	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
Avg days for Aged/MH claims with Covered Days	N/A	28	N/A	28	N/A	28	N/A	-0.54	1.02	Yes
% IP Psych. < 21 (TOS 04)	>0-5	6.04	No	5.95	No	5.83	No	-1.54	-2.01	Yes
% IP Psych. < 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. < 21 claims with Covered Days	N/A	18	N/A	19	N/A	19	N/A	2.47	-0.32	Yes
% Claims with Leave Days	1-20	0.00	No	0.00	No	0.00	No	Div by 0	Div by 0	N/A
% Claims with DX	95-100	23.27	No	25.76	No	49.36	No	10.68	91.63	No
% Claims with DX, where length=3	5-30	14.65	Yes	16.13	Yes	14.96	Yes	10.10	-7.25	Yes
% Claims with DX, where length=4	15-75	52.89	Yes	43.66	Yes	46.20	Yes	-17.40	5.82	Yes
% Claims with DX, where length=5	25-70	32.47	Yes	40.19	Yes	38.81	Yes	23.80	-3.43	Yes
<b>Patient Status</b>										
% Home	1-5	0.77	No	0.97	No	1.29	Yes	26.32	33.32	No
% Still a Patient	8-98	96.57	Yes	97.42	Yes	97.46	Yes	0.88	0.04	Yes
% Died	>0-5	0.00	No	0.18	Yes	0.63	Yes	Div by 0	243.90	No
<b>FFS Crossover Claims (Type of Claim=1, Crossover Claim Indicator=1)</b>										
Total Number of Claims	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	N/A
% Claims with> \$0 Paid	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
% Claims with< \$0 Paid	0	Div by 0	No	Div by 0	No	Div by 0	No	Div by 0	Div by 0	N/A

2003-2005 MAX LT VALIDATION TABLE  
STATE: MD

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Change Within Expected Range
Aver. Medicaid Amount Paid (claims with >\$0 paid)	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
% NF (TOS 07)	75-99	Div by 0	No	Div by 0	No	Div by 0	No	Div by 0	Div by 0	N/A
% ICF/MR (TOS 05)	>0-20	Div by 0	No	Div by 0	No	Div by 0	No	Div by 0	Div by 0	N/A
% Aged/MH (TOS 02)	>0-10	Div by 0	No	Div by 0	No	Div by 0	No	Div by 0	Div by 0	N/A
% IP Psych. < 21 (TOS 04)	>0-5	Div by 0	No	Div by 0	No	Div by 0	No	Div by 0	Div by 0	N/A
% Claims with DX	95-100	Div by 0	No	Div by 0	No	Div by 0	No	Div by 0	Div by 0	N/A
% Claims with DX, where length=3	5-30	Div by 0	No	Div by 0	No	Div by 0	No	Div by 0	Div by 0	N/A
% Claims with DX, where length=4	15-75	Div by 0	No	Div by 0	No	Div by 0	No	Div by 0	Div by 0	N/A
% Claims with DX, where length=5	25-70	Div by 0	No	Div by 0	No	Div by 0	No	Div by 0	Div by 0	N/A
Patient Status										
% Home	1-5	Div by 0	No	Div by 0	No	Div by 0	No	Div by 0	Div by 0	N/A
% Still a Patient	8-98	Div by 0	No	Div by 0	No	Div by 0	No	Div by 0	Div by 0	N/A
% Died	>0-5	Div by 0	No	Div by 0	No	Div by 0	No	Div by 0	Div by 0	N/A

2003-2005 MAX OT VALIDATION TABLE  
STATE: MD

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Change Within Expected Range
<b>All OT Claims</b>										
Total Number of Claims	N/A	21,650,506	N/A	20,457,371	N/A	23,126,015	N/A	-5.51	13.04	Yes
% Encounter Claims (Claim Type=3)	N/A	12.54	N/A	12.65	N/A	16.72	N/A	0.92	32.15	No
% Supplemental Claims	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% Cap Claims (Claim Type=2, and MAX TOS 20,21,22)	N/A	23.09	N/A	26.04	N/A	22.38	N/A	12.76	-14.10	Yes
Total FFS Claims Excluding Capitation Payments	N/A	13,592,871	N/A	12,510,825	N/A	13,799,177	N/A	-7.96	10.30	Yes
% Crossover	5-20	12.03	Yes	14.06	Yes	13.68	Yes	16.92	-2.69	Yes
% Adjusted Claims	> 1%	1.64	Yes	4.58	Yes	1.08	Yes	179.20	-76.40	No
% Standard Adjustments	N/A	97.74	N/A	98.06	N/A	94.26	N/A	0.33	-3.87	Yes
Aver. Amt. Pd Adjust. ( include \$0)	N/A	\$95	N/A	\$144	N/A	\$293	N/A	51.32	103.90	No
% Claims(TOC 1,2) TOS 20: HMO Cap Payment	N/A	26.40	N/A	29.81	N/A	26.87	N/A	12.90	-9.85	Yes
% Claims(TOC 1,2) TOS 21: PHP Cap Payments	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% Claims(TOC 1,2) TOS 22: PCCM Cap Pay.	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
Average Paid per HMO Cap Clms (TOS 20)	\$75-\$300	\$238	Yes	\$255	Yes	\$276	Yes	6.94	8.37	Yes
Average Paid per PHP Cap Clms (TOS 21)	\$20-\$250	Div by 0	No	Div by 0	No	Div by 0	No	Div by 0	Div by 0	N/A
Average Paid per PCCM Cap Clms (TOS 22)	3-5	Div by 0	No	Div by 0	No	Div by 0	No	Div by 0	Div by 0	N/A
Total number of claims with missing Medicaid eligibility (excludes S-SCHIP only)	N/A	N/A	N/A	N/A	N/A	15,748	N/A	N/A	N/A	N/A
<b>FFS Non-Crossover Claims (Type of Claim=1, Crossover Claim Indicator=0, excluding capitation claims)</b>										
Total Number of Claims	N/A	11,958,064	N/A	10,751,597	N/A	11,911,071	N/A	-10.10	10.78	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	0.03	N/A	0.04	N/A	0.03	N/A	14.53	-5.58	Yes
% OPD Claims with Span Bill/ All OPD Claims(TOS 11)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% HH Claims with Span Bill/All HH Claims (TOS 13)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% Other Claims with Span Bills/All Other Claims	N/A	0.04	N/A	0.04	N/A	0.04	N/A	13.03	-3.96	Yes
% Claims W/ Service Place 11- Office	50-90	26.74	No	21.00	No	18.36	No	-21.40	-12.60	Yes
% Claims W/ Service Place 12 - Home	>0-5	53.68	No	59.81	No	64.47	No	11.43	7.79	Yes
% Claims W/ Service Place 21 - Hospital	>0-5	2.86	Yes	3.99	Yes	3.91	Yes	39.38	-2.02	Yes
% Claims W/ Service Place 32 - NF	>0-5	0.34	Yes	0.44	Yes	0.42	Yes	26.49	-3.31	Yes
% Claims W/ Service Place 23 - ER	1-10	1.70	Yes	1.84	Yes	1.65	Yes	7.69	-10.10	Yes
% Claims w/ Service Place 22 - OPD	>0-10	2.76	Yes	3.19	Yes	2.95	Yes	15.88	-7.52	Yes
% Claims W/ Service Place 99 - Unknown/Other	<5	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	N/A
% Claims with TPL	>0 - 15	0.19	Yes	0.20	Yes	0.17	Yes	7.56	-18.30	No
Aver. TPL Paid -claims with TPL	N/A	\$177	N/A	\$207	N/A	\$235	N/A	16.63	13.76	Yes
<b>PERCENT CLAIMS/MAX TOS</b>										
% claims MAX TOS 08: Physicians	10-35	5.09	No	6.38	No	6.27	No	25.32	-1.71	Yes
% claims MAX TOS 09: Dental	2-20	0.07	No	0.08	No	0.09	No	11.30	2.54	Yes
% claims MAX TOS 10: Other Practioner	0.5-8	0.03	No	0.00	No	0.00	No	-100.00	Div by 0	N/A
% claims MAX TOS 11: OPD	3-25	2.81	No	1.79	No	1.64	No	-36.40	-8.03	Yes
% claims MAX TOS 12: Clinic	2-25	0.57	No	0.62	No	0.51	No	8.73	-18.50	No
% claims MAX TOS 13: HH	>0-25	12.23	Yes	12.13	Yes	13.73	Yes	-0.81	13.14	Yes
% claims MAX TOS 15: Lab/Xray	4-20	5.96	Yes	4.77	Yes	4.44	Yes	-19.90	-7.02	Yes
% claims MAX TOS 16: Drugs	<3	0.12	Yes	0.14	Yes	0.15	Yes	12.43	7.75	Yes
% claims MAX TOS 19: Other Services	<25	2.04	Yes	2.21	Yes	7.38	Yes	8.39	234.00	No

2003-2005 MAX OT VALIDATION TABLE  
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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Change Within Expected Range
% claims MAX TOS 51: DME	>3	1.70	No	2.25	No	2.24	No	32.59	-0.30	Yes
% claims MAX TOS 26: Transportation	>1	0.14	No	0.17	No	0.17	No	23.26	-3.62	Yes
% claims MAX TOS 24: Sterilizations	N/A	0.00	N/A	0.00	N/A	0.00	N/A	20.21	-37.50	No
% claims MAX TOS 25: Abortions	N/A	0.05	N/A	0.05	N/A	0.04	N/A	6.15	-22.70	No
% claims MAX TOS 30: PCS	>0	8.75	Yes	10.03	Yes	8.87	Yes	14.66	-11.60	Yes
% claims MAX TOS 31: TCM	>0	0.51	Yes	0.34	Yes	0.38	Yes	-33.00	12.35	Yes
% claims MAX TOS 33: Rehabilitation	>0	0.05	Yes	0.17	Yes	0.18	Yes	223.20	10.31	Yes
% claims MAX TOS 34: PT/OT/hear/speech	>1	9.28	Yes	9.86	Yes	8.11	Yes	6.26	-17.80	No
% claims MAX TOS 35: Hospice	>0	0.03	Yes	0.04	Yes	0.03	Yes	17.84	-5.70	Yes
% claims MAX TOS 36: Nurse Midwife	N/A	0.07	N/A	0.06	N/A	0.07	N/A	-6.03	8.03	Yes
% claims MAX TOS 37: Nurse Practitioner	N/A	0.08	N/A	0.13	N/A	0.14	N/A	55.70	2.95	Yes
% claims MAX TOS 38: Private Nursing	N/A	0.99	N/A	1.41	N/A	1.41	N/A	42.18	0.23	Yes
% claims MAX TOS 39: Religious Non-Med.	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% claims MAX TOS 52: Residential Care	N/A	16.09	N/A	14.69	N/A	14.07	N/A	-8.69	-4.21	Yes
% claims MAX TOS 53: Psych. Services	>1	23.73	Yes	12.89	Yes	10.95	Yes	-45.70	-15.10	No
% claims MAX TOS 54: Adult Day Care	>0	9.44	Yes	19.79	Yes	19.14	Yes	109.50	-3.27	Yes
% claims MAX TOS 99: Unknown	<1	0.17	Yes	0.00	Yes	0.00	Yes	-99.20	-79.30	No
Average Medicaid Amount Paid For Selected MAX TOS (excluding claims with <=\$0 paid)										
Total	N/A	\$91	N/A	\$107	N/A	\$111	N/A	16.75	3.65	Yes
08: Physicians	\$20-90	\$66	Yes	\$68	Yes	\$74	Yes	3.59	8.37	Yes
09: Dental	\$10-60	\$33	Yes	\$39	Yes	\$42	Yes	16.80	9.00	Yes
10: Other Practioner	\$10-100	\$29	Yes	Div by 0	No	Div by 0	No	Div by 0	Div by 0	N/A
11: OPD	\$20-100	\$285	No	\$313	No	\$355	No	9.62	13.42	Yes
12: Clinic	\$20-100	\$96	Yes	\$135	No	\$145	No	41.56	7.37	Yes
13: HH	N/A	\$81	N/A	\$107	N/A	\$90	N/A	32.17	-16.00	No
15: Lab/Xray	10-60	\$86	No	\$63	No	\$70	No	-26.40	10.09	Yes
16: Drugs	10-60	\$14	Yes	\$12	Yes	\$11	Yes	-16.30	-2.64	Yes
19: Other Services	N/A	\$93	N/A	\$98	N/A	\$82	N/A	4.73	-15.80	No
51: DME	N/A	\$146	N/A	\$150	N/A	\$140	N/A	2.13	-6.38	Yes
26: Transportation	N/A	\$100	N/A	\$100	N/A	\$100	N/A	-0.02	0.02	Yes
30: PCS	N/A	\$29	N/A	\$28	N/A	\$29	N/A	-1.39	2.74	Yes
31: Targeted Case Management	N/A	\$137	N/A	\$125	N/A	\$123	N/A	-8.79	-1.76	Yes
33: Rehabilitation	N/A	\$13	N/A	\$304	N/A	\$325	N/A	2,162.00	6.89	Yes
34: PT/OT/speech/hear	N/A	\$89	N/A	\$98	N/A	\$97	N/A	9.01	-0.59	Yes
35: Hospice	N/A	\$3,165	N/A	\$3,219	N/A	\$3,393	N/A	1.71	5.41	Yes
52: Residential Care	N/A	\$126	N/A	\$169	N/A	\$197	N/A	34.43	16.48	No
53: Psych. Services	N/A	\$67	N/A	\$131	N/A	\$150	N/A	95.72	13.96	Yes
54: Adult Day Care	N/A	\$75	N/A	\$64	N/A	\$66	N/A	-14.10	2.42	Yes
PERCENT OF CLAIMS BY PROGRAM TYPE (claim type 1)										
% Family Planning (code 2)	N/A	0.26	N/A	0.31	N/A	0.26	N/A	17.02	-16.70	No
% RHC (code 3)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% FQHC (code 4)	N/A	0.26	N/A	0.30	N/A	0.29	N/A	14.46	-1.49	Yes
% IHS (code 5)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% Waiver (code 6,7)	N/A	26.14	N/A	34.86	N/A	35.95	N/A	33.37	3.12	Yes
AVERAGE EXPENDITURES BY PROGRAM										
Family Planning (code 2)	N/A	\$95	N/A	\$102	N/A	\$111	N/A	7.51	8.95	Yes

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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Change Within Expected Range
RHC (code 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
FQHC (code 4)	N/A	\$131	N/A	\$147	N/A	\$147	N/A	12.19	-0.18	Yes
IHS (code 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
Waiver (code 6, 7)	N/A	\$117	N/A	\$115	N/A	\$118	N/A	-1.62	2.12	Yes
% Claims with DX	> 60	57.71	No	78.41	Yes	91.44	Yes	35.87	16.61	No
% Claims with DX (MAX TOS 8, 11, 12)	85-100	99.96	Yes	99.95	Yes	99.94	Yes	-0.01	-0.01	Yes
% Claims with 1 DX that have 2 DX	N/A	14.69	N/A	15.08	N/A	13.43	N/A	2.61	-10.90	Yes
% Claims with DX, where length=3	5-25	15.56	Yes	12.51	Yes	9.63	Yes	-19.60	-23.00	No
% Claims with DX, where length=4	40-70	30.00	No	61.71	Yes	64.11	Yes	105.70	3.89	Yes
% Claims with DX, where length=5	20-55	54.43	Yes	25.78	Yes	26.26	Yes	-52.60	1.88	Yes
% OPD Claims with Service Code or UB-92/OPD Claims (TOS 11)	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
% HH Claims with Service Code or UB-92/HH Claims (TOS13)	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
% Other Claims with Service Codes /All Other Claims (Excluding OPD/HH)	98-100	99.62	Yes	97.87	No	98.13	Yes	-1.76	0.26	Yes
% CPT-4 Service Code Indicator (code 01)/Claims with Service Codes	N/A	8.90	N/A	24.12	N/A	23.81	N/A	171.00	-1.28	Yes
% HCPCS (II & III) Service Codes Indicator (code 06)/Claims with Service Codes	N/A	64.18	N/A	75.87	N/A	76.19	N/A	18.21	0.42	Yes
% Other National Code Indicator (codes 2-5, 7- 9)/ Claims with Service Codes	N/A	0.00	N/A	0.00	N/A	0.00	N/A	1,017.00	1,182.00	No
% State Specific Serv. Indicator (10-87)/Claims with Service Codes	N/A	26.91	N/A	0.01	N/A	0.00	N/A	-100.00	-99.60	No
% CPT-4 Format Codes- 5n/Claims with CPT-4	98-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% HCPCS Format Codes Cnnnn or Cnnn /Claims with HCPCS	98-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with TOS 08 with Physician Specialty	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
PERCENT OF CLAIMS BY CLTC CODE										
CLTC 00: not a CLTC claim	N/A	N/A	N/A	N/A	N/A	40.46	N/A	N/A	N/A	N/A
CLTC Non-Waiver Claims (11-20)	N/A	N/A	N/A	N/A	N/A	23.59	N/A	N/A	N/A	N/A
CLTC 11: Non-Waiver Personal Care	N/A	N/A	N/A	N/A	N/A	8.87	N/A	N/A	N/A	N/A
CLTC 12: Non-Waiver PDN	N/A	N/A	N/A	N/A	N/A	1.41	N/A	N/A	N/A	N/A
CLTC 13: Non-Waiver Adult Day	N/A	N/A	N/A	N/A	N/A	10.16	N/A	N/A	N/A	N/A
CLTC 14: Non-Waiver HH	N/A	N/A	N/A	N/A	N/A	0.50	N/A	N/A	N/A	N/A
CLTC 15: Non-Waiver Residential Care	N/A	N/A	N/A	N/A	N/A	0.46	N/A	N/A	N/A	N/A
CLTC 16: Non-Waiver Rehab	N/A	N/A	N/A	N/A	N/A	0.13	N/A	N/A	N/A	N/A
CLTC 17: Non-Waiver TCM	N/A	N/A	N/A	N/A	N/A	0.08	N/A	N/A	N/A	N/A
CLTC 18: Non-Waiver Transportation	N/A	N/A	N/A	N/A	N/A	0.10	N/A	N/A	N/A	N/A
CLTC 19: Non-Waiver Hospice	N/A	N/A	N/A	N/A	N/A	0.03	N/A	N/A	N/A	N/A
CLTC 20: Non-Waiver DME	N/A	N/A	N/A	N/A	N/A	1.86	N/A	N/A	N/A	N/A
CLTC Waiver Claims (30-40)	N/A	N/A	N/A	N/A	N/A	35.95	N/A	N/A	N/A	N/A
CLTC 30: Other Waiver	N/A	N/A	N/A	N/A	N/A	0.05	N/A	N/A	N/A	N/A
CLTC 31: Waiver Personal Care	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A
CLTC 32: Waiver PDN	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A
CLTC 33: Waiver Adult Day	N/A	N/A	N/A	N/A	N/A	8.98	N/A	N/A	N/A	N/A
CLTC 34: Waiver HH	N/A	N/A	N/A	N/A	N/A	13.23	N/A	N/A	N/A	N/A



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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Change Within Expected Range
CLTC 35: Waiver Residential Care	N/A	N/A	N/A	N/A	N/A	13.61	N/A	N/A	N/A	N/A
CLTC 36: Waiver Rehab	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A
CLTC 37: Waiver TCM	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A
CLTC 38: Waiver Transportation	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A
CLTC 39: Waiver Hospice	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A
CLTC 40: Waiver DME	N/A	N/A	N/A	N/A	N/A	0.08	N/A	N/A	N/A	N/A
<b>FFS Crossover Claims (Type of Claim=1), Crossover Claim Indicator=1, excluding capitation claims)</b>										
Total Number of Claims	N/A	1,634,807	N/A	1,759,228	N/A	1,888,106	N/A	7.61	7.33	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	12.07	N/A	12.09	N/A	12.24	N/A	0.20	1.23	Yes
% OPD Claims with Span Bill/ All OPD Claims(TOS 11)	N/A	12.29	N/A	12.52	N/A	12.51	N/A	1.88	-0.13	Yes
% HH Claims with Span Bill/All HH Claims (TOS 13)	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 Bills/All Other Claims	N/A	12.05	N/A	12.06	N/A	12.23	N/A	0.09	1.34	Yes
<b>PERCENT CLAIMS/MAX TOS (excluding 20-22)</b>										
% claims MAX TOS 08: Physicians	N/A	49.57	N/A	48.61	N/A	49.84	N/A	-1.94	2.54	Yes
% claims MAX TOS 10: Other Practioner	N/A	3.26	N/A	3.16	N/A	3.02	N/A	-2.91	-4.56	Yes
% claims MAX TOS 11: OPD	N/A	6.30	N/A	6.16	N/A	5.73	N/A	-2.22	-7.09	Yes
% claims MAX TOS 12: Clinic	N/A	1.57	N/A	1.53	N/A	1.54	N/A	-2.27	0.21	Yes
% claims MAX TOS 13: HH	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% claims MAX TOS 15: Lab/Xray	N/A	17.71	N/A	17.89	N/A	17.16	N/A	1.03	-4.10	Yes
% claims MAX TOS 19: Other Services	N/A	2.06	N/A	2.27	N/A	2.63	N/A	10.14	15.70	No
% claims MAX TOS 51: DME	N/A	7.10	N/A	7.32	N/A	7.03	N/A	3.10	-3.88	Yes
% claims MAX TOS 26: Transportation	N/A	2.00	N/A	2.05	N/A	1.96	N/A	2.49	-4.55	Yes
% claims MAX TOS 30: PCS	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% claims MAX TOS 31: TCM	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% claims MAX TOS 33: Rehabilitation	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% claims MAX TOS 34: PT/OT/hear/speech	N/A	1.40	N/A	1.56	N/A	1.83	N/A	11.85	17.23	No
% claims MAX TOS 35: Hospice	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% claims MAX TOS 52: Residential Care	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	-6.83	Yes
% claims MAX TOS 53: Psych. Services	N/A	8.60	N/A	9.07	N/A	8.84	N/A	5.46	-2.56	Yes
% claims MAX TOS 54: Adult Day Care	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
Average Amount Paid	N/A	\$43	N/A	\$45	N/A	\$47	N/A	6.76	4.23	Yes
% Claims with DX	N/A	99.98	N/A	99.98	N/A	99.98	N/A	0.00	0.00	Yes
% Claims with DX (MAX TOS 8, 11, 12)	85-100	99.99	Yes	99.99	Yes	100.00	Yes	0.00	0.01	Yes
% Claims with 1 DX that have 2 DX	N/A	49.80	N/A	51.57	N/A	52.15	N/A	3.54	1.13	Yes
% Claims with DX, where length=3	5-25	10.17	Yes	9.63	Yes	8.72	Yes	-5.32	-9.46	Yes
% Claims with DX, where length=4	40-70	42.24	Yes	42.02	Yes	42.15	Yes	-0.54	0.33	Yes
% Claims with DX, where length=5	20-55	47.59	Yes	48.36	Yes	49.13	Yes	1.62	1.60	Yes
% OPD Claims with Service Code or UB-92/OPD Claims (TOS 11)	N/A	100.00	N/A	100.00	N/A	99.99	N/A	0.00	-0.01	Yes
% HH Claims with Service Code or UB-92/HH Claims (TOS13)	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 Service Codes/All Other Claims (Excluding OPD/HH)	98-100	98.52	Yes	98.42	Yes	98.64	Yes	-0.10	0.23	Yes

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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Change Within Expected Range
% CPT-4 Service Code Indicator (code 01)/Claims with Service Codes	N/A	86.22	N/A	84.90	N/A	85.55	N/A	-1.53	0.76	Yes
% HCPCS (II & III) Service Codes Indicator (code 06)/Claims with Service Codes	N/A	13.73	N/A	15.07	N/A	14.43	N/A	9.74	-4.23	Yes
% Other Codes Indicator /Claims with Service Codes	N/A	0.03	N/A	0.01	N/A	0.01	N/A	-45.40	-7.56	Yes

2003-2005 MAX RX VALIDATION TABLE  
STATE: MD

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Change Within Expected Range
<b>All RX Claims</b>										
Total Number of Claims	N/A	7,757,317	N/A	8,990,774	N/A	9,993,159	N/A	15.90	11.15	Yes
% Encounter Claims	N/A	24.86	N/A	29.54	N/A	33.36	N/A	18.82	12.96	Yes
% 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	5,829,104	N/A	6,335,314	N/A	6,659,137	N/A	8.68	5.11	Yes
% Adjusted Claims	N/A	0.74	N/A	0.62	N/A	1.80	N/A	-17.30	192.50	No
% Standard Adjustments	> 1%	93.74	Yes	99.98	Yes	99.99	Yes	6.66	0.00	Yes
Aver. Amt. Pd Adjust. ( include \$0)	N/A	\$73	N/A	\$91	N/A	\$75	N/A	24.93	-17.30	No
Total number of claims with missing Medicaid eligibility (excludes S-SCHIP only)	N/A	N/A	N/A	N/A	N/A	8,572	N/A	N/A	N/A	N/A
<b>FFS Claims (Type of Claim=1)</b>										
Total Number of Claims	N/A	5,829,104	N/A	6,335,314	N/A	6,659,137	N/A	8.68	5.11	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
Aver. Medicaid Amount Paid (claims with >\$0 paid)	\$15-\$60	\$69	No	\$69	No	\$71	No	1.14	2.04	Yes
% Claims with TPL	>0 - 15	3.34	Yes	2.71	Yes	2.03	Yes	-18.80	-25.20	No
Aver. TPL Paid for claims with TPL	N/A	\$25	N/A	\$33	N/A	\$45	N/A	31.37	34.60	No
% Family Planning Claims (program type=2)	N/A	0.74	N/A	0.81	N/A	0.77	N/A	9.30	-4.51	Yes
% Drug Claims (TOS 16)	95-99	99.26	No	99.19	No	99.23	No	-0.07	0.04	Yes
% DME Claims (TOS 51)	>0 - 6	0.74	Yes	0.81	Yes	0.77	Yes	9.30	-4.51	Yes
% Drug Claims with Quantity	>98	99.97	Yes	99.95	Yes	99.93	Yes	-0.02	-0.02	Yes
% Drug Claims with Days Supply	>98	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with HICL	98-100	99.99	Yes	100.00	Yes	99.99	Yes	0.01	0.00	Yes
% Claims with Medispan	98-100	99.75	Yes	99.79	Yes	99.91	Yes	0.05	0.11	Yes
% Claims with AHFS	98-100	99.99	Yes	100.00	Yes	99.99	Yes	0.01	0.00	Yes
% Claims with Generic (GTC)	98-100	99.99	Yes	100.00	Yes	99.99	Yes	0.01	0.00	Yes
% Claims with GC3	98-100	99.99	Yes	100.00	Yes	99.99	Yes	0.01	0.00	Yes
<b>NDC Configuration Indicator</b>										
% Prescription (codes 0-3)	N/A	75.08	N/A	72.91	N/A	71.43	N/A	-2.89	-2.02	Yes
% Products (codes 4-6)	N/A	24.77	N/A	26.98	N/A	28.44	N/A	8.91	5.44	Yes
% HRI (code 7)	N/A	0.10	N/A	0.10	N/A	0.10	N/A	-7.90	1.85	Yes
% Claims with Smart Key	98-100	99.99	Yes	100.00	Yes	99.99	Yes	0.01	0.00	Yes
% OTC-Drug Class	N/A	1.91	N/A	1.94	N/A	2.28	N/A	1.73	17.29	No
% Prescription-Drug Class	N/A	98.07	N/A	98.05	N/A	97.71	N/A	-0.02	-0.35	Yes
% Multiple Source (Code Y)	N/A	44.76	N/A	48.90	N/A	52.01	N/A	9.25	6.38	Yes
% Single Source (Code N)	N/A	49.50	N/A	44.07	N/A	43.29	N/A	-11.00	-1.76	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: MD

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
<b>All Records</b>											
Total Number of Records	N/A	841,004	N/A	854,343	N/A	868,686	N/A	1.59	1.68	10% (+/-)	Yes
Total Medicaid Amount Paid	N/A	\$4,309,595,623	N/A	\$4,520,242,423	N/A	\$5,011,178,393	N/A	4.89	10.86	15% (+/-)	Yes
% with no services (Code 0)	N/A	13.18	N/A	13.84	N/A	13.71	N/A	4.94	-0.89	N/A	N/A
% with FFS only claims (Code 1)	N/A	14.76	N/A	15.66	N/A	16.38	N/A	6.09	4.63	N/A	N/A
% with only cap claims (Code 2)	N/A	10.50	N/A	13.87	N/A	7.74	N/A	32.18	-44.20	N/A	N/A
% with only encounter claims (Code 3)	N/A	0.08	N/A	0.06	N/A	0.09	N/A	-23.10	59.82	N/A	N/A
% with FFS and cap claims (Code 4)	N/A	8.43	N/A	4.33	N/A	5.16	N/A	-48.70	19.31	N/A	N/A
% with cap and encounter claims only (Code 5)	N/A	17.78	N/A	29.40	N/A	20.59	N/A	65.35	-30.00	N/A	N/A
% with FFS and encounter claims only (Code 6)	N/A	0.06	N/A	0.04	N/A	0.33	N/A	-30.20	637.20	N/A	N/A
% with FFS, cap and encounter records (Code 7)	N/A	35.20	N/A	22.80	N/A	35.98	N/A	-35.20	57.85	N/A	N/A
# with claims and missing Medicaid eligibility (excludes S-SCHIP only)	N/A	2,378	N/A	5,642	N/A	1,765	N/A	137.30	-68.70	N/A	N/A
% with claims and missing Medicaid eligibility (excludes S-SCHIP only)	<2%	0.28	Yes	0.66	Yes	0.20	Yes	133.60	-69.20	N/A	N/A
# with FFS claims and missing Medicaid eligibility (excludes S-SCHIP only)	N/A	N/A	N/A	N/A	N/A	1,184	N/A	N/A	N/A	N/A	N/A
% with FFS claims and missing Medicaid eligibility (excludes S-SCHIP only)	N/A	N/A	N/A	N/A	N/A	0.14	N/A	N/A	N/A	N/A	N/A
Expenditures for people missing Medicaid eligibility (excludes S-SCHIP only enrollees)	N/A	\$4,479,798	N/A	\$3,985,829	N/A	\$3,782,912	N/A	-11.00	-5.09	N/A	N/A
Expenditures for people with FFS claims and missing Medicaid eligibility (excludes S-SCHIP only)	N/A	N/A	N/A	N/A	N/A	\$3,194,963	N/A	N/A	N/A	N/A	N/A
<b>S-SCHIP ENROLLMENT</b>											
# with ONLY S-SCHIP enrollment	N/A	4,962	N/A	6,002	N/A	7,820	N/A	20.96	30.29	N/A	N/A
% with ONLY S-SCHIP enrollment	N/A	0.59	N/A	0.70	N/A	0.90	N/A	19.07	28.14	N/A	N/A
# with ANY S-SCHIP enrollment	N/A	20,087	N/A	18,158	N/A	15,382	N/A	-9.60	-15.30	N/A	N/A
% with ANY S-SCHIP enrollment	N/A	2.39	N/A	2.13	N/A	1.77	N/A	-11.00	-16.70	N/A	N/A
Total PYE ANY S-SCHIP enrollment	N/A	8,032	N/A	9,437	N/A	9,225	N/A	17.49	-2.25	N/A	N/A
<b>Total Medicaid Enrollees (excludes people with missing Medicaid eligibility information or S-SCHIP only)</b>											
Total Medicaid Enrollees	N/A	833,664	N/A	842,699	N/A	859,101	N/A	1.08	1.95	10% (+/-)	Yes
Total Medicaid PYE (Person Years of Enrollment)	N/A	677,552	N/A	689,276	N/A	708,455	N/A	1.73	2.78	10% (+/-)	Yes
# with any M-SCHIP enrollment (Medicaid enrollees)	N/A	150,011	N/A	130,374	N/A	133,140	N/A	-13.10	2.12	N/A	N/A
Total PYE any M-SCHIP	N/A	99,662	N/A	84,551	N/A	92,075	N/A	-15.20	8.90	N/A	N/A
<b>Eligibility Demographics</b>											
% Records with Valid SSN Format	>=95%	96.84	Yes	97.12	Yes	97.05	Yes	0.29	-0.07	10% (+/-)	Yes
% Records whose MSIS SSN passed High Group Test (Code 1)	>95%	N/A	No	N/A	No	96.81	No	N/A	N/A	10% (+/-)	No
% Records whose MSIS SSN failed High Group Test due to invalid AAA (Code 2)	N/A	N/A	N/A	N/A	N/A	0.02	N/A	N/A	N/A	N/A	N/A
% Records whose MSIS SSN failed High Group Test due to GG = 00 (Code 3)	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A	N/A
% Records whose MSIS SSN failed High Group Test due to SSSS = 0000 (Code 4)	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A	N/A
% Records whose MSIS SSN failed High Group Test due to GG not yet issued (Code 5)	N/A	N/A	N/A	N/A	N/A	0.21	N/A	N/A	N/A	N/A	N/A
% Records whose MSIS SSN failed High Group Test due to RR with invalid DOB (Code 6)	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A	N/A
#SSNs with duplicate records	0	12	No	16	No	33	No	33.33	106.30	N/A	N/A
% with External SSN from EDB (Code 1)	N/A	N/A	N/A	N/A	N/A	15.83	N/A	N/A	N/A	10% (+/-)	No
% with External SSN from state-provided cross-reference file Code 2)	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	10% (+/-)	No
% with County Code	>=98%	99.83	Yes	99.80	Yes	99.81	Yes	-0.03	0.01	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
% Enrollees who Died During Year	0.1-3%	1.16	Yes	1.22	Yes	1.26	Yes	5.31	2.82	10% (+/-)	Yes
% White	N/A	33.46	N/A	33.09	N/A	32.53	N/A	-1.12	-1.69	10% (+/-)	Yes
% Black	N/A	52.70	N/A	52.49	N/A	52.13	N/A	-0.394	-0.69	10% (+/-)	Yes
% Native American/Alaskan Native	N/A	0.19	N/A	0.19	N/A	0.19	N/A	3.393	1.18	10% (+/-)	Yes
% Asian	N/A	2.86	N/A	2.81	N/A	2.87	N/A	-1.69	2.04	N/A	N/A
% Native Hawaiian or other Pacific Islander	N/A	0.03	N/A	0.03	N/A	0.03	N/A	-0.658	21.39	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%	3.50	Yes	3.59	Yes	12.25	No	2.607	241.10	N/A	N/A
% Hispanic/Latino (included with race categories prior to 2005)	N/A	7.27	N/A	7.80	N/A	8.43	N/A	7.318	8.08	10% (+/-)	Yes
% of Hispanic/Latino with unknown race	N/A	N/A	N/A	N/A	N/A	100.00	N/A	N/A	N/A	N/A	N/A
% Age 0	2-8%	3.86	Yes	3.88	Yes	3.93	Yes	0.38	1.42	10% (+/-)	Yes
% Age 0-20 Years	49-74%	58.13	Yes	57.85	Yes	57.81	Yes	-0.49	-0.07	10% (+/-)	Yes
% Age > 64 Years	5-18%	9.31	Yes	9.53	Yes	9.46	Yes	2.31	-0.65	10% (+/-)	Yes
% with century of birth '18', '19', '20'	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	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	40-65%	60.87	No	62.16	No	63.41	No	2.12	2.00	10% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: MD

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
<b>EDB Dual Eligibles</b>											
Total EDB Duals (Duals confirmed by EDB)	N/A	110,174	N/A	115,954	N/A	119,708	N/A	5.25	3.24	10% (+/-)	Yes
Total EDB Dual PYE	N/A	95,519	N/A	101,440	N/A	106,067	N/A	6.20	4.56	15% (+/-)	Yes
% Age > 64 Years who are EDB Duals	>=90%	89.51	No	90.41	Yes	90.46	Yes	1.01	0.06	10% (+/-)	Yes
% MAX Aged Groups (11,21,31,41,51) who are EDB Duals	>=90%	90.44	Yes	91.85	Yes	92.29	Yes	1.56	0.49	10% (+/-)	Yes
% MAX Disabled Groups (12,22,32,42,52) who are EDB Duals	30-55%	35.59	Yes	36.11	Yes	37.35	Yes	1.44	3.43	10% (+/-)	Yes
% EDB Only (50)	<5%	15.20	No	10.09	No	4.32	Yes	-33.60	-57.10	N/A	N/A
% EDB QMB Only (51)	N/A	13.54	N/A	14.65	N/A	15.61	N/A	8.15	6.57	N/A	N/A
% EDB QMB Plus (52)	N/A	41.01	N/A	41.02	N/A	42.81	N/A	0.02	4.37	N/A	N/A
% EDB SLMB Only (53)	N/A	5.91	N/A	6.47	N/A	6.98	N/A	9.44	7.88	N/A	N/A
% EDB SLMB Plus (54)	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 QDWI (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 (56)	N/A	1.50	N/A	1.45	N/A	1.55	N/A	-3.55	6.59	N/A	N/A
% EDB QI-2 (57)	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 Other (58)	N/A	12.66	N/A	14.85	N/A	17.52	N/A	17.29	18.01	N/A	N/A
% EDB dual type unknown (59)	N/A	10.17	N/A	11.48	N/A	11.21	N/A	12.87	-2.35	N/A	N/A
% EDB dual status unknown (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
Total Non-EDB Duals (Duals rptd in MSIS, not found in EDB)	N/A	4,743	N/A	6,266	N/A	1,815	N/A	32.11	-71.00	10% (+/-)	No
% Non-EDB Duals Without Valid SSN	N/A	0.42	N/A	0.35	N/A	0.17	N/A	-16.70	-52.90	10% (+/-)	No
% Non-EDB Duals who are Children/Adults	N/A	20.41	N/A	10.77	N/A	1.87	N/A	-47.20	-82.60	10% (+/-)	No
% EDB Duals with Spanish Language	N/A	0.56	N/A	0.61	N/A	0.70	N/A	9.34	15.01	15% (+/-)	No
% EDB Duals with EDB Date of Death During Year	6-10%	8.08	Yes	7.75	Yes	7.76	Yes	-4.09	0.16	15% (+/-)	Yes
% EDB Duals with Medicaid Reported HIC	N/A	98.66	N/A	99.57	N/A	99.71	N/A	0.93	0.14	15% (+/-)	Yes
% EDB Duals with Medicaid reported HIC = Medicare HIC	N/A	97.74	N/A	98.49	N/A	98.95	N/A	0.77	0.46	15% (+/-)	Yes
TOTAL EDB DUAL ENROLLEES IN JUNE	N/A	102,994	N/A	108,512	N/A	112,182	N/A	5.36	3.38	10% (+/-)	Yes
<b>June Medicare Type</b>											
June % with Part A Medicare	N/A	2.07	N/A	1.93	N/A	2.45	N/A	-6.51	26.71	15% (+/-)	No
June % with Part B Medicare	N/A	0.47	N/A	0.44	N/A	0.28	N/A	-6.06	-36.30	15% (+/-)	No
June % Part A/B Medicare	N/A	97.46	N/A	97.63	N/A	97.27	N/A	0.17	-0.36	15% (+/-)	Yes
<b>Original Reason for Medicare Entitlement</b>											
% Aged (Code 0)	N/A	53.91	N/A	53.36	N/A	52.05	N/A	-1.02	-2.44	15% (+/-)	Yes
% Disabled (Code 1)	N/A	44.20	N/A	44.77	N/A	46.09	N/A	1.31	2.95	15% (+/-)	Yes
% ESRD (Code 2)	N/A	0.85	N/A	0.91	N/A	0.78	N/A	8.07	-15.00	15% (+/-)	Yes
% Disabled with ESRD (Code 3)	N/A	1.05	N/A	0.96	N/A	1.08	N/A	-9.08	12.59	15% (+/-)	Yes
<b>Other Eligibility Characteristics (All Enrollees)</b>											
% MAX Aged Groups (11,21,31,41,51) >64 Years	>=99%	97.89	No	99.56	Yes	99.55	Yes	1.71	-0.01	10% (+/-)	Yes
% MAX Disabled Groups (12,22,32,42,52) >64 Years	N/A	9.59	N/A	9.00	N/A	9.01	N/A	-6.14	0.14	10% (+/-)	Yes
% MAX Child Grps (14,16, 24, 34, 44, 48, 54) <21 Years	>=98%	99.58	Yes	99.55	Yes	99.54	Yes	-0.02	-0.01	10% (+/-)	Yes
% MAX Adult Groups (15,17,25,35,45,55) >20 Years	>=80%	97.95	Yes	97.88	Yes	97.84	Yes	-0.08	-0.04	10% (+/-)	Yes
% MAX 1115 expansion enrollees (MASBOE=51,52,54,55) with 1115 waiver enrollment (Waiver Type=1,5,6,A,F)	100%	N/A	N/A	N/A	N/A	100.00	No	N/A	N/A	N/A	N/A
% MAX 1115 waiver enrollees (Waiver Type=1,5,6,A,F) in MAX 1115 expansion group (MASBOE=51,52,54,55)	N/A	N/A	N/A	N/A	N/A	19.04	N/A	N/A	N/A	N/A	N/A
MAX Aged Total	N/A	66,534	N/A	68,133	N/A	68,850	N/A	2.40	1.05	10% (+/-)	Yes
11: Aged, Cash	N/A	19,023	N/A	19,399	N/A	19,288	N/A	1.98	-0.57	10% (+/-)	Yes
21: Aged, MN	N/A	21,345	N/A	21,110	N/A	21,306	N/A	-1.10	0.93	10% (+/-)	Yes
31: Aged, Poverty	N/A	3,234	N/A	2,809	N/A	2,985	N/A	-13.10	6.27	10% (+/-)	Yes
41: Other Aged	N/A	17	N/A	19	N/A	17	N/A	11.76	-10.50	10% (+/-)	No
51: 1115 Aged	N/A	22,915	N/A	24,796	N/A	25,254	N/A	8.21	1.85	10% (+/-)	Yes
MAX Disabled Total	N/A	126,144	N/A	133,869	N/A	137,688	N/A	6.12	2.85	10% (+/-)	Yes
12: Disabled, Cash	N/A	87,547	N/A	91,050	N/A	93,976	N/A	4.00	3.21	10% (+/-)	Yes
22: Disabled, MN	N/A	23,850	N/A	24,877	N/A	23,353	N/A	4.31	-6.13	10% (+/-)	Yes
32: Disabled, Poverty	N/A	1,663	N/A	2,055	N/A	2,506	N/A	23.57	21.95	10% (+/-)	No
42: Other Disabled	N/A	4,816	N/A	4,807	N/A	5,154	N/A	-0.19	7.22	10% (+/-)	Yes
52: 1115 Disabled	N/A	8,268	N/A	11,080	N/A	12,699	N/A	34.01	14.61	10% (+/-)	No
MAX Child Total	N/A	463,630	N/A	465,489	N/A	473,614	N/A	0.40	1.75	10% (+/-)	Yes
14: AFDC Child, Cash	N/A	73,618	N/A	71,385	N/A	65,874	N/A	-3.03	-7.72	10% (+/-)	Yes

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16: AFDC-U Child, Cash	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
24: AFDC Child, MN	N/A	29,434	N/A	29,327	N/A	30,312	N/A	-0.36	3.36	10% (+/-)	Yes
34: Child Poverty	N/A	323,666	N/A	332,184	N/A	343,758	N/A	2.63	3.48	10% (+/-)	Yes
44: Other Child	N/A	13,896	N/A	9,503	N/A	9,609	N/A	-31.60	1.12	10% (+/-)	Yes
48: Foster Care Child	N/A	17,419	N/A	17,795	N/A	18,119	N/A	2.16	1.82	10% (+/-)	Yes
54: 1115 Child	N/A	5,597	N/A	5,295	N/A	5,942	N/A	-5.40	12.22	10% (+/-)	No
MAX Adult Total	N/A	177,356	N/A	175,208	N/A	178,949	N/A	-1.21	2.14	10% (+/-)	Yes
15: AFDC Adult, Cash	N/A	34,901	N/A	34,004	N/A	31,271	N/A	-2.57	-8.04	10% (+/-)	Yes
17: AFDC-U Adult, Cash	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
25: AFDC Adult, MN	N/A	21,115	N/A	21,626	N/A	21,742	N/A	2.42	0.54	10% (+/-)	Yes
35: Adult, Poverty	N/A	14,289	N/A	14,940	N/A	15,934	N/A	4.56	6.65	10% (+/-)	Yes
45: Other Adult	N/A	19,175	N/A	12,540	N/A	12,951	N/A	-34.60	3.28	10% (+/-)	Yes
55: 1115 Adult	N/A	87,876	N/A	92,098	N/A	97,051	N/A	4.80	5.38	10% (+/-)	Yes
<b>Long-Term Care Enrollees</b>											
<b>INSTITUTIONAL STATUS</b>											
# enrollees with any ILTC claims (includes NF, ICF/MR, Aged Mental Hospital, IP Psych. < 21 years)	N/A	26,842	N/A	27,221	N/A	27,195	N/A	1.41	-0.10	N/A	N/A
% enrollees with any ILTC claims	N/A	3.22	N/A	3.23	N/A	3.17	N/A	0.32	-2.00	N/A	N/A
% AGED enrollees with any ILTC claims	N/A	28.02	N/A	27.37	N/A	26.91	N/A	-2.32	-1.71	N/A	N/A
% DISABLED enrollees with any ILTC claims	N/A	4.61	N/A	4.72	N/A	4.71	N/A	2.47	-0.31	N/A	N/A
% CHILD enrollees with any ILTC claims	N/A	0.48	N/A	0.46	N/A	0.44	N/A	-2.97	-4.27	N/A	N/A
% ADULT enrollees with any ILTC claims	N/A	0.10	N/A	0.06	N/A	0.05	N/A	-43.30	-6.09	N/A	N/A
<b>COMMUNITY LONG-TERM CARE STATUS</b>											
# enrollees with any CLTC claims (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	35,753	N/A	N/A	N/A	15% (+/-)	No
% enrollees with any CLTC claims (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	4.16	N/A	N/A	N/A	15% (+/-)	No
% AGED enrollees with any CLTC claims (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	6.20	N/A	N/A	N/A	15% (+/-)	No
% DISABLED enrollees with any CLTC claims (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	18.18	N/A	N/A	N/A	15% (+/-)	No
% CHILD enrollees with any CLTC claims (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	1.25	N/A	N/A	N/A	15% (+/-)	No
% ADULT enrollees with any CLTC claims (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	0.30	N/A	N/A	N/A	15% (+/-)	No
# enrollees with ILTC claims and CLTC claims (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	1,598	N/A	N/A	N/A	15% (+/-)	No
<b>Section 1915(c) Waiver Enrollment - Most Recent</b>											
# ever enrolled in any Section 1915(c) waiver	N/A	N/A	N/A	N/A	N/A	15,288	N/A	N/A	N/A	15% (+/-)	No
% enrolled in any Section 1915(c) waiver	N/A	N/A	N/A	N/A	N/A	1.78	N/A	N/A	N/A	15% (+/-)	No
% AGED enrollees in Section 1915(c) waiver	N/A	N/A	N/A	N/A	N/A	1.58	N/A	N/A	N/A	15% (+/-)	No
% DISABLED enrollees in Section 1915(c) waiver	N/A	N/A	N/A	N/A	N/A	10.27	N/A	N/A	N/A	15% (+/-)	No
% CHILD enrollees in Section 1915(c) waiver	N/A	N/A	N/A	N/A	N/A	0.01	N/A	N/A	N/A	15% (+/-)	No
% ADULT enrollees in Section 1915(c) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
# with Section 1915(c) waiver for Aged and Disabled (Code G)	N/A	N/A	N/A	N/A	N/A	3,635	N/A	N/A	N/A	15% (+/-)	No
# with Section 1915(c) waiver for Aged (Code H)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
# with Section 1915(c) waiver for Physically Disabled (Code I)	N/A	N/A	N/A	N/A	N/A	329	N/A	N/A	N/A	15% (+/-)	No
# with Section 1915(c) waiver for People with Brain Injuries (Code J)	N/A	N/A	N/A	N/A	N/A	17	N/A	N/A	N/A	15% (+/-)	No
# with Section 1915(c) waiver for People with HIV/AIDS (Code K)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
# with Section 1915(c) waiver for MR/DD (Code L)	N/A	N/A	N/A	N/A	N/A	11,098	N/A	N/A	N/A	15% (+/-)	No
# with Section 1915(c) waiver for People with M/SED (Code M)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
# with Section 1915(c) waiver for Technologically Dependent/Medically Fragile (Code N)	N/A	N/A	N/A	N/A	N/A	209	N/A	N/A	N/A	15% (+/-)	No
# with Section 1915(c) waiver enrollment for unspecified or unknown populations (Code O)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
% of Section 1915(c) waiver enrollees with no waiver claim (Program Type 6 or 7)	<10%	N/A	No	N/A	No	5.38	Yes	N/A	N/A	15% (+/-)	No
% of Section 1915(c) claim (Program Type 6 or 7) recipients with no waiver enrollment	<10%	N/A	No	N/A	No	1.93	Yes	N/A	N/A	15% (+/-)	No
% of Section 1915(c) waiver enrollees with any HMO/HIO enrollment	N/A	N/A	N/A	N/A	N/A	38.74	N/A	N/A	N/A	15% (+/-)	No
<b>Other Waiver Enrollment (Enrolled Any Time During the Year)</b>											
# with any 1115 waiver (Codes 1,5,6,A,F)	N/A	N/A	N/A	N/A	N/A	740,432	N/A	N/A	N/A	15% (+/-)	No
% AGED enrollees with any 1115 waiver	N/A	N/A	N/A	N/A	N/A	39.45	N/A	N/A	N/A	15% (+/-)	No
% DISABLED enrollees with any 1115 waiver	N/A	N/A	N/A	N/A	N/A	65.83	N/A	N/A	N/A	15% (+/-)	No
% CHILD enrollees with any 1115 waiver	N/A	N/A	N/A	N/A	N/A	96.91	N/A	N/A	N/A	15% (+/-)	No
% ADULT enrollees with any 1115 waiver	N/A	N/A	N/A	N/A	N/A	91.44	N/A	N/A	N/A	15% (+/-)	No
% with any HMO/HIO enrollment	N/A	N/A	N/A	N/A	N/A	82.45	N/A	N/A	N/A	15% (+/-)	No
# with any 1915(b) waiver (Code 2)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No

2003-2005 MAX PSF VALIDATION TABLE  
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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
% AGED enrollees with any 1915(b) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% DISABLED enrollees with any 1915(b) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% CHILD enrollees with any 1915(b) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% ADULT enrollees with any 1915(b) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% with any HMO/HIO enrollment	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
# with any combined 1915(b)(c) waiver (Code 4)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
% AGED enrollees with any combined 1915(b)(c) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% DISABLED enrollees with any combined 1915(b)(c) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% CHILD enrollees with any combined 1915(b)(c) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% ADULT enrollees with any combined 1915(b)(c) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% with any HMO/HIO enrollment	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
# with 1115 HIFA waiver (Code 5)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
# with 1115 Pharmacy waiver coverage (Code 6)	N/A	N/A	N/A	N/A	N/A	79,251	N/A	N/A	N/A	15% (+/-)	No
% AGED enrollees with Pharmacy waiver coverage	N/A	N/A	N/A	N/A	N/A	38.33	N/A	N/A	N/A	15% (+/-)	No
% DISABLED enrollees with any Pharmacy waiver coverage	N/A	N/A	N/A	N/A	N/A	11.99	N/A	N/A	N/A	15% (+/-)	No
% CHILD enrollees with any Pharmacy waiver coverage	N/A	N/A	N/A	N/A	N/A	0.11	N/A	N/A	N/A	15% (+/-)	No
% ADULT enrollees with any combined 1915(b)(c) waiver	N/A	N/A	N/A	N/A	N/A	20.04	N/A	N/A	N/A	15% (+/-)	No
% with any HMO/HIO enrollment	N/A	N/A	N/A	N/A	N/A	4.94	N/A	N/A	N/A	15% (+/-)	No
# with other type of waiver (Code 7)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
# with unknown type of waiver (Code 9)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
# with 1115 disaster-related waiver (Code A)	N/A	N/A	N/A	N/A	N/A	2,361	N/A	N/A	N/A	15% (+/-)	No
# with 1115 Family Planning Only waiver (Code F)	N/A	N/A	N/A	N/A	N/A	72,950	N/A	N/A	N/A	15% (+/-)	No
<b>Enrollees with Restricted Benefits</b>											
<i>Family Planning enrollees with Restricted Benefits (Code 6)</i>											
# with ONLY Family Planning Only enrollment	N/A	45,898	N/A	48,467	N/A	49,879	N/A	5.60	2.91	N/A	N/A
# with ANY Family Planning Only enrollment	N/A	68,193	N/A	70,907	N/A	72,950	N/A	3.98	2.88	N/A	N/A
# PYE ANY FP Only	N/A	53,186	N/A	55,766	N/A	56,161	N/A	4.85	0.71	N/A	N/A
<i>Aliens with Restricted Benefits (Code 2)</i>											
# Aliens with ONLY restricted benefits	N/A	0	N/A	7,239	N/A	7,802	N/A	Div by 0	7.78	N/A	N/A
# Aliens with ANY restricted benefits	N/A	0	N/A	7,410	N/A	7,971	N/A	Div by 0	7.57	N/A	N/A
# PYE Aliens with ANY restricted benefits	N/A	Div by 0	N/A	1,457	N/A	1,406	N/A	Div by 0	-3.51	N/A	N/A
<i>EDB Duals with Restricted Benefits (Medicare Cost Sharing Only - Code 3)</i>											
# EDB Duals with ONLY restricted benefits enrollment	N/A	2,263	N/A	3,574	N/A	4,069	N/A	57.93	13.85	N/A	N/A
# EDB Duals with ANY restricted benefits enrollment	N/A	4,204	N/A	5,549	N/A	5,837	N/A	31.99	5.19	N/A	N/A
# PYE EDB Duals with ANY restricted benefits	N/A	2,640	N/A	3,288	N/A	3,657	N/A	24.52	11.25	N/A	N/A
% EDB Duals with ONLY restricted benefits enrollment	N/A	N/A	N/A	N/A	N/A	3.40	N/A	N/A	N/A	15% (+/-)	No
<i>Prescription Drug Enrollees (Codes X, Y, or Z)</i>											
# with ONLY Prescription Drug enrollment (may also have a month or more of Code 3)	N/A	59,151	N/A	65,786	N/A	69,341	N/A	11.22	5.40	N/A	N/A
# with ANY Prescription Drug enrollment	N/A	68,877	N/A	75,973	N/A	79,251	N/A	10.30	4.32	N/A	N/A
# PYE ANY Prescription Drug enrollment	N/A	47,069	N/A	54,972	N/A	59,600	N/A	16.79	8.42	N/A	N/A
<i>Dual Prescription Drug Enrollees</i>											
# with ONLY prescription drugs who are also EDB duals	N/A	31,733	N/A	37,348	N/A	39,217	N/A	17.69	5.00	N/A	N/A
<b>June Eligibility Profile</b>											
<b>TOTAL ENROLLEES IN JUNE</b>											
June % Full Scope Benefits (Code 1)	>80%	91.15	Yes	83.13	Yes	82.80	Yes	-8.80	-0.40	15% (+/-)	Yes
June % Restricted Benefits Alien (Code 2)	<5%	0.00	Yes	0.20	Yes	0.22	Yes	Div by 0	8.53	15% (+/-)	Yes
June % Restricted Benefits Dual (Code 3)	<5%	0.47	Yes	0.47	Yes	0.51	Yes	0.11	7.66	15% (+/-)	Yes
June % Restricted Benefits Pregnant (Code 4)	<5%	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	15% (+/-)	N/A
June % Restricted Benefits Other (Code 5)	0%	0.00	Yes	0.00	No	0.00	Yes	Div by 0	-100.00	15% (+/-)	No
June % Restricted Benefits Family Planning (Code 6)	<5%	8.38	No	8.12	No	8.10	No	-3.10	-0.22	15% (+/-)	Yes
June % Unknown Benefits (Code 9)	0%	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	15% (+/-)	N/A
June % Restricted Benefits Pharm Plus Non-Dual Enrollee (Code X)	N/A	N/A	N/A	N/A	N/A	3.28	N/A	N/A	N/A	15% (+/-)	No
June % Restricted Benefits Pharm Plus Dual Receiving Medicare Cost Sharing (Code Y)	N/A	N/A	N/A	N/A	N/A	3.00	N/A	N/A	N/A	15% (+/-)	No
June % Restricted Benefits Pharm Plus Dual Not Receiving Medicare Cost Sharing (Code Z)	N/A	N/A	N/A	N/A	N/A	2.09	N/A	N/A	N/A	15% (+/-)	No
June % Private Health Insurance (Codes 2-4)	2-12%	5.39	Yes	5.19	Yes	5.12	Yes	-3.71	-1.28	15% (+/-)	Yes

**2003-2005 MAX PSF VALIDATION TABLE**  
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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
June Total Enrollees with TANF Flag (Code 2)	N/A	75,377	N/A	68,677	N/A	0	N/A	-8.89	-100.00	15% (+/-)	No
June # with M-SCHIP (Code 2) - Child (<19 Years)	N/A	103,292	N/A	77,647	N/A	89,550	N/A	-24.80	15.33	15% (+/-)	No
June # with M-SCHIP (Code 2) - Adult (>18 Years)	N/A	4,589	N/A	2,920	N/A	2,456	N/A	-36.40	-15.90	15% (+/-)	No
June # with S-SCHIP Flag (Code 3) - Child (<19 Years)	N/A	1,858	N/A	8,034	N/A	3,162	N/A	332.40	-60.60	15% (+/-)	No
June # with S-SCHIP Flag (Code 3) - Adult (>18 Years)	N/A	28	N/A	153	N/A	38	N/A	446.40	-75.20	15% (+/-)	No
<b>Medicaid Expenditures</b>											
Total Medicaid Amt Paid	N/A	\$4,299,516,534	N/A	\$4,516,256,594	N/A	\$5,007,395,481	N/A	5.04	10.87	15% (+/-)	Yes
Average Medicaid Amt Paid per Enrollee	N/A	\$5,157	N/A	\$5,359	N/A	\$5,829	N/A	3.92	8.76	15% (+/-)	Yes
25th Percentile	N/A	\$484	N/A	\$520	N/A	\$549	N/A	7.44	5.58	15% (+/-)	Yes
50th Percentile (Median)	N/A	\$995	N/A	\$1,078	N/A	\$1,190	N/A	8.34	10.39	15% (+/-)	Yes
75th Percentile	N/A	\$2,841	N/A	\$3,076	N/A	\$3,408	N/A	8.27	10.79	15% (+/-)	Yes
95th Percentile	N/A	\$23,912	N/A	\$24,547	N/A	\$26,984	N/A	2.66	9.93	15% (+/-)	Yes
99th Percentile	N/A	\$67,440	N/A	\$68,797	N/A	\$74,009	N/A	2.01	7.58	15% (+/-)	Yes
<b>AVG MEDICAID AMT PD/ENROLLEE BY MAX ELIGIBILITY GROUP</b>											
MAX Aged	N/A	\$14,147	N/A	\$14,307	N/A	\$14,918	N/A	1.13	4.27	15% (+/-)	Yes
MAX Disabled	N/A	\$16,293	N/A	\$16,438	N/A	\$17,808	N/A	0.89	8.33	10% (+/-)	Yes
MAX Child	N/A	\$1,915	N/A	\$1,941	N/A	\$2,190	N/A	1.34	12.83	10% (+/-)	No
MAX Adult	N/A	\$2,340	N/A	\$2,496	N/A	\$2,744	N/A	6.67	9.96	10% (+/-)	Yes
<b>AVG MEDICAID AMT PD/EDB DUAL ENROLLEE</b>											
All EDB Dual Enrollees	N/A	\$14,216	N/A	\$14,508	N/A	\$15,212	N/A	2.06	4.85	15% (+/-)	Yes
MAX Aged	N/A	\$14,443	N/A	\$14,550	N/A	\$15,009	N/A	0.74	3.15	10% (+/-)	Yes
MAX Disabled	N/A	\$15,362	N/A	\$15,800	N/A	\$16,723	N/A	2.85	5.84	10% (+/-)	Yes
<b>AVG MEDICAID AMT PD/LONG-TERM CARE ENROLLEE</b>											
Enrollees with ILTC claims	N/A	N/A	N/A	N/A	N/A	\$49,570	N/A	N/A	N/A	15% (+/-)	No
Enrollees with CLTC claims (excluding CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	\$34,444	N/A	N/A	N/A	15% (+/-)	No
Enrollees with ILTC and CLTC claims (excluding CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	\$50,753	N/A	N/A	N/A	15% (+/-)	No
<b>AVG MEDICAID AMT PD PER ENROLLEE IN 1915(c) WAIVER - MOST RECENT</b>											
All Section 1915(c) enrollees	N/A	N/A	N/A	N/A	N/A	\$46,929	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for Aged and Disabled (Code G)	N/A	N/A	N/A	N/A	N/A	\$34,958	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for Aged (Code H)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for Physically Disabled (Code I)	N/A	N/A	N/A	N/A	N/A	\$48,305	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for People with Brain Injuries (Code J)	N/A	N/A	N/A	N/A	N/A	\$87,362	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for People with HIV/AIDS (Code K)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for MR/DD (Code L)	N/A	N/A	N/A	N/A	N/A	\$49,327	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for People with MI/SED (Code M)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for Technologically Dependent/Medically Fragile (Code N)	N/A	N/A	N/A	N/A	N/A	\$122,371	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for none of the above (Code O)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
<b>AVG 1915(c) WAIVER AMT PD (PROGRAM TYPES 6/7) PER ENROLLEE IN ANY 1915(c) WAIVER - MOST RECENT</b>											
All Section 1915(c) enrollees	N/A	N/A	N/A	N/A	N/A	\$32,617	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for Aged and Disabled (Code G)	N/A	N/A	N/A	N/A	N/A	\$18,204	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for Aged (Code H)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for Physically Disabled (Code I)	N/A	N/A	N/A	N/A	N/A	\$0	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for People with Brain Injuries (Code J)	N/A	N/A	N/A	N/A	N/A	\$73,617	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for People with HIV/AIDS (Code K)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for MR/DD (Code L)	N/A	N/A	N/A	N/A	N/A	\$38,749	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for People with MI/SED (Code M)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for Technologically Dependent/Medically Fragile (Code N)	N/A	N/A	N/A	N/A	N/A	\$5,667	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for none of the above (Code O)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
<b>EXPENDITURES FOR RESTRICTED BENEFIT ENROLLEES</b>											
<b>Expenditures for Family Planning enrollees with Restricted Benefits</b>											
Expenditures for ONLY FP Only enrollees	N/A	\$3,238,764	N/A	\$3,912,076	N/A	\$3,857,973	N/A	20.79	-1.38	N/A	N/A
Average Medicaid Paid for ONLY FP Only enrollees	N/A	\$71	N/A	\$81	N/A	\$77	N/A	14.39	-4.17	N/A	N/A
<b>Expenditures for Aliens with Restricted Benefits</b>											
Expend for Aliens with restricted benefits ONLY enrollment	N/A	Div by 0	N/A	\$38,115,534	N/A	\$51,562,773	N/A	Div by 0	35.28	N/A	N/A
Avg Medicaid Paid for Alien enrollees with restricted benefits ONLY	N/A	Div by 0	N/A	\$5,265	N/A	\$6,609	N/A	Div by 0	25.52	N/A	N/A
<b>Expenditures for EDB Duals with Restricted Benefits (Medicare Cost Sharing Only - Code 3)</b>											



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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
Expenditures for EDB Duals with only restricted benefits enrollment	N/A	\$14,943	N/A	\$11,218	N/A	\$29,843	N/A	-24.90	166.00	N/A	N/A
Avg Medicaid Paid for EDB Duals with only restricted benefit enrollment	N/A	\$7	N/A	\$3	N/A	\$7	N/A	-52.50	133.70	N/A	N/A
<b>Prescription Drug Enrollees</b>											
Expenditures for Prescription Drug ONLY enrollees (may also have a month or more of Code 3)	N/A	\$60,870,822	N/A	\$75,324,734	N/A	\$89,622,989	N/A	23.75	18.98	N/A	N/A
Avg Medicaid Paid for Prescription Drug ONLY enrollees	N/A	\$1,029	N/A	\$1,145	N/A	\$1,292	N/A	11.26	12.88	N/A	N/A
<b>Dual Prescription Drug Enrollees</b>											
Expenditures for Prescription Drug ONLY enrollees who are also EDB duals	N/A	\$60,457,019	N/A	\$74,938,401	N/A	\$89,083,342	N/A	23.95	18.88	N/A	N/A
<b>MEDICAID ENROLLEES - EXCLUDING SELECT RESTRICTED BENEFIT GROUPS (excludes people with missing eligibility information, S-SCHIP only, FP Only, Aliens with only restricted benefits, duals with restricted benefits only, and prescription drug only enrollees) ---- NOTE: S-SCHIP 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.</b>											
Total Medicaid Enrollees	N/A	726,352	N/A	717,633	N/A	728,010	N/A	-1.20	1.45	10% (+/-)	Yes
MAX Aged Total	N/A	43,235	N/A	41,509	N/A	41,629	N/A	-3.99	0.29	10% (+/-)	Yes
MAX Disabled Total	N/A	117,981	N/A	122,396	N/A	124,415	N/A	3.74	1.65	10% (+/-)	Yes
MAX Child Total	N/A	461,024	N/A	461,997	N/A	470,235	N/A	0.21	1.78	10% (+/-)	Yes
MAX Adult Total	N/A	104,112	N/A	91,731	N/A	91,731	N/A	-11.90	0.00	10% (+/-)	Yes
Total Medicaid PYE (Person Years of Enrollment)	N/A	589,381	N/A	589,099	N/A	603,268	N/A	-0.05	2.41	10% (+/-)	Yes
Total EDB Duals	N/A	76,005	N/A	74,819	N/A	76,190	N/A	-1.56	1.83	10% (+/-)	Yes
MAX Aged	N/A	38,038	N/A	36,818	N/A	36,910	N/A	-3.21	0.25	10% (+/-)	Yes
MAX Disabled	N/A	36,822	N/A	36,984	N/A	38,248	N/A	0.44	3.42	10% (+/-)	Yes
<b>Total Medicaid Amount Paid</b>											
Total Medicaid Amt Paid	N/A	\$4,235,392,005	N/A	\$4,398,893,032	N/A	\$4,862,321,903	N/A	3.86	10.54	15% (+/-)	Yes
Average Medicaid Amt Paid per Enrollee	N/A	\$5,831	N/A	\$6,130	N/A	\$6,679	N/A	5.12	8.96	15% (+/-)	Yes
<b>AVG MEDICAID AMT PD/ENROLLEE BY MAX ELIGIBILITY GROUP</b>											
MAX Aged	N/A	\$21,112	N/A	\$22,656	N/A	\$23,717	N/A	7.31	4.68	15% (+/-)	Yes
MAX Disabled	N/A	\$17,152	N/A	\$17,649	N/A	\$19,312	N/A	2.90	9.42	10% (+/-)	Yes
MAX Child	N/A	\$1,926	N/A	\$1,943	N/A	\$2,187	N/A	0.91	12.53	10% (+/-)	No
MAX Adult	N/A	\$3,949	N/A	\$4,366	N/A	\$4,841	N/A	10.54	10.88	10% (+/-)	No
<b>AVG MEDICAID AMT PD/EDB DUAL ENROLLEE</b>											
All EDB Dual Enrollees	N/A	\$19,810	N/A	\$21,479	N/A	\$22,727	N/A	8.43	5.81	15% (+/-)	Yes
MAX Aged	N/A	\$22,105	N/A	\$23,804	N/A	\$24,771	N/A	7.69	4.06	10% (+/-)	Yes
MAX Disabled	N/A	\$17,875	N/A	\$19,560	N/A	\$21,199	N/A	9.43	8.38	10% (+/-)	Yes
<b>MANAGED CARE PLAN INFORMATION (Enrollees in Capitated Plans - PCCM, HMO, HIO, &amp; PHPs, excludes people with missing eligibility information, S-SCHIP 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.</b>											
% Total Enrollees in MC Anytime During Year	N/A	83.50	N/A	84.76	N/A	84.35	N/A	1.52	-0.49	25% (+)	Yes
Total MC Enrollees	N/A	606,489	N/A	608,294	N/A	614,062	N/A	0.30	0.95	25% (+)	Yes
Aged	N/A	661	N/A	638	N/A	680	N/A	-3.48	6.58	25% (+)	Yes
Disabled	N/A	74,225	N/A	77,543	N/A	77,973	N/A	4.47	0.55	25% (+)	Yes
Child	N/A	444,201	N/A	449,527	N/A	456,709	N/A	1.20	1.60	25% (+)	Yes
Adult	N/A	87,402	N/A	80,586	N/A	78,700	N/A	-7.80	-2.34	25% (+)	Yes
% of MC Enrollees in HMO/HIO (Dups)	N/A	99.97	N/A	99.97	N/A	99.97	N/A	0.00	0.00	25% (+)	Yes
% of MC Enrollees in Dental (Dups)	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 (Dups)	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 (Dups)	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 (Dups)	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 (Dups)	N/A	0.03	N/A	0.03	N/A	0.03	N/A	-2.67	5.71	25% (+)	Yes
% of MC Enrollees in PCCM (Dups)	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 (Dups)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
% EDB Duals ever enrolled in HMO/HIOs	<20%	8.22	Yes	8.11	Yes	8.56	Yes	-1.41	5.63	25% (+)	Yes
% EDB Duals in PHP only or PHP/PCCM only	N/A	0.20	N/A	0.21	N/A	0.22	N/A	4.28	7.07	25% (+)	Yes
% 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	N/A	N/A	N/A	N/A	38.75	N/A	N/A	N/A	25% (+)	No
% Section 1915(c) waiver enrollees in PHP only or PHP/PCCM only	N/A	N/A	N/A	N/A	N/A	0.16	N/A	N/A	N/A	25% (+)	No
% Section 1915(c) waiver enrollees in PCCM only	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	25% (+)	No
TOTAL ENROLLEES IN JUNE	N/A	589,992	N/A	584,660	N/A	601,695	N/A	-0.90	2.91	25% (+)	Yes
June % HMO/HIO only (Code 1)	N/A	79.52	N/A	79.46	N/A	80.03	N/A	-0.07	0.72	25% (+)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
June % Dental Plan only (Code 2)	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 (Code 3)	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 (Code 4)	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 (Code 5)	N/A	0.02	N/A	0.03	N/A	0.02	N/A	7.40	-3.48	25% (+)	Yes
June % HMO/HIO & Dental (Code 6)	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 (Code 7)	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 (Code 8)	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 (Code 9)	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 (Code 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 (Code 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 (Code 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 (Code 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 (Code 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 (Code 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 (Code 16)	N/A	20.46	N/A	20.51	N/A	19.94	N/A	0.27	-2.78	25% (+)	Yes
June % MC Status Unknown (Code 99)	<5%	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	25% (+)	N/A
<b>CAPITATION CLAIMS</b>											
Total Cap Payments	N/A	\$1,185,864,157	N/A	\$1,355,699,848	N/A	\$1,427,250,970	N/A	14.32	5.28	15% (+/-)	Yes
HMO/HIO	N/A	\$1,185,864,157	N/A	\$1,355,699,848	N/A	\$1,427,250,970	N/A	14.32	5.28	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 Cap Claims to PME (person mo. enroll.) in MC	-9-2	0.89	No	0.95	Yes	0.90	No	6.69	-5.27	15% (+/-)	Yes
HMO/HIO	-9-2	0.89	No	0.95	Yes	0.90	No	6.69	-5.27	15% (+/-)	Yes
PHP	-9-2	0.00	No	0.00	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
Average Cap Payment for PME in MC	N/A	\$212	N/A	\$241	N/A	\$247	N/A	13.53	2.64	15% (+/-)	Yes
HMO/HIO	N/A	\$212	N/A	\$241	N/A	\$247	N/A	13.54	2.64	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	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
<b>Persons enrolled in PHP only or PHP/PCCM only</b>											
Total Cap Payments	N/A	\$3,121,565	N/A	\$3,801,428	N/A	\$3,008,681	N/A	21.78	-20.90	15% (+/-)	No
Total Medicaid Amt Paid	N/A	\$3,286,865	N/A	\$3,918,546	N/A	\$3,973,209	N/A	19.22	1.40	15% (+/-)	Yes
Count of Enrollees	N/A	157	N/A	164	N/A	175	N/A	4.46	6.71	15% (+/-)	Yes
<b>Persons enrolled in PCCM only</b>											
Total Cap 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
<b>Persons ever enrolled in HMO/HIOs during year</b>											
Count of Enrollees	N/A	606,332	N/A	608,130	N/A	613,887	N/A	0.30	0.95	15% (+/-)	Yes
Aged	N/A	510	N/A	481	N/A	516	N/A	-5.69	7.28	25% (+)	Yes
Disabled	N/A	74,219	N/A	77,537	N/A	77,962	N/A	4.47	0.55	25% (+)	Yes
Child	N/A	444,201	N/A	449,527	N/A	456,709	N/A	1.20	1.60	25% (+)	Yes
Adult	N/A	87,402	N/A	80,585	N/A	78,700	N/A	-7.80	-2.34	25% (+)	Yes
Total Ever Enrolled in HMO/HIO PYE	N/A	465,693	N/A	468,870	N/A	480,910	N/A	0.68	2.57	25% (+)	Yes
Total Cap Payments	N/A	\$1,182,742,592	N/A	\$1,351,898,420	N/A	\$1,424,242,289	N/A	14.30	5.35	15% (+/-)	Yes
Average Cap Payments	N/A	\$1,951	N/A	\$2,223	N/A	\$2,320	N/A	13.96	4.36	15% (+/-)	Yes
Aged	N/A	\$4,581	N/A	\$4,771	N/A	\$4,302	N/A	4.15	-9.82	15% (+/-)	Yes
Disabled	N/A	\$6,178	N/A	\$6,834	N/A	\$7,020	N/A	10.63	2.71	15% (+/-)	Yes
Child	N/A	\$998	N/A	\$1,129	N/A	\$1,180	N/A	13.16	4.48	15% (+/-)	Yes
Adult	N/A	\$3,188	N/A	\$3,872	N/A	\$4,268	N/A	21.47	10.22	15% (+/-)	Yes
Total FFS Payments	N/A	\$1,116,293,900	N/A	\$1,045,450,395	N/A	\$1,245,247,854	N/A	-6.35	19.11	15% (+/-)	No
Average FFS Payments per enrollee	N/A	\$1,841.06	N/A	\$1,719	N/A	\$2,028	N/A	-6.62	17.99	15% (+/-)	No
Aged	N/A	\$5,528.11	N/A	\$6,575	N/A	\$6,349	N/A	18.95	-3.44	15% (+/-)	Yes
Disabled	N/A	\$9,090.72	N/A	\$8,547	N/A	\$9,669	N/A	-5.98	13.13	15% (+/-)	Yes
Child	N/A	\$829.33	N/A	\$709	N/A	\$904	N/A	-14.50	27.46	15% (+/-)	No
Adult	N/A	\$805.25	N/A	\$753	N/A	\$955	N/A	-6.54	26.89	15% (+/-)	No
Total FFS Payments by Type of Service											
IP	N/A	\$232,407,388	N/A	\$221,420,386	N/A	\$249,732,092	N/A	-4.73	12.79	15% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: MD

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
ILTC	N/A	\$50,708,011	N/A	\$47,792,341	N/A	\$50,460,606	N/A	-5.75	5.58	15% (+/-)	Yes
Drug	N/A	\$122,501,708	N/A	\$130,972,871	N/A	\$137,240,619	N/A	6.92	4.79	15% (+/-)	Yes
All Other (excluding cap payments)	N/A	\$710,676,793	N/A	\$645,264,797	N/A	\$807,814,537	N/A	-9.20	25.19	15% (+/-)	No
Average FFS Payments by Type of Service											
IP	N/A	\$383	N/A	\$364	N/A	\$407	N/A	-5.01	11.73	15% (+/-)	Yes
ILTC	N/A	\$84	N/A	\$79	N/A	\$82	N/A	-6.03	4.59	15% (+/-)	Yes
Drug	N/A	\$202	N/A	\$215	N/A	\$224	N/A	6.60	3.80	15% (+/-)	Yes
All Other (excluding cap payments)	N/A	\$1,172	N/A	\$1,061	N/A	\$1,316	N/A	-9.47	24.02	15% (+/-)	No
<b>FFS INFORMATION FOR NON-DUAL MEDICAID ENROLLEES (excludes EDB Duals, people ever enrolled in HMO/HIOS, with missing eligibility information, S-SCHIP only, FP Only, Aliens with restricted benefits only, and prescription drug only enrollees) ---- NOTE: S-SCHIP only, FP Only, and Aliens with restricted benefits were NOT excluded prior to 2001. Prescription drug only enrollees were NOT excluded prior to 2003.</b>											
Total Non-Dual FFS Enrollees	N/A	50,265	N/A	40,750	N/A	44,458	N/A	-18.90	9.10	15% (+/-)	Yes
Total Non-Dual FFS Recipients	N/A	26,393	N/A	21,759	N/A	24,225	N/A	-17.60	11.33	15% (+/-)	Yes
Total Non-Dual FFS PYE	N/A	23,188	N/A	19,842	N/A	21,613	N/A	-14.40	8.93	15% (+/-)	Yes
MAX Aged Total	N/A	5,090	N/A	4,603	N/A	4,621	N/A	-9.57	0.39	10% (+/-)	Yes
11: Aged, Cash	N/A	2,577	N/A	2,512	N/A	2,406	N/A	-2.52	-4.22	10% (+/-)	Yes
21: Aged, MN	N/A	2,093	N/A	2,007	N/A	2,131	N/A	-4.11	6.18	10% (+/-)	Yes
31: Aged, Poverty	N/A	360	N/A	71	N/A	46	N/A	-80.30	-35.20	10% (+/-)	No
41: Other Aged	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
51: 1115 Aged	N/A	60	N/A	13	N/A	38	N/A	-78.30	192.30	10% (+/-)	No
MAX Disabled Total	N/A	12,249	N/A	13,078	N/A	13,788	N/A	6.77	5.43	10% (+/-)	Yes
12: Disabled, Cash	N/A	5,461	N/A	6,046	N/A	6,566	N/A	10.71	8.60	10% (+/-)	Yes
22: Disabled, MN	N/A	6,445	N/A	6,377	N/A	6,508	N/A	-1.06	2.05	10% (+/-)	Yes
32: Disabled, Poverty	N/A	37	N/A	367	N/A	452	N/A	891.90	23.16	10% (+/-)	No
42: Other Disabled	N/A	304	N/A	279	N/A	251	N/A	-8.22	-10.00	10% (+/-)	Yes
52: 1115 Disabled	N/A	2	N/A	9	N/A	11	N/A	350.00	22.22	10% (+/-)	No
MAX Child Total	N/A	16,797	N/A	12,450	N/A	13,513	N/A	-25.90	8.54	10% (+/-)	Yes
14: AFDC Child, Cash	N/A	1,980	N/A	1,982	N/A	1,995	N/A	0.10	0.66	10% (+/-)	Yes
16: AFDC-U Child, Cash	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
24: AFDC Child, MN	N/A	2,043	N/A	2,123	N/A	2,189	N/A	3.92	3.11	10% (+/-)	Yes
34: Child Poverty	N/A	7,313	N/A	7,254	N/A	7,427	N/A	-0.81	2.39	10% (+/-)	Yes
44: Other Child	N/A	4,580	N/A	200	N/A	195	N/A	-95.60	-2.50	10% (+/-)	Yes
48: Foster Care Child	N/A	736	N/A	693	N/A	603	N/A	-5.84	-13.00	10% (+/-)	No
54: 1115 Child	N/A	145	N/A	198	N/A	1,104	N/A	36.55	457.60	10% (+/-)	No
MAX Adult Total	N/A	16,129	N/A	10,619	N/A	12,536	N/A	-34.20	18.05	10% (+/-)	No
15: AFDC Adult, Cash	N/A	2,638	N/A	2,600	N/A	2,688	N/A	-1.44	3.39	10% (+/-)	Yes
17: AFDC-U Adult, Cash	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
25: AFDC Adult, MN	N/A	3,749	N/A	4,098	N/A	4,298	N/A	9.31	4.88	10% (+/-)	Yes
35: Adult, Poverty	N/A	2,171	N/A	2,207	N/A	2,571	N/A	1.66	16.49	10% (+/-)	No
45: Other Adult	N/A	6,421	N/A	222	N/A	167	N/A	-96.50	-24.80	10% (+/-)	No
55: 1115 Adult	N/A	1,150	N/A	1,492	N/A	2,812	N/A	29.74	88.47	10% (+/-)	No
# Non-Dual FFS Enrollees w/ MSIS Dual Code/No EDB Confirmation	N/A	1,521	N/A	1,823	N/A	868	N/A	19.86	-52.40	10% (+/-)	No
Total FFS Medicaid Amt Paid	N/A	\$508,377,581	N/A	\$471,520,833	N/A	\$551,612,633	N/A	-7.25	16.99	15% (+/-)	No
Average FFS Medicaid Amt Paid per Non-Dual FFS Enrollee	N/A	\$10,114	N/A	\$11,571	N/A	\$12,407	N/A	14.41	7.23	15% (+/-)	Yes
Avg FFS Medicaid Amt Paid per Non-Dual FFS Recipient (User of any service)	N/A	\$19,262	N/A	\$21,670	N/A	\$22,770	N/A	12.50	5.08	15% (+/-)	Yes
<b>AVG FFS MEDICAID AMT PD/NON-DUAL FFS ENROLLEE BY MAX ELIG GRP</b>											
All Aged	N/A	\$13,795	N/A	\$13,536	N/A	\$15,441	N/A	-1.88	14.07	15% (+/-)	Yes
11: Aged, Cash	N/A	\$14,937	N/A	\$13,818	N/A	\$15,770	N/A	-7.49	14.13	15% (+/-)	Yes
21: Aged, MN	N/A	\$13,726	N/A	\$13,660	N/A	\$15,610	N/A	-0.48	14.27	15% (+/-)	Yes
31: Aged, Poverty	N/A	\$7,299	N/A	\$2,004	N/A	\$31	N/A	-72.50	-98.50	15% (+/-)	No
41: Other Aged	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
51: 1115 Aged	N/A	\$6,131	N/A	\$3,000	N/A	\$3,760	N/A	-51.10	25.34	15% (+/-)	No
All Disabled	N/A	\$24,778	N/A	\$23,980	N/A	\$27,102	N/A	-3.22	13.02	15% (+/-)	Yes
12: Disabled, Cash	N/A	\$28,153	N/A	\$26,717	N/A	\$29,196	N/A	-5.10	9.28	15% (+/-)	Yes
22: Disabled, MN	N/A	\$20,560	N/A	\$20,207	N/A	\$24,385	N/A	-1.72	20.67	15% (+/-)	No
32: Disabled, Poverty	N/A	\$960	N/A	\$11,070	N/A	\$9,713	N/A	1,053.00	-12.30	15% (+/-)	Yes
42: Other Disabled	N/A	\$56,624	N/A	\$68,576	N/A	\$74,763	N/A	21.11	9.02	15% (+/-)	Yes
52: 1115 Disabled	N/A	\$3,464	N/A	\$3,242	N/A	\$11,796	N/A	-6.42	263.90	15% (+/-)	No

2003-2005 MAX PSF VALIDATION TABLE  
STATE: MD

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
All Child	N/A	\$4,499	N/A	\$5,628	N/A	\$5,630	N/A	25.10	0.04	15% (+/-)	Yes
14: AFDC Child, Cash	N/A	\$1,100	N/A	\$1,386	N/A	\$1,989	N/A	26.02	43.53	15% (+/-)	No
16: AFDC-U Child, Cash	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
24: AFDC Child, MN	N/A	\$25,912	N/A	\$25,138	N/A	\$25,211	N/A	-2.99	0.29	15% (+/-)	Yes
34: Child, Poverty	N/A	\$1,201	N/A	\$1,083	N/A	\$1,315	N/A	-9.84	21.47	15% (+/-)	No
44: Other Child	N/A	\$1,134	N/A	\$636	N/A	\$570	N/A	-43.90	-10.30	15% (+/-)	Yes
48: Foster Care Child	N/A	\$8,289	N/A	\$7,863	N/A	\$10,270	N/A	-5.14	30.61	15% (+/-)	No
54: 1115 Child	N/A	\$2,586	N/A	\$2,662	N/A	\$774	N/A	2.94	-70.90	15% (+/-)	No
All Adult	N/A	\$3,663	N/A	\$2,404	N/A	\$2,432	N/A	-34.40	1.20	15% (+/-)	Yes
15: AFDC Adult, Cash	N/A	\$1,421	N/A	\$1,670	N/A	\$1,655	N/A	17.49	-0.85	15% (+/-)	Yes
17: AFDC-U Adult, Cash	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
25: AFDC Adult, MN	N/A	\$3,050	N/A	\$3,369	N/A	\$3,493	N/A	10.47	3.66	15% (+/-)	Yes
35: Adult, Poverty	N/A	\$997	N/A	\$902	N/A	\$1,099	N/A	-9.52	21.79	15% (+/-)	No
45: Other Adult	N/A	\$5,642	N/A	\$1,067	N/A	\$4,096	N/A	-81.10	284.00	15% (+/-)	No
55: 1115 Adult	N/A	\$4,791	N/A	\$3,450	N/A	\$2,675	N/A	-28.00	-22.40	15% (+/-)	No
FFS EXPENDITURES AND USERS BY MAX TOS											
IP: Total Medicaid Paid (TOS 01)	N/A	\$202,834,388	N/A	\$153,074,299	N/A	\$197,621,950	N/A	-24.50	29.10	15% (+/-)	No
IP: Number of Users	N/A	12,099	N/A	7,676	N/A	9,111	N/A	-36.60	18.69	15% (+/-)	No
IP: Average Medicaid Pd per User	N/A	\$16,765	N/A	\$19,942	N/A	\$21,690	N/A	18.95	8.77	15% (+/-)	Yes
IP: Average Medicaid Covered Days Per User	N/A	11	N/A	12	N/A	12	N/A	13.19	0.92	15% (+/-)	Yes
MH Aged: Total Medicaid Paid (TOS 02)	N/A	\$1,530,816	N/A	\$1,460,432	N/A	\$1,354,771	N/A	-4.60	-7.23	15% (+/-)	Yes
MH Aged: Number of Users	N/A	12	N/A	13	N/A	9	N/A	8.33	-30.80	15% (+/-)	No
MH Aged: Avg Medicaid Pd per User	N/A	\$127,568	N/A	\$112,341	N/A	\$150,530	N/A	-11.90	33.99	15% (+/-)	No
IP Psych < 21: Total Medicaid Paid (TOS 04)	N/A	\$54,084,398	N/A	\$55,439,384	N/A	\$54,248,799	N/A	2.51	-2.15	15% (+/-)	Yes
IP Psych < 21: Number of Users	N/A	732	N/A	777	N/A	700	N/A	6.15	-9.91	15% (+/-)	Yes
IP Psych<21 :Avg Medicaid Pd per User	N/A	\$73,886	N/A	\$71,351	N/A	\$77,498	N/A	-3.43	8.62	15% (+/-)	Yes
ICF/MR: Total Medicaid Pd (TOS 05)	N/A	\$17,153,267	N/A	\$17,691,416	N/A	\$16,285,082	N/A	3.14	-7.95	15% (+/-)	Yes
ICF/MR: Number of Users	N/A	110	N/A	109	N/A	95	N/A	-0.91	-12.80	15% (+/-)	Yes
ICF/MR: Avg Medicaid Pd per User	N/A	\$155,939	N/A	\$162,307	N/A	\$171,422	N/A	4.08	5.62	15% (+/-)	Yes
NF: Total Medicaid Paid (TOS 07)	N/A	\$105,455,120	N/A	\$110,082,508	N/A	\$127,959,831	N/A	4.39	16.24	15% (+/-)	No
NF Number of Users	N/A	2,628	N/A	2,667	N/A	2,915	N/A	1.48	9.30	15% (+/-)	Yes
NF:Avg Medicaid Pd per User	N/A	\$40,128	N/A	\$41,276	N/A	\$43,897	N/A	2.86	6.35	15% (+/-)	Yes
Physician: Total Medicaid Paid (TOS 08)	N/A	\$17,497,960	N/A	\$16,634,043	N/A	\$20,799,158	N/A	-4.94	25.04	15% (+/-)	No
Physician: Number of Users	N/A	19,028	N/A	15,847	N/A	17,568	N/A	-16.70	10.86	15% (+/-)	Yes
Physician: Avg Medicaid Pd per User	N/A	\$920	N/A	\$1,050	N/A	\$1,184	N/A	14.14	12.79	15% (+/-)	Yes
Dental: Total Medicaid Paid (TOS 09)	N/A	\$69,905	N/A	\$85,086	N/A	\$87,594	N/A	21.72	2.95	15% (+/-)	Yes
Dental: Number of Users	N/A	344	N/A	387	N/A	414	N/A	12.50	6.98	15% (+/-)	Yes
Dental: Avg Medicaid Pd per User	N/A	\$203	N/A	\$220	N/A	\$212	N/A	8.19	-3.77	15% (+/-)	Yes
Other Practitioner: Total Medicaid Pd (TOS 10)	N/A	\$82,676	N/A	\$3,623	N/A	\$7,872	N/A	-95.60	117.30	15% (+/-)	No
Other Practitioner: Number of Users	N/A	1,050	N/A	97	N/A	180	N/A	-90.80	85.57	15% (+/-)	No
Other Practitioner: Avg Medicaid Pd per User	N/A	\$79	N/A	\$37	N/A	\$44	N/A	-52.60	17.09	15% (+/-)	No
OPD: Total Medicaid Paid (TOS 11)	N/A	\$17,518,595	N/A	\$14,979,484	N/A	\$18,878,356	N/A	-14.50	26.03	15% (+/-)	No
OPD Number of Users	N/A	12,194	N/A	9,602	N/A	10,674	N/A	-21.30	11.16	15% (+/-)	Yes
OPD: Avg Medicaid Pd per User	N/A	\$1,437	N/A	\$1,560	N/A	\$1,769	N/A	8.59	13.37	15% (+/-)	Yes
Clinic: Total Medicaid Paid (TOS 12)	N/A	\$896,845	N/A	\$647,005	N/A	\$918,183	N/A	-27.90	41.91	15% (+/-)	No
Clinic: Number of Users	N/A	2,315	N/A	1,610	N/A	1,929	N/A	-30.50	19.81	15% (+/-)	No
Clinic: Avg Medicaid Pd per User	N/A	\$387	N/A	\$402	N/A	\$476	N/A	3.73	18.44	15% (+/-)	No
HH: Total Medicaid Paid (TOS 13)	N/A	\$5,262,420	N/A	\$5,494,210	N/A	\$5,128,774	N/A	4.41	-6.65	15% (+/-)	Yes
HH: Number of Users	N/A	1,195	N/A	1,331	N/A	1,358	N/A	11.38	2.03	15% (+/-)	Yes
HH: Avg Medicaid Pd per User	N/A	\$4,404	N/A	\$4,128	N/A	\$3,777	N/A	-6.26	-8.51	15% (+/-)	Yes
Lab/Xray: Total Medicaid Paid (TOS 15)	N/A	\$9,336,610	N/A	\$12,713,911	N/A	\$15,257,529	N/A	36.17	20.01	15% (+/-)	No
Lab/Xray: Number of Users	N/A	14,145	N/A	13,608	N/A	14,683	N/A	-3.80	7.90	15% (+/-)	Yes
Lab/Xray:Avg Medicaid Pd per User	N/A	\$660	N/A	\$934	N/A	\$1,039	N/A	41.55	11.22	15% (+/-)	Yes
Drugs: Total Medicaid Paid (TOS 16)	N/A	\$30,708,464	N/A	\$34,091,541	N/A	\$37,611,085	N/A	11.02	10.32	15% (+/-)	Yes
Drugs: Number of Users	N/A	12,417	N/A	13,081	N/A	14,033	N/A	5.35	7.28	15% (+/-)	Yes
Drugs: Avg Medicaid Pd per User	N/A	\$2,473	N/A	\$2,606	N/A	\$2,680	N/A	5.38	2.84	15% (+/-)	Yes
Other Services: Total Medicaid Paid (TOS 19)	N/A	\$3,765,172	N/A	\$3,438,413	N/A	\$4,840,912	N/A	-8.68	40.79	15% (+/-)	No

2003-2005 MAX PSF VALIDATION TABLE  
STATE: MD

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
Other Services: Number of Users	N/A	1,004	N/A	854	N/A	1,065	N/A	-14.90	24.71	15% (+/-)	No
Other Services: Avg Medicaid Pd per User	N/A	\$3,750	N/A	\$4,026	N/A	\$4,545	N/A	7.36	12.90	15% (+/-)	Yes
Transportation: Total Medicaid Paid (TOS 26)	N/A	\$173,210	N/A	\$190,424	N/A	\$208,779	N/A	9.94	9.64	15% (+/-)	Yes
Transportation: Number of Users	N/A	1,055	N/A	1,089	N/A	1,225	N/A	3.22	12.49	15% (+/-)	Yes
Transportation: Avg Medicaid Pd per User	N/A	\$164	N/A	\$175	N/A	\$170	N/A	6.51	-2.53	15% (+/-)	Yes
PCS: Total Medicaid Paid (TOS 30)	N/A	\$1,680,740	N/A	\$1,724,955	N/A	\$1,874,902	N/A	2.63	8.69	15% (+/-)	Yes
PCS: Number of Users	N/A	273	N/A	292	N/A	297	N/A	6.96	1.71	15% (+/-)	Yes
PCS: Avg Medicaid Pd per User	N/A	\$6,157	N/A	\$5,907	N/A	\$6,313	N/A	-4.05	6.86	15% (+/-)	Yes
Target Case Management: Total Medicaid Pd (TOS 31)	N/A	\$103,430	N/A	\$61,880	N/A	\$75,390	N/A	-40.20	21.83	15% (+/-)	No
Target Case Management: Number of Users	N/A	288	N/A	309	N/A	360	N/A	7.29	16.50	15% (+/-)	No
Target Case Management: Avg Medicaid Pd per User	N/A	\$359	N/A	\$200	N/A	\$209	N/A	-44.20	4.57	15% (+/-)	Yes
Rehab Services: Total Medicaid Pd (TOS 33)	N/A	\$3,690	N/A	\$139,711	N/A	\$215,770	N/A	3,686.00	54.44	15% (+/-)	No
Rehab Services: Number of Users	N/A	25	N/A	134	N/A	170	N/A	436.00	26.87	15% (+/-)	No
Rehab Services: Avg Medicaid Pd per User	N/A	\$148	N/A	\$1,043	N/A	\$1,269	N/A	606.40	21.74	15% (+/-)	No
PT/OT/Speech/Hear: Total Medicaid Paid (TOS 34)	N/A	\$1,357,631	N/A	\$1,420,072	N/A	\$1,502,329	N/A	4.60	5.79	15% (+/-)	Yes
PT/OT/Speech/Hear: Number of Users	N/A	804	N/A	900	N/A	1,016	N/A	11.94	12.89	15% (+/-)	Yes
PT/OT/Speech/Hear: Avg Medicaid Pd per User	N/A	\$1,689	N/A	\$1,578	N/A	\$1,479	N/A	-6.56	-6.29	15% (+/-)	Yes
Hospice: Total Medicaid Paid (TOS 35)	N/A	\$1,967,475	N/A	\$1,826,964	N/A	\$2,035,509	N/A	-7.14	11.41	15% (+/-)	Yes
Hospice: Number of Users	N/A	222	N/A	242	N/A	241	N/A	9.01	-0.41	15% (+/-)	Yes
Hospice: Avg Medicaid Pd per User	N/A	\$8,863	N/A	\$7,549	N/A	\$8,446	N/A	-14.80	11.88	15% (+/-)	Yes
DME: Total Medicaid Paid (TOS 51)	N/A	\$4,753,928	N/A	\$5,690,992	N/A	\$5,941,095	N/A	19.71	4.40	15% (+/-)	Yes
DME: Number of Users	N/A	2,709	N/A	2,891	N/A	3,212	N/A	6.72	11.10	15% (+/-)	Yes
DME: Avg Medicaid Pd per User	N/A	\$1,755	N/A	\$1,969	N/A	\$1,850	N/A	12.18	-6.04	15% (+/-)	Yes
Residential Care: Total Medicaid Paid (TOS 52)	N/A	\$6,789,881	N/A	\$7,636,535	N/A	\$9,781,228	N/A	12.47	28.08	15% (+/-)	No
Residential Care: Number of Users	N/A	281	N/A	309	N/A	408	N/A	9.96	32.04	15% (+/-)	No
Residential Care: Avg Medicaid Pd per User	N/A	\$24,163	N/A	\$24,714	N/A	\$23,974	N/A	2.28	-2.99	15% (+/-)	Yes
Psych. Services: Total Medicaid Paid (TOS 53)	N/A	\$3,571,420	N/A	\$3,939,377	N/A	\$5,272,941	N/A	10.30	33.85	15% (+/-)	No
Psych. Services: Number of Users	N/A	3,445	N/A	3,717	N/A	4,613	N/A	7.90	24.11	15% (+/-)	No
Psych. Services: Avg Medicaid Pd per User	N/A	\$1,037	N/A	\$1,060	N/A	\$1,143	N/A	2.23	7.85	15% (+/-)	Yes
Adult Day Care: Total Medicaid Paid (TOS 54)	N/A	\$3,595,589	N/A	\$5,064,197	N/A	\$5,976,864	N/A	40.84	18.02	15% (+/-)	No
Adult Day Care: Number of Users	N/A	339	N/A	455	N/A	513	N/A	34.22	12.75	15% (+/-)	Yes
Adult Day Care: Avg Medicaid Pd per User	N/A	\$10,606	N/A	\$11,130	N/A	\$11,651	N/A	4.94	4.68	15% (+/-)	Yes
<b>AVG FFS MEDICAID AMT PD/NON-DUAL FFS ENROLLEE BY MAX TOS</b>											
Inpatient Hospital (TOS 01)	N/A	\$4,035	N/A	\$3,756	N/A	\$4,445	N/A	-6.91	18.33	15% (+/-)	No
Aged	N/A	\$3,374	N/A	\$2,761	N/A	\$3,342	N/A	-18.10	21.04	15% (+/-)	No
Disabled	N/A	\$10,076	N/A	\$8,535	N/A	\$10,434	N/A	-15.30	22.25	15% (+/-)	No
Child	N/A	\$1,176	N/A	\$1,003	N/A	\$1,412	N/A	-14.70	40.76	15% (+/-)	No
Adult	N/A	\$2,634	N/A	\$1,531	N/A	\$1,535	N/A	-41.90	0.24	15% (+/-)	Yes
ILTC (TOS=02,04,05,07)	N/A	\$3,546	N/A	\$4,532	N/A	\$4,495	N/A	27.81	-0.81	15% (+/-)	Yes
Aged	N/A	\$5,982	N/A	\$6,341	N/A	\$7,322	N/A	6.02	15.47	15% (+/-)	No
Disabled	N/A	\$8,053	N/A	\$8,160	N/A	\$8,620	N/A	1.34	5.63	15% (+/-)	Yes
Child	N/A	\$2,814	N/A	\$3,903	N/A	\$3,470	N/A	38.73	-11.10	15% (+/-)	Yes
Adult	N/A	\$116	N/A	\$16	N/A	\$22	N/A	-86.60	37.58	15% (+/-)	No
Drugs (TOS=16)	N/A	\$611	N/A	\$837	N/A	\$846	N/A	36.94	1.12	15% (+/-)	Yes
Aged	N/A	\$1,558	N/A	\$1,609	N/A	\$1,663	N/A	3.30	3.34	15% (+/-)	Yes
Disabled	N/A	\$1,447	N/A	\$1,622	N/A	\$1,775	N/A	12.10	9.40	15% (+/-)	Yes
Child	N/A	\$202	N/A	\$336	N/A	\$295	N/A	66.09	-12.30	15% (+/-)	Yes
Adult	N/A	\$102	N/A	\$121	N/A	\$117	N/A	17.90	-2.87	15% (+/-)	Yes
All Other Services	N/A	\$1,922	N/A	\$2,446	N/A	\$2,621	N/A	27.27	7.15	15% (+/-)	Yes
Aged	N/A	\$2,883	N/A	\$2,825	N/A	\$3,114	N/A	-2.01	10.23	15% (+/-)	Yes
Disabled	N/A	\$5,202	N/A	\$5,663	N/A	\$6,274	N/A	8.86	10.79	15% (+/-)	Yes
Child	N/A	\$307	N/A	\$386	N/A	\$454	N/A	25.86	17.55	15% (+/-)	No
Adult	N/A	\$810	N/A	\$736	N/A	\$759	N/A	-9.16	3.08	15% (+/-)	Yes
<b>% OF NON-DUAL FFS ENROLLEES WITH CLAIMS BY SELECTED MAX TOS</b>											
% Non-Dual FFS Enrollees with IP Claims (TOS=01)	N/A	24.07	N/A	18.84	N/A	20.49	N/A	-21.70	8.80	15% (+/-)	Yes
Aged	N/A	18.25	N/A	16.12	N/A	17.59	N/A	-11.70	9.14	15% (+/-)	Yes
Disabled	N/A	28.17	N/A	28.11	N/A	31.72	N/A	-0.23	12.86	15% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: MD

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
Child	N/A	12.92	N/A	11.82	N/A	13.99	N/A	-8.54	18.44	15% (+/-)	No
Adult	N/A	34.40	N/A	16.83	N/A	16.22	N/A	-51.10	-3.63	15% (+/-)	Yes
% Non-Dual FFS Enrollees with ILTC Claims (TOS=02,04,05,07)	N/A	6.92	N/A	8.75	N/A	8.36	N/A	26.36	-4.38	15% (+/-)	Yes
Aged	N/A	15.58	N/A	16.10	N/A	17.40	N/A	3.33	8.08	15% (+/-)	Yes
Disabled	N/A	16.25	N/A	16.32	N/A	16.59	N/A	0.39	1.65	15% (+/-)	Yes
Child	N/A	3.81	N/A	5.40	N/A	4.48	N/A	41.66	-16.90	15% (+/-)	No
Adult	N/A	0.34	N/A	0.16	N/A	0.17	N/A	-53.10	4.64	15% (+/-)	Yes
% with ratio of ILTC days/enroll days > 1	N/A	0.09	N/A	0.03	N/A	0.19	N/A	-67.50	571.00	15% (+/-)	No
% Non-Dual FFS Enrollees with Drug Claims (TOS=16)	N/A	24.70	N/A	32.10	N/A	31.56	N/A	29.95	-1.67	15% (+/-)	Yes
Aged	N/A	72.08	N/A	73.23	N/A	75.09	N/A	1.60	2.54	15% (+/-)	Yes
Disabled	N/A	42.26	N/A	44.92	N/A	46.57	N/A	6.29	3.68	15% (+/-)	Yes
Child	N/A	9.06	N/A	12.63	N/A	12.04	N/A	39.53	-4.70	15% (+/-)	Yes
Adult	N/A	12.72	N/A	21.31	N/A	20.06	N/A	67.59	-5.86	15% (+/-)	Yes
% Non-Dual FFS Enrollees with All Other Claims	N/A	48.31	N/A	49.21	N/A	50.13	N/A	1.88	1.86	15% (+/-)	Yes
Aged	N/A	72.16	N/A	72.65	N/A	74.68	N/A	0.68	2.80	15% (+/-)	Yes
Disabled	N/A	63.72	N/A	63.56	N/A	68.12	N/A	-0.24	7.17	15% (+/-)	Yes
Child	N/A	26.22	N/A	29.74	N/A	31.26	N/A	13.44	5.10	15% (+/-)	Yes
Adult	N/A	52.07	N/A	44.20	N/A	41.62	N/A	-15.10	-5.85	15% (+/-)	Yes
Avg # IP Days per Non-Dual FFS User	N/A	11	N/A	12	N/A	12	N/A	13.19	0.92	15% (+/-)	Yes
Aged	N/A	12	N/A	10	N/A	11	N/A	-19.80	7.77	15% (+/-)	Yes
Disabled	N/A	22	N/A	18	N/A	18	N/A	-17.60	0.20	15% (+/-)	Yes
Child	N/A	7	N/A	7	N/A	7	N/A	4.30	-0.75	15% (+/-)	Yes
Adult	N/A	5	N/A	4	N/A	4	N/A	-11.40	1.53	15% (+/-)	Yes
Avg # ILTC Days per Non-Dual FFS User	N/A	240	N/A	234	N/A	235	N/A	-2.17	0.49	15% (+/-)	Yes
Aged	N/A	250	N/A	241	N/A	247	N/A	-3.64	2.31	15% (+/-)	Yes
Disabled	N/A	244	N/A	241	N/A	238	N/A	-1.17	-1.39	15% (+/-)	Yes
Child	N/A	218	N/A	210	N/A	218	N/A	-3.64	3.91	15% (+/-)	Yes
Adult	N/A	178	N/A	55	N/A	61	N/A	-69.10	10.33	15% (+/-)	Yes
% Non-Dual FFS Enrollees with Delivery	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	15% (+/-)	No
<b>FFS EXPENDITURES AND USERS BY MAX PGM TYPE</b>											
FP: Total Medicaid Paid (Program Type 2)	N/A	\$688,413	N/A	\$504,250	N/A	\$433,648	N/A	-26.80	-14.00	15% (+/-)	Yes
FP: Number of Users	N/A	1,158	N/A	1,122	N/A	1,131	N/A	-3.11	0.80	15% (+/-)	Yes
FP: Average Medicaid Pd per User	N/A	\$594	N/A	\$449	N/A	\$383	N/A	-24.40	-14.70	15% (+/-)	Yes
RHC: Total Medicaid Paid (Program 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 Pd 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 (Program Type 4)	N/A	\$654,687	N/A	\$517,872	N/A	\$794,434	N/A	-20.90	53.40	15% (+/-)	No
FQHC: Number of Users	N/A	1,173	N/A	1,173	N/A	1,563	N/A	0.00	33.25	15% (+/-)	No
FQHC: Avg Medicaid Pd per User	N/A	\$558	N/A	\$441	N/A	\$508	N/A	-20.90	15.13	15% (+/-)	No
IHS: Total Medicaid Pd (Program 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 Pd 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 (Program Types 6 and 7)	N/A	\$12,199,501	N/A	\$13,080,123	N/A	\$14,705,702	N/A	7.22	12.43	15% (+/-)	Yes
Section 1915(c) Waiver: Number of Users	N/A	515	N/A	575	N/A	604	N/A	11.65	5.04	15% (+/-)	Yes
Section 1915(c) Waiver: Avg Medicaid Pd per User	N/A	\$23,688	N/A	\$22,748	N/A	\$24,347	N/A	-3.97	7.03	15% (+/-)	Yes
<b>FFS COMMUNITY-BASED LONG-TERM CARE EXPENDITURES AND USERS</b>											
Total FFS CLTC Expenditures (all codes - overestimate)	N/A	N/A	N/A	N/A	N/A	\$47,481,627	N/A	N/A	N/A	15% (+/-)	No
Number of FFS Non-Dual CLTC Users (all codes - overestimate)	N/A	N/A	N/A	N/A	N/A	4,106	N/A	N/A	N/A	15% (+/-)	No
Average FFS CLTC Expenditures per FFS Non-Dual User (all codes - overestimate)	N/A	N/A	N/A	N/A	N/A	\$11,564	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$6,193	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$14,725	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$1,172	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$1,257	N/A	N/A	N/A	15% (+/-)	No
% Non-Dual FFS Enrollees with CLTC Claims (all codes - overestimate)	N/A	N/A	N/A	N/A	N/A	9.24	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	19.91	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	20.36	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	2.29	N/A	N/A	N/A	15% (+/-)	No

2003-2005 MAX PSF VALIDATION TABLE  
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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
Adult	N/A	N/A	N/A	N/A	N/A	0.56	N/A	N/A	N/A	15% (+/-)	No
Total FFS CLTC Expenditures (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	\$40,036,823	N/A	N/A	N/A	15% (+/-)	No
Number of Non-Dual CLTC Users (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	2,040	N/A	N/A	N/A	15% (+/-)	No
Average FFS CLTC Expenditures per Non-Dual User (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	\$19,626	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$10,845	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$28,117	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$1,172	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$1,257	N/A	N/A	N/A	15% (+/-)	No
% Non-Dual FFS Enrollees with CLTC Claims (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	4.59	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	8.92	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	9.06	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	2.29	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	0.56	N/A	N/A	N/A	15% (+/-)	No
Total FFS CLTC Expenditures (Section 1915(c) claims only - excludes CLTC Codes 11-20)	N/A	N/A	N/A	N/A	N/A	\$14,705,702	N/A	N/A	N/A	15% (+/-)	No
Number of Non-Dual CLTC Users (Section 1915(c) claims only - excludes CLTC Codes 11-20)	N/A	N/A	N/A	N/A	N/A	604	N/A	N/A	N/A	15% (+/-)	No
Average FFS CLTC Expenditures per Non-Dual User (Section 1915(c) claims only - excludes CLTC Codes 11-20)	N/A	N/A	N/A	N/A	N/A	\$24,347	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$23,310	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$24,529	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$16,720	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
% Non-Dual FFS Enrollees with CLTC Claims (Section 1915(c) claims only - excludes CLTC Codes 11-20)	N/A	N/A	N/A	N/A	N/A	1.36	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	1.26	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	3.92	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	0.04	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
<b>FFS INFORMATION FOR DUAL MEDICAID ENROLLEES (excludes non-EDB duals, duals ever enrolled in HMO/HIOs, 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.</b>											
Total EDB Dual FFS Enrollees	N/A	69,755	N/A	68,753	N/A	69,665	N/A	-1.44	1.33	15% (+/-)	Yes
Number of EDB Dual FFS Recipients	N/A	63,415	N/A	64,516	N/A	65,466	N/A	1.74	1.47	15% (+/-)	Yes
Total EDB Dual FFS PYE	N/A	61,689	N/A	60,780	N/A	61,653	N/A	-1.47	1.44	15% (+/-)	Yes
% EDB Only Dual (Code 50)	N/A	16.61	N/A	10.65	N/A	1.87	N/A	-35.90	-82.40	15% (+/-)	No
% QMB Only (Code 51)	N/A	1.10	N/A	1.26	N/A	1.33	N/A	15.25	5.51	15% (+/-)	Yes
% QMB Plus (Code 52)	N/A	57.99	N/A	61.69	N/A	65.48	N/A	6.38	6.14	15% (+/-)	Yes
% SLMB Only (Code 53)	N/A	1.36	N/A	0.81	N/A	0.75	N/A	-40.30	-7.51	15% (+/-)	Yes
% SLMB Plus (Code 54)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	15% (+/-)	N/A
% QDWI (Code 55)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	15% (+/-)	N/A
% Q1 1 (Code 56)	N/A	2.36	N/A	0.18	N/A	0.15	N/A	-92.50	-13.40	15% (+/-)	Yes
% Q1 2 (Code 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 (Code 58)	N/A	19.89	N/A	24.93	N/A	29.99	N/A	25.34	20.30	15% (+/-)	No
% Dual Type Unknown (Code 59)	N/A	0.70	N/A	0.47	N/A	0.42	N/A	-31.80	-11.00	15% (+/-)	Yes
MAX Aged EDB Dual FFS Total	N/A	37,635	N/A	36,425	N/A	36,492	N/A	-3.22	0.18	10% (+/-)	Yes
11: Aged, Cash	N/A	16,060	N/A	16,458	N/A	16,473	N/A	2.48	0.09	10% (+/-)	Yes
21: Aged, MN	N/A	19,202	N/A	19,064	N/A	19,105	N/A	-0.72	0.22	10% (+/-)	Yes
31: Aged, Poverty	N/A	1,219	N/A	160	N/A	153	N/A	-86.90	-4.38	10% (+/-)	Yes
41: Other Aged	N/A	17	N/A	19	N/A	17	N/A	11.76	-10.50	10% (+/-)	No
51: 1115 Aged	N/A	1,137	N/A	724	N/A	744	N/A	-36.30	2.76	10% (+/-)	Yes
MAX Disabled EDB Dual FFS Total	N/A	31,513	N/A	31,781	N/A	32,665	N/A	0.85	2.78	10% (+/-)	Yes
12: Disabled, Cash	N/A	22,521	N/A	23,407	N/A	23,851	N/A	3.93	1.90	10% (+/-)	Yes
22: Disabled, MN	N/A	4,013	N/A	3,996	N/A	3,985	N/A	-0.42	-0.28	10% (+/-)	Yes
32: Disabled, Poverty	N/A	731	N/A	158	N/A	228	N/A	-78.40	44.30	10% (+/-)	No
42: Other Disabled	N/A	3,464	N/A	3,467	N/A	3,796	N/A	0.09	9.49	10% (+/-)	Yes
52: 1115 Disabled	N/A	784	N/A	753	N/A	805	N/A	-3.95	6.91	10% (+/-)	Yes
Total FFS Medicaid Amt Paid	N/A	\$1,424,305,774	N/A	\$1,525,662,177	N/A	\$1,637,619,491	N/A	7.12	7.34	15% (+/-)	Yes
Average FFS Medicaid Amt Paid per FFS Dual	N/A	\$20,419	N/A	\$22,190	N/A	\$23,507	N/A	8.68	5.93	15% (+/-)	Yes



**2003-2005 MAX PSF VALIDATION TABLE**  
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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
Average FFS Medicaid Amt Paid per FFS Dual Recipient (User of any service)	N/A	\$22,460	N/A	\$23,648	N/A	\$25,015	N/A	5.29	5.78	15% (+/-)	Yes
<b>AVG FFS MEDICAID AMT PD/FFS DUAL BY MAX ELIGIBILITY GROUP</b>											
All Aged	N/A	\$22,170	N/A	\$23,856	N/A	\$24,872	N/A	7.60	4.26	15% (+/-)	Yes
11: Aged, Cash	N/A	\$8,713	N/A	\$9,380	N/A	\$9,961	N/A	7.67	6.19	15% (+/-)	Yes
21: Aged, MN	N/A	\$35,945	N/A	\$37,247	N/A	\$38,701	N/A	3.62	3.91	15% (+/-)	Yes
31: Aged, Poverty	N/A	\$454	N/A	\$2,637	N/A	\$3,129	N/A	481.10	18.64	15% (+/-)	No
41: Other Aged	N/A	\$15,666	N/A	\$16,595	N/A	\$6,048	N/A	5.93	-63.60	15% (+/-)	No
51: 1115 Aged	N/A	\$2,998	N/A	\$5,198	N/A	\$4,789	N/A	73.38	-7.88	15% (+/-)	Yes
All Disabled	N/A	\$18,609	N/A	\$20,562	N/A	\$22,266	N/A	10.49	8.29	15% (+/-)	Yes
12: Disabled, Cash	N/A	\$13,231	N/A	\$14,421	N/A	\$15,869	N/A	8.99	10.05	15% (+/-)	Yes
22: Disabled, MN	N/A	\$40,857	N/A	\$43,541	N/A	\$46,649	N/A	6.57	7.14	15% (+/-)	Yes
32: Disabled, Poverty	N/A	\$744	N/A	\$5,243	N/A	\$5,852	N/A	604.80	11.61	15% (+/-)	Yes
42: Other Disabled	N/A	\$34,347	N/A	\$38,840	N/A	\$40,826	N/A	13.08	5.12	15% (+/-)	Yes
52: 1115 Disabled	N/A	\$6,352	N/A	\$8,569	N/A	\$8,216	N/A	34.91	-4.12	15% (+/-)	Yes
<b>FFS EXPENDITURES AND USERS BY MAX TOS</b>											
IP: Total Medicaid Paid (TOS 01)	N/A	\$64,209,279	N/A	\$65,849,358	N/A	\$69,408,801	N/A	2.55	5.41	15% (+/-)	Yes
IP: Number of Users	N/A	15,540	N/A	16,293	N/A	16,255	N/A	4.85	-0.23	15% (+/-)	Yes
IP: Average Medicaid Pd per User	N/A	\$4,132	N/A	\$4,042	N/A	\$4,270	N/A	-2.19	5.65	15% (+/-)	Yes
IP: Average Medicaid Covered Days Per User	N/A	10	N/A	10	N/A	10	N/A	-3.73	2.17	15% (+/-)	Yes
MH Aged: Total Medicaid Paid (TOS 02)	N/A	\$5,222,025	N/A	\$4,682,616	N/A	\$4,366,500	N/A	-10.30	-6.75	15% (+/-)	Yes
MH Aged: Number of Users	N/A	51	N/A	48	N/A	41	N/A	-5.88	-14.60	15% (+/-)	Yes
MH Aged: Avg Medicaid Pd per User	N/A	\$102,393	N/A	\$97,555	N/A	\$106,500	N/A	-4.73	9.17	15% (+/-)	Yes
IP Psych < 21: Total Medicaid Paid (TOS 04)	N/A	\$56,917	N/A	\$144,747	N/A	\$6,895	N/A	154.30	-95.20	15% (+/-)	No
IP Psych < 21: Number of Users	N/A	1	N/A	2	N/A	1	N/A	100.00	-50.00	15% (+/-)	No
IP Psych<21 :Avg Medicaid Pd per User	N/A	\$56,917	N/A	\$72,374	N/A	\$6,895	N/A	27.16	-90.50	15% (+/-)	No
ICF/MR: Total Medicaid Pd (TOS 05)	N/A	\$43,670,193	N/A	\$45,648,568	N/A	\$46,841,129	N/A	4.53	2.61	15% (+/-)	Yes
ICF/MR: Number of Users	N/A	284	N/A	277	N/A	277	N/A	-2.46	0.00	15% (+/-)	Yes
ICF/MR: Avg Medicaid Pd per User	N/A	\$153,768	N/A	\$164,796	N/A	\$169,102	N/A	7.17	2.61	15% (+/-)	Yes
NF: Total Medicaid Paid (TOS 07)	N/A	\$702,294,869	N/A	\$729,753,374	N/A	\$764,096,470	N/A	3.91	4.71	15% (+/-)	Yes
NF Number of Users	N/A	20,192	N/A	20,519	N/A	20,388	N/A	1.62	-0.64	15% (+/-)	Yes
NF:Avg Medicaid Pd per User	N/A	\$34,781	N/A	\$35,565	N/A	\$37,478	N/A	2.25	5.38	15% (+/-)	Yes
Physician: Total Medicaid Paid (TOS 08)	N/A	\$19,452,864	N/A	\$21,396,756	N/A	\$23,585,884	N/A	9.99	10.23	15% (+/-)	Yes
Physician: Number of Users	N/A	50,165	N/A	51,208	N/A	53,084	N/A	2.08	3.66	15% (+/-)	Yes
Physician: Avg Medicaid Pd per User	N/A	\$388	N/A	\$418	N/A	\$444	N/A	7.75	6.34	15% (+/-)	Yes
Dental: Total Medicaid Paid (TOS 09)	N/A	\$11,099	N/A	\$5,405	N/A	\$9,032	N/A	-51.30	67.10	15% (+/-)	No
Dental: Number of Users	N/A	98	N/A	94	N/A	82	N/A	-4.08	-12.80	15% (+/-)	Yes
Dental: Avg Medicaid Pd per User	N/A	\$113	N/A	\$58	N/A	\$110	N/A	-49.20	91.56	15% (+/-)	No
Other Practitioner: Total Medicaid Pd (TOS 10)	N/A	\$758,289	N/A	\$758,573	N/A	\$810,976	N/A	0.04	6.91	15% (+/-)	Yes
Other Practitioner: Number of Users	N/A	15,704	N/A	15,704	N/A	16,349	N/A	0.00	4.11	15% (+/-)	Yes
Other Practitioner: Avg Medicaid Pd per User	N/A	\$48	N/A	\$48	N/A	\$50	N/A	0.04	2.69	15% (+/-)	Yes
OPD: Total Medicaid Paid (TOS 11)	N/A	\$11,168,086	N/A	\$11,880,856	N/A	\$12,410,503	N/A	6.38	4.46	15% (+/-)	Yes
OPD Number of Users	N/A	24,828	N/A	25,083	N/A	24,885	N/A	1.03	-0.79	15% (+/-)	Yes
OPD: Avg Medicaid Pd per User	N/A	\$450	N/A	\$474	N/A	\$499	N/A	5.30	5.29	15% (+/-)	Yes
Clinic: Total Medicaid Paid (TOS 12)	N/A	\$664,431	N/A	\$469,303	N/A	\$507,560	N/A	-29.40	8.15	15% (+/-)	Yes
Clinic: Number of Users	N/A	4,762	N/A	4,657	N/A	4,672	N/A	-2.20	0.32	15% (+/-)	Yes
Clinic: Avg Medicaid Pd per User	N/A	\$140	N/A	\$101	N/A	\$109	N/A	-27.80	7.81	15% (+/-)	Yes
HH: Total Medicaid Paid (TOS 13)	N/A	\$63,769,462	N/A	\$88,274,545	N/A	\$84,061,450	N/A	38.43	-4.77	15% (+/-)	Yes
HH: Number of Users	N/A	5,449	N/A	7,179	N/A	6,645	N/A	31.75	-7.44	15% (+/-)	Yes
HH: Avg Medicaid Pd per User	N/A	\$11,703	N/A	\$12,296	N/A	\$12,650	N/A	5.07	2.88	15% (+/-)	Yes
Lab/Xray: Total Medicaid Paid (TOS 15)	N/A	\$42,504,580	N/A	\$8,433,226	N/A	\$8,717,197	N/A	-80.20	3.37	15% (+/-)	Yes
Lab/Xray: Number of Users	N/A	40,335	N/A	40,935	N/A	40,431	N/A	1.49	-1.23	15% (+/-)	Yes
Lab/Xray:Avg Medicaid Pd per User	N/A	\$1,054	N/A	\$206	N/A	\$216	N/A	-80.50	4.66	15% (+/-)	Yes
Drugs: Total Medicaid Paid (TOS 16)	N/A	\$200,739,072	N/A	\$217,417,864	N/A	\$229,079,349	N/A	8.31	5.36	15% (+/-)	Yes
Drugs: Number of Users	N/A	59,592	N/A	60,649	N/A	61,333	N/A	1.77	1.13	15% (+/-)	Yes
Drugs: Avg Medicaid Pd per User	N/A	\$3,369	N/A	\$3,585	N/A	\$3,735	N/A	6.42	4.19	15% (+/-)	Yes
Other Services: Total Medicaid Paid (TOS 19)	N/A	\$13,715,182	N/A	\$16,252,390	N/A	\$19,055,274	N/A	18.50	17.25	15% (+/-)	No
Other Services: Number of Users	N/A	6,997	N/A	8,505	N/A	10,324	N/A	21.55	21.39	15% (+/-)	No



2003-2005 MAX PSF VALIDATION TABLE  
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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
Other Services: Avg Medicaid Pd per User	N/A	\$1,960	N/A	\$1,911	N/A	\$1,846	N/A	-2.51	-3.41	15% (+/-)	Yes
Transportation: Total Medicaid Paid (TOS 26)	N/A	\$1,631,176	N/A	\$1,862,345	N/A	\$1,983,176	N/A	14.17	6.49	15% (+/-)	Yes
Transportation: Number of Users	N/A	10,396	N/A	10,832	N/A	10,848	N/A	4.19	0.15	15% (+/-)	Yes
Transportation: Avg Medicaid Pd per User	N/A	\$157	N/A	\$172	N/A	\$183	N/A	9.58	6.33	15% (+/-)	Yes
PCS: Total Medicaid Paid (TOS 30)	N/A	\$20,625,716	N/A	\$21,171,262	N/A	\$21,147,477	N/A	2.65	-0.11	15% (+/-)	Yes
PCS: Number of Users	N/A	3,392	N/A	3,301	N/A	3,327	N/A	-2.68	0.79	15% (+/-)	Yes
PCS: Avg Medicaid Pd per User	N/A	\$6,081	N/A	\$6,414	N/A	\$6,356	N/A	5.48	-0.89	15% (+/-)	Yes
Target Case Management: Total Medicaid Pd (TOS 31)	N/A	\$290,595	N/A	\$271,540	N/A	\$325,595	N/A	-6.56	19.91	15% (+/-)	No
Target Case Management: Number of Users	N/A	1,219	N/A	1,179	N/A	1,162	N/A	-3.28	-1.44	15% (+/-)	Yes
Target Case Management: Avg Medicaid Pd per User	N/A	\$238	N/A	\$230	N/A	\$280	N/A	-3.39	21.66	15% (+/-)	No
Rehab Services: Total Medicaid Pd (TOS 33)	N/A	\$1,105	N/A	\$741,784	N/A	\$982,745	N/A	67,030.00	32.48	15% (+/-)	No
Rehab Services: Number of Users	N/A	29	N/A	397	N/A	481	N/A	1,269.00	21.16	15% (+/-)	No
Rehab Services: Avg Medicaid Pd per User	N/A	\$38	N/A	\$1,868	N/A	\$2,043	N/A	4,804.00	9.35	15% (+/-)	Yes
PT/OT/Speech/Hear: Total Medicaid Paid (TOS 34)	N/A	\$1,350,664	N/A	\$1,984,534	N/A	\$2,392,983	N/A	46.93	20.58	15% (+/-)	No
PT/OT/Speech/Hear: Number of Users	N/A	5,367	N/A	6,039	N/A	6,835	N/A	12.52	13.18	15% (+/-)	Yes
PT/OT/Speech/Hear: Avg Medicaid Pd per User	N/A	\$252	N/A	\$329	N/A	\$350	N/A	30.58	6.54	15% (+/-)	Yes
Hospice: Total Medicaid Paid (TOS 35)	N/A	\$8,952,655	N/A	\$10,114,048	N/A	\$11,218,048	N/A	12.97	10.92	15% (+/-)	Yes
Hospice: Number of Users	N/A	945	N/A	1,078	N/A	1,128	N/A	14.07	4.64	15% (+/-)	Yes
Hospice: Avg Medicaid Pd per User	N/A	\$9,474	N/A	\$9,382	N/A	\$9,945	N/A	-0.97	6.00	15% (+/-)	Yes
DME: Total Medicaid Paid (TOS 51)	N/A	\$11,520,798	N/A	\$15,072,940	N/A	\$17,979,500	N/A	30.83	19.28	15% (+/-)	No
DME: Number of Users	N/A	18,574	N/A	19,044	N/A	19,940	N/A	2.53	4.71	15% (+/-)	Yes
DME: Avg Medicaid Pd per User	N/A	\$620	N/A	\$791	N/A	\$902	N/A	27.60	13.92	15% (+/-)	Yes
Residential Care: Total Medicaid Paid (TOS 52)	N/A	\$130,079,641	N/A	\$151,282,418	N/A	\$195,260,979	N/A	16.30	29.07	15% (+/-)	No
Residential Care: Number of Users	N/A	3,916	N/A	5,288	N/A	5,922	N/A	35.04	11.99	15% (+/-)	Yes
Residential Care: Avg Medicaid Pd per User	N/A	\$33,217	N/A	\$28,609	N/A	\$32,972	N/A	-13.90	15.25	15% (+/-)	No
Psych. Services: Total Medicaid Paid (TOS 53)	N/A	\$37,955,712	N/A	\$35,713,535	N/A	\$39,726,002	N/A	-5.91	11.24	15% (+/-)	Yes
Psych. Services: Number of Users	N/A	16,540	N/A	17,785	N/A	18,681	N/A	7.53	5.04	15% (+/-)	Yes
Psych. Services: Avg Medicaid Pd per User	N/A	\$2,295	N/A	\$2,008	N/A	\$2,127	N/A	-12.50	5.90	15% (+/-)	Yes
Adult Day Care: Total Medicaid Paid (TOS 54)	N/A	\$43,024,534	N/A	\$76,065,866	N/A	\$83,209,208	N/A	76.80	9.39	15% (+/-)	Yes
Adult Day Care: Number of Users	N/A	4,035	N/A	6,689	N/A	7,099	N/A	65.77	6.13	15% (+/-)	Yes
Adult Day Care: Avg Medicaid Pd per User	N/A	\$10,663	N/A	\$11,372	N/A	\$11,721	N/A	6.65	3.07	15% (+/-)	Yes
<b>AVG FFS MEDICAID AMT PD/FFS DUAL BY SELECTED TYPE OF SERVICE</b>											
Inpatient Hospital (TOS=01)	N/A	\$920	N/A	\$958	N/A	\$996	N/A	4.05	4.03	15% (+/-)	Yes
Aged	N/A	\$834	N/A	\$883	N/A	\$923	N/A	5.89	4.57	15% (+/-)	Yes
Disabled	N/A	\$999	N/A	\$1,016	N/A	\$1,069	N/A	1.70	5.24	15% (+/-)	Yes
ILTC (TOS=02,04,05,07)	N/A	\$10,770	N/A	\$11,348	N/A	\$11,703	N/A	5.37	3.13	15% (+/-)	Yes
Aged	N/A	\$16,535	N/A	\$17,584	N/A	\$18,236	N/A	6.34	3.71	15% (+/-)	Yes
Disabled	N/A	\$4,087	N/A	\$4,390	N/A	\$4,582	N/A	7.42	4.37	15% (+/-)	Yes
Drugs (TOS=16)	N/A	\$2,878	N/A	\$3,162	N/A	\$3,288	N/A	9.89	3.98	15% (+/-)	Yes
Aged	N/A	\$2,514	N/A	\$2,760	N/A	\$2,879	N/A	9.81	4.31	15% (+/-)	Yes
Disabled	N/A	\$3,338	N/A	\$3,654	N/A	\$3,777	N/A	9.45	3.37	15% (+/-)	Yes
All Other Services	N/A	\$5,851	N/A	\$6,722	N/A	\$7,519	N/A	14.89	11.86	15% (+/-)	Yes
Aged	N/A	\$2,287	N/A	\$2,629	N/A	\$2,833	N/A	14.91	7.78	15% (+/-)	Yes
Disabled	N/A	\$10,186	N/A	\$11,503	N/A	\$12,839	N/A	12.93	11.61	15% (+/-)	Yes
<b>% OF FFS DUALS WITH CLAIMS BY SELECTED TYPE OF SERVICE</b>											
% FFS Duals with IP Claims (TOS=01)	N/A	22.28	N/A	23.70	N/A	23.33	N/A	6.37	-1.54	15% (+/-)	Yes
Aged	N/A	20.83	N/A	22.04	N/A	21.63	N/A	5.79	-1.83	15% (+/-)	Yes
Disabled	N/A	23.90	N/A	25.58	N/A	25.20	N/A	7.02	-1.47	15% (+/-)	Yes
% FFS Duals with ILTC Claims (TOS=02,04,05,07)	N/A	29.42	N/A	30.31	N/A	29.72	N/A	3.01	-1.96	15% (+/-)	Yes
Aged	N/A	47.13	N/A	48.83	N/A	48.26	N/A	3.61	-1.17	15% (+/-)	Yes
Disabled	N/A	8.80	N/A	9.57	N/A	9.42	N/A	8.70	-1.52	15% (+/-)	Yes
% FFS Duals with Drug Claims (TOS=16)	N/A	85.43	N/A	88.21	N/A	88.04	N/A	3.26	-0.20	15% (+/-)	Yes
Aged	N/A	86.88	N/A	90.28	N/A	90.03	N/A	3.92	-0.28	15% (+/-)	Yes
Disabled	N/A	84.10	N/A	86.23	N/A	86.21	N/A	2.52	-0.02	15% (+/-)	Yes
% FFS Duals with All Other Claims	N/A	80.76	N/A	83.86	N/A	85.09	N/A	3.84	1.47	15% (+/-)	Yes
Aged	N/A	75.58	N/A	79.00	N/A	80.88	N/A	4.52	2.38	15% (+/-)	Yes
Disabled	N/A	87.05	N/A	89.65	N/A	90.04	N/A	2.99	0.44	15% (+/-)	Yes

**2003-2005 MAX PSF VALIDATION TABLE**  
**STATE: MD**

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
Avg # IP Days per FFS Dual User (TOS 01)	N/A	10	N/A	10	N/A	10	N/A	-3.73	2.17	15% (+/-)	Yes
Aged	N/A	10	N/A	10	N/A	10	N/A	-4.80	1.73	15% (+/-)	Yes
Disabled	N/A	11	N/A	10	N/A	11	N/A	-2.96	2.93	15% (+/-)	Yes
Avg # ILTC Days per FFS Dual User (TOS 02, 04, 05, 07)	N/A	256	N/A	253	N/A	251	N/A	-1.29	-0.67	15% (+/-)	Yes
Aged	N/A	257	N/A	255	N/A	252	N/A	-0.98	-0.87	15% (+/-)	Yes
Disabled	N/A	250	N/A	242	N/A	244	N/A	-3.03	0.62	15% (+/-)	Yes
<b>FFS EXPENDITURES AND USERS BY MAX PROGRAM TYPE</b>											
FP: Total Medicaid Paid (Program Type 2)	N/A	\$154,691	N/A	\$22,241	N/A	\$28,449	N/A	-85.60	27.91	15% (+/-)	No
FP: Number of Users	N/A	631	N/A	158	N/A	113	N/A	-75.00	-28.50	15% (+/-)	No
FP: Average Medicaid Pd per User	N/A	\$245	N/A	\$141	N/A	\$252	N/A	-42.60	78.85	15% (+/-)	No
RHC: Total Medicaid Paid (Program 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 Pd 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 (Program Type 4)	N/A	\$272,509	N/A	\$265,656	N/A	\$266,743	N/A	-2.51	0.41	15% (+/-)	Yes
FQHC: Number of Users	N/A	1,975	N/A	2,066	N/A	2,216	N/A	4.61	7.26	15% (+/-)	Yes
FQHC: Avg Medicaid Pd per User	N/A	\$138	N/A	\$129	N/A	\$120	N/A	-6.81	-6.39	15% (+/-)	Yes
IHS: Total Medicaid Pd (Program 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 Pd 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 (Program Types 6 and 7)	N/A	\$226,354,688	N/A	\$263,562,725	N/A	\$307,662,868	N/A	16.44	16.73	15% (+/-)	No
Section 1915(c) Waiver: Number of Users	N/A	7,241	N/A	7,565	N/A	8,449	N/A	4.48	11.69	15% (+/-)	Yes
Section 1915(c) Waiver: Avg Medicaid Pd per User	N/A	\$31,260	N/A	\$34,840	N/A	\$36,414	N/A	11.45	4.52	15% (+/-)	Yes
<b>FFS COMMUNITY-BASED LONG-TERM CARE EXPENDITURES AND USERS</b>											
Total FFS CLTC Expenditures (all codes - overestimate)	N/A	N/A	N/A	N/A	N/A	\$416,065,859	N/A	N/A	N/A	15% (+/-)	No
Number of Dual CLTC Users (all codes - overestimate)	N/A	N/A	N/A	N/A	N/A	32,586	N/A	N/A	N/A	15% (+/-)	No
Average FFS CLTC Expenditures per FFS Dual User (all codes - overestimate)	N/A	N/A	N/A	N/A	N/A	\$12,768	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$5,235	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$18,691	N/A	N/A	N/A	15% (+/-)	No
% FFS Dual Enrollees with CLTC Claims (all codes - overestimate)	N/A	N/A	N/A	N/A	N/A	46.78	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	39.24	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	55.86	N/A	N/A	N/A	15% (+/-)	No
Total FFS CLTC Expenditures (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	\$385,409,312	N/A	N/A	N/A	15% (+/-)	No
Number of Dual CLTC Users (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	14,448	N/A	N/A	N/A	15% (+/-)	No
Average FFS CLTC Expenditures per Dual User (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	\$26,676	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$15,055	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$30,874	N/A	N/A	N/A	15% (+/-)	No
% FFS Dual Enrollees with CLTC Claims (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	20.74	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	10.40	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	32.54	N/A	N/A	N/A	15% (+/-)	No
Total FFS CLTC Expenditures (Section 1915(c) claims only - excludes CLTC Codes 11-20)	N/A	N/A	N/A	N/A	N/A	\$307,662,868	N/A	N/A	N/A	15% (+/-)	No
Number of Dual CLTC Users (Section 1915(c) claims only - excludes CLTC Codes 11-20)	N/A	N/A	N/A	N/A	N/A	8,449	N/A	N/A	N/A	15% (+/-)	No
Average CLTC Expenditures per Dual User (Section 1915(c) claims only - excludes CLTC Codes 11-20)	N/A	N/A	N/A	N/A	N/A	\$36,414	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$23,791	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$38,009	N/A	N/A	N/A	15% (+/-)	No
% FFS Dual Enrollees with CLTC Claims (Section 1915(c) claims only - excludes CLTC Codes 11-20)	N/A	N/A	N/A	N/A	N/A	12.13	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	2.80	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	22.96	N/A	N/A	N/A	15% (+/-)	No
<b>FFS INFORMATION FOR TOTAL MEDICAID ENROLLEES (excludes people ever enrolled in HMO/HIOs, with missing eligibility information, S-SCHIP only, FP Only, Aliens with only restricted benefits, duals with restricted benefits only, and prescription drug only enrollees) --- NOTE: S-SCHIP 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.</b>											
Total FFS Enrollees	N/A	120,020	N/A	109,503	N/A	114,123	N/A	-8.76	4.22	15% (+/-)	Yes
# FFS Recipients	N/A	89,808	N/A	86,275	N/A	89,691	N/A	-3.93	3.96	15% (+/-)	Yes
% FFS Enrollees who are Recipients	65-90%	74.83	Yes	78.79	Yes	78.59	Yes	5.29	-0.25	15% (+/-)	Yes
% Aged who are Recipients	90-100%	89.83	No	93.06	Yes	93.34	Yes	3.60	0.30	15% (+/-)	Yes
% Disabled who are Recipients	85-100%	84.22	No	85.56	Yes	87.10	Yes	1.59	1.80	15% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: MD

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
% Child who are Recipients	80-100%	29.63	No	33.14	No	34.73	No	11.87	4.77	15% (+/-)	Yes
% Adults who are Recipients	80-100%	57.38	No	50.04	No	47.25	No	-12.80	-5.59	15% (+/-)	Yes
Total FFS PYE	N/A	84,877	N/A	80,623	N/A	83,266	N/A	-5.01	3.28	15% (+/-)	Yes
MAX Aged Total	N/A	42,725	N/A	41,028	N/A	41,113	N/A	-3.97	0.21	10% (+/-)	Yes
11: Aged, Cash	N/A	18,637	N/A	18,970	N/A	18,879	N/A	1.79	-0.48	10% (+/-)	Yes
21: Aged, MN	N/A	21,295	N/A	21,071	N/A	21,236	N/A	-1.05	0.78	10% (+/-)	Yes
31: Aged, Poverty	N/A	1,579	N/A	231	N/A	199	N/A	-85.40	-13.90	10% (+/-)	No
41: Other Aged	N/A	17	N/A	19	N/A	17	N/A	11.76	-10.50	10% (+/-)	No
51: 1115 Aged	N/A	1,197	N/A	737	N/A	782	N/A	-38.40	6.11	10% (+/-)	Yes
MAX Disabled Total	N/A	43,762	N/A	44,859	N/A	46,453	N/A	2.51	3.55	10% (+/-)	Yes
12: Disabled, Cash	N/A	27,982	N/A	29,453	N/A	30,417	N/A	5.26	3.27	10% (+/-)	Yes
22: Disabled, MN	N/A	10,458	N/A	10,373	N/A	10,493	N/A	-0.81	1.16	10% (+/-)	Yes
32: Disabled, Poverty	N/A	768	N/A	525	N/A	680	N/A	-31.60	29.52	10% (+/-)	No
42: Other Disabled	N/A	3,768	N/A	3,746	N/A	4,047	N/A	-0.58	8.04	10% (+/-)	Yes
52: 1115 Disabled	N/A	786	N/A	762	N/A	816	N/A	-3.05	7.09	10% (+/-)	Yes
MAX Child Total	N/A	16,823	N/A	12,470	N/A	13,526	N/A	-25.90	8.47	10% (+/-)	Yes
14: AFDC Child, Cash	N/A	1,982	N/A	1,983	N/A	1,996	N/A	0.05	0.66	10% (+/-)	Yes
16: AFDC-U Child, Cash	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
24: AFDC Child, MN	N/A	2,045	N/A	2,127	N/A	2,193	N/A	4.01	3.10	10% (+/-)	Yes
34: Child Poverty	N/A	7,326	N/A	7,265	N/A	7,431	N/A	-0.83	2.29	10% (+/-)	Yes
44: Other Child	N/A	4,581	N/A	200	N/A	195	N/A	-95.60	-2.50	10% (+/-)	Yes
48: Foster Care Child	N/A	743	N/A	697	N/A	606	N/A	-6.19	-13.10	10% (+/-)	No
54: 1115 Child	N/A	146	N/A	198	N/A	1,105	N/A	35.62	458.10	10% (+/-)	No
MAX Adult Total	N/A	16,710	N/A	11,146	N/A	13,031	N/A	-33.30	16.91	10% (+/-)	No
15: AFDC Adult, Cash	N/A	2,738	N/A	2,693	N/A	2,748	N/A	-1.64	2.04	10% (+/-)	Yes
17: AFDC-U Adult, Cash	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
25: AFDC Adult, MN	N/A	3,948	N/A	4,276	N/A	4,438	N/A	8.31	3.79	10% (+/-)	Yes
35: Adult, Poverty	N/A	2,198	N/A	2,241	N/A	2,608	N/A	1.96	16.38	10% (+/-)	No
45: Other Adult	N/A	6,457	N/A	230	N/A	176	N/A	-96.40	-23.50	10% (+/-)	No
55: 1115 Adult	N/A	1,369	N/A	1,706	N/A	3,061	N/A	24.62	79.43	10% (+/-)	No
Total FFS Medicaid Amt Paid	N/A	\$1,932,683,355	N/A	\$1,997,183,010	N/A	\$2,189,232,124	N/A	3.34	9.62	15% (+/-)	Yes
Average FFS Medicaid Amt Paid per FFS Enrollee	N/A	\$16,103	N/A	\$18,239	N/A	\$19,183	N/A	13.26	5.18	15% (+/-)	Yes
Average FFS Medicaid Amt Paid per FFS Recipient (User of any svc)	N/A	\$21,520	N/A	\$23,149	N/A	\$24,409	N/A	7.57	5.44	15% (+/-)	Yes
AVG FFS MEDICAID AMT PD/FFS ENROLLEE BY MAX ELIGIBILITY GROUP											
All Aged	N/A	\$21,172	N/A	\$22,698	N/A	\$23,812	N/A	7.21	4.91	15% (+/-)	Yes
11: Aged, Cash	N/A	\$9,573	N/A	\$9,968	N/A	\$10,701	N/A	4.12	7.36	15% (+/-)	Yes
21: Aged, MN	N/A	\$33,762	N/A	\$35,000	N/A	\$36,384	N/A	3.67	3.95	15% (+/-)	Yes
31: Aged, Poverty	N/A	\$2,014	N/A	\$2,442	N/A	\$2,413	N/A	21.25	-1.21	15% (+/-)	Yes
41: Other Aged	N/A	\$15,666	N/A	\$16,595	N/A	\$6,048	N/A	5.93	-63.60	15% (+/-)	No
51: 1115 Aged	N/A	\$3,155	N/A	\$5,159	N/A	\$4,739	N/A	63.52	-8.16	15% (+/-)	Yes
All Disabled	N/A	\$20,336	N/A	\$21,558	N/A	\$23,701	N/A	6.01	9.94	15% (+/-)	Yes
12: Disabled, Cash	N/A	\$16,143	N/A	\$16,945	N/A	\$18,746	N/A	4.97	10.63	15% (+/-)	Yes
22: Disabled, MN	N/A	\$28,349	N/A	\$29,196	N/A	\$32,840	N/A	2.99	12.48	15% (+/-)	Yes
32: Disabled, Poverty	N/A	\$754	N/A	\$9,316	N/A	\$8,419	N/A	1,135.00	-9.64	15% (+/-)	Yes
42: Other Disabled	N/A	\$36,145	N/A	\$41,054	N/A	\$42,931	N/A	13.58	4.57	15% (+/-)	Yes
52: 1115 Disabled	N/A	\$6,345	N/A	\$8,506	N/A	\$8,264	N/A	34.07	-2.85	15% (+/-)	Yes
All Child	N/A	\$4,519	N/A	\$5,704	N/A	\$5,643	N/A	26.22	-1.07	15% (+/-)	Yes
14: AFDC Child, Cash	N/A	\$1,099	N/A	\$1,391	N/A	\$1,989	N/A	26.54	42.94	15% (+/-)	No
16: AFDC-U Child, Cash	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
24: AFDC Child, MN	N/A	\$25,918	N/A	\$25,255	N/A	\$25,225	N/A	-2.56	-0.12	15% (+/-)	Yes
34: Child, Poverty	N/A	\$1,218	N/A	\$1,105	N/A	\$1,320	N/A	-9.24	19.39	15% (+/-)	No
44: Other Child	N/A	\$1,134	N/A	\$636	N/A	\$570	N/A	-43.90	-10.30	15% (+/-)	Yes
48: Foster Care Child	N/A	\$8,547	N/A	\$8,558	N/A	\$10,237	N/A	0.13	19.62	15% (+/-)	No
54: 1115 Child	N/A	\$2,577	N/A	\$2,662	N/A	\$829	N/A	3.30	-68.90	15% (+/-)	No
All Adult	N/A	\$3,718	N/A	\$2,485	N/A	\$2,527	N/A	-33.10	1.69	15% (+/-)	Yes
15: AFDC Adult, Cash	N/A	\$1,526	N/A	\$1,712	N/A	\$1,697	N/A	12.17	-0.88	15% (+/-)	Yes
17: AFDC-U Adult, Cash	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

**2003-2005 MAX PSF VALIDATION TABLE**  
STATE: MD

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
25: AFDC Adult, MN	N/A	\$3,267	N/A	\$3,391	N/A	\$3,640	N/A	3.78	7.35	15% (+/-)	Yes
35: Adult, Poverty	N/A	\$1,010	N/A	\$934	N/A	\$1,121	N/A	-7.51	20.03	15% (+/-)	No
45: Other Adult	N/A	\$5,624	N/A	\$1,121	N/A	\$3,950	N/A	-80.10	252.30	15% (+/-)	No
55: 1115 Adult	N/A	\$4,756	N/A	\$3,659	N/A	\$2,776	N/A	-23.10	-24.10	15% (+/-)	No
<b>FFS EXPENDITURES AND USERS BY MAX TOS</b>											
IP: Total Medicaid Paid (TOS 01)	N/A	\$267,043,667	N/A	\$218,923,657	N/A	\$267,030,751	N/A	-18.00	21.97	15% (+/-)	No
IP: Number of Users	N/A	27,639	N/A	23,969	N/A	25,366	N/A	-13.30	5.83	15% (+/-)	Yes
IP: Average Medicaid Pd per User	N/A	\$9,662	N/A	\$9,134	N/A	\$10,527	N/A	-5.47	15.26	15% (+/-)	No
IP: Average Medicaid Covered Days Per User	N/A	10	N/A	11	N/A	11	N/A	1.48	2.43	15% (+/-)	Yes
MH Aged: Total Medicaid Paid (TOS 02)	N/A	\$6,752,841	N/A	\$6,143,048	N/A	\$5,721,271	N/A	-9.03	-6.87	15% (+/-)	Yes
MH Aged: Number of Users	N/A	63	N/A	61	N/A	50	N/A	-3.17	-18.00	15% (+/-)	No
MH Aged: Avg Medicaid Pd per User	N/A	\$107,188	N/A	\$100,706	N/A	\$114,425	N/A	-6.05	13.62	15% (+/-)	Yes
IP Psych < 21: Total Medicaid Paid (TOS 04)	N/A	\$54,141,315	N/A	\$55,584,131	N/A	\$54,255,694	N/A	2.67	-2.39	15% (+/-)	Yes
IP Psych < 21: Number of Users	N/A	733	N/A	779	N/A	701	N/A	6.28	-10.00	15% (+/-)	Yes
IP Psych<21 :Avg Medicaid Pd per User	N/A	\$73,863	N/A	\$71,353	N/A	\$77,398	N/A	-3.40	8.47	15% (+/-)	Yes
ICF/MR: Total Medicaid Pd (TOS 05)	N/A	\$60,823,460	N/A	\$63,339,984	N/A	\$63,126,211	N/A	4.14	-0.34	15% (+/-)	Yes
ICF/MR: Number of Users	N/A	394	N/A	386	N/A	372	N/A	-2.03	-3.63	15% (+/-)	Yes
ICF/MR: Avg Medicaid Pd per User	N/A	\$154,374	N/A	\$164,093	N/A	\$169,694	N/A	6.30	3.41	15% (+/-)	Yes
NF: Total Medicaid Paid (TOS 07)	N/A	\$807,749,989	N/A	\$839,835,882	N/A	\$892,056,301	N/A	3.97	6.22	15% (+/-)	Yes
NF Number of Users	N/A	22,820	N/A	23,186	N/A	23,303	N/A	1.60	0.50	15% (+/-)	Yes
NF:Avg Medicaid Pd per User	N/A	\$35,397	N/A	\$36,222	N/A	\$38,281	N/A	2.33	5.69	15% (+/-)	Yes
Physician: Total Medicaid Paid (TOS 08)	N/A	\$36,950,824	N/A	\$38,030,799	N/A	\$44,385,042	N/A	2.92	16.71	15% (+/-)	No
Physician: Number of Users	N/A	69,193	N/A	67,055	N/A	70,652	N/A	-3.09	5.36	15% (+/-)	Yes
Physician: Avg Medicaid Pd per User	N/A	\$534	N/A	\$567	N/A	\$628	N/A	6.20	10.77	15% (+/-)	Yes
Dental: Total Medicaid Paid (TOS 09)	N/A	\$81,004	N/A	\$90,491	N/A	\$96,626	N/A	11.71	6.78	15% (+/-)	Yes
Dental: Number of Users	N/A	442	N/A	481	N/A	496	N/A	8.82	3.12	15% (+/-)	Yes
Dental: Avg Medicaid Pd per User	N/A	\$183	N/A	\$188	N/A	\$195	N/A	2.65	3.55	15% (+/-)	Yes
Other Practitioner: Total Medicaid Pd (TOS 10)	N/A	\$840,965	N/A	\$762,196	N/A	\$818,848	N/A	-9.37	7.43	15% (+/-)	Yes
Other Practitioner: Number of Users	N/A	16,754	N/A	15,801	N/A	16,529	N/A	-5.69	4.61	15% (+/-)	Yes
Other Practitioner: Avg Medicaid Pd per User	N/A	\$50	N/A	\$48	N/A	\$50	N/A	-3.90	2.70	15% (+/-)	Yes
OPD: Total Medicaid Paid (TOS 11)	N/A	\$28,686,681	N/A	\$26,860,340	N/A	\$31,288,859	N/A	-6.37	16.49	15% (+/-)	No
OPD Number of Users	N/A	37,022	N/A	34,685	N/A	35,559	N/A	-6.31	2.52	15% (+/-)	Yes
OPD: Avg Medicaid Pd per User	N/A	\$775	N/A	\$774	N/A	\$880	N/A	-0.06	13.62	15% (+/-)	Yes
Clinic: Total Medicaid Paid (TOS 12)	N/A	\$1,561,276	N/A	\$1,116,308	N/A	\$1,425,743	N/A	-28.50	27.72	15% (+/-)	No
Clinic: Number of Users	N/A	7,077	N/A	6,267	N/A	6,601	N/A	-11.40	5.33	15% (+/-)	Yes
Clinic: Avg Medicaid Pd per User	N/A	\$221	N/A	\$178	N/A	\$216	N/A	-19.30	21.26	15% (+/-)	No
HH: Total Medicaid Paid (TOS 13)	N/A	\$69,031,882	N/A	\$93,768,755	N/A	\$89,190,224	N/A	35.83	-4.88	15% (+/-)	Yes
HH: Number of Users	N/A	6,644	N/A	8,510	N/A	8,003	N/A	28.09	-5.96	15% (+/-)	Yes
HH: Avg Medicaid Pd per User	N/A	\$10,390	N/A	\$11,019	N/A	\$11,145	N/A	6.05	1.14	15% (+/-)	Yes
Lab/Xray: Total Medicaid Paid (TOS 15)	N/A	\$51,841,190	N/A	\$21,147,137	N/A	\$23,974,726	N/A	-59.20	13.37	15% (+/-)	Yes
Lab/Xray: Number of Users	N/A	54,480	N/A	54,543	N/A	55,114	N/A	0.12	1.05	15% (+/-)	Yes
Lab/Xray:Avg Medicaid Pd per User	N/A	\$952	N/A	\$388	N/A	\$435	N/A	-59.30	12.20	15% (+/-)	Yes
Drugs: Total Medicaid Paid (TOS 16)	N/A	\$231,447,536	N/A	\$251,509,405	N/A	\$266,690,434	N/A	8.67	6.04	15% (+/-)	Yes
Drugs: Number of Users	N/A	72,009	N/A	73,730	N/A	75,366	N/A	2.39	2.22	15% (+/-)	Yes
Drugs: Avg Medicaid Pd per User	N/A	\$3,214	N/A	\$3,411	N/A	\$3,539	N/A	6.13	3.73	15% (+/-)	Yes
Other Services: Total Medicaid Paid (TOS 19)	N/A	\$17,480,354	N/A	\$19,690,803	N/A	\$23,896,186	N/A	12.65	21.36	15% (+/-)	No
Other Services: Number of Users	N/A	8,001	N/A	9,359	N/A	11,389	N/A	16.97	21.69	15% (+/-)	No
Other Services: Avg Medicaid Pd per User	N/A	\$2,185	N/A	\$2,104	N/A	\$2,098	N/A	-3.70	-0.27	15% (+/-)	Yes
Transportation: Total Medicaid Paid (TOS 26)	N/A	\$1,804,386	N/A	\$2,052,769	N/A	\$2,191,955	N/A	13.77	6.78	15% (+/-)	Yes
Transportation: Number of Users	N/A	11,451	N/A	11,921	N/A	12,073	N/A	4.10	1.28	15% (+/-)	Yes
Transportation: Avg Medicaid Pd per User	N/A	\$158	N/A	\$172	N/A	\$182	N/A	9.28	5.44	15% (+/-)	Yes
PCS: Total Medicaid Paid (TOS 30)	N/A	\$22,306,456	N/A	\$22,896,217	N/A	\$23,022,379	N/A	2.64	0.55	15% (+/-)	Yes
PCS: Number of Users	N/A	3,665	N/A	3,593	N/A	3,624	N/A	-1.96	0.86	15% (+/-)	Yes
PCS: Avg Medicaid Pd per User	N/A	\$6,086	N/A	\$6,372	N/A	\$6,353	N/A	4.70	-0.31	15% (+/-)	Yes
Target Case Management: Total Medicaid Pd (TOS 31)	N/A	\$394,025	N/A	\$333,420	N/A	\$400,985	N/A	-15.40	20.26	15% (+/-)	No
Target Case Management: Number of Users	N/A	1,507	N/A	1,488	N/A	1,522	N/A	-1.26	2.29	15% (+/-)	Yes
Target Case Management: Avg Medicaid Pd per User	N/A	\$261	N/A	\$224	N/A	\$263	N/A	-14.30	17.58	15% (+/-)	No

2003-2005 MAX PSF VALIDATION TABLE  
STATE: MD

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
Rehab Services: Total Medicaid Pd (TOS 33)	N/A	\$4,795	N/A	\$881,495	N/A	\$1,198,515	N/A	18,284.00	35.96	15% (+/-)	No
Rehab Services: Number of Users	N/A	54	N/A	531	N/A	651	N/A	883.30	22.60	15% (+/-)	No
Rehab Services: Avg Medicaid Pd per User	N/A	\$89	N/A	\$1,660	N/A	\$1,841	N/A	1,770.00	10.90	15% (+/-)	Yes
PT/OT/Speech/Hear: Total Medicaid Paid (TOS 34)	N/A	\$2,708,295	N/A	\$3,404,606	N/A	\$3,895,312	N/A	25.71	14.41	15% (+/-)	Yes
PT/OT/Speech/Hear: Number of Users	N/A	6,171	N/A	6,939	N/A	7,851	N/A	12.45	13.14	15% (+/-)	Yes
PT/OT/Speech/Hear: Avg Medicaid Pd per User	N/A	\$439	N/A	\$491	N/A	\$496	N/A	11.80	1.12	15% (+/-)	Yes
Hospice: Total Medicaid Paid (TOS 35)	N/A	\$10,920,130	N/A	\$11,941,012	N/A	\$13,253,557	N/A	9.35	10.99	15% (+/-)	Yes
Hospice: Number of Users	N/A	1,167	N/A	1,320	N/A	1,369	N/A	13.11	3.71	15% (+/-)	Yes
Hospice: Avg Medicaid Pd per User	N/A	\$9,357	N/A	\$9,046	N/A	\$9,681	N/A	-3.33	7.02	15% (+/-)	Yes
DME: Total Medicaid Paid (TOS 51)	N/A	\$16,274,726	N/A	\$20,763,932	N/A	\$23,920,595	N/A	27.58	15.20	15% (+/-)	No
DME: Number of Users	N/A	21,283	N/A	21,935	N/A	23,152	N/A	3.06	5.55	15% (+/-)	Yes
DME: Avg Medicaid Pd per User	N/A	\$765	N/A	\$947	N/A	\$1,033	N/A	23.79	9.15	15% (+/-)	Yes
Residential Care: Total Medicaid Paid (TOS 52)	N/A	\$136,869,522	N/A	\$158,918,953	N/A	\$205,042,207	N/A	16.11	29.02	15% (+/-)	No
Residential Care: Number of Users	N/A	4,197	N/A	5,597	N/A	6,330	N/A	33.36	13.10	15% (+/-)	Yes
Residential Care: Avg Medicaid Pd per User	N/A	\$32,611	N/A	\$28,394	N/A	\$32,392	N/A	-12.90	14.08	15% (+/-)	Yes
Psych. Services: Total Medicaid Paid (TOS 53)	N/A	\$41,527,132	N/A	\$39,652,912	N/A	\$44,998,943	N/A	-4.51	13.48	15% (+/-)	Yes
Psych. Services: Number of Users	N/A	19,985	N/A	21,502	N/A	23,294	N/A	7.59	8.33	15% (+/-)	Yes
Psych. Services: Avg Medicaid Pd per User	N/A	\$2,078	N/A	\$1,844	N/A	\$1,932	N/A	-11.20	4.75	15% (+/-)	Yes
Adult Day Care: Total Medicaid Paid (TOS 54)	N/A	\$46,620,123	N/A	\$81,130,063	N/A	\$89,186,072	N/A	74.02	9.93	15% (+/-)	Yes
Adult Day Care: Number of Users	N/A	4,374	N/A	7,144	N/A	7,612	N/A	63.33	6.55	15% (+/-)	Yes
Adult Day Care: Avg Medicaid Pd per User	N/A	\$10,658	N/A	\$11,356	N/A	\$11,717	N/A	6.55	3.17	15% (+/-)	Yes
<b>AVG FFS MEDICAID AMT PD/FFS ENROLLEE BY SELECTED MAX TOS</b>											
Inpatient Hospital (TOS=01)	N/A	\$2,225	N/A	\$1,999	N/A	\$2,340	N/A	-10.10	17.04	15% (+/-)	No
Aged	N/A	\$1,136	N/A	\$1,094	N/A	\$1,195	N/A	-3.76	9.28	15% (+/-)	Yes
Disabled	N/A	\$3,540	N/A	\$3,208	N/A	\$3,849	N/A	-9.37	19.97	15% (+/-)	No
Child	N/A	\$1,188	N/A	\$1,062	N/A	\$1,415	N/A	-10.60	33.26	15% (+/-)	No
Adult	N/A	\$2,610	N/A	\$1,518	N/A	\$1,534	N/A	-41.90	1.05	15% (+/-)	Yes
ILTC (TOS=02,04,05,07)	N/A	\$7,744	N/A	\$8,812	N/A	\$8,895	N/A	13.78	0.95	15% (+/-)	Yes
Aged	N/A	\$15,278	N/A	\$16,323	N/A	\$17,010	N/A	6.84	4.21	15% (+/-)	Yes
Disabled	N/A	\$5,197	N/A	\$5,489	N/A	\$5,780	N/A	5.62	5.31	15% (+/-)	Yes
Child	N/A	\$2,812	N/A	\$3,908	N/A	\$3,472	N/A	38.98	-11.20	15% (+/-)	Yes
Adult	N/A	\$119	N/A	\$21	N/A	\$28	N/A	-81.90	31.05	15% (+/-)	No
Drugs (TOS=16)	N/A	\$1,928	N/A	\$2,297	N/A	\$2,337	N/A	19.10	1.74	15% (+/-)	Yes
Aged	N/A	\$2,400	N/A	\$2,631	N/A	\$2,742	N/A	9.64	4.23	15% (+/-)	Yes
Disabled	N/A	\$2,809	N/A	\$3,061	N/A	\$3,183	N/A	8.99	3.96	15% (+/-)	Yes
Child	N/A	\$208	N/A	\$343	N/A	\$298	N/A	65.03	-13.30	15% (+/-)	Yes
Adult	N/A	\$149	N/A	\$174	N/A	\$159	N/A	16.77	-8.75	15% (+/-)	Yes
All Other Services	N/A	\$4,205	N/A	\$5,131	N/A	\$5,611	N/A	22.01	9.36	15% (+/-)	Yes
Aged	N/A	\$2,358	N/A	\$2,651	N/A	\$2,864	N/A	12.39	8.07	15% (+/-)	Yes
Disabled	N/A	\$8,791	N/A	\$9,800	N/A	\$10,890	N/A	11.48	11.12	15% (+/-)	Yes
Child	N/A	\$311	N/A	\$391	N/A	\$459	N/A	25.52	17.40	15% (+/-)	No
Adult	N/A	\$839	N/A	\$772	N/A	\$806	N/A	-8.02	4.48	15% (+/-)	Yes
<b>% OF FFS ENROLLEES WITH CLAIMS BY SELECTED MAX TYPE OF SERVICE</b>											
% FFS Enrollees with IP Claims (TOS=01)	N/A	23.03	N/A	21.89	N/A	22.23	N/A	-4.95	1.54	15% (+/-)	Yes
Aged	N/A	20.52	N/A	21.37	N/A	21.18	N/A	4.14	-0.90	15% (+/-)	Yes
Disabled	N/A	25.09	N/A	26.31	N/A	27.13	N/A	4.86	3.12	15% (+/-)	Yes
Child	N/A	12.94	N/A	11.86	N/A	14.00	N/A	-8.35	18.06	15% (+/-)	No
Adult	N/A	34.18	N/A	17.20	N/A	16.57	N/A	-49.70	-3.67	15% (+/-)	Yes
% FFS Enrollees with ILTC Claims (TOS=02,04,05,07)	N/A	20.00	N/A	22.29	N/A	21.40	N/A	11.43	-3.99	15% (+/-)	Yes
Aged	N/A	43.37	N/A	45.16	N/A	44.79	N/A	4.12	-0.81	15% (+/-)	Yes
Disabled	N/A	10.89	N/A	11.54	N/A	11.55	N/A	5.95	0.11	15% (+/-)	Yes
Child	N/A	3.81	N/A	5.40	N/A	4.49	N/A	41.85	-17.00	15% (+/-)	No
Adult	N/A	0.40	N/A	0.24	N/A	0.25	N/A	-39.60	1.37	15% (+/-)	Yes
% FFS Enrollees with Drug Claims (TOS=16)	N/A	60.00	N/A	67.33	N/A	66.04	N/A	12.22	-1.92	15% (+/-)	Yes
Aged	N/A	85.12	N/A	88.37	N/A	88.35	N/A	3.82	-0.02	15% (+/-)	Yes
Disabled	N/A	72.39	N/A	74.18	N/A	74.44	N/A	2.48	0.35	15% (+/-)	Yes
Child	N/A	9.16	N/A	12.73	N/A	12.10	N/A	38.93	-4.96	15% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: MD

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
Adult	N/A	14.49	N/A	23.40	N/A	21.68	N/A	61.50	-7.35	15% (+/-)	Yes
% FFS Enrollees with All Other Claims	N/A	67.17	N/A	70.96	N/A	71.47	N/A	5.65	0.71	15% (+/-)	Yes
Aged	N/A	75.17	N/A	78.29	N/A	80.18	N/A	4.14	2.42	15% (+/-)	Yes
Disabled	N/A	80.52	N/A	82.04	N/A	83.53	N/A	1.89	1.82	15% (+/-)	Yes
Child	N/A	26.30	N/A	29.82	N/A	31.30	N/A	13.41	4.96	15% (+/-)	Yes
Adult	N/A	52.88	N/A	45.45	N/A	42.66	N/A	-14.00	-6.14	15% (+/-)	Yes
Avg # IP Days per FFS User	N/A	10	N/A	11	N/A	11	N/A	1.48	2.43	15% (+/-)	Yes
Aged	N/A	10	N/A	10	N/A	10	N/A	-6.75	2.34	15% (+/-)	Yes
Disabled	N/A	14	N/A	13	N/A	13	N/A	-10.30	3.87	15% (+/-)	Yes
Child	N/A	7	N/A	7	N/A	7	N/A	6.28	-3.57	15% (+/-)	Yes
Adult	N/A	5	N/A	4	N/A	4	N/A	-9.25	0.00	15% (+/-)	Yes
Avg # ILTC Days per FFS User	N/A	254	N/A	250	N/A	249	N/A	-1.42	-0.55	15% (+/-)	Yes
Aged	N/A	257	N/A	254	N/A	252	N/A	-1.07	-0.75	15% (+/-)	Yes
Disabled	N/A	247	N/A	242	N/A	241	N/A	-2.26	-0.24	15% (+/-)	Yes
Child	N/A	218	N/A	210	N/A	218	N/A	-3.65	3.94	15% (+/-)	Yes
Adult	N/A	159	N/A	61	N/A	60	N/A	-61.50	-2.01	15% (+/-)	Yes
<b>FFS EXPENDITURES AND USERS BY MAX PGM TYPE</b>											
FP: Total Medicaid Paid (Program Type 2)	N/A	\$843,104	N/A	\$526,491	N/A	\$462,097	N/A	-37.60	-12.20	15% (+/-)	Yes
FP: Number of Users	N/A	1,789	N/A	1,280	N/A	1,244	N/A	-28.50	-2.81	15% (+/-)	Yes
FP: Average Medicaid Pd per User	N/A	\$471	N/A	\$411	N/A	\$371	N/A	-12.70	-9.69	15% (+/-)	Yes
RHC: Total Medicaid Paid (Program 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 Pd 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
FOHC: Total Medicaid Paid (Program Type 4)	N/A	\$927,196	N/A	\$783,528	N/A	\$1,061,177	N/A	-15.50	35.44	15% (+/-)	No
FOHC: Number of Users	N/A	3,148	N/A	3,239	N/A	3,779	N/A	2.89	16.67	15% (+/-)	No
FOHC: Avg Medicaid Pd per User	N/A	\$295	N/A	\$242	N/A	\$281	N/A	-17.90	16.08	15% (+/-)	No
IHS: Total Medicaid Pd (Program 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 Pd 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 (Program Types 6 and 7)	N/A	\$238,554,189	N/A	\$276,642,848	N/A	\$322,368,570	N/A	15.97	16.53	15% (+/-)	No
Section 1915(c) Waiver: Number of Users	N/A	7,756	N/A	8,140	N/A	9,053	N/A	4.95	11.22	15% (+/-)	Yes
Section 1915(c) Waiver: Avg Medicaid Pd per User	N/A	\$30,757	N/A	\$33,986	N/A	\$35,609	N/A	10.50	4.78	15% (+/-)	Yes
<b>FFS COMMUNITY-BASED LONG-TERM CARE EXPENDITURES AND USERS</b>											
Total FFS CLTC Expenditures (all codes - overestimate)	N/A	N/A	N/A	N/A	N/A	\$463,547,486	N/A	N/A	N/A	15% (+/-)	No
Number of CLTC Users (all codes - overestimate)	N/A	N/A	N/A	N/A	N/A	36,692	N/A	N/A	N/A	15% (+/-)	No
Average FFS CLTC Expenditures per User (all codes - overestimate)	N/A	N/A	N/A	N/A	N/A	\$12,633	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$5,293	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$18,162	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$1,170	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$1,745	N/A	N/A	N/A	15% (+/-)	No
% FFS Enrollees with CLTC Claims (all codes - overestimate)	N/A	N/A	N/A	N/A	N/A	32.15	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	37.06	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	45.32	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	2.29	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	0.70	N/A	N/A	N/A	15% (+/-)	No
Total FFS CLTC Expenditures (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	\$425,446,135	N/A	N/A	N/A	15% (+/-)	No
Number of CLTC Users (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	16,488	N/A	N/A	N/A	15% (+/-)	No
Average FFS CLTC Expenditures per User (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	\$25,803	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$14,643	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$30,584	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$1,170	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$1,745	N/A	N/A	N/A	15% (+/-)	No
% FFS Enrollees with CLTC Claims (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	14.45	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	10.24	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	25.57	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	2.29	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	0.70	N/A	N/A	N/A	15% (+/-)	No

2003-2005 MAX PSF VALIDATION TABLE  
STATE: MD

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
Total FFS CLTC Expenditures (Section 1915(c) claims only - excludes CLTC Codes 11-20)	N/A	N/A	N/A	N/A	N/A	\$322,368,570	N/A	N/A	N/A	15% (+/-)	No
Number of CLTC Users (Section 1915(c) claims only - excludes CLTC Codes 11-20)	N/A	N/A	N/A	N/A	N/A	9,053	N/A	N/A	N/A	15% (+/-)	No
Average FFS CLTC Expenditures per User (Section 1915(c) claims only - excludes CLTC Codes 11-20)	N/A	N/A	N/A	N/A	N/A	\$35,609	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$23,763	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$37,102	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$16,720	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$25,407	N/A	N/A	N/A	15% (+/-)	No
% FFS Enrollees with CLTC Claims (Section 1915(c) claims only - excludes CLTC Codes 11-20)	N/A	N/A	N/A	N/A	N/A	7.93	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	2.44	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	17.31	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	0.04	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	0.01	N/A	N/A	N/A	15% (+/-)	No