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2003-2005 MAX IP VALIDATION TABLE  
STATE: MN

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	99,405	N/A	90,725	N/A	88,781	N/A	-8.73	-2.14	Yes
% Encounter Claims	N/A	40.69	N/A	22.98	N/A	35.09	N/A	-43.50	52.67	No
% Supplemental Claims	N/A	0	N/A	0	N/A	0	N/A	20.52	-100.00	No
Total FFS Claims	N/A	58,938	N/A	69,850	N/A	57,627	N/A	18.51	-17.50	No
% Crossover	5-20	28.44	No	24.31	No	30.26	No	-14.50	24.45	No
% Adjusted Claims	N/A	16.91	N/A	12.53	N/A	13.67	N/A	-25.90	9.13	Yes
% Standard Adjustments	> 1%	79.48	Yes	69.76	Yes	73.61	Yes	-12.20	5.52	Yes
Aver. Amt. Pd Adjust. ( include \$0)	N/A	\$5,943	N/A	\$7,881	N/A	\$9,702	N/A	32.61	23.10	No
Total number of claims with missing Medicaid eligibility (excludes S-SCHIP only)	N/A	N/A	N/A	N/A	N/A	231	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	42,176	N/A	52,867	N/A	40,190	N/A	25.35	-24.00	No
% 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	\$6,226	Yes	\$6,241	Yes	\$7,588	No	0.23	21.58	No
Aver. Medicaid Amt Paid per Covered Day (>\$0 paid and >0 days claims)	N/A	\$1,381	N/A	\$1,412	N/A	\$1,502	N/A	2.25	6.38	Yes
% Claims with TPL	>0 - 10	2.92	Yes	2.33	Yes	2.65	Yes	-20.20	13.71	Yes
Aver. TPL Paid for claims with TPL	N/A	\$5,333	N/A	\$4,555	N/A	\$4,136	N/A	-14.60	-9.21	Yes
% Claims with UB-92 Accommodation Codes	95-100	99.87	Yes	99.95	Yes	99.97	Yes	0.09	0.01	Yes
Average # UB-92 Accom. Codes (at least 1 accom code)	>1	1.12	Yes	1.12	Yes	1.14	Yes	-0.30	1.93	Yes
% Claims with UB-92 Ancillary Codes	95-100	99.38	Yes	99.52	Yes	99.42	Yes	0.15	-0.10	Yes
Average # UB-92 Ancillary Codes (at least 1 Ancillary code)	>3	8.30	Yes	7.89	Yes	9.11	Yes	-4.86	15.44	No
Average LOS	2-<8	4.51	Yes	4.38	Yes	5.01	Yes	-2.98	14.41	Yes
Average Covered Days (> 0 day)	2-<8	4.51	Yes	4.42	Yes	5.05	Yes	-2.05	14.29	Yes
% Begin Date = Admit Date	95-100	98.62	Yes	98.76	Yes	98.28	Yes	0.14	-0.49	Yes
% IP Claims (MAX TOS 01)	95-100	99.95	Yes	100.00	Yes	99.99	Yes	0.04	-0.01	Yes
% Family Planning Claims (pgm type=2)	>0-5	0.00	No	0.00	No	0.00	No	Div by 0	Div by 0	N/A
% Claims with PDX	98-100	99.88	Yes	99.97	Yes	99.99	Yes	0.09	0.01	Yes
Average Number of DX Codes (at least 1 DX)	>=2	4.61	Yes	4.36	Yes	5.38	Yes	-5.56	23.57	No
% Claims with PDX, where length=3	5-30	4.56	No	3.48	No	4.63	No	-23.60	32.95	No
% Claims with PDX, where length=4	15-75	24.79	Yes	22.13	Yes	27.83	Yes	-10.70	25.77	No
% Claims with PDX, where length=5	25-70	70.65	No	74.39	No	67.54	Yes	5.30	-9.21	Yes
% Claims with a procedure code	35-70	49.59	Yes	47.60	Yes	51.03	Yes	-4.01	7.19	Yes
Average Number of Procedures for claims with at least 1 procedure code	>1	2.04	Yes	1.91	Yes	2.12	Yes	-6.51	10.86	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	99.99	N/A	100.00	N/A	-0.01	0.01	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: MN

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	99.88	Yes	99.97	Yes	99.98	Yes	0.09	0.01	Yes
% Claims Maternal Delivery Indicator	N/A	10.17	N/A	7.03	N/A	9.02	N/A	-30.90	28.43	No
% Claims Newborn Delivery Indicator (only for separate infant delivery claims using mother's ID)	N/A	25.34	N/A	36.88	N/A	17.81	N/A	45.56	-51.70	No
<b>Patient Status</b>										
% Home	75-90	77.99	Yes	77.83	Yes	77.87	Yes	-0.19	0.05	Yes
% Transferred	1-10	21.06	No	21.29	No	20.91	No	1.07	-1.78	Yes
% Still a Patient	>0 - 2	0.10	Yes	0.07	Yes	0.13	Yes	-24.10	75.39	No
% Died	>0 - 3	0.74	Yes	0.76	Yes	0.97	Yes	2.94	28.58	No
<b>FFS Crossover Claims (Type of Claim=1, Crossover Claim Indicator=1)</b>										
Total Number of Claims	N/A	16,762	N/A	16,983	N/A	17,437	N/A	1.32	2.67	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	\$904	N/A	\$933	N/A	\$990	N/A	3.31	6.08	Yes
% Claims with TPL	N/A	0.97	N/A	1.00	N/A	1.11	N/A	2.94	11.15	Yes
Aver. TPL Paid -claims with TPL	N/A	\$5,446	N/A	\$762	N/A	\$657	N/A	-86.00	-13.80	Yes
% Claims with UB-92 Accommodation Codes	95-100	99.91	Yes	99.92	Yes	99.89	Yes	0.01	-0.04	Yes
Average # UB-92 Accom. Codes (at least 1 accom code)	>1	1.16	Yes	1.16	Yes	1.16	Yes	0.28	0.33	Yes
% Claims with UB-92 Ancillary Codes	95-100	99.98	Yes	99.96	Yes	99.95	Yes	-0.01	-0.02	Yes
Average # UB-92 Ancillary Codes (at least 1 Ancillary code)	>3	10.57	Yes	10.91	Yes	11.05	Yes	3.16	1.34	Yes
Average LOS	2-<8	5.52	Yes	5.30	Yes	5.47	Yes	-4.13	3.35	Yes
% Begin Date = Admit Date	95-100	99.66	Yes	99.71	Yes	99.59	Yes	0.05	-0.12	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	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
Average Number of DX Codes (at least 1 DX)	>=2	6.82	Yes	7.04	Yes	7.35	Yes	3.29	4.42	Yes
% Claims with PDX, where length=3	5-30	7.37	Yes	6.29	Yes	6.31	Yes	-14.60	0.22	Yes
% Claims with PDX, where length=4	15-75	37.42	Yes	36.92	Yes	36.23	Yes	-1.33	-1.86	Yes
% Claims with PDX, where length=5	25-70	55.21	Yes	56.79	Yes	57.46	Yes	2.86	1.18	Yes
% Claims with a procedure code	35-70	0.01	No	0.01	No	0.01	No	-50.70	-2.60	Yes
Average Number of Procedures for claims with at least 1 procedure code	>1	1.00	No	6.00	Yes	2.00	Yes	500.00	-66.70	No
% 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	8.81	No	10.22	No	11.25	No	16.01	10.08	Yes

2003-2005 MAX LT VALIDATION TABLE  
STATE: MN

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	364,298	N/A	420,391	N/A	442,763	N/A	15.40	5.32	Yes
% Encounter Claims	N/A	0.00	N/A	0.42	N/A	0.22	N/A	Div by 0	-47.00	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	364,298	N/A	418,623	N/A	441,776	N/A	14.91	5.53	Yes
% Crossover	5-20	1.19	No	0.50	No	0.34	No	-57.90	-31.40	No
% Adjusted Claims	> 1%	42.65	Yes	20.60	Yes	28.08	Yes	-51.70	36.27	No
% Standard Adjustments	N/A	61.93	N/A	52.40	N/A	82.67	N/A	-15.40	57.76	No
Aver. Amt. Pd Adjust. ( include \$0)	N/A	\$2,819	N/A	\$2,941	N/A	\$2,679	N/A	4.30	-8.91	Yes
Total number of claims with missing Medicaid eligibility (excludes S-SCHIP only)	N/A	N/A	N/A	N/A	N/A	86	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	359,970	N/A	416,527	N/A	440,259	N/A	15.71	5.70	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	\$113	No	\$115	No	\$117	No	2.04	1.38	Yes
ICF/MR (TOS 05)	N/A	\$204	N/A	\$208	N/A	\$214	N/A	1.83	3.02	Yes
Aged/MH (TOS 02)	N/A	\$201	N/A	\$189	N/A	\$178	N/A	-6.22	-5.40	Yes
IP Psych. < 21 (TOS 04)	N/A	\$695	N/A	\$696	N/A	\$773	N/A	0.07	11.10	Yes
% NF (TOS 07)	75-99	67.14	No	70.05	No	67.50	No	4.34	-3.63	Yes
% NF claims with NF Covered Days	N/A	92.26	N/A	92.24	N/A	90.06	N/A	-0.02	-2.37	Yes
Avg days for NF claims with Covered Days	N/A	26	N/A	27	N/A	26	N/A	1.36	-4.57	Yes
% ICF/MR (TOS 05)	>0-20	32.34	No	29.38	No	32.04	No	-9.16	9.05	Yes
% ICF/MR claims with ICF/MR Covered Days	N/A	25.86	N/A	24.10	N/A	20.51	N/A	-6.80	-14.90	Yes
Avg days for ICF/MR claims with Covered Days	N/A	24	N/A	23	N/A	23	N/A	-1.12	-1.47	Yes
% Aged/MH (TOS 02)	>0-10	0.27	Yes	0.31	Yes	0.20	Yes	16.13	-35.80	No
% Aged/MH claims with Aged/MH Covered Days	N/A	98.13	N/A	98.61	N/A	98.41	N/A	0.49	-0.21	Yes
Avg days for Aged/MH claims with Covered Days	N/A	27	N/A	28	N/A	28	N/A	4.02	2.19	Yes
% IP Psych. < 21 (TOS 04)	>0-5	0.25	Yes	0.26	Yes	0.26	Yes	3.29	-1.35	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	19	N/A	18	N/A	16	N/A	-7.76	-8.84	Yes
% Claims with Leave Days	1-20	5.81	Yes	3.88	Yes	3.63	Yes	-33.30	-6.42	Yes
% Claims with DX	95-100	98.66	Yes	99.97	Yes	99.98	Yes	1.34	0.00	Yes
% Claims with DX, where length=3	5-30	5.79	Yes	9.07	Yes	13.71	Yes	56.48	51.19	No
% Claims with DX, where length=4	15-75	18.37	Yes	29.03	Yes	43.65	Yes	58.03	50.37	No
% Claims with DX, where length=5	25-70	75.84	No	61.90	Yes	42.64	Yes	-18.40	-31.10	No
<b>Patient Status</b>										
% Home	1-5	1.28	Yes	0.96	No	0.95	No	-24.60	-1.10	Yes
% Still a Patient	8-98	95.40	Yes	97.61	Yes	97.77	Yes	2.31	0.16	Yes
% Died	>0-5	1.18	Yes	0.81	Yes	0.75	Yes	-31.00	-8.27	Yes
<b>FFS Crossover Claims (Type of Claim=1, Crossover Claim Indicator=1)</b>										
Total Number of Claims	N/A	4,328	N/A	2,096	N/A	1,517	N/A	-51.60	-27.60	No
% Claims with> \$0 Paid	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
% Claims with< \$0 Paid	0	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	N/A

2003-2005 MAX LT VALIDATION TABLE  
STATE: MN

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	\$1,126	N/A	\$862	N/A	\$822	N/A	-23.50	-4.54	Yes
% NF (TOS 07)	75-99	99.70	No	98.38	Yes	97.17	Yes	-1.33	-1.23	Yes
% ICF/MR (TOS 05)	>0-20	0.00	No	0.00	No	0.00	No	Div by 0	Div by 0	N/A
% Aged/MH (TOS 02)	>0-10	0.30	Yes	1.53	Yes	2.37	Yes	408.30	55.44	No
% IP Psych. < 21 (TOS 04)	>0-5	0.00	No	0.10	Yes	0.46	Yes	Div by 0	383.60	No
% Claims with DX	95-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with DX, where length=3	5-30	12.62	Yes	12.31	Yes	10.09	Yes	-2.43	-18.10	No
% Claims with DX, where length=4	15-75	40.27	Yes	48.47	Yes	44.30	Yes	20.36	-8.61	Yes
% Claims with DX, where length=5	25-70	47.11	Yes	39.22	Yes	45.62	Yes	-16.80	16.32	No
Patient Status										
% Home	1-5	8.41	No	8.87	No	9.29	No	5.51	4.74	Yes
% Still a Patient	8-98	75.76	Yes	75.10	Yes	76.93	Yes	-0.88	2.44	Yes
% Died	>0-5	2.73	Yes	2.10	Yes	0.79	Yes	-23.00	-62.30	No

2003-2005 MAX OT VALIDATION TABLE  
STATE: MN

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	26,094,552	N/A	25,512,215	N/A	27,379,847	N/A	-2.23	7.32	Yes
% Encounter Claims (Claim Type=3)	N/A	37.16	N/A	31.09	N/A	32.76	N/A	-16.30	5.36	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
% Cap Claims (Claim Type=2, and MAX TOS 20,21,22)	N/A	15.15	N/A	16.97	N/A	15.13	N/A	11.95	-10.80	Yes
Total FFS Claims Excluding Capitation Payments	N/A	12,442,730	N/A	13,250,845	N/A	14,267,408	N/A	6.50	7.67	Yes
% Crossover	5-20	16.90	Yes	16.34	Yes	16.15	Yes	-3.33	-1.18	Yes
% Adjusted Claims	> 1%	4.36	Yes	8.09	Yes	4.14	Yes	85.47	-48.90	No
% Standard Adjustments	N/A	35.81	N/A	35.55	N/A	35.50	N/A	-0.71	-0.15	Yes
Aver. Amt. Pd Adjust. ( include \$0)	N/A	\$169	N/A	\$151	N/A	\$207	N/A	-10.60	37.51	No
% Claims(TOC 1,2) TOS 20: HMO Cap Payment	N/A	24.12	N/A	24.62	N/A	22.50	N/A	2.10	-8.61	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	\$275	Yes	\$289	Yes	\$322	No	5.10	11.59	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	14,931	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	10,339,289	N/A	11,085,439	N/A	11,963,433	N/A	7.22	7.92	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	14.96	N/A	15.15	N/A	14.57	N/A	1.23	-3.80	Yes
% OPD Claims with Span Bill/ All OPD Claims(TOS 11)	N/A	0.07	N/A	0.22	N/A	0.26	N/A	203.60	16.97	No
% HH Claims with Span Bill/All HH Claims (TOS 13)	N/A	21.69	N/A	21.90	N/A	20.74	N/A	1.00	-5.30	Yes
% Other Claims with Span Bills/All Other Claims	N/A	15.23	N/A	15.43	N/A	14.98	N/A	1.32	-2.95	Yes
% Claims W/ Service Place 11- Office	50-90	22.32	No	22.96	No	23.00	No	2.89	0.18	Yes
% Claims W/ Service Place 12 - Home	>0-5	22.08	No	23.07	No	26.45	No	4.48	14.63	Yes
% Claims W/ Service Place 21 - Hospital	>0-5	3.52	Yes	4.06	Yes	3.32	Yes	15.24	-18.20	No
% Claims W/ Service Place 32 - NF	>0-5	0.18	Yes	0.15	Yes	0.11	Yes	-16.60	-25.90	No
% Claims W/ Service Place 23 - ER	1-10	1.34	Yes	1.33	Yes	1.30	Yes	-0.76	-1.86	Yes
% Claims w/ Service Place 22 - OPD	>0-10	15.02	No	14.71	No	13.81	No	-2.05	-6.11	Yes
% Claims W/ Service Place 99 - Unknown/Other	<5	21.66	No	18.61	No	17.27	No	-14.10	-7.22	Yes
% Claims with TPL	>0 - 15	0.32	Yes	0.37	Yes	0.34	Yes	14.26	-8.97	Yes
Aver. TPL Paid -claims with TPL	N/A	\$125	N/A	\$146	N/A	\$176	N/A	16.24	20.79	No
<b>PERCENT CLAIMS/MAX TOS</b>										
% claims MAX TOS 08: Physicians	10-35	11.97	Yes	12.29	Yes	11.59	Yes	2.67	-5.72	Yes
% claims MAX TOS 09: Dental	2-20	5.08	Yes	4.80	Yes	4.59	Yes	-5.60	-4.41	Yes
% claims MAX TOS 10: Other Practioner	0.5-8	1.34	Yes	2.55	Yes	2.79	Yes	90.71	9.33	Yes
% claims MAX TOS 11: OPD	3-25	3.59	Yes	3.45	Yes	3.61	Yes	-3.84	4.63	Yes
% claims MAX TOS 12: Clinic	2-25	1.12	No	0.96	No	0.99	No	-14.40	3.49	Yes
% claims MAX TOS 13: HH	>0-25	4.33	Yes	3.76	Yes	2.23	Yes	-13.20	-40.80	No
% claims MAX TOS 15: Lab/Xray	4-20	12.69	Yes	13.06	Yes	11.33	Yes	2.93	-13.20	Yes
% claims MAX TOS 16: Drugs	<3	0.16	Yes	0.17	Yes	0.17	Yes	5.11	1.12	Yes
% claims MAX TOS 19: Other Services	<25	2.55	Yes	8.49	Yes	8.93	Yes	232.50	5.11	Yes

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	4.36	Yes	5.31	Yes	7.63	Yes	21.89	43.71	No
% claims MAX TOS 26: Transportation	>1	11.62	Yes	8.87	Yes	7.13	Yes	-23.60	-19.60	No
% claims MAX TOS 24: Sterilizations	N/A	0.01	N/A	0.01	N/A	0.01	N/A	-9.11	-18.60	No
% claims MAX TOS 25: Abortions	N/A	0.00	N/A	0.00	N/A	0.00	N/A	-24.20	-43.00	No
% claims MAX TOS 30: PCS	>0	7.42	Yes	7.74	Yes	9.46	Yes	4.35	22.19	No
% claims MAX TOS 31: TCM	>0	9.05	Yes	10.15	Yes	10.00	Yes	12.15	-1.49	Yes
% claims MAX TOS 33: Rehabilitation	>0	2.82	Yes	1.99	Yes	2.30	Yes	-29.30	15.69	No
% claims MAX TOS 34: PT/OT/hear/speech	>1	1.51	Yes	1.48	Yes	1.21	Yes	-2.27	-17.90	No
% claims MAX TOS 35: Hospice	>0	0.06	Yes	0.07	Yes	0.08	Yes	15.39	15.91	No
% claims MAX TOS 36: Nurse Midwife	N/A	0.06	N/A	0.06	N/A	0.06	N/A	4.17	-3.71	Yes
% claims MAX TOS 37: Nurse Practitioner	N/A	0.58	N/A	0.61	N/A	0.58	N/A	4.15	-3.52	Yes
% claims MAX TOS 38: Private Nursing	N/A	0.32	N/A	0.31	N/A	0.31	N/A	-2.42	-0.46	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	1.54	N/A	1.50	N/A	1.25	N/A	-2.65	-17.10	No
% claims MAX TOS 53: Psych. Services	>1	15.66	Yes	9.99	Yes	11.03	Yes	-36.20	10.42	Yes
% claims MAX TOS 54: Adult Day Care	>0	2.15	Yes	2.36	Yes	2.71	Yes	10.11	14.68	Yes
% claims MAX TOS 99: Unknown	<1	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	N/A
Average Medicaid Amount Paid For Selected MAX TOS (excluding claims with <=\$0 paid)										
Total	N/A	\$182	N/A	\$185	N/A	\$187	N/A	1.96	1.16	Yes
08: Physicians	\$20-90	\$70	Yes	\$76	Yes	\$73	Yes	7.55	-3.71	Yes
09: Dental	\$10-60	\$46	Yes	\$47	Yes	\$47	Yes	2.68	1.39	Yes
10: Other Practioner	\$10-100	\$39	Yes	\$76	Yes	\$71	Yes	98.26	-7.34	Yes
11: OPD	\$20-100	\$99	Yes	\$108	No	\$101	No	9.77	-6.31	Yes
12: Clinic	\$20-100	\$145	No	\$166	No	\$152	No	14.50	-8.29	Yes
13: HH	N/A	\$93	N/A	\$107	N/A	\$97	N/A	15.32	-9.18	Yes
15: Lab/Xray	10-60	\$30	Yes	\$32	Yes	\$37	Yes	5.98	14.03	Yes
16: Drugs	10-60	\$39	Yes	\$33	Yes	\$38	Yes	-14.80	15.56	No
19: Other Services	N/A	\$257	N/A	\$171	N/A	\$111	N/A	-33.40	-35.20	No
51: DME	N/A	\$97	N/A	\$87	N/A	\$141	N/A	-9.93	62.02	No
26: Transportation	N/A	\$28	N/A	\$33	N/A	\$34	N/A	16.57	3.32	Yes
30: PCS	N/A	\$365	N/A	\$417	N/A	\$457	N/A	14.14	9.70	Yes
31: Targeted Case Management	N/A	\$185	N/A	\$199	N/A	\$183	N/A	7.51	-7.62	Yes
33: Rehabilitation	N/A	\$672	N/A	\$509	N/A	\$395	N/A	-24.20	-22.50	No
34: PT/OT/speech/hear	N/A	\$33	N/A	\$37	N/A	\$43	N/A	13.85	15.81	No
35: Hospice	N/A	\$2,631	N/A	\$2,659	N/A	\$2,492	N/A	1.07	-6.29	Yes
52: Residential Care	N/A	\$2,990	N/A	\$3,024	N/A	\$3,158	N/A	1.11	4.44	Yes
53: Psych. Services	N/A	\$108	N/A	\$92	N/A	\$108	N/A	-14.90	16.70	No
54: Adult Day Care	N/A	\$524	N/A	\$512	N/A	\$412	N/A	-2.24	-19.50	No
PERCENT OF CLAIMS BY PROGRAM TYPE (claim type 1)										
% Family Planning (code 2)	N/A	0.21	N/A	0.20	N/A	0.18	N/A	-4.29	-9.75	Yes
% RHC (code 3)	N/A	0.24	N/A	0.22	N/A	0.20	N/A	-8.05	-8.63	Yes
% FQHC (code 4)	N/A	0.50	N/A	0.55	N/A	0.51	N/A	10.75	-6.76	Yes
% IHS (code 5)	N/A	0.27	N/A	0.24	N/A	0.22	N/A	-10.60	-7.63	Yes
% Waiver (code 6,7)	N/A	19.48	N/A	19.32	N/A	20.86	N/A	-0.80	7.95	Yes
AVERAGE EXPENDITURES BY PROGRAM										
Family Planning (code 2)	N/A	\$47	N/A	\$54	N/A	\$54	N/A	15.81	-0.31	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	\$91	N/A	\$101	N/A	\$104	N/A	10.65	3.62	Yes
FQHC (code 4)	N/A	\$162	N/A	\$161	N/A	\$169	N/A	-0.49	4.80	Yes
IHS (code 5)	N/A	\$158	N/A	\$163	N/A	\$164	N/A	3.09	0.44	Yes
Waiver (code 6, 7)	N/A	\$522	N/A	\$524	N/A	\$486	N/A	0.37	-7.22	Yes
% Claims with DX	> 60	99.49	Yes	99.42	Yes	99.36	Yes	-0.07	-0.06	Yes
% Claims with DX (MAX TOS 8, 11, 12)	85-100	99.99	Yes	99.99	Yes	99.99	Yes	0.00	0.00	Yes
% Claims with 1 DX that have 2 DX	N/A	24.97	N/A	27.43	N/A	29.23	N/A	9.86	6.57	Yes
% Claims with DX, where length=3	5-25	4.99	No	5.56	Yes	7.61	Yes	11.57	36.80	No
% Claims with DX, where length=4	40-70	26.68	No	28.76	No	30.06	No	7.81	4.53	Yes
% Claims with DX, where length=5	20-55	68.34	No	65.68	No	62.33	No	-3.89	-5.10	Yes
% OPD Claims with Service Code or UB-92/OPD Claims (TOS 11)	N/A	99.99	N/A	100.00	N/A	99.99	N/A	0.01	0.00	Yes
% HH Claims with Service Code or UB-92/HH Claims (TOS13)	N/A	99.17	N/A	98.87	N/A	97.42	N/A	-0.31	-1.46	Yes
% Other Claims with Service Codes /All Other Claims (Excluding OPD/HH)	98-100	98.66	Yes	98.77	Yes	98.83	Yes	0.12	0.06	Yes
% CPT-4 Service Code Indicator (code 01)/Claims with Service Codes	N/A	32.11	N/A	33.25	N/A	32.41	N/A	3.55	-2.51	Yes
% HCPCS (II & III) Service Codes Indicator (code 06)/Claims with Service Codes	N/A	67.89	N/A	66.75	N/A	67.59	N/A	-1.68	1.25	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	Div by 0	Div by 0	N/A
% State Specific Serv. Indicator (10-87)/Claims with Service Codes	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% CPT-4 Format Codes- 5n/Claims with CPT-4	98-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% HCPCS Format Codes 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	19.55	N/A	18.31	N/A	17.24	N/A	-6.33	-5.82	Yes
PERCENT OF CLAIMS BY CLTC CODE										
CLTC 00: not a CLTC claim	N/A	N/A	N/A	N/A	N/A	58.52	N/A	N/A	N/A	N/A
CLTC Non-Waiver Claims (11-20)	N/A	N/A	N/A	N/A	N/A	20.62	N/A	N/A	N/A	N/A
CLTC 11: Non-Waiver Personal Care	N/A	N/A	N/A	N/A	N/A	5.49	N/A	N/A	N/A	N/A
CLTC 12: Non-Waiver PDN	N/A	N/A	N/A	N/A	N/A	0.29	N/A	N/A	N/A	N/A
CLTC 13: Non-Waiver Adult Day	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A
CLTC 14: Non-Waiver HH	N/A	N/A	N/A	N/A	N/A	1.24	N/A	N/A	N/A	N/A
CLTC 15: Non-Waiver Residential Care	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A
CLTC 16: Non-Waiver Rehab	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A
CLTC 17: Non-Waiver TCM	N/A	N/A	N/A	N/A	N/A	1.38	N/A	N/A	N/A	N/A
CLTC 18: Non-Waiver Transportation	N/A	N/A	N/A	N/A	N/A	6.43	N/A	N/A	N/A	N/A
CLTC 19: Non-Waiver Hospice	N/A	N/A	N/A	N/A	N/A	0.08	N/A	N/A	N/A	N/A
CLTC 20: Non-Waiver DME	N/A	N/A	N/A	N/A	N/A	5.71	N/A	N/A	N/A	N/A
CLTC Waiver Claims (30-40)	N/A	N/A	N/A	N/A	N/A	20.86	N/A	N/A	N/A	N/A
CLTC 30: Other Waiver	N/A	N/A	N/A	N/A	N/A	1.29	N/A	N/A	N/A	N/A
CLTC 31: Waiver Personal Care	N/A	N/A	N/A	N/A	N/A	3.97	N/A	N/A	N/A	N/A
CLTC 32: Waiver PDN	N/A	N/A	N/A	N/A	N/A	0.02	N/A	N/A	N/A	N/A
CLTC 33: Waiver Adult Day	N/A	N/A	N/A	N/A	N/A	2.71	N/A	N/A	N/A	N/A
CLTC 34: Waiver HH	N/A	N/A	N/A	N/A	N/A	0.99	N/A	N/A	N/A	N/A



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
CLTC 35: Waiver Residential Care	N/A	N/A	N/A	N/A	N/A	1.25	N/A	N/A	N/A	N/A
CLTC 36: Waiver Rehab	N/A	N/A	N/A	N/A	N/A	2.30	N/A	N/A	N/A	N/A
CLTC 37: Waiver TCM	N/A	N/A	N/A	N/A	N/A	6.68	N/A	N/A	N/A	N/A
CLTC 38: Waiver Transportation	N/A	N/A	N/A	N/A	N/A	0.47	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	1.18	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	2,103,441	N/A	2,165,406	N/A	2,303,975	N/A	2.95	6.40	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	2.01	N/A	2.05	N/A	2.00	N/A	1.70	-2.16	Yes
% OPD Claims with Span Bill/ All OPD Claims(TOS 11)	N/A	0.12	N/A	0.16	N/A	0.15	N/A	34.10	-11.50	Yes
% HH Claims with Span Bill/All HH Claims (TOS 13)	N/A	6.73	N/A	6.80	N/A	5.59	N/A	0.95	-17.80	No
% Other Claims with Span Bills/All Other Claims	N/A	2.24	N/A	2.19	N/A	2.16	N/A	-1.99	-1.59	Yes
<b>PERCENT CLAIMS/MAX TOS (excluding 20-22)</b>										
% claims MAX TOS 08: Physicians	N/A	53.41	N/A	53.97	N/A	53.35	N/A	1.06	-1.16	Yes
% claims MAX TOS 10: Other Practioner	N/A	8.23	N/A	8.47	N/A	8.44	N/A	2.89	-0.37	Yes
% claims MAX TOS 11: OPD	N/A	14.22	N/A	10.86	N/A	11.02	N/A	-23.60	1.50	Yes
% claims MAX TOS 12: Clinic	N/A	1.41	N/A	1.27	N/A	1.58	N/A	-9.56	24.21	No
% claims MAX TOS 13: HH	N/A	1.75	N/A	1.67	N/A	2.01	N/A	-4.56	20.37	No
% claims MAX TOS 15: Lab/Xray	N/A	4.99	N/A	6.27	N/A	6.69	N/A	25.74	6.60	Yes
% claims MAX TOS 19: Other Services	N/A	0.60	N/A	0.53	N/A	0.65	N/A	-11.60	22.37	No
% claims MAX TOS 51: DME	N/A	7.81	N/A	8.18	N/A	8.22	N/A	4.65	0.50	Yes
% claims MAX TOS 26: Transportation	N/A	1.86	N/A	1.90	N/A	1.92	N/A	2.04	1.00	Yes
% claims MAX TOS 30: PCS	N/A	0.00	N/A	0.00	N/A	0.00	N/A	-2.86	-6.01	Yes
% claims MAX TOS 31: TCM	N/A	0.00	N/A	0.00	N/A	0.00	N/A	-100.00	Div by 0	N/A
% claims MAX TOS 33: Rehabilitation	N/A	0.02	N/A	0.03	N/A	0.03	N/A	26.74	11.37	Yes
% claims MAX TOS 34: PT/OT/hear/speech	N/A	4.79	N/A	4.67	N/A	4.49	N/A	-2.50	-3.77	Yes
% claims MAX TOS 35: Hospice	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	-53.00	No
% claims MAX TOS 52: Residential Care	N/A	0.00	N/A	0.00	N/A	0.00	N/A	774.20	-100.00	No
% claims MAX TOS 53: Psych. Services	N/A	0.07	N/A	1.35	N/A	1.07	N/A	1,776.00	-20.70	No
% 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	\$26	N/A	\$28	N/A	\$29	N/A	4.89	3.99	Yes
% Claims with DX	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
% Claims with DX (MAX TOS 8, 11, 12)	85-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with 1 DX that have 2 DX	N/A	55.58	N/A	57.24	N/A	57.65	N/A	2.98	0.72	Yes
% Claims with DX, where length=3	5-25	8.95	Yes	8.52	Yes	7.82	Yes	-4.83	-8.15	Yes
% Claims with DX, where length=4	40-70	42.89	Yes	42.58	Yes	42.92	Yes	-0.72	0.79	Yes
% Claims with DX, where length=5	20-55	48.16	Yes	48.90	Yes	49.26	Yes	1.53	0.74	Yes
% OPD Claims with Service Code or UB-92/OPD Claims (TOS 11)	N/A	94.94	N/A	96.47	N/A	92.21	N/A	1.62	-4.42	Yes
% HH Claims with Service Code or UB-92/HH Claims (TOS13)	N/A	78.49	N/A	82.10	N/A	80.17	N/A	4.60	-2.34	Yes
% Other Claims with Service Codes/All Other Claims (Excluding OPD/HH)	98-100	13.34	No	13.29	No	13.55	No	-0.38	1.95	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
% CPT-4 Service Code Indicator (code 01)/Claims with Service Codes	N/A	24.88	N/A	24.91	N/A	25.99	N/A	0.13	4.35	Yes
% HCPCS (II & III) Service Codes Indicator (code 06)/Claims with Service Codes	N/A	75.12	N/A	75.09	N/A	74.01	N/A	-0.04	-1.44	Yes
% Other Codes Indicator /Claims with Service Codes	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A

2003-2005 MAX RX VALIDATION TABLE  
STATE: MN

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	10,150,240	N/A	10,594,578	N/A	11,270,743	N/A	4.38	6.38	Yes
% Encounter Claims	N/A	46.02	N/A	46.61	N/A	47.36	N/A	1.29	1.61	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	5,479,072	N/A	5,656,079	N/A	5,932,724	N/A	3.23	4.89	Yes
% Adjusted Claims	N/A	2.98	N/A	3.48	N/A	2.62	N/A	16.63	-24.80	No
% Standard Adjustments	> 1%	74.35	Yes	45.04	Yes	69.72	Yes	-39.40	54.82	No
Aver. Amt. Pd Adjust. ( include \$0)	N/A	\$97	N/A	\$90	N/A	\$93	N/A	-7.33	3.20	Yes
Total number of claims with missing Medicaid eligibility (excludes S-SCHIP only)	N/A	N/A	N/A	N/A	N/A	4,875	N/A	N/A	N/A	N/A
<b>FFS Claims (Type of Claim=1)</b>										
Total Number of Claims	N/A	5,479,072	N/A	5,656,079	N/A	5,932,724	N/A	3.23	4.89	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	\$67	No	\$71	No	\$75	No	6.16	5.69	Yes
% Claims with TPL	>0 - 15	5.14	Yes	5.33	Yes	5.16	Yes	3.65	-3.19	Yes
Aver. TPL Paid for claims with TPL	N/A	\$81	N/A	\$86	N/A	\$92	N/A	6.66	7.06	Yes
% Family Planning Claims (program type=2)	N/A	0.63	N/A	0.63	N/A	0.61	N/A	0.34	-3.04	Yes
% Drug Claims (TOS 16)	95-99	100.00	No	100.00	No	100.00	No	0.00	0.00	Yes
% DME Claims (TOS 51)	>0 - 6	0.00	No	0.00	No	0.00	No	Div by 0	Div by 0	N/A
% Drug Claims with Quantity	>98	99.83	Yes	99.81	Yes	99.26	Yes	-0.02	-0.55	Yes
% Drug Claims with Days Supply	>98	99.98	Yes	99.98	Yes	99.98	Yes	0.00	0.00	Yes
% Claims with HICL	98-100	99.90	Yes	99.88	Yes	99.92	Yes	-0.03	0.05	Yes
% Claims with Medispan	98-100	99.52	Yes	99.49	Yes	99.64	Yes	-0.02	0.14	Yes
% Claims with AHFS	98-100	99.90	Yes	99.88	Yes	99.92	Yes	-0.03	0.05	Yes
% Claims with Generic (GTC)	98-100	99.90	Yes	99.88	Yes	99.92	Yes	-0.03	0.05	Yes
% Claims with GC3	98-100	99.90	Yes	99.88	Yes	99.92	Yes	-0.03	0.05	Yes
<b>NDC Configuration Indicator</b>										
% Prescription (codes 0-3)	N/A	79.34	N/A	77.11	N/A	76.12	N/A	-2.81	-1.28	Yes
% Products (codes 4-6)	N/A	20.54	N/A	22.75	N/A	23.80	N/A	10.74	4.62	Yes
% HRI (code 7)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	-58.50	-100.00	No
% Claims with Smart Key	98-100	99.90	Yes	99.88	Yes	99.92	Yes	-0.03	0.05	Yes
% OTC-Drug Class	N/A	11.60	N/A	11.39	N/A	11.84	N/A	-1.86	4.00	Yes
% Prescription-Drug Class	N/A	88.30	N/A	88.49	N/A	88.08	N/A	0.21	-0.46	Yes
% Multiple Source (Code Y)	N/A	53.28	N/A	56.32	N/A	59.86	N/A	5.69	6.29	Yes
% Single Source (Code N)	N/A	40.96	N/A	36.76	N/A	35.88	N/A	-10.20	-2.42	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
<b>All Records</b>											
Total Number of Records	N/A	762,630	N/A	776,857	N/A	792,366	N/A	1.87	2.00	10% (+/-)	Yes
Total Medicaid Amount Paid	N/A	\$4,582,040,542	N/A	\$5,199,509,084	N/A	\$5,464,140,984	N/A	13.48	5.09	15% (+/-)	Yes
% with no services (Code 0)	N/A	11.99	N/A	11.39	N/A	11.94	N/A	-4.97	4.79	N/A	N/A
% with FFS only claims (Code 1)	N/A	21.14	N/A	21.05	N/A	20.67	N/A	-0.42	-1.83	N/A	N/A
% with only cap claims (Code 2)	N/A	7.04	N/A	8.01	N/A	6.74	N/A	13.71	-15.90	N/A	N/A
% with only encounter claims (Code 3)	N/A	0.58	N/A	0.14	N/A	0.41	N/A	-76.00	197.80	N/A	N/A
% with FFS and cap claims (Code 4)	N/A	2.92	N/A	3.42	N/A	3.00	N/A	16.85	-12.10	N/A	N/A
% with cap and encounter claims only (Code 5)	N/A	34.28	N/A	32.49	N/A	33.88	N/A	-5.21	4.29	N/A	N/A
% with FFS and encounter claims only (Code 6)	N/A	0.17	N/A	0.04	N/A	0.13	N/A	-75.30	196.80	N/A	N/A
% with FFS, cap and encounter records (Code 7)	N/A	21.88	N/A	23.46	N/A	23.23	N/A	7.22	-0.98	N/A	N/A
# with claims and missing Medicaid eligibility (excludes S-SCHIP only)	N/A	4,447	N/A	1,290	N/A	1,654	N/A	-71.00	28.22	N/A	N/A
% with claims and missing Medicaid eligibility (excludes S-SCHIP only)	<2%	0.58	Yes	0.17	Yes	0.21	Yes	-71.50	25.71	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	828	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	0.10	N/A	N/A	N/A	N/A	N/A
Expenditures for people missing Medicaid eligibility (excludes S-SCHIP only enrollees)	N/A	\$34,140,626	N/A	\$26,391,465	N/A	\$3,580,032	N/A	-22.70	-86.40	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	\$3,150,252	N/A	N/A	N/A	N/A	N/A
<b>S-SCHIP ENROLLMENT</b>											
# with ONLY S-SCHIP enrollment	N/A	25,200	N/A	25,528	N/A	26,499	N/A	1.30	3.80	N/A	N/A
% with ONLY S-SCHIP enrollment	N/A	3.30	N/A	3.29	N/A	3.34	N/A	-0.55	1.77	N/A	N/A
# with ANY S-SCHIP enrollment	N/A	45,227	N/A	43,442	N/A	40,211	N/A	-3.95	-7.44	N/A	N/A
% with ANY S-SCHIP enrollment	N/A	5.93	N/A	5.59	N/A	5.07	N/A	-5.71	-9.25	N/A	N/A
Total PYE ANY S-SCHIP enrollment	N/A	26,899	N/A	26,623	N/A	25,693	N/A	-1.03	-3.50	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	732,983	N/A	750,039	N/A	764,213	N/A	2.33	1.89	10% (+/-)	Yes
Total Medicaid PYE (Person Years of Enrollment)	N/A	559,581	N/A	574,954	N/A	587,460	N/A	2.75	2.18	10% (+/-)	Yes
# with any M-SCHIP enrollment (Medicaid enrollees)	N/A	64	N/A	116	N/A	105	N/A	81.25	-9.48	N/A	N/A
Total PYE any M-SCHIP	N/A	16	N/A	30	N/A	26	N/A	81.12	-13.80	N/A	N/A
<b>Eligibility Demographics</b>											
% Records with Valid SSN Format	>=95%	97.46	Yes	97.79	Yes	97.96	Yes	0.34	0.17	10% (+/-)	Yes
% Records whose MSIS SSN passed High Group Test (Code 1)	>95%	N/A	No	N/A	No	97.82	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	0.12	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	0	Yes	0	Yes	0	Yes	Div by 0	Div by 0	N/A	N/A
% with External SSN from EDB (Code 1)	N/A	N/A	N/A	N/A	N/A	20.22	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%	99.92	Yes	99.94	Yes	99.96	Yes	0.03	0.01	10% (+/-)	Yes
% with Valid 5 Digit Zip Code Format	>=95%	97.36	Yes	97.33	Yes	97.31	Yes	-0.04	-0.02	10% (+/-)	Yes
% Enrollees who Died During Year	0.1-3%	1.55	Yes	1.50	Yes	1.48	Yes	-3.26	-1.45	10% (+/-)	Yes
% White	N/A	60.43	N/A	59.73	N/A	63.86	N/A	-1.15	6.91	10% (+/-)	Yes
% Black	N/A	15.75	N/A	16.06	N/A	17.59	N/A	1.961	9.51	10% (+/-)	Yes
% Native American/Alaskan Native	N/A	3.89	N/A	3.81	N/A	4.41	N/A	-2.21	15.98	10% (+/-)	No
% Asian	N/A	6.28	N/A	6.47	N/A	6.73	N/A	2.951	4.07	N/A	N/A
% Native Hawaiian or other Pacific Islander	N/A	0.06	N/A	0.07	N/A	0.12	N/A	14.55	78.72	N/A	N/A
% More than one race	N/A	0.99	N/A	1.13	N/A	1.44	N/A	13.86	27.77	N/A	N/A
% Unknown race	<5%	4.98	Yes	5.02	No	8.82	No	.8156	75.72	N/A	N/A
% Hispanic/Latino (included with race categories prior to 2005)	N/A	7.61	N/A	7.72	N/A	7.80	N/A	1.338	1.03	10% (+/-)	Yes
% of Hispanic/Latino with unknown race	N/A	N/A	N/A	N/A	N/A	45.68	N/A	N/A	N/A	N/A	N/A
% Age 0	2-8%	3.74	Yes	3.79	Yes	3.90	Yes	1.41	2.89	10% (+/-)	Yes
% Age 0-20 Years	49-74%	54.11	Yes	54.03	Yes	53.87	Yes	-0.15	-0.28	10% (+/-)	Yes
% Age > 64 Years	5-18%	12.33	Yes	12.12	Yes	12.16	Yes	-1.74	0.34	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%	54.09	Yes	54.52	Yes	54.42	Yes	0.79	-0.19	10% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: MN

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	133,713	N/A	136,960	N/A	141,559	N/A	2.43	3.36	10% (+/-)	Yes
Total EDB Dual PYE	N/A	105,476	N/A	108,557	N/A	111,981	N/A	2.92	3.15	15% (+/-)	Yes
% Age > 64 Years who are EDB Duals	>=90%	95.42	Yes	95.15	Yes	94.62	Yes	-0.28	-0.56	10% (+/-)	Yes
% MAX Aged Groups (11,21,31,41,51) who are EDB Duals	>=90%	95.28	Yes	94.88	Yes	94.85	Yes	-0.42	-0.03	10% (+/-)	Yes
% MAX Disabled Groups (12,22,32,42,52) who are EDB Duals	30-55%	46.13	Yes	46.93	Yes	47.61	Yes	1.74	1.44	10% (+/-)	Yes
% EDB Only (50)	<5%	10.77	No	11.48	No	11.51	No	6.56	0.31	N/A	N/A
% EDB QMB Only (51)	N/A	1.72	N/A	1.66	N/A	1.44	N/A	-3.56	-13.60	N/A	N/A
% EDB QMB Plus (52)	N/A	45.97	N/A	46.34	N/A	46.90	N/A	0.80	1.20	N/A	N/A
% EDB SLMB Only (53)	N/A	4.14	N/A	3.97	N/A	3.89	N/A	-4.01	-1.99	N/A	N/A
% EDB SLMB Plus (54)	N/A	8.77	N/A	8.79	N/A	8.61	N/A	0.13	-2.00	N/A	N/A
% EDB ODWI (55)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	-100.00	Div by 0	N/A	N/A
% EDB QI-1 (56)	N/A	1.90	N/A	1.81	N/A	1.93	N/A	-4.37	6.57	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	26.72	N/A	25.95	N/A	25.72	N/A	-2.90	-0.89	N/A	N/A
% EDB dual type unknown (59)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A	N/A
% EDB dual status unknown (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	1,116	N/A	1,023	N/A	845	N/A	-8.33	-17.40	10% (+/-)	No
% Non-EDB Duals Without Valid SSN	N/A	5.20	N/A	4.01	N/A	0.36	N/A	-22.90	-91.10	10% (+/-)	No
% Non-EDB Duals who are Children/Adults	N/A	8.78	N/A	8.80	N/A	11.72	N/A	0.19	33.17	10% (+/-)	No
% EDB Duals with Spanish Language	N/A	0.20	N/A	0.23	N/A	0.27	N/A	19.24	14.59	15% (+/-)	Yes
% EDB Duals with EDB Date of Death During Year	6-10%	10.91	No	10.54	No	10.43	No	-3.39	-1.08	15% (+/-)	Yes
% EDB Duals with Medicaid Reported HIC	N/A	85.36	N/A	84.90	N/A	85.34	N/A	-0.53	0.51	15% (+/-)	Yes
% EDB Duals with Medicaid reported HIC = Medicare HIC	N/A	97.60	N/A	97.90	N/A	97.57	N/A	0.31	-0.34	15% (+/-)	Yes
TOTAL EDB DUAL ENROLLEES IN JUNE	N/A	124,587	N/A	127,600	N/A	132,124	N/A	2.42	3.55	10% (+/-)	Yes
<b>June Medicare Type</b>											
June % with Part A Medicare	N/A	1.85	N/A	1.76	N/A	2.11	N/A	-4.82	19.95	15% (+/-)	No
June % with Part B Medicare	N/A	0.65	N/A	0.58	N/A	0.54	N/A	-11.00	-6.19	15% (+/-)	Yes
June % Part A/B Medicare	N/A	97.50	N/A	97.66	N/A	97.35	N/A	0.16	-0.32	15% (+/-)	Yes
<b>Original Reason for Medicare Entitlement</b>											
% Aged (Code 0)	N/A	56.24	N/A	54.79	N/A	53.66	N/A	-2.57	-2.07	15% (+/-)	Yes
% Disabled (Code 1)	N/A	42.86	N/A	44.32	N/A	45.41	N/A	3.40	2.46	15% (+/-)	Yes
% ESRD (Code 2)	N/A	0.35	N/A	0.37	N/A	0.33	N/A	6.34	-12.10	15% (+/-)	Yes
% Disabled with ESRD (Code 3)	N/A	0.54	N/A	0.51	N/A	0.60	N/A	-5.99	17.18	15% (+/-)	No
<b>Other Eligibility Characteristics (All Enrollees)</b>											
% MAX Aged Groups (11,21,31,41,51) >64 Years	>=99%	99.68	Yes	99.55	Yes	100.00	Yes	-0.13	0.45	10% (+/-)	Yes
% MAX Disabled Groups (12,22,32,42,52) >64 Years	N/A	1.43	N/A	1.26	N/A	0.87	N/A	-12.10	-31.00	10% (+/-)	No
% MAX Child Grps (14,16, 24, 34, 44, 48, 54) <21 Years	>=98%	98.35	Yes	98.39	Yes	98.42	Yes	0.04	0.03	10% (+/-)	Yes
% MAX Adult Groups (15,17,25,35,45,55) >20 Years	>=80%	93.33	Yes	93.82	Yes	94.11	Yes	0.52	0.31	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	19.50	N/A	N/A	N/A	N/A	N/A
<b>MAX Aged Total</b>											
11: Aged, Cash	N/A	89,120	N/A	89,862	N/A	91,881	N/A	0.83	2.25	10% (+/-)	Yes
21: Aged, MN	N/A	18,049	N/A	18,514	N/A	19,085	N/A	2.58	3.08	10% (+/-)	Yes
31: Aged, Poverty	N/A	16,854	N/A	15,551	N/A	16,083	N/A	-7.73	3.42	10% (+/-)	Yes
41: Other Aged	N/A	19,627	N/A	20,971	N/A	20,965	N/A	6.85	-0.03	10% (+/-)	Yes
51: 1115 Aged	N/A	34,590	N/A	34,826	N/A	35,709	N/A	0.68	2.54	10% (+/-)	Yes
51: 1115 Aged	N/A	0	N/A	0	N/A	39	N/A	Div by 0	Div by 0	10% (+/-)	N/A
<b>MAX Disabled Total</b>											
12: Disabled, Cash	N/A	101,923	N/A	105,467	N/A	108,700	N/A	3.48	3.07	10% (+/-)	Yes
22: Disabled, MN	N/A	62,005	N/A	62,917	N/A	63,317	N/A	1.47	0.64	10% (+/-)	Yes
32: Disabled, Poverty	N/A	6,734	N/A	7,870	N/A	8,653	N/A	16.87	9.95	10% (+/-)	Yes
42: Other Disabled	N/A	13,205	N/A	14,416	N/A	15,162	N/A	9.17	5.18	10% (+/-)	Yes
52: 1115 Disabled	N/A	19,979	N/A	20,264	N/A	21,502	N/A	1.43	6.11	10% (+/-)	Yes
52: 1115 Disabled	N/A	0	N/A	0	N/A	66	N/A	Div by 0	Div by 0	10% (+/-)	N/A
<b>MAX Child Total</b>											
14: AFDC Child, Cash	N/A	373,322	N/A	382,204	N/A	388,219	N/A	2.38	1.57	10% (+/-)	Yes
14: AFDC Child, Cash	N/A	193,590	N/A	223,007	N/A	230,541	N/A	15.20	3.38	10% (+/-)	Yes

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

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
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	1,245	N/A	1,089	N/A	1,207	N/A	-12.50	10.84	10% (+/-)	No
34: Child Poverty	N/A	38,954	N/A	39,851	N/A	42,287	N/A	2.30	6.11	10% (+/-)	Yes
44: Other Child	N/A	44,976	N/A	28,908	N/A	29,818	N/A	-35.70	3.15	10% (+/-)	Yes
48: Foster Care Child	N/A	9,438	N/A	9,604	N/A	10,391	N/A	1.76	8.20	10% (+/-)	Yes
54: 1115 Child	N/A	85,119	N/A	79,745	N/A	73,975	N/A	-6.31	-7.24	10% (+/-)	Yes
MAX Adult Total	N/A	168,618	N/A	172,506	N/A	175,413	N/A	2.31	1.69	10% (+/-)	Yes
15: AFDC Adult, Cash	N/A	106,605	N/A	120,224	N/A	123,400	N/A	12.78	2.64	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	4,876	N/A	4,673	N/A	5,184	N/A	-4.16	10.94	10% (+/-)	No
35: Adult, Poverty	N/A	4,254	N/A	4,324	N/A	4,597	N/A	1.65	6.31	10% (+/-)	Yes
45: Other Adult	N/A	18,582	N/A	11,222	N/A	13,279	N/A	-39.60	18.33	10% (+/-)	No
55: 1115 Adult	N/A	34,301	N/A	32,063	N/A	28,953	N/A	-6.52	-9.70	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	36,803	N/A	35,731	N/A	35,467	N/A	-2.91	-0.74	N/A	N/A
% enrollees with any ILTC claims	N/A	5.02	N/A	4.76	N/A	4.64	N/A	-5.12	-2.58	N/A	N/A
% AGED enrollees with any ILTC claims	N/A	31.08	N/A	29.72	N/A	28.16	N/A	-4.40	-5.23	N/A	N/A
% DISABLED enrollees with any ILTC claims	N/A	7.61	N/A	7.29	N/A	7.32	N/A	-4.17	0.47	N/A	N/A
% CHILD enrollees with any ILTC claims	N/A	0.23	N/A	0.23	N/A	0.26	N/A	1.30	11.87	N/A	N/A
% ADULT enrollees with any ILTC claims	N/A	0.29	N/A	0.26	N/A	0.35	N/A	-10.70	36.00	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	64,153	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	8.39	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	21.09	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	36.87	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	0.78	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	0.95	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	5,551	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	54,598	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	7.14	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	30.66	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	23.80	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	0.12	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	0.06	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	13,759	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	14,124	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	10,595	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	1,306	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	14,814	N/A	N/A	N/A	15% (+/-)	No
# with Section 1915(c) waiver for People with MI/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	0	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	22.44	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	1.06	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	43.36	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	528,451	N/A	N/A	N/A	15% (+/-)	No
% AGED enrollees with any 1115 waiver	N/A	N/A	N/A	N/A	N/A	36.45	N/A	N/A	N/A	15% (+/-)	No
% DISABLED enrollees with any 1115 waiver	N/A	N/A	N/A	N/A	N/A	7.97	N/A	N/A	N/A	15% (+/-)	No
% CHILD enrollees with any 1115 waiver	N/A	N/A	N/A	N/A	N/A	87.79	N/A	N/A	N/A	15% (+/-)	No
% ADULT enrollees with any 1115 waiver	N/A	N/A	N/A	N/A	N/A	82.93	N/A	N/A	N/A	15% (+/-)	No
% with any HMO/HIO enrollment	N/A	N/A	N/A	N/A	N/A	99.06	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	6,962	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	0.07	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	2.92	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	0.43	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	1.18	N/A	N/A	N/A	15% (+/-)	No
% with any HMO/HIO enrollment	N/A	N/A	N/A	N/A	N/A	37.58	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	43,047	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	46.33	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	0.42	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	0.01	N/A	N/A	N/A	15% (+/-)	No
% with any HMO/HIO enrollment	N/A	N/A	N/A	N/A	N/A	100.00	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	0	N/A	N/A	N/A	15% (+/-)	No
% AGED enrollees with Pharmacy waiver coverage	N/A	N/A	N/A	N/A	N/A	0.00	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	0.00	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	0.00	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 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	716	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	0	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	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	N/A	N/A
# with ANY Family Planning Only enrollment	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	N/A	N/A
# PYE ANY FP Only	N/A	Div by 0	N/A	Div by 0	N/A	0	N/A	Div by 0	Div by 0	N/A	N/A
<i>Aliens with Restricted Benefits (Code 2)</i>											
# Aliens with ONLY restricted benefits	N/A	5,830	N/A	5,253	N/A	4,285	N/A	-9.90	-18.40	N/A	N/A
# Aliens with ANY restricted benefits	N/A	6,996	N/A	5,899	N/A	4,951	N/A	-15.70	-16.10	N/A	N/A
# PYE Aliens with ANY restricted benefits	N/A	3,080	N/A	2,594	N/A	2,494	N/A	-15.80	-3.86	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	9,087	N/A	8,959	N/A	9,396	N/A	-1.41	4.88	N/A	N/A
# EDB Duals with ANY restricted benefits enrollment	N/A	12,417	N/A	12,166	N/A	12,546	N/A	-2.02	3.12	N/A	N/A
# PYE EDB Duals with ANY restricted benefits	N/A	9,064	N/A	8,952	N/A	9,203	N/A	-1.23	2.81	N/A	N/A
% EDB Duals with ONLY restricted benefits enrollment	N/A	N/A	N/A	N/A	N/A	6.64	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	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	N/A	N/A
# with ANY Prescription Drug enrollment	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	N/A	N/A
# PYE ANY Prescription Drug enrollment	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	N/A	N/A
<i>Dual Prescription Drug Enrollees</i>											
# with ONLY prescription drugs who are also EDB duals	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	N/A	N/A
<b>June Eligibility Profile</b>											
TOTAL ENROLLEES IN JUNE	N/A	563,325	N/A	576,309	N/A	589,105	N/A	2.31	2.22	15% (+/-)	Yes
June % Full Scope Benefits (Code 1)	>80%	97.02	Yes	97.20	Yes	97.20	Yes	0.19	0.00	15% (+/-)	Yes
June % Restricted Benefits Alien (Code 2)	<5%	0.70	Yes	0.48	Yes	0.44	Yes	-32.50	-7.81	15% (+/-)	Yes
June % Restricted Benefits Dual (Code 3)	<5%	1.62	Yes	1.56	Yes	1.56	Yes	-3.68	0.33	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%	0.66	No	0.76	No	0.80	No	15.78	4.37	15% (+/-)	Yes
June % Restricted Benefits Family Planning (Code 6)	<5%	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	15% (+/-)	N/A
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	0.00	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	0.00	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	0.00	N/A	N/A	N/A	15% (+/-)	No
June % Private Health Insurance (Codes 2-4)	2-12%	11.35	Yes	10.95	Yes	10.76	Yes	-3.55	-1.77	15% (+/-)	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 Expected Range	Cross Year Within Range
June Total Enrollees with TANF Flag (Code 2)	N/A	139,569	N/A	135,615	N/A	0	N/A	-2.83	-100.00	15% (+/-)	No
June # with M-SCHIP (Code 2) - Child (<19 Years)	N/A	19	N/A	42	N/A	32	N/A	121.10	-23.80	15% (+/-)	No
June # with M-SCHIP (Code 2) - Adult (>18 Years)	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
June # with S-SCHIP Flag (Code 3) - Child (<19 Years)	N/A	3	N/A	21	N/A	14	N/A	600.00	-33.30	15% (+/-)	No
June # with S-SCHIP Flag (Code 3) - Adult (>18 Years)	N/A	8,032	N/A	7,587	N/A	6,224	N/A	-5.54	-18.00	15% (+/-)	No
<b>Medicaid Expenditures</b>											
Total Medicaid Amt Paid	N/A	\$4,547,805,922	N/A	\$5,173,117,619	N/A	\$5,460,560,952	N/A	13.75	5.56	15% (+/-)	Yes
Average Medicaid Amt Paid per Enrollee	N/A	\$6,205	N/A	\$6,897	N/A	\$7,145	N/A	11.16	3.60	15% (+/-)	Yes
25th Percentile	N/A	\$854	N/A	\$948	N/A	\$997	N/A	11.01	5.17	15% (+/-)	Yes
50th Percentile (Median)	N/A	\$1,891	N/A	\$2,086	N/A	\$2,061	N/A	10.31	-1.20	15% (+/-)	Yes
75th Percentile	N/A	\$3,658	N/A	\$4,083	N/A	\$4,175	N/A	11.62	2.25	15% (+/-)	Yes
95th Percentile	N/A	\$31,519	N/A	\$38,007	N/A	\$38,999	N/A	20.58	2.61	15% (+/-)	Yes
99th Percentile	N/A	\$82,531	N/A	\$85,230	N/A	\$89,352	N/A	3.27	4.84	15% (+/-)	Yes
<b>AVG MEDICAID AMT PD/ENROLLEE BY MAX ELIGIBILITY GROUP</b>											
MAX Aged	N/A	\$12,387	N/A	\$15,147	N/A	\$15,208	N/A	22.28	0.40	15% (+/-)	Yes
MAX Disabled	N/A	\$22,011	N/A	\$23,086	N/A	\$24,489	N/A	4.89	6.08	10% (+/-)	Yes
MAX Child	N/A	\$2,132	N/A	\$2,414	N/A	\$2,324	N/A	13.26	-3.75	10% (+/-)	Yes
MAX Adult	N/A	\$2,400	N/A	\$2,634	N/A	\$2,846	N/A	9.77	8.04	10% (+/-)	Yes
<b>AVG MEDICAID AMT PD/EDB DUAL ENROLLEE</b>											
All EDB Dual Enrollees	N/A	\$16,483	N/A	\$18,537	N/A	\$19,189	N/A	12.46	3.52	15% (+/-)	Yes
MAX Aged	N/A	\$12,653	N/A	\$15,517	N/A	\$15,608	N/A	22.63	0.59	10% (+/-)	Yes
MAX Disabled	N/A	\$23,904	N/A	\$24,398	N/A	\$25,939	N/A	2.06	6.32	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	\$40,381	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	\$36,923	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	\$48,901	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	\$38,668	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	\$24,006	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	\$17,805	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	\$40,836	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	\$76,248	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	\$67,315	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	Div by 0	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	\$22,191	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	\$894	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	\$8,530	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	\$14,414	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	\$49,930	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	\$58,111	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	Div by 0	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>											
<i>Expenditures for Family Planning enrollees with Restricted Benefits</i>											
Expenditures for ONLY FP Only enrollees	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A	N/A
Average Medicaid Paid for ONLY FP Only enrollees	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A	N/A
<i>Expenditures for Aliens with Restricted Benefits</i>											
Expend for Aliens with restricted benefits ONLY enrollment	N/A	\$1,765,995	N/A	\$839,671	N/A	\$1,017,844	N/A	-52.50	21.22	N/A	N/A
Avg Medicaid Paid for Alien enrollees with restricted benefits ONLY	N/A	\$303	N/A	\$160	N/A	\$238	N/A	-47.20	48.60	N/A	N/A
<i>Expenditures for EDB Duals with Restricted Benefits (Medicare Cost Sharing Only - Code 3)</i>											



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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	\$809,697	N/A	\$924,307	N/A	\$1,055,648	N/A	14.15	14.21	N/A	N/A
Avg Medicaid Paid for EDB Duals with only restricted benefit enrollment	N/A	\$89	N/A	\$103	N/A	\$112	N/A	15.79	8.90	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	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A	N/A
Avg Medicaid Paid for Prescription Drug ONLY enrollees	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A	N/A
<b>Dual Prescription Drug Enrollees</b>											
Expenditures for Prescription Drug ONLY enrollees who are also EDB duals	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A	N/A
<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	718,066	N/A	735,827	N/A	750,532	N/A	2.47	2.00	10% (+/-)	Yes
MAX Aged Total	N/A	81,441	N/A	82,532	N/A	84,348	N/A	1.34	2.20	10% (+/-)	Yes
MAX Disabled Total	N/A	100,220	N/A	103,579	N/A	106,591	N/A	3.35	2.91	10% (+/-)	Yes
MAX Child Total	N/A	372,518	N/A	381,129	N/A	387,183	N/A	2.31	1.59	10% (+/-)	Yes
MAX Adult Total	N/A	163,887	N/A	168,587	N/A	172,410	N/A	2.87	2.27	10% (+/-)	Yes
Total Medicaid PYE (Person Years of Enrollment)	N/A	549,217	N/A	564,912	N/A	577,337	N/A	2.86	2.20	10% (+/-)	Yes
Total EDB Duals	N/A	124,610	N/A	127,989	N/A	132,148	N/A	2.71	3.25	10% (+/-)	Yes
MAX Aged	N/A	77,473	N/A	78,144	N/A	79,799	N/A	0.87	2.12	10% (+/-)	Yes
MAX Disabled	N/A	45,349	N/A	47,643	N/A	49,691	N/A	5.06	4.30	10% (+/-)	Yes
<b>Total Medicaid Amount Paid</b>											
Total Medicaid Amt Paid	N/A	\$4,545,230,230	N/A	\$5,171,353,641	N/A	\$5,458,487,460	N/A	13.78	5.55	15% (+/-)	Yes
Average Medicaid Amt Paid per Enrollee	N/A	\$6,330	N/A	\$7,028	N/A	\$7,273	N/A	11.03	3.48	15% (+/-)	Yes
<b>AVG MEDICAID AMT PD/ENROLLEE BY MAX ELIGIBILITY GROUP</b>											
MAX Aged	N/A	\$13,547	N/A	\$16,483	N/A	\$16,555	N/A	21.67	0.44	15% (+/-)	Yes
MAX Disabled	N/A	\$22,383	N/A	\$23,505	N/A	\$24,971	N/A	5.01	6.24	10% (+/-)	Yes
MAX Child	N/A	\$2,136	N/A	\$2,421	N/A	\$2,329	N/A	13.33	-3.77	10% (+/-)	Yes
MAX Adult	N/A	\$2,459	N/A	\$2,692	N/A	\$2,891	N/A	9.46	7.41	10% (+/-)	Yes
<b>AVG MEDICAID AMT PD/EDB DUAL ENROLLEE</b>											
All EDB Dual Enrollees	N/A	\$17,680	N/A	\$19,829	N/A	\$20,548	N/A	12.15	3.62	15% (+/-)	Yes
MAX Aged	N/A	\$13,859	N/A	\$16,920	N/A	\$17,035	N/A	22.09	0.68	10% (+/-)	Yes
MAX Disabled	N/A	\$24,779	N/A	\$25,343	N/A	\$27,009	N/A	2.28	6.58	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	71.14	N/A	71.25	N/A	71.66	N/A	0.15	0.58	25% (+)	Yes
Total MC Enrollees	N/A	510,838	N/A	524,276	N/A	537,856	N/A	2.63	2.59	25% (+)	Yes
Aged	N/A	47,030	N/A	47,888	N/A	49,763	N/A	1.82	3.92	25% (+)	Yes
Disabled	N/A	8,385	N/A	8,500	N/A	8,626	N/A	1.37	1.48	25% (+)	Yes
Child	N/A	320,181	N/A	328,845	N/A	336,908	N/A	2.71	2.45	25% (+)	Yes
Adult	N/A	135,242	N/A	139,043	N/A	142,559	N/A	2.81	2.53	25% (+)	Yes
% of MC Enrollees in HMO/HIO (Dups)	N/A	100.00	N/A	100.00	N/A	100.00	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	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
% of MC Enrollees in PCCM (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%	38.37	No	38.07	No	38.14	No	-0.77	0.18	25% (+)	Yes
% EDB Duals in PHP only or PHP/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
% 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	43.36	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	0.00	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	552,094	N/A	566,182	N/A	578,973	N/A	2.55	2.26	25% (+)	Yes
June % HMO/HIO only (Code 1)	N/A	65.93	N/A	64.11	N/A	65.64	N/A	-2.77	2.38	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	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
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	34.07	N/A	35.89	N/A	34.36	N/A	5.36	-4.26	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	\$1,081,301,814	N/A	\$1,248,228,243	N/A	\$1,333,830,345	N/A	15.44	6.86	15% (+/-)	Yes
HMO/HIO	N/A	\$1,081,301,814	N/A	\$1,248,228,243	N/A	\$1,333,830,345	N/A	15.44	6.86	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	0.93	Yes	1.00	Yes	0.92	Yes	7.60	-7.45	15% (+/-)	Yes
HMO/HIO	-9-2	0.93	Yes	1.00	Yes	0.92	Yes	7.60	-7.45	15% (+/-)	Yes
PHP	-9-2	Div by 0	No	Div by 0	No	Div by 0	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	\$254	N/A	\$288	N/A	\$297	N/A	13.17	3.27	15% (+/-)	Yes
HMO/HIO	N/A	\$254	N/A	\$288	N/A	\$297	N/A	13.17	3.27	15% (+/-)	Yes
PHP	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
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	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Total Medicaid Amt Paid	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
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 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	510,838	N/A	524,276	N/A	537,856	N/A	2.63	2.59	15% (+/-)	Yes
Aged	N/A	47,030	N/A	47,888	N/A	49,763	N/A	1.82	3.92	25% (+)	Yes
Disabled	N/A	8,385	N/A	8,500	N/A	8,626	N/A	1.37	1.48	25% (+)	Yes
Child	N/A	320,181	N/A	328,845	N/A	336,908	N/A	2.71	2.45	25% (+)	Yes
Adult	N/A	135,242	N/A	139,043	N/A	142,559	N/A	2.81	2.53	25% (+)	Yes
Total Ever Enrolled in HMO/HIO PYE	N/A	354,699	N/A	361,813	N/A	374,372	N/A	2.01	3.47	25% (+)	Yes
Total Cap Payments	N/A	\$1,081,301,814	N/A	\$1,248,228,243	N/A	\$1,333,830,345	N/A	15.44	6.86	15% (+/-)	Yes
Average Cap Payments	N/A	\$2,117	N/A	\$2,381	N/A	\$2,480	N/A	12.48	4.16	15% (+/-)	Yes
Aged	N/A	\$5,407	N/A	\$6,507	N/A	\$6,733	N/A	20.34	3.48	15% (+/-)	Yes
Disabled	N/A	\$3,445	N/A	\$5,080	N/A	\$6,060	N/A	47.44	19.29	15% (+/-)	No
Child	N/A	\$1,577	N/A	\$1,703	N/A	\$1,737	N/A	8.04	1.96	15% (+/-)	Yes
Adult	N/A	\$2,169	N/A	\$2,397	N/A	\$2,535	N/A	10.53	5.75	15% (+/-)	Yes
Total FFS Payments	N/A	\$930,345,133	N/A	\$1,170,992,559	N/A	\$1,161,166,852	N/A	25.87	-0.84	15% (+/-)	Yes
Average FFS Payments per enrollee	N/A	\$1,821.21	N/A	\$2,234	N/A	\$2,159	N/A	22.64	-3.34	15% (+/-)	Yes
Aged	N/A	\$13,422.71	N/A	\$16,816	N/A	\$16,597	N/A	25.28	-1.30	15% (+/-)	Yes
Disabled	N/A	\$9,315.70	N/A	\$10,696	N/A	\$11,443	N/A	14.82	6.98	15% (+/-)	Yes
Child	N/A	\$506.04	N/A	\$646	N/A	\$496	N/A	27.62	-23.20	15% (+/-)	No
Adult	N/A	\$435.80	N/A	\$449	N/A	\$487	N/A	2.99	8.54	15% (+/-)	Yes
Total FFS Payments by Type of Service											
IP	N/A	\$71,711,875	N/A	\$120,985,019	N/A	\$88,023,059	N/A	68.71	-27.20	15% (+/-)	No

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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
ILTC	N/A	\$508,181,667	N/A	\$671,325,868	N/A	\$669,731,868	N/A	32.10	-0.24	15% (+/-)	Yes
Drug	N/A	\$34,429,578	N/A	\$32,448,978	N/A	\$34,900,044	N/A	-5.75	7.55	15% (+/-)	Yes
All Other (excluding cap payments)	N/A	\$316,022,013	N/A	\$346,232,694	N/A	\$368,511,881	N/A	9.56	6.44	15% (+/-)	Yes
Average FFS Payments by Type of Service											
IP	N/A	\$140	N/A	\$231	N/A	\$164	N/A	64.39	-29.10	15% (+/-)	No
ILTC	N/A	\$995	N/A	\$1,280	N/A	\$1,245	N/A	28.72	-2.76	15% (+/-)	Yes
Drug	N/A	\$67	N/A	\$62	N/A	\$65	N/A	-8.17	4.84	15% (+/-)	Yes
All Other (excluding cap payments)	N/A	\$619	N/A	\$660	N/A	\$685	N/A	6.75	3.75	15% (+/-)	Yes
<b>FFS INFORMATION FOR NON-DUAL MEDICAID ENROLLEES</b> (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) ---- <b>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	130,429	N/A	132,290	N/A	130,929	N/A	1.43	-1.03	15% (+/-)	Yes
Total Non-Dual FFS Recipients	N/A	100,156	N/A	102,587	N/A	100,096	N/A	2.43	-2.43	15% (+/-)	Yes
Total Non-Dual FFS PYE	N/A	82,123	N/A	85,975	N/A	83,831	N/A	4.69	-2.49	15% (+/-)	Yes
MAX Aged Total	N/A	2,155	N/A	2,381	N/A	2,239	N/A	10.49	-5.96	10% (+/-)	Yes
11: Aged, Cash	N/A	92	N/A	113	N/A	121	N/A	22.83	7.08	10% (+/-)	Yes
21: Aged, MN	N/A	105	N/A	89	N/A	100	N/A	-15.20	12.36	10% (+/-)	No
31: Aged, Poverty	N/A	342	N/A	446	N/A	50	N/A	30.41	-88.80	10% (+/-)	No
41: Other Aged	N/A	1,616	N/A	1,733	N/A	1,967	N/A	7.24	13.50	10% (+/-)	No
51: 1115 Aged	N/A	0	N/A	0	N/A	1	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Disabled Total	N/A	48,231	N/A	49,306	N/A	50,135	N/A	2.23	1.68	10% (+/-)	Yes
12: Disabled, Cash	N/A	36,177	N/A	37,203	N/A	37,249	N/A	2.84	0.12	10% (+/-)	Yes
22: Disabled, MN	N/A	1,113	N/A	1,190	N/A	1,317	N/A	6.92	10.67	10% (+/-)	No
32: Disabled, Poverty	N/A	5,863	N/A	6,410	N/A	2,146	N/A	9.33	-66.50	10% (+/-)	No
42: Other Disabled	N/A	5,078	N/A	4,503	N/A	9,378	N/A	-11.30	108.30	10% (+/-)	No
52: 1115 Disabled	N/A	0	N/A	0	N/A	45	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Child Total	N/A	52,327	N/A	52,275	N/A	50,258	N/A	-0.10	-3.86	10% (+/-)	Yes
14: AFDC Child, Cash	N/A	31,105	N/A	34,795	N/A	32,127	N/A	11.86	-7.67	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	778	N/A	870	N/A	993	N/A	11.83	14.14	10% (+/-)	No
34: Child Poverty	N/A	6,933	N/A	7,005	N/A	7,153	N/A	1.04	2.11	10% (+/-)	Yes
44: Other Child	N/A	9,359	N/A	4,850	N/A	4,319	N/A	-48.20	-10.90	10% (+/-)	No
48: Foster Care Child	N/A	3,783	N/A	4,632	N/A	5,279	N/A	22.44	13.97	10% (+/-)	No
54: 1115 Child	N/A	369	N/A	123	N/A	387	N/A	-66.70	214.60	10% (+/-)	No
MAX Adult Total	N/A	27,716	N/A	28,328	N/A	28,297	N/A	2.21	-0.11	10% (+/-)	Yes
15: AFDC Adult, Cash	N/A	20,210	N/A	23,152	N/A	22,464	N/A	14.56	-2.97	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	1,688	N/A	1,640	N/A	1,705	N/A	-2.84	3.96	10% (+/-)	Yes
35: Adult, Poverty	N/A	1,636	N/A	1,867	N/A	2,015	N/A	14.12	7.93	10% (+/-)	Yes
45: Other Adult	N/A	4,104	N/A	1,604	N/A	1,869	N/A	-60.90	16.52	10% (+/-)	No
55: 1115 Adult	N/A	78	N/A	65	N/A	244	N/A	-16.70	275.40	10% (+/-)	No
# Non-Dual FFS Enrollees w/ MSIS Dual Code/No EDB Confirmation	N/A	676	N/A	584	N/A	424	N/A	-13.60	-27.40	10% (+/-)	No
Total FFS Medicaid Amt Paid	N/A	\$1,226,864,189	N/A	\$1,345,101,476	N/A	\$1,425,970,869	N/A	9.64	6.01	15% (+/-)	Yes
Average FFS Medicaid Amt Paid per Non-Dual FFS Enrollee	N/A	\$9,406	N/A	\$10,168	N/A	\$10,891	N/A	8.10	7.11	15% (+/-)	Yes
Avg FFS Medicaid Amt Paid per Non-Dual FFS Recipient (User of any service)	N/A	\$12,250	N/A	\$13,112	N/A	\$14,246	N/A	7.04	8.65	15% (+/-)	Yes
<b>AVG FFS MEDICAID AMT PD/NON-DUAL FFS ENROLLEE BY MAX ELIG GRP</b>											
All Aged	N/A	\$3,372	N/A	\$3,977	N/A	\$3,852	N/A	17.93	-3.15	15% (+/-)	Yes
11: Aged, Cash	N/A	\$12,421	N/A	\$9,704	N/A	\$9,933	N/A	-21.90	2.36	15% (+/-)	Yes
21: Aged, MN	N/A	\$10,389	N/A	\$12,416	N/A	\$12,595	N/A	19.51	1.45	15% (+/-)	Yes
31: Aged, Poverty	N/A	\$3,703	N/A	\$4,383	N/A	\$3,556	N/A	18.38	-18.90	15% (+/-)	No
41: Other Aged	N/A	\$2,331	N/A	\$3,066	N/A	\$3,042	N/A	31.50	-0.76	15% (+/-)	Yes
51: 1115 Aged	N/A	Div by 0	N/A	Div by 0	N/A	\$233	N/A	Div by 0	Div by 0	15% (+/-)	N/A
All Disabled	N/A	\$21,618	N/A	\$22,962	N/A	\$24,118	N/A	6.22	5.03	15% (+/-)	Yes
12: Disabled, Cash	N/A	\$21,948	N/A	\$23,043	N/A	\$24,665	N/A	4.99	7.04	15% (+/-)	Yes
22: Disabled, MN	N/A	\$21,347	N/A	\$23,919	N/A	\$22,483	N/A	12.05	-6.00	15% (+/-)	Yes
32: Disabled, Poverty	N/A	\$27,526	N/A	\$27,017	N/A	\$14,187	N/A	-1.85	-47.50	15% (+/-)	No
42: Other Disabled	N/A	\$12,509	N/A	\$16,273	N/A	\$24,548	N/A	30.09	50.85	15% (+/-)	No
52: 1115 Disabled	N/A	Div by 0	N/A	Div by 0	N/A	\$3,263	N/A	Div by 0	Div by 0	15% (+/-)	N/A

2003-2005 MAX PSF VALIDATION TABLE  
STATE: MN

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	\$2,460	N/A	\$2,867	N/A	\$2,965	N/A	16.54	3.41	15% (+/-)	Yes
14: AFDC Child, Cash	N/A	\$2,066	N/A	\$1,969	N/A	\$2,131	N/A	-4.73	8.23	15% (+/-)	Yes
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	\$1,935	N/A	\$2,843	N/A	\$1,709	N/A	46.88	-39.90	15% (+/-)	No
34: Child, Poverty	N/A	\$842	N/A	\$1,135	N/A	\$1,835	N/A	34.80	61.63	15% (+/-)	No
44: Other Child	N/A	\$1,676	N/A	\$4,050	N/A	\$2,032	N/A	141.70	-49.80	15% (+/-)	No
48: Foster Care Child	N/A	\$10,803	N/A	\$10,998	N/A	\$10,752	N/A	1.81	-2.24	15% (+/-)	Yes
54: 1115 Child	N/A	\$1,532	N/A	\$2,934	N/A	\$520	N/A	91.57	-82.30	15% (+/-)	No
All Adult	N/A	\$1,739	N/A	\$1,891	N/A	\$2,091	N/A	8.78	10.58	15% (+/-)	Yes
15: AFDC Adult, Cash	N/A	\$1,978	N/A	\$2,046	N/A	\$2,341	N/A	3.48	14.38	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	\$1,954	N/A	\$1,926	N/A	\$1,883	N/A	-1.48	-2.19	15% (+/-)	Yes
35: Adult, Poverty	N/A	\$731	N/A	\$770	N/A	\$744	N/A	5.38	-3.41	15% (+/-)	Yes
45: Other Adult	N/A	\$898	N/A	\$972	N/A	\$872	N/A	8.30	-10.30	15% (+/-)	Yes
55: 1115 Adult	N/A	\$487	N/A	\$597	N/A	\$1,032	N/A	22.59	72.97	15% (+/-)	No
<b>FFS EXPENDITURES AND USERS BY MAX TOS</b>											
IP: Total Medicaid Paid (TOS 01)	N/A	\$177,532,467	N/A	\$199,403,631	N/A	\$204,437,589	N/A	12.32	2.53	15% (+/-)	Yes
IP: Number of Users	N/A	17,872	N/A	16,801	N/A	15,918	N/A	-5.99	-5.26	15% (+/-)	Yes
IP: Average Medicaid Pd per User	N/A	\$9,934	N/A	\$11,869	N/A	\$12,843	N/A	19.48	8.21	15% (+/-)	Yes
IP: Average Medicaid Covered Days Per User	N/A	7	N/A	8	N/A	8	N/A	9.12	8.00	15% (+/-)	Yes
MH Aged: Total Medicaid Paid (TOS 02)	N/A	\$0	N/A	\$0	N/A	\$8,520	N/A	Div by 0	Div by 0	15% (+/-)	N/A
MH Aged: Number of Users	N/A	0	N/A	0	N/A	1	N/A	Div by 0	Div by 0	15% (+/-)	N/A
MH Aged: Avg Medicaid Pd per User	N/A	Div by 0	N/A	Div by 0	N/A	\$8,520	N/A	Div by 0	Div by 0	15% (+/-)	N/A
IP Psych < 21: Total Medicaid Paid (TOS 04)	N/A	\$9,247,293	N/A	\$10,128,222	N/A	\$10,800,050	N/A	9.53	6.63	15% (+/-)	Yes
IP Psych < 21: Number of Users	N/A	299	N/A	440	N/A	429	N/A	47.16	-2.50	15% (+/-)	Yes
IP Psych<21 :Avg Medicaid Pd per User	N/A	\$30,927	N/A	\$23,019	N/A	\$25,175	N/A	-25.60	9.37	15% (+/-)	Yes
ICF/MR: Total Medicaid Pd (TOS 05)	N/A	\$53,375,269	N/A	\$49,265,318	N/A	\$45,589,152	N/A	-7.70	-7.46	15% (+/-)	Yes
ICF/MR: Number of Users	N/A	839	N/A	840	N/A	823	N/A	0.12	-2.02	15% (+/-)	Yes
ICF/MR: Avg Medicaid Pd per User	N/A	\$63,618	N/A	\$58,649	N/A	\$55,394	N/A	-7.81	-5.55	15% (+/-)	Yes
NF: Total Medicaid Paid (TOS 07)	N/A	\$40,309,758	N/A	\$44,032,355	N/A	\$45,227,480	N/A	9.24	2.71	15% (+/-)	Yes
NF Number of Users	N/A	2,403	N/A	2,216	N/A	2,403	N/A	-7.78	8.44	15% (+/-)	Yes
NF:Avg Medicaid Pd per User	N/A	\$16,775	N/A	\$19,870	N/A	\$18,821	N/A	18.45	-5.28	15% (+/-)	Yes
Physician: Total Medicaid Paid (TOS 08)	N/A	\$59,214,976	N/A	\$65,427,676	N/A	\$67,846,943	N/A	10.49	3.70	15% (+/-)	Yes
Physician: Number of Users	N/A	76,330	N/A	77,312	N/A	74,597	N/A	1.29	-3.51	15% (+/-)	Yes
Physician: Avg Medicaid Pd per User	N/A	\$776	N/A	\$846	N/A	\$910	N/A	9.09	7.47	15% (+/-)	Yes
Dental: Total Medicaid Paid (TOS 09)	N/A	\$9,127,552	N/A	\$9,961,919	N/A	\$10,035,381	N/A	9.14	0.74	15% (+/-)	Yes
Dental: Number of Users	N/A	28,600	N/A	30,378	N/A	29,338	N/A	6.22	-3.42	15% (+/-)	Yes
Dental: Avg Medicaid Pd per User	N/A	\$319	N/A	\$328	N/A	\$342	N/A	2.75	4.31	15% (+/-)	Yes
Other Practitioner: Total Medicaid Pd (TOS 10)	N/A	\$3,413,171	N/A	\$17,701,519	N/A	\$19,908,429	N/A	418.60	12.47	15% (+/-)	Yes
Other Practitioner: Number of Users	N/A	25,026	N/A	27,254	N/A	27,260	N/A	8.90	0.02	15% (+/-)	Yes
Other Practitioner: Avg Medicaid Pd per User	N/A	\$136	N/A	\$650	N/A	\$730	N/A	376.20	12.44	15% (+/-)	Yes
OPD: Total Medicaid Paid (TOS 11)	N/A	\$24,486,034	N/A	\$27,184,178	N/A	\$28,842,586	N/A	11.02	6.10	15% (+/-)	Yes
OPD Number of Users	N/A	44,206	N/A	43,021	N/A	42,936	N/A	-2.68	-0.20	15% (+/-)	Yes
OPD: Avg Medicaid Pd per User	N/A	\$554	N/A	\$632	N/A	\$672	N/A	14.08	6.31	15% (+/-)	Yes
Clinic: Total Medicaid Paid (TOS 12)	N/A	\$11,047,227	N/A	\$11,385,477	N/A	\$11,566,368	N/A	3.06	1.59	15% (+/-)	Yes
Clinic: Number of Users	N/A	13,881	N/A	14,478	N/A	14,074	N/A	4.30	-2.79	15% (+/-)	Yes
Clinic: Avg Medicaid Pd per User	N/A	\$796	N/A	\$786	N/A	\$822	N/A	-1.19	4.51	15% (+/-)	Yes
HH: Total Medicaid Paid (TOS 13)	N/A	\$11,820,494	N/A	\$16,506,753	N/A	\$8,588,403	N/A	39.65	-48.00	15% (+/-)	No
HH: Number of Users	N/A	7,963	N/A	6,755	N/A	5,060	N/A	-15.20	-25.10	15% (+/-)	No
HH: Avg Medicaid Pd per User	N/A	\$1,484	N/A	\$2,444	N/A	\$1,697	N/A	64.62	-30.50	15% (+/-)	No
Lab/Xray: Total Medicaid Paid (TOS 15)	N/A	\$26,543,136	N/A	\$30,002,302	N/A	\$32,062,661	N/A	13.03	6.87	15% (+/-)	Yes
Lab/Xray: Number of Users	N/A	58,269	N/A	60,051	N/A	57,697	N/A	3.06	-3.92	15% (+/-)	Yes
Lab/Xray:Avg Medicaid Pd per User	N/A	\$456	N/A	\$500	N/A	\$556	N/A	9.68	11.23	15% (+/-)	Yes
Drugs: Total Medicaid Paid (TOS 16)	N/A	\$136,907,540	N/A	\$151,417,806	N/A	\$165,198,735	N/A	10.60	9.10	15% (+/-)	Yes
Drugs: Number of Users	N/A	73,888	N/A	75,191	N/A	73,912	N/A	1.76	-1.70	15% (+/-)	Yes
Drugs: Avg Medicaid Pd per User	N/A	\$1,853	N/A	\$2,014	N/A	\$2,235	N/A	8.68	10.99	15% (+/-)	Yes
Other Services: Total Medicaid Paid (TOS 19)	N/A	\$46,595,238	N/A	\$122,154,169	N/A	\$84,009,133	N/A	162.20	-31.20	15% (+/-)	No

2003-2005 MAX PSF VALIDATION TABLE  
STATE: MN

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	23,454	N/A	28,665	N/A	30,149	N/A	22.22	5.18	15% (+/-)	Yes
Other Services: Avg Medicaid Pd per User	N/A	\$1,987	N/A	\$4,261	N/A	\$2,786	N/A	114.50	-34.60	15% (+/-)	No
Transportation: Total Medicaid Paid (TOS 26)	N/A	\$14,514,195	N/A	\$14,361,487	N/A	\$13,348,449	N/A	-1.05	-7.05	15% (+/-)	Yes
Transportation: Number of Users	N/A	10,815	N/A	10,709	N/A	10,746	N/A	-0.98	0.35	15% (+/-)	Yes
Transportation: Avg Medicaid Pd per User	N/A	\$1,342	N/A	\$1,341	N/A	\$1,242	N/A	-0.07	-7.37	15% (+/-)	Yes
PCS: Total Medicaid Paid (TOS 30)	N/A	\$119,851,295	N/A	\$154,337,866	N/A	\$213,445,734	N/A	28.77	38.30	15% (+/-)	No
PCS: Number of Users	N/A	8,538	N/A	10,421	N/A	12,033	N/A	22.05	15.47	15% (+/-)	No
PCS: Avg Medicaid Pd per User	N/A	\$14,037	N/A	\$14,810	N/A	\$17,738	N/A	5.51	19.77	15% (+/-)	No
Target Case Management: Total Medicaid Pd (TOS 31)	N/A	\$50,104,596	N/A	\$70,222,407	N/A	\$67,670,078	N/A	40.15	-3.63	15% (+/-)	Yes
Target Case Management: Number of Users	N/A	21,953	N/A	26,118	N/A	26,184	N/A	18.97	0.25	15% (+/-)	Yes
Target Case Management: Avg Medicaid Pd per User	N/A	\$2,282	N/A	\$2,689	N/A	\$2,584	N/A	17.80	-3.88	15% (+/-)	Yes
Rehab Services: Total Medicaid Pd (TOS 33)	N/A	\$100,210,764	N/A	\$35,523,803	N/A	\$31,960,371	N/A	-64.60	-10.00	15% (+/-)	Yes
Rehab Services: Number of Users	N/A	5,262	N/A	3,409	N/A	2,873	N/A	-35.20	-15.70	15% (+/-)	No
Rehab Services: Avg Medicaid Pd per User	N/A	\$19,044	N/A	\$10,421	N/A	\$11,124	N/A	-45.30	6.75	15% (+/-)	Yes
PT/OT/Speech/Hear: Total Medicaid Paid (TOS 34)	N/A	\$3,466,167	N/A	\$4,240,467	N/A	\$4,275,564	N/A	22.34	0.83	15% (+/-)	Yes
PT/OT/Speech/Hear: Number of Users	N/A	4,172	N/A	4,103	N/A	4,248	N/A	-1.65	3.53	15% (+/-)	Yes
PT/OT/Speech/Hear: Avg Medicaid Pd per User	N/A	\$831	N/A	\$1,034	N/A	\$1,006	N/A	24.40	-2.61	15% (+/-)	Yes
Hospice: Total Medicaid Paid (TOS 35)	N/A	\$2,269,805	N/A	\$2,382,309	N/A	\$2,366,351	N/A	4.96	-0.67	15% (+/-)	Yes
Hospice: Number of Users	N/A	249	N/A	259	N/A	256	N/A	4.02	-1.16	15% (+/-)	Yes
Hospice: Avg Medicaid Pd per User	N/A	\$9,116	N/A	\$9,198	N/A	\$9,244	N/A	0.90	0.49	15% (+/-)	Yes
DME: Total Medicaid Paid (TOS 51)	N/A	\$31,264,955	N/A	\$34,394,217	N/A	\$90,435,376	N/A	10.01	162.90	15% (+/-)	No
DME: Number of Users	N/A	26,329	N/A	35,322	N/A	36,842	N/A	34.16	4.30	15% (+/-)	Yes
DME: Avg Medicaid Pd per User	N/A	\$1,187	N/A	\$974	N/A	\$2,455	N/A	-18.00	152.10	15% (+/-)	No
Residential Care: Total Medicaid Paid (TOS 52)	N/A	\$135,118,408	N/A	\$142,307,429	N/A	\$118,220,873	N/A	5.32	-16.90	15% (+/-)	No
Residential Care: Number of Users	N/A	3,667	N/A	3,744	N/A	2,797	N/A	2.10	-25.30	15% (+/-)	No
Residential Care: Avg Medicaid Pd per User	N/A	\$36,847	N/A	\$38,009	N/A	\$42,267	N/A	3.15	11.20	15% (+/-)	Yes
Psych. Services: Total Medicaid Paid (TOS 53)	N/A	\$98,204,474	N/A	\$60,752,451	N/A	\$75,649,461	N/A	-38.10	24.52	15% (+/-)	No
Psych. Services: Number of Users	N/A	32,309	N/A	30,410	N/A	30,463	N/A	-5.88	0.17	15% (+/-)	Yes
Psych. Services: Avg Medicaid Pd per User	N/A	\$3,040	N/A	\$1,998	N/A	\$2,483	N/A	-34.30	24.30	15% (+/-)	No
Adult Day Care: Total Medicaid Paid (TOS 54)	N/A	\$30,467,890	N/A	\$35,713,869	N/A	\$32,363,252	N/A	17.22	-9.38	15% (+/-)	Yes
Adult Day Care: Number of Users	N/A	2,382	N/A	2,891	N/A	2,729	N/A	21.37	-5.60	15% (+/-)	Yes
Adult Day Care: Avg Medicaid Pd per User	N/A	\$12,791	N/A	\$12,353	N/A	\$11,859	N/A	-3.42	-4.00	15% (+/-)	Yes
<b>AVG FFS MEDICAID AMT PD/NON-DUAL FFS ENROLLEE BY MAX TOS</b>											
Inpatient Hospital (TOS 01)	N/A	\$1,361	N/A	\$1,507	N/A	\$1,561	N/A	10.74	3.59	15% (+/-)	Yes
Aged	N/A	\$1,076	N/A	\$1,127	N/A	\$1,156	N/A	4.77	2.56	15% (+/-)	Yes
Disabled	N/A	\$2,680	N/A	\$2,935	N/A	\$3,132	N/A	9.54	6.70	15% (+/-)	Yes
Child	N/A	\$558	N/A	\$662	N/A	\$527	N/A	18.65	-20.30	15% (+/-)	No
Adult	N/A	\$606	N/A	\$614	N/A	\$648	N/A	1.42	5.52	15% (+/-)	Yes
ILTC (TOS=02,04,05,07)	N/A	\$789	N/A	\$782	N/A	\$776	N/A	-0.93	-0.72	15% (+/-)	Yes
Aged	N/A	\$689	N/A	\$809	N/A	\$853	N/A	17.39	5.50	15% (+/-)	Yes
Disabled	N/A	\$1,963	N/A	\$1,907	N/A	\$1,825	N/A	-2.89	-4.29	15% (+/-)	Yes
Child	N/A	\$113	N/A	\$131	N/A	\$142	N/A	16.03	8.51	15% (+/-)	Yes
Adult	N/A	\$30	N/A	\$22	N/A	\$38	N/A	-26.00	68.84	15% (+/-)	No
Drugs (TOS=16)	N/A	\$1,050	N/A	\$1,145	N/A	\$1,262	N/A	9.04	10.24	15% (+/-)	Yes
Aged	N/A	\$265	N/A	\$316	N/A	\$325	N/A	18.95	2.85	15% (+/-)	Yes
Disabled	N/A	\$2,449	N/A	\$2,624	N/A	\$2,819	N/A	7.16	7.44	15% (+/-)	Yes
Child	N/A	\$219	N/A	\$262	N/A	\$295	N/A	20.10	12.35	15% (+/-)	Yes
Adult	N/A	\$245	N/A	\$267	N/A	\$293	N/A	8.89	9.90	15% (+/-)	Yes
All Other Services	N/A	\$6,206	N/A	\$6,734	N/A	\$7,292	N/A	8.50	8.28	15% (+/-)	Yes
Aged	N/A	\$1,342	N/A	\$1,726	N/A	\$1,518	N/A	28.55	-12.00	15% (+/-)	Yes
Disabled	N/A	\$14,527	N/A	\$15,497	N/A	\$16,342	N/A	6.68	5.46	15% (+/-)	Yes
Child	N/A	\$1,571	N/A	\$1,811	N/A	\$2,000	N/A	15.33	10.43	15% (+/-)	Yes
Adult	N/A	\$858	N/A	\$988	N/A	\$1,112	N/A	15.17	12.59	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	13.70	N/A	12.70	N/A	12.16	N/A	-7.32	-4.27	15% (+/-)	Yes
Aged	N/A	7.70	N/A	8.15	N/A	8.17	N/A	5.78	0.31	15% (+/-)	Yes
Disabled	N/A	16.91	N/A	17.18	N/A	17.05	N/A	1.59	-0.74	15% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: MN

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	12.47	N/A	9.83	N/A	8.52	N/A	-21.10	-13.40	15% (+/-)	Yes
Adult	N/A	10.93	N/A	10.58	N/A	10.27	N/A	-3.13	-2.93	15% (+/-)	Yes
% Non-Dual FFS Enrollees with ILTC Claims (TOS=02,04,05,07)	N/A	2.67	N/A	2.59	N/A	2.71	N/A	-2.77	4.66	15% (+/-)	Yes
Aged	N/A	4.50	N/A	3.36	N/A	3.89	N/A	-25.40	15.65	15% (+/-)	No
Disabled	N/A	5.80	N/A	5.63	N/A	5.62	N/A	-3.05	-0.06	15% (+/-)	Yes
Child	N/A	0.85	N/A	0.90	N/A	0.97	N/A	6.41	7.32	15% (+/-)	Yes
Adult	N/A	0.49	N/A	0.36	N/A	0.56	N/A	-26.40	54.54	15% (+/-)	No
% with ratio of ILTC days/enroll days > 1	N/A	6.50	N/A	0.15	N/A	0.37	N/A	-97.80	151.00	15% (+/-)	No
% Non-Dual FFS Enrollees with Drug Claims (TOS=16)	N/A	56.65	N/A	56.84	N/A	56.45	N/A	0.33	-0.68	15% (+/-)	Yes
Aged	N/A	22.83	N/A	25.03	N/A	22.20	N/A	9.64	-11.30	15% (+/-)	Yes
Disabled	N/A	84.39	N/A	83.93	N/A	83.53	N/A	-0.54	-0.48	15% (+/-)	Yes
Child	N/A	40.02	N/A	41.18	N/A	40.31	N/A	2.89	-2.10	15% (+/-)	Yes
Adult	N/A	42.40	N/A	41.25	N/A	39.85	N/A	-2.71	-3.40	15% (+/-)	Yes
% Non-Dual FFS Enrollees with All Other Claims	N/A	74.23	N/A	75.00	N/A	73.71	N/A	1.04	-1.72	15% (+/-)	Yes
Aged	N/A	30.86	N/A	36.20	N/A	28.05	N/A	17.32	-22.50	15% (+/-)	No
Disabled	N/A	93.60	N/A	93.68	N/A	93.45	N/A	0.09	-0.25	15% (+/-)	Yes
Child	N/A	65.06	N/A	65.78	N/A	62.92	N/A	1.10	-4.34	15% (+/-)	Yes
Adult	N/A	61.19	N/A	62.78	N/A	61.53	N/A	2.59	-1.98	15% (+/-)	Yes
Avg # IP Days per Non-Dual FFS User	N/A	7	N/A	8	N/A	8	N/A	9.12	8.00	15% (+/-)	Yes
Aged	N/A	8	N/A	8	N/A	8	N/A	-6.09	2.22	15% (+/-)	Yes
Disabled	N/A	11	N/A	11	N/A	12	N/A	1.46	6.67	15% (+/-)	Yes
Child	N/A	4	N/A	5	N/A	5	N/A	19.11	-3.14	15% (+/-)	Yes
Adult	N/A	4	N/A	4	N/A	4	N/A	0.99	8.99	15% (+/-)	Yes
Avg # ILTC Days per Non-Dual FFS User	N/A	122	N/A	120	N/A	104	N/A	-1.39	-13.10	15% (+/-)	Yes
Aged	N/A	133	N/A	178	N/A	135	N/A	33.13	-23.90	15% (+/-)	No
Disabled	N/A	143	N/A	139	N/A	124	N/A	-2.75	-11.10	15% (+/-)	Yes
Child	N/A	18	N/A	21	N/A	18	N/A	14.60	-15.00	15% (+/-)	Yes
Adult	N/A	8	N/A	10	N/A	7	N/A	18.48	-31.20	15% (+/-)	No
% 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	\$1,331,440	N/A	\$1,418,729	N/A	\$1,351,005	N/A	6.56	-4.77	15% (+/-)	Yes
FP: Number of Users	N/A	6,693	N/A	6,990	N/A	6,662	N/A	4.44	-4.69	15% (+/-)	Yes
FP: Average Medicaid Pd per User	N/A	\$199	N/A	\$203	N/A	\$203	N/A	2.03	-0.09	15% (+/-)	Yes
RHC: Total Medicaid Paid (Program Type 3)	N/A	\$1,503,920	N/A	\$1,601,689	N/A	\$1,677,798	N/A	6.50	4.75	15% (+/-)	Yes
RHC: Number of Users	N/A	4,482	N/A	4,382	N/A	4,536	N/A	-2.23	3.51	15% (+/-)	Yes
RHC: Avg Medicaid Pd per User	N/A	\$336	N/A	\$366	N/A	\$370	N/A	8.93	1.20	15% (+/-)	Yes
FOHC: Total Medicaid Paid (Program Type 4)	N/A	\$4,604,443	N/A	\$5,172,718	N/A	\$5,656,726	N/A	12.34	9.36	15% (+/-)	Yes
FOHC: Number of Users	N/A	6,025	N/A	6,914	N/A	7,135	N/A	14.76	3.20	15% (+/-)	Yes
FOHC: Avg Medicaid Pd per User	N/A	\$764	N/A	\$748	N/A	\$793	N/A	-2.10	5.97	15% (+/-)	Yes
IHS: Total Medicaid Pd (Program Type 5)	N/A	\$9,271,638	N/A	\$10,051,206	N/A	\$10,661,981	N/A	8.41	6.08	15% (+/-)	Yes
IHS: Number of Users	N/A	6,359	N/A	6,451	N/A	6,595	N/A	1.45	2.23	15% (+/-)	Yes
IHS: Avg Medicaid Pd per User	N/A	\$1,458	N/A	\$1,558	N/A	\$1,617	N/A	6.86	3.76	15% (+/-)	Yes
Section 1915(c) Waiver: Total Medicaid Paid (Program Types 6 and 7)	N/A	\$366,253,287	N/A	\$380,044,630	N/A	\$388,639,820	N/A	3.77	2.26	15% (+/-)	Yes
Section 1915(c) Waiver: Number of Users	N/A	11,279	N/A	11,112	N/A	10,923	N/A	-1.48	-1.70	15% (+/-)	Yes
Section 1915(c) Waiver: Avg Medicaid Pd per User	N/A	\$32,472	N/A	\$34,201	N/A	\$35,580	N/A	5.33	4.03	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	\$668,054,089	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	38,565	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	\$17,323	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$4,990	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$17,767	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$15,990	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$3,543	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	29.45	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	14.87	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	70.77	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	4.19	N/A	N/A	N/A	15% (+/-)	No



2003-2005 MAX PSF VALIDATION TABLE  
STATE: MN

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	2.27	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	\$593,096,440	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	20,523	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	\$28,899	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$11,200	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$31,464	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$15,990	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$3,543	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	15.67	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	4.56	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	35.24	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	4.19	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	2.27	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	\$388,636,744	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	10,923	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	\$35,580	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$7,558	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$35,996	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$29,230	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$5,668	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	8.34	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	1.65	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	20.87	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	0.79	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	0.10	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	76,799	N/A	79,261	N/A	81,747	N/A	3.21	3.14	15% (+/-)	Yes
Number of EDB Dual FFS Recipients	N/A	57,558	N/A	58,850	N/A	60,950	N/A	2.25	3.57	15% (+/-)	Yes
Total EDB Dual FFS PYE	N/A	54,824	N/A	57,133	N/A	58,829	N/A	4.21	2.97	15% (+/-)	Yes
% EDB Only Dual (Code 50)	N/A	18.29	N/A	19.32	N/A	19.46	N/A	5.63	0.74	15% (+/-)	Yes
% QMB Only (Code 51)	N/A	0.33	N/A	0.25	N/A	0.15	N/A	-24.00	-40.10	15% (+/-)	No
% QMB Plus (Code 52)	N/A	39.57	N/A	40.06	N/A	40.40	N/A	1.24	0.85	15% (+/-)	Yes
% SLMB Only (Code 53)	N/A	0.74	N/A	0.65	N/A	0.53	N/A	-11.00	-18.40	15% (+/-)	No
% SLMB Plus (Code 54)	N/A	10.98	N/A	10.97	N/A	10.76	N/A	-0.11	-1.94	15% (+/-)	Yes
% QDWI (Code 55)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	-100.00	Div by 0	15% (+/-)	N/A
% QI 1 (Code 56)	N/A	0.35	N/A	0.33	N/A	0.21	N/A	-7.02	-35.70	15% (+/-)	No
% QI 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	29.75	N/A	28.42	N/A	28.49	N/A	-4.45	0.23	15% (+/-)	Yes
% Dual Type Unknown (Code 59)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	15% (+/-)	N/A
MAX Aged EDB Dual FFS Total	N/A	32,256	N/A	32,263	N/A	32,346	N/A	0.02	0.26	10% (+/-)	Yes
11: Aged, Cash	N/A	1,556	N/A	1,435	N/A	1,167	N/A	-7.78	-18.70	10% (+/-)	No
21: Aged, MN	N/A	6,562	N/A	6,076	N/A	6,627	N/A	-7.41	9.07	10% (+/-)	Yes
31: Aged, Poverty	N/A	2,396	N/A	2,525	N/A	2,303	N/A	5.38	-8.79	10% (+/-)	Yes
41: Other Aged	N/A	21,742	N/A	22,227	N/A	22,217	N/A	2.23	-0.05	10% (+/-)	Yes
51: 1115 Aged	N/A	0	N/A	0	N/A	32	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Disabled EDB Dual FFS Total	N/A	43,604	N/A	45,773	N/A	47,830	N/A	4.97	4.49	10% (+/-)	Yes
12: Disabled, Cash	N/A	20,906	N/A	20,831	N/A	21,131	N/A	-0.36	1.44	10% (+/-)	Yes
22: Disabled, MN	N/A	5,045	N/A	5,976	N/A	6,607	N/A	18.45	10.56	10% (+/-)	No
32: Disabled, Poverty	N/A	3,972	N/A	4,409	N/A	9,914	N/A	11.00	124.90	10% (+/-)	No
42: Other Disabled	N/A	13,681	N/A	14,557	N/A	10,158	N/A	6.40	-30.20	10% (+/-)	No
52: 1115 Disabled	N/A	0	N/A	0	N/A	20	N/A	Div by 0	Div by 0	10% (+/-)	N/A
Total FFS Medicaid Amt Paid	N/A	\$1,306,631,930	N/A	\$1,406,886,586	N/A	\$1,537,264,111	N/A	7.67	9.27	15% (+/-)	Yes
Average FFS Medicaid Amt Paid per FFS Dual	N/A	\$17,014	N/A	\$17,750	N/A	\$18,805	N/A	4.33	5.94	15% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: MN

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	\$22,701	N/A	\$23,906	N/A	\$25,222	N/A	5.31	5.50	15% (+/-)	Yes
<b>AVG FFS MEDICAID AMT PD/FFS DUAL BY MAX ELIGIBILITY GROUP</b>											
All Aged	N/A	\$6,525	N/A	\$7,252	N/A	\$7,012	N/A	11.14	-3.31	15% (+/-)	Yes
11: Aged, Cash	N/A	\$13,978	N/A	\$15,858	N/A	\$17,347	N/A	13.45	9.39	15% (+/-)	Yes
21: Aged, MN	N/A	\$11,061	N/A	\$12,890	N/A	\$12,753	N/A	16.53	-1.06	15% (+/-)	Yes
31: Aged, Poverty	N/A	\$14,139	N/A	\$16,091	N/A	\$15,043	N/A	13.81	-6.51	15% (+/-)	Yes
41: Other Aged	N/A	\$3,783	N/A	\$4,151	N/A	\$3,931	N/A	9.72	-5.28	15% (+/-)	Yes
51: 1115 Aged	N/A	Div by 0	N/A	Div by 0	N/A	\$1,561	N/A	Div by 0	Div by 0	15% (+/-)	N/A
All Disabled	N/A	\$25,077	N/A	\$25,522	N/A	\$27,210	N/A	1.78	6.62	15% (+/-)	Yes
12: Disabled, Cash	N/A	\$29,734	N/A	\$27,966	N/A	\$30,208	N/A	-5.94	8.02	15% (+/-)	Yes
22: Disabled, MN	N/A	\$22,161	N/A	\$29,046	N/A	\$30,799	N/A	31.07	6.03	15% (+/-)	Yes
32: Disabled, Poverty	N/A	\$25,422	N/A	\$26,267	N/A	\$20,060	N/A	3.32	-23.60	15% (+/-)	No
42: Other Disabled	N/A	\$18,935	N/A	\$20,351	N/A	\$25,667	N/A	7.48	26.12	15% (+/-)	No
52: 1115 Disabled	N/A	Div by 0	N/A	Div by 0	N/A	\$2,226	N/A	Div by 0	Div by 0	15% (+/-)	N/A
<b>FFS EXPENDITURES AND USERS BY MAX TOS</b>											
IP: Total Medicaid Paid (TOS 01)	N/A	\$22,513,511	N/A	\$23,693,664	N/A	\$27,431,678	N/A	5.24	15.78	15% (+/-)	No
IP: Number of Users	N/A	12,059	N/A	12,477	N/A	12,789	N/A	3.47	2.50	15% (+/-)	Yes
IP: Average Medicaid Pd per User	N/A	\$1,867	N/A	\$1,899	N/A	\$2,145	N/A	1.72	12.95	15% (+/-)	Yes
IP: Average Medicaid Covered Days Per User	N/A	7	N/A	7	N/A	7	N/A	-4.62	4.03	15% (+/-)	Yes
MH Aged: Total Medicaid Paid (TOS 02)	N/A	\$1,042,360	N/A	\$1,090,566	N/A	\$770,920	N/A	4.63	-29.30	15% (+/-)	No
MH Aged: Number of Users	N/A	36	N/A	44	N/A	41	N/A	22.22	-6.82	15% (+/-)	Yes
MH Aged: Avg Medicaid Pd per User	N/A	\$28,954	N/A	\$24,786	N/A	\$18,803	N/A	-14.40	-24.10	15% (+/-)	No
IP Psych < 21: Total Medicaid Paid (TOS 04)	N/A	\$388,786	N/A	\$12,477	N/A	\$243,564	N/A	-96.80	1,852.00	15% (+/-)	No
IP Psych < 21: Number of Users	N/A	8	N/A	3	N/A	9	N/A	-62.50	200.00	15% (+/-)	No
IP Psych<21 :Avg Medicaid Pd per User	N/A	\$48,598	N/A	\$4,159	N/A	\$27,063	N/A	-91.40	550.70	15% (+/-)	No
ICF/MR: Total Medicaid Pd (TOS 05)	N/A	\$127,147,265	N/A	\$115,326,476	N/A	\$117,966,666	N/A	-9.30	2.29	15% (+/-)	Yes
ICF/MR: Number of Users	N/A	1,712	N/A	1,719	N/A	1,922	N/A	0.41	11.81	15% (+/-)	Yes
ICF/MR: Avg Medicaid Pd per User	N/A	\$74,268	N/A	\$67,089	N/A	\$61,377	N/A	-9.67	-8.51	15% (+/-)	Yes
NF: Total Medicaid Paid (TOS 07)	N/A	\$155,944,904	N/A	\$175,211,496	N/A	\$163,014,511	N/A	12.35	-6.96	15% (+/-)	Yes
NF Number of Users	N/A	8,846	N/A	8,034	N/A	7,725	N/A	-9.18	-3.85	15% (+/-)	Yes
NF:Avg Medicaid Pd per User	N/A	\$17,629	N/A	\$21,809	N/A	\$21,102	N/A	23.71	-3.24	15% (+/-)	Yes
Physician: Total Medicaid Paid (TOS 08)	N/A	\$24,643,522	N/A	\$27,584,465	N/A	\$29,634,662	N/A	11.93	7.43	15% (+/-)	Yes
Physician: Number of Users	N/A	48,250	N/A	49,314	N/A	50,876	N/A	2.21	3.17	15% (+/-)	Yes
Physician: Avg Medicaid Pd per User	N/A	\$511	N/A	\$559	N/A	\$582	N/A	9.52	4.13	15% (+/-)	Yes
Dental: Total Medicaid Paid (TOS 09)	N/A	\$8,030,748	N/A	\$8,108,791	N/A	\$8,890,977	N/A	0.97	9.65	15% (+/-)	Yes
Dental: Number of Users	N/A	24,429	N/A	25,069	N/A	26,100	N/A	2.62	4.11	15% (+/-)	Yes
Dental: Avg Medicaid Pd per User	N/A	\$329	N/A	\$323	N/A	\$341	N/A	-1.61	5.32	15% (+/-)	Yes
Other Practitioner: Total Medicaid Pd (TOS 10)	N/A	\$3,990,474	N/A	\$4,293,345	N/A	\$4,918,297	N/A	7.59	14.56	15% (+/-)	Yes
Other Practitioner: Number of Users	N/A	24,920	N/A	26,073	N/A	27,213	N/A	4.63	4.37	15% (+/-)	Yes
Other Practitioner: Avg Medicaid Pd per User	N/A	\$160	N/A	\$165	N/A	\$181	N/A	2.83	9.76	15% (+/-)	Yes
OPD: Total Medicaid Paid (TOS 11)	N/A	\$10,687,476	N/A	\$9,810,250	N/A	\$11,248,661	N/A	-8.21	14.66	15% (+/-)	Yes
OPD Number of Users	N/A	30,881	N/A	29,504	N/A	31,573	N/A	-4.46	7.01	15% (+/-)	Yes
OPD: Avg Medicaid Pd per User	N/A	\$346	N/A	\$333	N/A	\$356	N/A	-3.92	7.15	15% (+/-)	Yes
Clinic: Total Medicaid Paid (TOS 12)	N/A	\$4,147,120	N/A	\$4,550,692	N/A	\$5,577,143	N/A	9.73	22.56	15% (+/-)	No
Clinic: Number of Users	N/A	5,403	N/A	5,387	N/A	6,760	N/A	-0.30	25.49	15% (+/-)	No
Clinic: Avg Medicaid Pd per User	N/A	\$768	N/A	\$845	N/A	\$825	N/A	10.06	-2.34	15% (+/-)	Yes
HH: Total Medicaid Paid (TOS 13)	N/A	\$25,614,384	N/A	\$24,748,789	N/A	\$15,005,296	N/A	-3.38	-39.40	15% (+/-)	No
HH: Number of Users	N/A	15,829	N/A	15,531	N/A	14,769	N/A	-1.88	-4.91	15% (+/-)	Yes
HH: Avg Medicaid Pd per User	N/A	\$1,618	N/A	\$1,594	N/A	\$1,016	N/A	-1.53	-36.20	15% (+/-)	No
Lab/Xray: Total Medicaid Paid (TOS 15)	N/A	\$5,917,828	N/A	\$7,232,999	N/A	\$8,356,734	N/A	22.22	15.54	15% (+/-)	No
Lab/Xray: Number of Users	N/A	27,349	N/A	30,589	N/A	32,345	N/A	11.85	5.74	15% (+/-)	Yes
Lab/Xray:Avg Medicaid Pd per User	N/A	\$216	N/A	\$236	N/A	\$258	N/A	9.28	9.26	15% (+/-)	Yes
Drugs: Total Medicaid Paid (TOS 16)	N/A	\$194,315,331	N/A	\$216,944,850	N/A	\$244,258,296	N/A	11.65	12.59	15% (+/-)	Yes
Drugs: Number of Users	N/A	52,335	N/A	53,925	N/A	55,633	N/A	3.04	3.17	15% (+/-)	Yes
Drugs: Avg Medicaid Pd per User	N/A	\$3,713	N/A	\$4,023	N/A	\$4,391	N/A	8.35	9.13	15% (+/-)	Yes
Other Services: Total Medicaid Paid (TOS 19)	N/A	\$17,936,340	N/A	\$28,639,732	N/A	\$21,228,837	N/A	59.67	-25.90	15% (+/-)	No
Other Services: Number of Users	N/A	18,662	N/A	17,534	N/A	19,150	N/A	-6.04	9.22	15% (+/-)	Yes



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

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	\$961	N/A	\$1,633	N/A	\$1,109	N/A	69.95	-32.10	15% (+/-)	No
Transportation: Total Medicaid Paid (TOS 26)	N/A	\$17,654,811	N/A	\$15,921,431	N/A	\$13,570,792	N/A	-9.82	-14.80	15% (+/-)	Yes
Transportation: Number of Users	N/A	16,307	N/A	16,035	N/A	15,700	N/A	-1.67	-2.09	15% (+/-)	Yes
Transportation: Avg Medicaid Pd per User	N/A	\$1,083	N/A	\$993	N/A	\$864	N/A	-8.29	-12.90	15% (+/-)	Yes
PCS: Total Medicaid Paid (TOS 30)	N/A	\$106,633,803	N/A	\$138,880,478	N/A	\$222,168,767	N/A	30.24	59.97	15% (+/-)	No
PCS: Number of Users	N/A	10,118	N/A	12,036	N/A	13,506	N/A	18.96	12.21	15% (+/-)	Yes
PCS: Avg Medicaid Pd per User	N/A	\$10,539	N/A	\$11,539	N/A	\$16,450	N/A	9.49	42.56	15% (+/-)	No
Target Case Management: Total Medicaid Pd (TOS 31)	N/A	\$31,307,153	N/A	\$56,946,473	N/A	\$56,988,892	N/A	81.90	0.07	15% (+/-)	Yes
Target Case Management: Number of Users	N/A	20,068	N/A	25,981	N/A	27,413	N/A	29.46	5.51	15% (+/-)	Yes
Target Case Management: Avg Medicaid Pd per User	N/A	\$1,560	N/A	\$2,192	N/A	\$2,079	N/A	40.50	-5.15	15% (+/-)	Yes
Rehab Services: Total Medicaid Pd (TOS 33)	N/A	\$86,914,496	N/A	\$70,084,005	N/A	\$70,034,186	N/A	-19.40	-0.07	15% (+/-)	Yes
Rehab Services: Number of Users	N/A	6,954	N/A	6,529	N/A	6,381	N/A	-6.11	-2.27	15% (+/-)	Yes
Rehab Services: Avg Medicaid Pd per User	N/A	\$12,498	N/A	\$10,734	N/A	\$10,975	N/A	-14.10	2.25	15% (+/-)	Yes
PT/OT/Speech/Hear: Total Medicaid Paid (TOS 34)	N/A	\$1,741,384	N/A	\$1,896,691	N/A	\$1,805,572	N/A	8.92	-4.80	15% (+/-)	Yes
PT/OT/Speech/Hear: Number of Users	N/A	5,504	N/A	5,292	N/A	5,153	N/A	-3.85	-2.63	15% (+/-)	Yes
PT/OT/Speech/Hear: Avg Medicaid Pd per User	N/A	\$316	N/A	\$358	N/A	\$350	N/A	13.28	-2.24	15% (+/-)	Yes
Hospice: Total Medicaid Paid (TOS 35)	N/A	\$4,877,538	N/A	\$6,091,927	N/A	\$7,344,680	N/A	24.90	20.56	15% (+/-)	No
Hospice: Number of Users	N/A	577	N/A	654	N/A	781	N/A	13.34	19.42	15% (+/-)	No
Hospice: Avg Medicaid Pd per User	N/A	\$8,453	N/A	\$9,315	N/A	\$9,404	N/A	10.19	0.96	15% (+/-)	Yes
DME: Total Medicaid Paid (TOS 51)	N/A	\$13,348,758	N/A	\$17,285,253	N/A	\$37,780,942	N/A	29.49	118.60	15% (+/-)	No
DME: Number of Users	N/A	21,448	N/A	30,602	N/A	32,818	N/A	42.68	7.24	15% (+/-)	Yes
DME: Avg Medicaid Pd per User	N/A	\$622	N/A	\$565	N/A	\$1,151	N/A	-9.24	103.80	15% (+/-)	No
Residential Care: Total Medicaid Paid (TOS 52)	N/A	\$307,225,695	N/A	\$323,417,138	N/A	\$317,066,182	N/A	5.27	-1.96	15% (+/-)	Yes
Residential Care: Number of Users	N/A	6,263	N/A	6,599	N/A	5,642	N/A	5.37	-14.50	15% (+/-)	Yes
Residential Care: Avg Medicaid Pd per User	N/A	\$49,054	N/A	\$49,010	N/A	\$56,197	N/A	-0.09	14.67	15% (+/-)	Yes
Psych. Services: Total Medicaid Paid (TOS 53)	N/A	\$47,552,038	N/A	\$30,527,004	N/A	\$49,692,573	N/A	-35.80	62.78	15% (+/-)	No
Psych. Services: Number of Users	N/A	13,955	N/A	14,168	N/A	15,113	N/A	1.53	6.67	15% (+/-)	Yes
Psych. Services: Avg Medicaid Pd per User	N/A	\$3,408	N/A	\$2,155	N/A	\$3,288	N/A	-36.80	52.60	15% (+/-)	No
Adult Day Care: Total Medicaid Paid (TOS 54)	N/A	\$77,488,131	N/A	\$89,053,392	N/A	\$91,500,315	N/A	14.93	2.75	15% (+/-)	Yes
Adult Day Care: Number of Users	N/A	6,283	N/A	7,604	N/A	7,807	N/A	21.02	2.67	15% (+/-)	Yes
Adult Day Care: Avg Medicaid Pd per User	N/A	\$12,333	N/A	\$11,711	N/A	\$11,720	N/A	-5.04	0.08	15% (+/-)	Yes
<b>AVG FFS MEDICAID AMT PD/FFS DUAL BY SELECTED TYPE OF SERVICE</b>											
Inpatient Hospital (TOS=01)	N/A	\$293	N/A	\$299	N/A	\$336	N/A	1.97	12.26	15% (+/-)	Yes
Aged	N/A	\$109	N/A	\$107	N/A	\$119	N/A	-1.03	11.09	15% (+/-)	Yes
Disabled	N/A	\$430	N/A	\$433	N/A	\$478	N/A	0.89	10.39	15% (+/-)	Yes
ILTC (TOS=02,04,05,07)	N/A	\$3,705	N/A	\$3,680	N/A	\$3,450	N/A	-0.68	-6.25	15% (+/-)	Yes
Aged	N/A	\$3,239	N/A	\$3,530	N/A	\$3,029	N/A	9.00	-14.20	15% (+/-)	Yes
Disabled	N/A	\$4,128	N/A	\$3,881	N/A	\$3,847	N/A	-5.97	-0.90	15% (+/-)	Yes
Drugs (TOS=16)	N/A	\$2,530	N/A	\$2,737	N/A	\$2,988	N/A	8.18	9.17	15% (+/-)	Yes
Aged	N/A	\$869	N/A	\$927	N/A	\$879	N/A	6.68	-5.18	15% (+/-)	Yes
Disabled	N/A	\$3,793	N/A	\$4,049	N/A	\$4,444	N/A	6.76	9.75	15% (+/-)	Yes
All Other Services	N/A	\$10,486	N/A	\$11,035	N/A	\$12,032	N/A	5.24	9.04	15% (+/-)	Yes
Aged	N/A	\$2,308	N/A	\$2,687	N/A	\$2,985	N/A	16.41	11.07	15% (+/-)	Yes
Disabled	N/A	\$16,726	N/A	\$17,158	N/A	\$18,441	N/A	2.58	7.48	15% (+/-)	Yes
<b>% OF FFS DUALS WITH CLAIMS BY SELECTED TYPE OF SERVICE</b>											
% FFS Duals with IP Claims (TOS=01)	N/A	15.70	N/A	15.74	N/A	15.64	N/A	0.25	-0.62	15% (+/-)	Yes
Aged	N/A	9.13	N/A	8.65	N/A	8.57	N/A	-5.18	-0.94	15% (+/-)	Yes
Disabled	N/A	20.69	N/A	20.84	N/A	20.46	N/A	0.73	-1.85	15% (+/-)	Yes
% FFS Duals with ILTC Claims (TOS=02,04,05,07)	N/A	13.74	N/A	12.29	N/A	11.76	N/A	-10.50	-4.31	15% (+/-)	Yes
Aged	N/A	19.26	N/A	17.03	N/A	15.78	N/A	-11.60	-7.34	15% (+/-)	Yes
Disabled	N/A	9.93	N/A	9.26	N/A	9.40	N/A	-6.81	1.59	15% (+/-)	Yes
% FFS Duals with Drug Claims (TOS=16)	N/A	68.15	N/A	68.03	N/A	68.06	N/A	-0.16	0.03	15% (+/-)	Yes
Aged	N/A	39.87	N/A	38.01	N/A	36.02	N/A	-4.68	-5.23	15% (+/-)	Yes
Disabled	N/A	89.77	N/A	89.90	N/A	90.17	N/A	0.14	0.30	15% (+/-)	Yes
% FFS Duals with All Other Claims	N/A	72.12	N/A	71.66	N/A	71.85	N/A	-0.65	0.27	15% (+/-)	Yes
Aged	N/A	40.58	N/A	38.48	N/A	37.13	N/A	-5.17	-3.53	15% (+/-)	Yes
Disabled	N/A	95.86	N/A	95.41	N/A	95.47	N/A	-0.47	0.07	15% (+/-)	Yes

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

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	7	N/A	7	N/A	7	N/A	-4.62	4.03	15% (+/-)	Yes
Aged	N/A	6	N/A	6	N/A	6	N/A	-4.83	5.10	15% (+/-)	Yes
Disabled	N/A	8	N/A	7	N/A	8	N/A	-4.95	3.90	15% (+/-)	Yes
Avg # ILTC Days per FFS Dual User (TOS 02, 04, 05, 07)	N/A	168	N/A	189	N/A	172	N/A	12.70	-9.36	15% (+/-)	Yes
Aged	N/A	143	N/A	173	N/A	152	N/A	20.54	-12.00	15% (+/-)	Yes
Disabled	N/A	204	N/A	211	N/A	194	N/A	3.76	-8.05	15% (+/-)	Yes
<b>FFS EXPENDITURES AND USERS BY MAX PROGRAM TYPE</b>											
FP: Total Medicaid Paid (Program Type 2)	N/A	\$702,356	N/A	\$724,927	N/A	\$782,287	N/A	3.21	7.91	15% (+/-)	Yes
FP: Number of Users	N/A	2,839	N/A	3,073	N/A	3,230	N/A	8.24	5.11	15% (+/-)	Yes
FP: Average Medicaid Pd per User	N/A	\$247	N/A	\$236	N/A	\$242	N/A	-4.65	2.67	15% (+/-)	Yes
RHC: Total Medicaid Paid (Program Type 3)	N/A	\$337,379	N/A	\$331,581	N/A	\$413,393	N/A	-1.72	24.67	15% (+/-)	No
RHC: Number of Users	N/A	2,082	N/A	2,112	N/A	2,367	N/A	1.44	12.07	15% (+/-)	Yes
RHC: Avg Medicaid Pd per User	N/A	\$162	N/A	\$157	N/A	\$175	N/A	-3.11	11.24	15% (+/-)	Yes
FQHC: Total Medicaid Paid (Program Type 4)	N/A	\$1,307,668	N/A	\$1,329,254	N/A	\$1,526,705	N/A	1.65	14.85	15% (+/-)	Yes
FQHC: Number of Users	N/A	2,891	N/A	3,181	N/A	3,791	N/A	10.03	19.18	15% (+/-)	No
FQHC: Avg Medicaid Pd per User	N/A	\$452	N/A	\$418	N/A	\$403	N/A	-7.62	-3.63	15% (+/-)	Yes
IHS: Total Medicaid Pd (Program Type 5)	N/A	\$2,253,684	N/A	\$2,531,814	N/A	\$2,988,542	N/A	12.34	18.04	15% (+/-)	No
IHS: Number of Users	N/A	646	N/A	670	N/A	715	N/A	3.72	6.72	15% (+/-)	Yes
IHS: Avg Medicaid Pd per User	N/A	\$3,489	N/A	\$3,779	N/A	\$4,180	N/A	8.32	10.61	15% (+/-)	Yes
Section 1915(c) Waiver: Total Medicaid Paid (Program Types 6 and 7)	N/A	\$568,410,677	N/A	\$612,584,086	N/A	\$681,746,294	N/A	7.77	11.29	15% (+/-)	Yes
Section 1915(c) Waiver: Number of Users	N/A	18,029	N/A	18,845	N/A	19,906	N/A	4.53	5.63	15% (+/-)	Yes
Section 1915(c) Waiver: Avg Medicaid Pd per User	N/A	\$31,528	N/A	\$32,506	N/A	\$34,248	N/A	3.11	5.36	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	\$867,849,225	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	46,084	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	\$18,832	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$8,786	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$21,664	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	56.37	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	30.58	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	75.17	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	\$793,822,672	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	28,041	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	\$28,309	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$10,717	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$34,134	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	34.30	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	20.76	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	44.09	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	\$681,746,294	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	19,906	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	\$34,248	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$10,353	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$43,666	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	24.35	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	17.29	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	29.86	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	207,228	N/A	211,551	N/A	212,676	N/A	2.09	0.53	15% (+/-)	Yes
# FFS Recipients	N/A	157,714	N/A	161,437	N/A	161,046	N/A	2.36	-0.24	15% (+/-)	Yes
% FFS Enrollees who are Recipients	65-90%	76.11	Yes	76.31	Yes	75.72	Yes	0.27	-0.77	15% (+/-)	Yes
% Aged who are Recipients	90-100%	45.11	No	43.06	No	41.66	No	-4.55	-3.25	15% (+/-)	Yes
% Disabled who are Recipients	85-100%	95.77	Yes	95.55	Yes	95.51	Yes	-0.23	-0.04	15% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: MN

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%	68.38	No	69.27	No	66.81	No	1.30	-3.54	15% (+/-)	Yes
% Adults who are Recipients	80-100%	64.42	No	65.86	No	65.26	No	2.24	-0.91	15% (+/-)	Yes
Total FFS PYE	N/A	136,947	N/A	143,108	N/A	142,660	N/A	4.50	-0.31	15% (+/-)	Yes
MAX Aged Total	N/A	34,411	N/A	34,644	N/A	34,585	N/A	0.68	-0.17	10% (+/-)	Yes
11: Aged, Cash	N/A	1,648	N/A	1,548	N/A	1,288	N/A	-6.07	-16.80	10% (+/-)	No
21: Aged, MN	N/A	6,667	N/A	6,165	N/A	6,727	N/A	-7.53	9.12	10% (+/-)	Yes
31: Aged, Poverty	N/A	2,738	N/A	2,971	N/A	2,353	N/A	8.51	-20.80	10% (+/-)	No
41: Other Aged	N/A	23,358	N/A	23,960	N/A	24,184	N/A	2.58	0.93	10% (+/-)	Yes
51: 1115 Aged	N/A	0	N/A	0	N/A	33	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Disabled Total	N/A	91,835	N/A	95,079	N/A	97,965	N/A	3.53	3.04	10% (+/-)	Yes
12: Disabled, Cash	N/A	57,083	N/A	58,034	N/A	58,380	N/A	1.67	0.60	10% (+/-)	Yes
22: Disabled, MN	N/A	6,158	N/A	7,166	N/A	7,924	N/A	16.37	10.58	10% (+/-)	No
32: Disabled, Poverty	N/A	9,835	N/A	10,819	N/A	12,060	N/A	10.01	11.47	10% (+/-)	No
42: Other Disabled	N/A	18,759	N/A	19,060	N/A	19,536	N/A	1.61	2.50	10% (+/-)	Yes
52: 1115 Disabled	N/A	0	N/A	0	N/A	65	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Child Total	N/A	52,337	N/A	52,284	N/A	50,275	N/A	-0.10	-3.84	10% (+/-)	Yes
14: AFDC Child, Cash	N/A	31,109	N/A	34,799	N/A	32,131	N/A	11.86	-7.67	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	778	N/A	870	N/A	994	N/A	11.83	14.25	10% (+/-)	No
34: Child Poverty	N/A	6,935	N/A	7,005	N/A	7,153	N/A	1.01	2.11	10% (+/-)	Yes
44: Other Child	N/A	9,361	N/A	4,852	N/A	4,321	N/A	-48.20	-10.90	10% (+/-)	No
48: Foster Care Child	N/A	3,785	N/A	4,635	N/A	5,289	N/A	22.46	14.11	10% (+/-)	No
54: 1115 Child	N/A	369	N/A	123	N/A	387	N/A	-66.70	214.60	10% (+/-)	No
MAX Adult Total	N/A	28,645	N/A	29,544	N/A	29,851	N/A	3.14	1.04	10% (+/-)	Yes
15: AFDC Adult, Cash	N/A	20,523	N/A	23,670	N/A	23,285	N/A	15.33	-1.63	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	1,734	N/A	1,689	N/A	1,777	N/A	-2.60	5.21	10% (+/-)	Yes
35: Adult, Poverty	N/A	1,648	N/A	1,875	N/A	2,025	N/A	13.77	8.00	10% (+/-)	Yes
45: Other Adult	N/A	4,662	N/A	2,245	N/A	2,519	N/A	-51.80	12.20	10% (+/-)	No
55: 1115 Adult	N/A	78	N/A	65	N/A	245	N/A	-16.70	276.90	10% (+/-)	No
Total FFS Medicaid Amt Paid	N/A	\$2,533,496,119	N/A	\$2,751,988,062	N/A	\$2,963,234,980	N/A	8.62	7.68	15% (+/-)	Yes
Average FFS Medicaid Amt Paid per FFS Enrollee	N/A	\$12,226	N/A	\$13,009	N/A	\$13,933	N/A	6.40	7.11	15% (+/-)	Yes
Average FFS Medicaid Amt Paid per FFS Recipient (User of any svc)	N/A	\$16,064	N/A	\$17,047	N/A	\$18,400	N/A	6.12	7.94	15% (+/-)	Yes
<b>AVG FFS MEDICAID AMT PD/FFS ENROLLEE BY MAX ELIGIBILITY GROUP</b>											
All Aged	N/A	\$6,327	N/A	\$7,027	N/A	\$6,807	N/A	11.05	-3.12	15% (+/-)	Yes
11: Aged, Cash	N/A	\$13,891	N/A	\$15,408	N/A	\$16,650	N/A	10.93	8.06	15% (+/-)	Yes
21: Aged, MN	N/A	\$11,051	N/A	\$12,883	N/A	\$12,751	N/A	16.58	-1.02	15% (+/-)	Yes
31: Aged, Poverty	N/A	\$12,835	N/A	\$14,334	N/A	\$14,799	N/A	11.68	3.25	15% (+/-)	Yes
41: Other Aged	N/A	\$3,682	N/A	\$4,072	N/A	\$3,859	N/A	10.58	-5.23	15% (+/-)	Yes
51: 1115 Aged	N/A	Div by 0	N/A	Div by 0	N/A	\$1,521	N/A	Div by 0	Div by 0	15% (+/-)	N/A
All Disabled	N/A	\$23,260	N/A	\$24,195	N/A	\$25,628	N/A	4.02	5.92	15% (+/-)	Yes
12: Disabled, Cash	N/A	\$24,800	N/A	\$24,810	N/A	\$26,671	N/A	0.04	7.50	15% (+/-)	Yes
22: Disabled, MN	N/A	\$22,014	N/A	\$28,195	N/A	\$29,417	N/A	28.08	4.33	15% (+/-)	Yes
32: Disabled, Poverty	N/A	\$26,676	N/A	\$26,711	N/A	\$19,015	N/A	0.13	-28.80	15% (+/-)	No
42: Other Disabled	N/A	\$17,195	N/A	\$19,388	N/A	\$25,130	N/A	12.75	29.62	15% (+/-)	No
52: 1115 Disabled	N/A	Div by 0	N/A	Div by 0	N/A	\$2,944	N/A	Div by 0	Div by 0	15% (+/-)	N/A
All Child	N/A	\$2,463	N/A	\$2,871	N/A	\$2,975	N/A	16.57	3.64	15% (+/-)	Yes
14: AFDC Child, Cash	N/A	\$2,070	N/A	\$1,972	N/A	\$2,131	N/A	-4.73	8.07	15% (+/-)	Yes
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	\$1,935	N/A	\$2,843	N/A	\$1,723	N/A	46.88	-39.40	15% (+/-)	No
34: Child, Poverty	N/A	\$842	N/A	\$1,135	N/A	\$1,835	N/A	34.84	61.63	15% (+/-)	No
44: Other Child	N/A	\$1,675	N/A	\$4,048	N/A	\$2,089	N/A	141.70	-48.40	15% (+/-)	No
48: Foster Care Child	N/A	\$10,807	N/A	\$11,013	N/A	\$10,785	N/A	1.91	-2.07	15% (+/-)	Yes
54: 1115 Child	N/A	\$1,532	N/A	\$2,934	N/A	\$520	N/A	91.57	-82.30	15% (+/-)	No
All Adult	N/A	\$1,772	N/A	\$1,965	N/A	\$2,265	N/A	10.90	15.26	15% (+/-)	No
15: AFDC Adult, Cash	N/A	\$2,043	N/A	\$2,156	N/A	\$2,579	N/A	5.54	19.63	15% (+/-)	No
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: MN

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	\$2,093	N/A	\$2,152	N/A	\$2,171	N/A	2.81	0.89	15% (+/-)	Yes
35: Adult, Poverty	N/A	\$761	N/A	\$820	N/A	\$751	N/A	7.78	-8.37	15% (+/-)	Yes
45: Other Adult	N/A	\$840	N/A	\$810	N/A	\$766	N/A	-3.57	-5.46	15% (+/-)	Yes
55: 1115 Adult	N/A	\$487	N/A	\$597	N/A	\$1,028	N/A	22.59	72.26	15% (+/-)	No
<b>FFS EXPENDITURES AND USERS BY MAX TOS</b>											
IP: Total Medicaid Paid (TOS 01)	N/A	\$200,045,978	N/A	\$223,097,295	N/A	\$231,869,267	N/A	11.52	3.93	15% (+/-)	Yes
IP: Number of Users	N/A	29,931	N/A	29,278	N/A	28,707	N/A	-2.18	-1.95	15% (+/-)	Yes
IP: Average Medicaid Pd per User	N/A	\$6,684	N/A	\$7,620	N/A	\$8,077	N/A	14.01	6.00	15% (+/-)	Yes
IP: Average Medicaid Covered Days Per User	N/A	7	N/A	7	N/A	8	N/A	3.21	6.15	15% (+/-)	Yes
MH Aged: Total Medicaid Paid (TOS 02)	N/A	\$1,042,360	N/A	\$1,090,566	N/A	\$779,440	N/A	4.63	-28.50	15% (+/-)	No
MH Aged: Number of Users	N/A	36	N/A	44	N/A	42	N/A	22.22	-4.55	15% (+/-)	Yes
MH Aged: Avg Medicaid Pd per User	N/A	\$28,954	N/A	\$24,786	N/A	\$18,558	N/A	-14.40	-25.10	15% (+/-)	No
IP Psych < 21: Total Medicaid Paid (TOS 04)	N/A	\$9,636,079	N/A	\$10,140,699	N/A	\$11,043,614	N/A	5.24	8.90	15% (+/-)	Yes
IP Psych < 21: Number of Users	N/A	307	N/A	443	N/A	438	N/A	44.30	-1.13	15% (+/-)	Yes
IP Psych<21 :Avg Medicaid Pd per User	N/A	\$31,388	N/A	\$22,891	N/A	\$25,214	N/A	-27.10	10.15	15% (+/-)	Yes
ICF/MR: Total Medicaid Pd (TOS 05)	N/A	\$180,522,534	N/A	\$164,591,794	N/A	\$163,555,818	N/A	-8.82	-0.63	15% (+/-)	Yes
ICF/MR: Number of Users	N/A	2,551	N/A	2,559	N/A	2,745	N/A	0.31	7.27	15% (+/-)	Yes
ICF/MR: Avg Medicaid Pd per User	N/A	\$70,765	N/A	\$64,319	N/A	\$59,583	N/A	-9.11	-7.36	15% (+/-)	Yes
NF: Total Medicaid Paid (TOS 07)	N/A	\$196,254,662	N/A	\$219,243,851	N/A	\$208,241,991	N/A	11.71	-5.02	15% (+/-)	Yes
NF: Number of Users	N/A	11,249	N/A	10,250	N/A	10,128	N/A	-8.88	-1.19	15% (+/-)	Yes
NF:Avg Medicaid Pd per User	N/A	\$17,446	N/A	\$21,390	N/A	\$20,561	N/A	22.60	-3.87	15% (+/-)	Yes
Physician: Total Medicaid Paid (TOS 08)	N/A	\$83,858,498	N/A	\$93,012,141	N/A	\$97,481,605	N/A	10.92	4.81	15% (+/-)	Yes
Physician: Number of Users	N/A	124,580	N/A	126,626	N/A	125,473	N/A	1.64	-0.91	15% (+/-)	Yes
Physician: Avg Medicaid Pd per User	N/A	\$673	N/A	\$735	N/A	\$777	N/A	9.12	5.77	15% (+/-)	Yes
Dental: Total Medicaid Paid (TOS 09)	N/A	\$17,158,300	N/A	\$18,070,710	N/A	\$18,926,358	N/A	5.32	4.74	15% (+/-)	Yes
Dental: Number of Users	N/A	53,029	N/A	55,447	N/A	55,438	N/A	4.56	-0.02	15% (+/-)	Yes
Dental: Avg Medicaid Pd per User	N/A	\$324	N/A	\$326	N/A	\$341	N/A	0.72	4.75	15% (+/-)	Yes
Other Practitioner: Total Medicaid Pd (TOS 10)	N/A	\$7,403,645	N/A	\$21,994,864	N/A	\$24,826,726	N/A	197.10	12.88	15% (+/-)	Yes
Other Practitioner: Number of Users	N/A	49,946	N/A	53,327	N/A	54,473	N/A	6.77	2.15	15% (+/-)	Yes
Other Practitioner: Avg Medicaid Pd per User	N/A	\$148	N/A	\$412	N/A	\$456	N/A	178.20	10.50	15% (+/-)	Yes
OPD: Total Medicaid Paid (TOS 11)	N/A	\$35,173,510	N/A	\$36,994,428	N/A	\$40,091,247	N/A	5.18	8.37	15% (+/-)	Yes
OPD: Number of Users	N/A	75,087	N/A	72,525	N/A	74,509	N/A	-3.41	2.74	15% (+/-)	Yes
OPD: Avg Medicaid Pd per User	N/A	\$468	N/A	\$510	N/A	\$538	N/A	8.89	5.49	15% (+/-)	Yes
Clinic: Total Medicaid Paid (TOS 12)	N/A	\$15,194,347	N/A	\$15,936,169	N/A	\$17,143,511	N/A	4.88	7.58	15% (+/-)	Yes
Clinic: Number of Users	N/A	19,284	N/A	19,865	N/A	20,834	N/A	3.01	4.88	15% (+/-)	Yes
Clinic: Avg Medicaid Pd per User	N/A	\$788	N/A	\$802	N/A	\$823	N/A	1.82	2.57	15% (+/-)	Yes
HH: Total Medicaid Paid (TOS 13)	N/A	\$37,434,878	N/A	\$41,255,542	N/A	\$23,593,699	N/A	10.21	-42.80	15% (+/-)	No
HH: Number of Users	N/A	23,792	N/A	22,286	N/A	19,829	N/A	-6.33	-11.00	15% (+/-)	Yes
HH: Avg Medicaid Pd per User	N/A	\$1,573	N/A	\$1,851	N/A	\$1,190	N/A	17.65	-35.70	15% (+/-)	No
Lab/Xray: Total Medicaid Paid (TOS 15)	N/A	\$32,460,964	N/A	\$37,235,301	N/A	\$40,419,395	N/A	14.71	8.55	15% (+/-)	Yes
Lab/Xray: Number of Users	N/A	85,618	N/A	90,640	N/A	90,042	N/A	5.87	-0.66	15% (+/-)	Yes
Lab/Xray:Avg Medicaid Pd per User	N/A	\$379	N/A	\$411	N/A	\$449	N/A	8.35	9.27	15% (+/-)	Yes
Drugs: Total Medicaid Paid (TOS 16)	N/A	\$331,222,871	N/A	\$368,362,656	N/A	\$409,457,031	N/A	11.21	11.16	15% (+/-)	Yes
Drugs: Number of Users	N/A	126,223	N/A	129,116	N/A	129,545	N/A	2.29	0.33	15% (+/-)	Yes
Drugs: Avg Medicaid Pd per User	N/A	\$2,624	N/A	\$2,853	N/A	\$3,161	N/A	8.72	10.79	15% (+/-)	Yes
Other Services: Total Medicaid Paid (TOS 19)	N/A	\$64,531,578	N/A	\$150,793,901	N/A	\$105,237,970	N/A	133.70	-30.20	15% (+/-)	No
Other Services: Number of Users	N/A	42,116	N/A	46,199	N/A	49,299	N/A	9.70	6.71	15% (+/-)	Yes
Other Services: Avg Medicaid Pd per User	N/A	\$1,532	N/A	\$3,264	N/A	\$2,135	N/A	113.00	-34.60	15% (+/-)	No
Transportation: Total Medicaid Paid (TOS 26)	N/A	\$32,169,006	N/A	\$30,282,918	N/A	\$26,919,241	N/A	-5.86	-11.10	15% (+/-)	Yes
Transportation: Number of Users	N/A	27,122	N/A	26,744	N/A	26,446	N/A	-1.39	-1.11	15% (+/-)	Yes
Transportation: Avg Medicaid Pd per User	N/A	\$1,186	N/A	\$1,132	N/A	\$1,018	N/A	-4.53	-10.10	15% (+/-)	Yes
PCS: Total Medicaid Paid (TOS 30)	N/A	\$226,485,098	N/A	\$293,218,344	N/A	\$435,614,501	N/A	29.46	48.56	15% (+/-)	No
PCS: Number of Users	N/A	18,656	N/A	22,457	N/A	25,539	N/A	20.37	13.72	15% (+/-)	Yes
PCS: Avg Medicaid Pd per User	N/A	\$12,140	N/A	\$13,057	N/A	\$17,057	N/A	7.55	30.63	15% (+/-)	No
Target Case Management: Total Medicaid Pd (TOS 31)	N/A	\$81,411,749	N/A	\$127,168,880	N/A	\$124,658,970	N/A	56.20	-1.97	15% (+/-)	Yes
Target Case Management: Number of Users	N/A	42,021	N/A	52,099	N/A	53,597	N/A	23.98	2.88	15% (+/-)	Yes
Target Case Management: Avg Medicaid Pd per User	N/A	\$1,937	N/A	\$2,441	N/A	\$2,326	N/A	25.99	-4.71	15% (+/-)	Yes

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

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	\$187,125,260	N/A	\$105,607,808	N/A	\$101,994,557	N/A	-43.60	-3.42	15% (+/-)	Yes
Rehab Services: Number of Users	N/A	12,216	N/A	9,938	N/A	9,254	N/A	-18.60	-6.88	15% (+/-)	Yes
Rehab Services: Avg Medicaid Pd per User	N/A	\$15,318	N/A	\$10,627	N/A	\$11,022	N/A	-30.60	3.72	15% (+/-)	Yes
PT/OT/Speech/Hear: Total Medicaid Paid (TOS 34)	N/A	\$5,207,551	N/A	\$6,137,158	N/A	\$6,081,136	N/A	17.85	-0.91	15% (+/-)	Yes
PT/OT/Speech/Hear: Number of Users	N/A	9,676	N/A	9,395	N/A	9,401	N/A	-2.90	0.06	15% (+/-)	Yes
PT/OT/Speech/Hear: Avg Medicaid Pd per User	N/A	\$538	N/A	\$653	N/A	\$647	N/A	21.38	-0.98	15% (+/-)	Yes
Hospice: Total Medicaid Paid (TOS 35)	N/A	\$7,147,343	N/A	\$8,474,236	N/A	\$9,711,031	N/A	18.56	14.59	15% (+/-)	Yes
Hospice: Number of Users	N/A	826	N/A	913	N/A	1,037	N/A	10.53	13.58	15% (+/-)	Yes
Hospice: Avg Medicaid Pd per User	N/A	\$8,653	N/A	\$9,282	N/A	\$9,365	N/A	7.27	0.89	15% (+/-)	Yes
DME: Total Medicaid Paid (TOS 51)	N/A	\$44,613,713	N/A	\$51,679,470	N/A	\$128,216,318	N/A	15.84	148.10	15% (+/-)	No
DME: Number of Users	N/A	47,777	N/A	65,924	N/A	69,660	N/A	37.98	5.67	15% (+/-)	Yes
DME: Avg Medicaid Pd per User	N/A	\$934	N/A	\$784	N/A	\$1,841	N/A	-16.00	134.80	15% (+/-)	No
Residential Care: Total Medicaid Paid (TOS 52)	N/A	\$442,344,103	N/A	\$465,724,567	N/A	\$435,287,055	N/A	5.29	-6.54	15% (+/-)	Yes
Residential Care: Number of Users	N/A	9,930	N/A	10,343	N/A	8,439	N/A	4.16	-18.40	15% (+/-)	No
Residential Care: Avg Medicaid Pd per User	N/A	\$44,546	N/A	\$45,028	N/A	\$51,580	N/A	1.08	14.55	15% (+/-)	Yes
Psych. Services: Total Medicaid Paid (TOS 53)	N/A	\$145,756,512	N/A	\$91,279,455	N/A	\$125,342,034	N/A	-37.40	37.32	15% (+/-)	No
Psych. Services: Number of Users	N/A	46,264	N/A	44,578	N/A	45,576	N/A	-3.64	2.24	15% (+/-)	Yes
Psych. Services: Avg Medicaid Pd per User	N/A	\$3,151	N/A	\$2,048	N/A	\$2,750	N/A	-35.00	34.31	15% (+/-)	No
Adult Day Care: Total Medicaid Paid (TOS 54)	N/A	\$107,956,021	N/A	\$124,767,261	N/A	\$123,863,567	N/A	15.57	-0.72	15% (+/-)	Yes
Adult Day Care: Number of Users	N/A	8,665	N/A	10,495	N/A	10,536	N/A	21.12	0.39	15% (+/-)	Yes
Adult Day Care: Avg Medicaid Pd per User	N/A	\$12,459	N/A	\$11,888	N/A	\$11,756	N/A	-4.58	-1.11	15% (+/-)	Yes
<b>AVG FFS MEDICAID AMT PD/FFS ENROLLEE BY SELECTED MAX TOS</b>											
Inpatient Hospital (TOS=01)	N/A	\$965	N/A	\$1,055	N/A	\$1,090	N/A	9.24	3.38	15% (+/-)	Yes
Aged	N/A	\$169	N/A	\$177	N/A	\$186	N/A	4.96	5.04	15% (+/-)	Yes
Disabled	N/A	\$1,611	N/A	\$1,731	N/A	\$1,836	N/A	7.42	6.10	15% (+/-)	Yes
Child	N/A	\$558	N/A	\$662	N/A	\$531	N/A	18.61	-19.80	15% (+/-)	No
Adult	N/A	\$595	N/A	\$602	N/A	\$631	N/A	1.12	4.82	15% (+/-)	Yes
ILTC (TOS=02,04,05,07)	N/A	\$1,870	N/A	\$1,867	N/A	\$1,804	N/A	-0.12	-3.41	15% (+/-)	Yes
Aged	N/A	\$3,079	N/A	\$3,343	N/A	\$2,888	N/A	8.57	-13.60	15% (+/-)	Yes
Disabled	N/A	\$2,991	N/A	\$2,857	N/A	\$2,812	N/A	-4.47	-1.59	15% (+/-)	Yes
Child	N/A	\$114	N/A	\$131	N/A	\$142	N/A	15.33	8.49	15% (+/-)	Yes
Adult	N/A	\$30	N/A	\$24	N/A	\$37	N/A	-19.50	53.14	15% (+/-)	No
Drugs (TOS=16)	N/A	\$1,598	N/A	\$1,741	N/A	\$1,925	N/A	8.94	10.57	15% (+/-)	Yes
Aged	N/A	\$831	N/A	\$885	N/A	\$843	N/A	6.47	-4.73	15% (+/-)	Yes
Disabled	N/A	\$3,087	N/A	\$3,310	N/A	\$3,612	N/A	7.23	9.13	15% (+/-)	Yes
Child	N/A	\$219	N/A	\$263	N/A	\$296	N/A	20.14	12.59	15% (+/-)	Yes
Adult	N/A	\$269	N/A	\$313	N/A	\$387	N/A	16.58	23.46	15% (+/-)	No
All Other Services	N/A	\$7,792	N/A	\$8,345	N/A	\$9,114	N/A	7.10	9.21	15% (+/-)	Yes
Aged	N/A	\$2,248	N/A	\$2,621	N/A	\$2,890	N/A	16.60	10.24	15% (+/-)	Yes
Disabled	N/A	\$15,571	N/A	\$16,296	N/A	\$17,367	N/A	4.66	6.57	15% (+/-)	Yes
Child	N/A	\$1,572	N/A	\$1,815	N/A	\$2,006	N/A	15.45	10.53	15% (+/-)	Yes
Adult	N/A	\$878	N/A	\$1,026	N/A	\$1,210	N/A	16.83	17.99	15% (+/-)	No
<b>% OF FFS ENROLLEES WITH CLAIMS BY SELECTED MAX TYPE OF SERVICE</b>											
% FFS Enrollees with IP Claims (TOS=01)	N/A	14.44	N/A	13.84	N/A	13.50	N/A	-4.18	-2.47	15% (+/-)	Yes
Aged	N/A	9.04	N/A	8.62	N/A	8.55	N/A	-4.63	-0.84	15% (+/-)	Yes
Disabled	N/A	18.71	N/A	18.94	N/A	18.71	N/A	1.27	-1.21	15% (+/-)	Yes
Child	N/A	12.47	N/A	9.83	N/A	8.52	N/A	-21.10	-13.30	15% (+/-)	Yes
Adult	N/A	10.89	N/A	10.63	N/A	10.50	N/A	-2.36	-1.25	15% (+/-)	Yes
% FFS Enrollees with ILTC Claims (TOS=02,04,05,07)	N/A	6.77	N/A	6.23	N/A	6.19	N/A	-8.02	-0.57	15% (+/-)	Yes
Aged	N/A	18.33	N/A	16.09	N/A	15.01	N/A	-12.20	-6.71	15% (+/-)	Yes
Disabled	N/A	7.76	N/A	7.37	N/A	7.47	N/A	-5.02	1.29	15% (+/-)	Yes
Child	N/A	0.85	N/A	0.90	N/A	0.97	N/A	6.18	7.30	15% (+/-)	Yes
Adult	N/A	0.50	N/A	0.39	N/A	0.57	N/A	-23.20	48.46	15% (+/-)	No
% FFS Enrollees with Drug Claims (TOS=16)	N/A	60.91	N/A	61.03	N/A	60.91	N/A	0.20	-0.20	15% (+/-)	Yes
Aged	N/A	38.80	N/A	37.11	N/A	35.12	N/A	-4.35	-5.37	15% (+/-)	Yes
Disabled	N/A	86.95	N/A	86.80	N/A	86.77	N/A	-0.16	-0.04	15% (+/-)	Yes
Child	N/A	40.03	N/A	41.19	N/A	40.33	N/A	2.90	-2.07	15% (+/-)	Yes

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

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	42.16	N/A	41.26	N/A	40.58	N/A	-2.12	-1.65	15% (+/-)	Yes
% FFS Enrollees with All Other Claims	N/A	73.45	N/A	73.75	N/A	73.00	N/A	0.41	-1.02	15% (+/-)	Yes
Aged	N/A	39.97	N/A	38.33	N/A	36.54	N/A	-4.12	-4.67	15% (+/-)	Yes
Disabled	N/A	94.67	N/A	94.51	N/A	94.44	N/A	-0.17	-0.08	15% (+/-)	Yes
Child	N/A	65.06	N/A	65.78	N/A	62.94	N/A	1.11	-4.32	15% (+/-)	Yes
Adult	N/A	60.94	N/A	62.56	N/A	61.83	N/A	2.67	-1.17	15% (+/-)	Yes
Avg # IP Days per FFS User	N/A	7	N/A	7	N/A	8	N/A	3.21	6.15	15% (+/-)	Yes
Aged	N/A	6	N/A	6	N/A	6	N/A	-4.59	4.78	15% (+/-)	Yes
Disabled	N/A	9	N/A	9	N/A	10	N/A	-1.57	5.29	15% (+/-)	Yes
Child	N/A	4	N/A	5	N/A	5	N/A	19.13	-2.59	15% (+/-)	Yes
Adult	N/A	4	N/A	4	N/A	4	N/A	1.42	8.51	15% (+/-)	Yes
Avg # ILTC Days per FFS User	N/A	156	N/A	171	N/A	153	N/A	9.44	-10.40	15% (+/-)	Yes
Aged	N/A	143	N/A	173	N/A	152	N/A	20.71	-12.20	15% (+/-)	Yes
Disabled	N/A	180	N/A	183	N/A	167	N/A	1.60	-8.57	15% (+/-)	Yes
Child	N/A	19	N/A	21	N/A	18	N/A	10.82	-15.00	15% (+/-)	Yes
Adult	N/A	8	N/A	11	N/A	7	N/A	33.16	-39.80	15% (+/-)	No
<b>FFS EXPENDITURES AND USERS BY MAX PGM TYPE</b>											
FP: Total Medicaid Paid (Program Type 2)	N/A	\$2,033,796	N/A	\$2,143,656	N/A	\$2,133,292	N/A	5.40	-0.48	15% (+/-)	Yes
FP: Number of Users	N/A	9,532	N/A	10,063	N/A	9,892	N/A	5.57	-1.70	15% (+/-)	Yes
FP: Average Medicaid Pd per User	N/A	\$213	N/A	\$213	N/A	\$216	N/A	-0.16	1.24	15% (+/-)	Yes
RHC: Total Medicaid Paid (Program Type 3)	N/A	\$1,841,299	N/A	\$1,933,270	N/A	\$2,091,191	N/A	5.00	8.17	15% (+/-)	Yes
RHC: Number of Users	N/A	6,564	N/A	6,494	N/A	6,903	N/A	-1.07	6.30	15% (+/-)	Yes
RHC: Avg Medicaid Pd per User	N/A	\$281	N/A	\$298	N/A	\$303	N/A	6.13	1.76	15% (+/-)	Yes
FOHC: Total Medicaid Paid (Program Type 4)	N/A	\$5,912,111	N/A	\$6,501,972	N/A	\$7,183,431	N/A	9.98	10.48	15% (+/-)	Yes
FOHC: Number of Users	N/A	8,916	N/A	10,095	N/A	10,926	N/A	13.22	8.23	15% (+/-)	Yes
FOHC: Avg Medicaid Pd per User	N/A	\$663	N/A	\$644	N/A	\$657	N/A	-2.87	2.08	15% (+/-)	Yes
IHS: Total Medicaid Pd (Program Type 5)	N/A	\$11,525,322	N/A	\$12,583,020	N/A	\$13,650,523	N/A	9.18	8.48	15% (+/-)	Yes
IHS: Number of Users	N/A	7,005	N/A	7,121	N/A	7,310	N/A	1.66	2.65	15% (+/-)	Yes
IHS: Avg Medicaid Pd per User	N/A	\$1,645	N/A	\$1,767	N/A	\$1,867	N/A	7.40	5.68	15% (+/-)	Yes
Section 1915(c) Waiver: Total Medicaid Paid (Program Types 6 and 7)	N/A	\$934,663,964	N/A	\$992,628,716	N/A	\$1,070,386,114	N/A	6.20	7.83	15% (+/-)	Yes
Section 1915(c) Waiver: Number of Users	N/A	29,308	N/A	29,957	N/A	30,829	N/A	2.21	2.91	15% (+/-)	Yes
Section 1915(c) Waiver: Avg Medicaid Pd per User	N/A	\$31,891	N/A	\$33,135	N/A	\$34,720	N/A	3.90	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	\$1,535,903,314	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	84,649	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	\$18,144	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$8,662	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$19,728	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$15,996	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$4,779	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	39.80	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	29.57	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	72.92	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	4.21	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	2.92	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	\$1,386,919,112	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	48,564	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	\$28,559	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$10,724	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$32,917	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$15,996	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$4,779	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	22.83	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	19.71	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	39.56	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	4.21	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	2.92	N/A	N/A	N/A	15% (+/-)	No

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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
Total FFS CLTC Expenditures (Section 1915(c) claims only - excludes CLTC Codes 11-20)	N/A	N/A	N/A	N/A	N/A	\$1,070,383,038	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	30,829	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	\$34,720	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$10,335	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$40,422	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$29,159	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$6,430	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	14.50	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	16.28	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	25.26	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	0.79	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	0.19	N/A	N/A	N/A	15% (+/-)	No