

1999-2001 MAX IP Validation Table
State: WY

Measure	Expected Range	1999		2000		2001		% Change 1999-2000	% Change 2000-2001	Cross Year Change Within Expected Range (+/-15%)
		Value	Within Range	Value	Within Range	Value	Within Range			
All IP Claims										
Total Number of Claims	N/A	9,653	N/A	10,149	N/A	10,940	N/A	5.14	7.79	Yes
	N/A	0.00	N/A	0.00	N/A	0.00	N/A	N/A	N/A	N/A
% Encounter Claims *	N/A	0	N/A	0	N/A	0	N/A	N/A	N/A	N/A
Total IP Claims	N/A	9,653	N/A	10,149	N/A	10,940	N/A	5.14	7.79	Yes
% Supplemental Claims	5-20	17.35	Yes	16.81	Yes	15.73	Yes	-3.13	-6.41	Yes
% Crossover	N/A	1.99	N/A	2.23	N/A	3.37	N/A	11.96	51.47	No
% Adjusted Claims	> 1%	.	Yes	96.46	Yes	90.79	Yes	N/A	-5.88	Yes
% Standard Adjustments	N/A	\$4,542	N/A	\$3,460	N/A	\$4,013	N/A	-23.82	16.00	No
Aver. Amt. Pd Adjust. (include \$PS Non-Crossover Claims (Type of Claim=1, Crossover Claim Indicator=0)										
Total Number of Claims	N/A	7,978	N/A	8,443	N/A	9,219	N/A	5.83	9.19	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	N/A	N/A	N/A
Aver. Medicaid Amount Paid (claims with >\$0 paid)	\$2000 - \$7000	\$3,115	Yes	\$3,316	Yes	\$3,747	Yes	6.44	13.00	Yes
Aver. Medicaid Amt Paid per Covered Day (>\$0 paid and >0 days claims)	N/A	\$996	N/A	\$1,003	N/A	\$1,104	N/A	0.70	10.12	Yes
% Claims with TPL	>0 - 10	2.73	Yes	2.65	Yes	2.74	Yes	-2.91	3.44	Yes
Aver. TPL Paid for claims with TPL	N/A	\$1,467	N/A	\$1,510	N/A	\$1,653	N/A	2.87	9.53	Yes
% Claims with UB-92 Accommodation Codes	95-100	99.56	Yes	99.46	Yes	99.48	Yes	-0.11	0.02	Yes
Average # UB-92 Accom. Codes (at least 1 accom code)	>1	1.06	Yes	1.06	Yes	1.06	Yes	0.06	0.23	Yes
% Claims with UB-92 Ancillary Codes	95-100	99.84	Yes	99.61	Yes	99.75	Yes	-0.23	0.14	Yes
Average # UB-92 Ancillary Codes (at least 1 Ancillary code)	>3	7.44	Yes	7.31	Yes	7.46	Yes	-1.74	2.05	Yes
Average LOS	2-<8	3.12	Yes	3.29	Yes	3.38	Yes	5.40	2.54	Yes
Average Covered Days (> 0 day)	2-<8	3.13	Yes	3.31	Yes	3.39	Yes	5.70	2.61	Yes
% Begin Date = Admit Date	95-100	99.86	Yes	99.80	Yes	99.82	Yes	-0.06	0.02	Yes
% IP Claims (MAX TOS 01)	95-100	96.30	Yes	96.85	Yes	96.94	Yes	0.57	0.09	Yes
% Family Planning Claims (pgm type=2)	>0-5	3.67	Yes	3.15	Yes	3.05	Yes	-14.22	-3.25	Yes
% Claims with PDX	98-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
Average Number of DX Codes (at least 1 DX)	>=2	3.26	Yes	3.32	Yes	3.49	Yes	1.76	5.04	Yes
% Claims with PDX, where length=3	5-30	7.13	Yes	6.63	Yes	5.98	Yes	-7.00	-9.89	Yes
% Claims with PDX, where length=4	15-75	17.54	Yes	18.17	Yes	19.51	Yes	3.61	7.40	Yes
% Claims with PDX, where length=5	25-70	75.33	No	75.20	No	74.51	No	-0.18	-0.92	Yes
% Claims with a procedure code	35-70	58.45	Yes	56.00	Yes	58.50	Yes	-4.19	4.46	Yes
Average Number of Procedures for claims with at least 1 procedure code	>1	1.86	Yes	1.88	Yes	1.91	Yes	0.97	2.08	Yes
% Claims with Procedures that have CPT-4 Indicator	N/A	0.00	N/A	0.00	N/A	0.00	N/A	N/A	N/A	N/A
% Claims with Procedures that have ICD-9 Indicator	N/A	99.94	N/A	100.00	N/A	99.96	N/A	0.06	-0.04	N/A
% Claims with Procedures that have CPT-4 Indicator & CPT-4 format of 5n	N/A	0.00	N/A	0.00	N/A	.	N/A	N/A	N/A	N/A

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

1999-2001 MAX IP Validation Table
State: WY

Measure	Expected Range	1999		2000		2001		% Change 1999-2000	% Change 2000-2001	Cross Year Change Within Expected Range (+/-15%)
		Value	Within Range	Value	Within Range	Value	Within Range			
% Claims with Procedures that have ICD-9-CM Indicator & ICD-9-CM Format 3n or 4n	N/A	99.94	N/A	100.00	N/A	100.00	N/A	0.06	0.00	N/A
% Claims with DRG	>=90	0.00	No	0.00	No	0.00	No	N/A	N/A	N/A
% Claims Maternal Delivery Indicator	N/A	28.06	N/A	26.52	N/A	26.58	N/A	-5.51	0.21	Yes
% Claims Newborn Delivery Indicator (only for separate infant delivery claims using mother's ID)	N/A	29.82	N/A	28.53	N/A	28.48	N/A	-4.32	-0.17	Yes
Patient Status										
% Home	75-90	92.96	No	91.48	No	92.01	No	-1.58	0.57	Yes
% Transferred	1-10	6.08	Yes	6.60	Yes	5.72	Yes	8.52	-13.35	Yes
% Still a Patient	>0 - 2	0.45	Yes	1.46	Yes	1.81	Yes	222.85	24.34	No
% Died	>0 - 3	0.51	Yes	0.46	Yes	0.47	Yes	-10.12	0.98	Yes
FFS Crossover Claims (Type of Claim=1, Crossover Claim Indicator=1)										
Total Number of Claims	N/A	1,675	N/A	1,706	N/A	1,721	N/A	1.85	0.88	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	N/A	N/A	N/A
Aver. Medicaid Amount Paid (claims with >\$0 paid)	N/A	\$816	N/A	\$804	N/A	\$804	N/A	-1.42	-0.07	Yes
% Claims with TPL	N/A	1.91	N/A	1.41	N/A	1.57	N/A	-26.36	11.52	Yes
Aver. TPL Paid -claims with TPL	N/A	\$562	N/A	\$709	N/A	\$467	N/A	26.21	-34.07	No
% Claims with UB-92 Accommodation Codes	95-100	99.04	Yes	98.71	Yes	98.95	Yes	-0.34	0.25	Yes
Average # UB-92 Accom. Codes (at least 1 accom code)	>1	1.00	No	1.00	Yes	1.00	Yes	0.06	0.00	Yes
% Claims with UB-92 Ancillary Codes	95-100	1.19	No	1.41	No	1.05	No	17.82	-25.65	No
Average # UB-92 Ancillary Codes (at least 1 Ancillary code)	>3	2.45	No	1.38	No	1.00	No	-43.88	-27.27	No
Average LOS	2-<8	5.10	Yes	4.98	Yes	4.66	Yes	-2.23	-6.42	Yes
% Begin Date = Admit Date	95-100	97.79	Yes	98.77	Yes	98.78	Yes	1.00	0.01	Yes
% Claims with IP TOS	95-100	99.88	Yes	99.94	Yes	99.94	Yes	0.06	0.00	Yes
% Claims with DX	98-100	100.00	Yes	100.00	Yes	99.94	Yes	0.00	-0.06	Yes
Average Number of DX Codes (at least 1 DX)	>=2	6.45	Yes	6.62	Yes	6.90	Yes	2.73	4.11	Yes
% Claims with PDX, where length=3	5-30	11.52	Yes	10.84	Yes	9.65	Yes	-5.89	-11.00	Yes
% Claims with PDX, where length=4	15-75	43.64	Yes	43.96	Yes	42.50	Yes	0.73	-3.33	Yes
% Claims with PDX, where length=5	25-70	44.84	Yes	45.19	Yes	47.85	Yes	0.80	5.88	Yes
% Claims with a procedure code	35-70	0.00	No	0.06	No	0.00	No	N/A	-100.00	No
Average Number of Procedures for claims with at least 1 procedure code	>1	.	Yes	4.00	Yes	.	Yes	N/A	N/A	N/A
% Claims with Procedures that have CPT-4 Indicator	N/A	.	N/A	0.00	N/A	.	N/A	N/A	N/A	N/A
% Claims with Procedures that have ICD-9 Indicator	N/A	.	N/A	100.00	N/A	.	N/A	N/A	N/A	N/A
% Claims with Procedures that have CPT-4 Indicator & CPT-4 format of 5n	N/A	.	N/A	0.00	N/A	.	N/A	N/A	N/A	N/A

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

1999-2001 MAX IP Validation Table
State: WY

Measure	Expected Range	1999		2000		2001		% Change 1999-2000	% Change 2000 - 2001	Cross Year Change Within Expected Range (+/-15%)
		Value	Within Range	Value	Within Range	Value	Within Range			
% Claims with Procedures that have ICD-9-CM Indicator & ICD-9-CM Format 3n or 4n	N/A	.	N/A	100.00	N/A	.	N/A	N/A	N/A	N/A
% Claims with DRG	>=90	0.00	No	0.00	No	0.00	No	N/A	N/A	N/A

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