Medicaid Analytic Extract Provider Characteristics (MAXPC)

State-Specific Validation Tables, 2010

District of Columbia

May 31, 2013

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Policy Research

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ACRONYMS

CMS	Centers for Medicare & Medicaid Services
CY	Calendar year
FY	Federal fiscal year
HIPAA	Health Insurance Portability and Accountability Act
ID	Identification/identifier
IP	Inpatient
LT	Long-term care
MAX	Medicaid Analytic Extract
MAXPC	MAX Provider Characteristics File
MSIS	Medicaid Statistical Information System
NPI	National Provider Identifier
NPPES	National Plan and Provider Enumeration System
OT	Other services
RX	Drug
UPIN	Unique Physician Identification Number

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INTRODUCTION

The Medicaid Statistical Information System (MSIS) files and the corresponding research-friendly Medicaid Analytic Extract (MAX) files support a wide range of studies on Medicaid enrollment, service use, and expenditures. There is currently considerable interest at the Centers for Medicare & Medicaid Services (CMS) in also examining health reform proposals, program integrity, and access-to-care issues among certain types of Medicaid providers. However, it has not been possible to easily conduct provider-based research activities because the provider identification numbers collected in MSIS are largely unedited, undocumented, and state specific.

The advent of the Health Insurance Portability and Accountability Act (HIPAA) mandated covered entities such as health care providers, health plans, and health care clearinghouses to obtain and use a National Provider Identifier (NPI) in all administrative and financial HIPAA transactions.[1] The NPI is a unique 10-digit, sequentially assigned national identification number, unstructured so as not to carry any way information such as the state or medical specialty of the health care provider who "owns" the identifier. Beginning in February 2009, states were required to include NPIs on claims submitted to MSIS. The main limitation of this identifier, however, is that certain classes of nonmedical providers are not required to obtain an NPI. Nonetheless, the availability of the NPI on MSIS claims makes the development of a uniform provider characteristic file more feasible. The MAX Provider Characteristics (MAXPC) file is such a file.

Once the state's MAXPC file is created, validation tables are produced. Validation tables are designed as a diagnostic tool to determine whether linkages are working in the expected manner and consist of a set of seven tables. The first six tables focus on provider ID types in the IP, LT, OT, and RX files. These provider types are: IP billing, LT billing, OT servicing, OT billing, RX billing, and RX prescribing provider IDs. The seventh table examines all provider IDs in all of the files. Each file-specific validation table is used to detect linkage issues that are peculiar to a given file type. The all-provider table is used to monitor the overall quality of the linkages of all provider IDs. The design of the validation tables is very similar across file types. The measures are grouped into seven sections as denoted by the shaded rows. The first section describes measures for each unique provider in the file. The second section focuses on the source of NPIs. The third section focuses on provider IDs that link to NPPES, followed by a section for provider IDs that link to state provider files. The fifth section focuses on the primary taxonomy of providers that link to NPPES. Among providers, taxonomies are classified into two groups: (1) individuals or groups of individuals, and (2) nonindividuals. The sixth section focuses on individual providers showing their sole proprietorship status. Finally, the seventh section focuses on provider organizations and their ownership status.

The columns in the state-specific tables describe the annual statistics for up to three years, followed by a column describing the percentage change between year one and year two, the

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[1] CMS. "National Provider Identifier (NPI) Overview." Available at http://www.cms.gov/nationalProvIdentstand/.

percentage change between year two and year three, if applicable, followed by the expected range of values across years, and finally, an indicator showing whether the percentage change between the two most recent years being compared is within the expected range.

The primary source of data used in the MAXPC 2010 files were the MSIS Valid claims files. The following measures in the MAXPC file were derived from original, unadjusted claims:

- Number of IP Claims for Provider

- Number of Beneficiaries with IP Claims for Provider

- Number of LT Claims for Provider

- Number of Beneficiaries with LT Claims for Provider

- Number of OT Claims for Provider

- Number of Beneficiaries with OT Claims for Provider

- Number of RX Claims for provider

- Number of Beneficiaries with RX Claims for Provider.

2009-2010 MAX IP Billing Provider Characteristics Validation Table
State: DC
Produced: 04/18/2013

Measure	2009 Value	2010 Value	% Change 2009-2010	Cross Year Expected Range	Cross Year Within Range[a]
IP Providers					
Number of provider IDs	195	161	-17.44	30% (+/-)	Yes
% billing provider on IP claim	45.1	50.3	11.49	N/A	N/A
% NPI billing provider on IP claim	54.9	49.7	-9.45	N/A	N/A
% also a provider on LT claim	7.2	0.6	-91.35	N/A	N/A
% also a provider on OT claim	76.9	85.7	11.43	N/A	N/A
% also a provider on RX claim	13.8	13.7	-1.31	N/A	N/A
% provider IDs with NPI	88.7	97.5	9.92	30% (+/-)	Yes
% provider IDs linked to NPPES	75.9	97.5	28.48	30% (+/-)	Yes
% provider IDs with or without NPI but linked to state provider file	0.0	0.0	Div by 0	N/A	N/A
average number of IP claims	324.5	448.3	38.14	30% (+/-)	No
average number of beneficiaries with IP claims	241.5	341.3	41.34	30% (+/-)	No
Provider IDs with NPI					
Number of provider IDs with NPI	173	157	-9.25	30% (+/-)	Yes
% NPI source = MSIS	99.4	100.0	0.58	30% (+/-)	Yes
% NPI source = NPPES	0.6	0.0	-100.00	30% (+/-)	Yes
% NPI source = state cross-reference file	0.0	0.0	Div by 0	N/A	N/A
Provider IDs Linked to NPPES					
Number of provider IDs linked to NPPES	148	157	6.08	30% (+/-)	Yes
% linked via NPI	99.3	100.0	0.68	30% (+/-)	Yes
% linked via Medicaid legacy provider ID	0.7	0.0	-100.00	30% (+/-)	Yes
% linked via Medicare UPIN	0.0	0.0	Div by 0	30% (+/-)	N/A
% with name prefix	0.0	0.0	Div by 0	30% (+/-)	N/A
% with first name	0.0	1.3	Div by 0	30% (+/-)	N/A
% with middle name	0.0	1.3	Div by 0	30% (+/-)	N/A
% with last name	0.0	1.3	Div by 0	30% (+/-)	N/A
% with name suffix	0.0	0.0	Div by 0	30% (+/-)	N/A
% male	0.0	0.6	Div by 0	30% (+/-)	N/A
% female	0.0	0.6	Div by 0	30% (+/-)	N/A
% with credential	0.0	1.3	Div by 0	30% (+/-)	N/A
% with business name	100.0	98.7	-1.27	30% (+/-)	Yes
% with address line 1	100.0	100.0	0.00	30% (+/-)	Yes
% with city	100.0	100.0	0.00	30% (+/-)	Yes
% with state	100.0	100.0	0.00	30% (+/-)	Yes
% state = IP state code	23.6	27.4	15.81	30% (+/-)	Yes
% with zip code	100.0	100.0	0.00	30% (+/-)	Yes
% with primary taxonomy	100.0	100.0	0.00	30% (+/-)	Yes
% with provider entity type = individual	0.0	1.3	Div by 0	30% (+/-)	N/A
% with provider entity type = organization	100.0	98.7	-1.27	30% (+/-)	Yes
Provider IDs with or without NPI but linked to state provider file					
Number of provider IDs with or without NPI linked to state provider file	0	0	Div by 0	N/A	N/A
Provider IDs with NPPES Primary Taxonomy					
Number of provider IDs with NPPES primary taxonomy	148	157	6.08	30% (+/-)	Yes
% individual or group of individuals	0.0	6.4	Div by 0	30% (+/-)	N/A
% allopathic and osteopathic physicians	0.0	4.5	Div by 0	30% (+/-)	N/A
% behavioral health and social service providers	0.0	0.0	Div by 0	30% (+/-)	N/A

Source: Medicaid Analytic eXtract (MAX) Provider Characteristics Files, 2009-2010.

[a] "Yes" signifies that either (1) the percent change between 2009 and 2010 is within the cross-year expected range or (2) both the 2009 and the 2010 values are less than 10. "No" signifies that both (1) the percent change between 2009 and 2010 is over or under the cross-year expected range and (2) either the 2009 or the 2010 value is greater than 10.

2009-2010 MAX IP Billing Provider Characteristics Validation Table
State: DC
Produced: 04/18/2013

Measure	2009 Value	2010 Value	% Change 2009-2010	Cross Year Expected Range	Cross Year Within Range[a]
% chiropractic providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% dental providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% dietary and nutritional service providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% emergency medical service providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% eye and vision service providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% nursing service providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% nursing service-related providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% other service providers	0.0	1.9	Div by 0	30% (+/-)	N/A
% pharmacy service providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% physician assistants and advanced practice nursing providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% podiatric medicine and surgery service providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% respiratory, developmental, rehabilitative, and restorative service providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% speech, language, and hearing service providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% student health care	0.0	0.0	Div by 0	30% (+/-)	N/A
% technologists, technicians, and other technical service providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% group of individuals with multi- or single specialty	0.0	0.0	Div by 0	30% (+/-)	N/A
% nonindividuals	100.0	93.6	-6.37	30% (+/-)	Yes
% agencies	0.0	0.0	Div by 0	30% (+/-)	N/A
% ambulatory health care facilities	0.0	0.0	Div by 0	30% (+/-)	N/A
% hospital units	3.4	6.4	88.54	30% (+/-)	Yes
% hospitals	87.8	87.3	-0.66	30% (+/-)	Yes
% laboratories	0.7	0.0	-100.00	30% (+/-)	Yes
% managed care organizations	0.0	0.0	Div by 0	30% (+/-)	N/A
% nursing and custodial care facilities	5.4	0.0	-100.00	30% (+/-)	Yes
% residential treatment facilities	2.7	0.0	-100.00	30% (+/-)	Yes
% respite care facility	0.0	0.0	Div by 0	30% (+/-)	N/A
% suppliers	0.0	0.0	Div by 0	30% (+/-)	N/A
% transportation services	0.0	0.0	Div by 0	30% (+/-)	N/A
% nonmedical	0.0	0.0	Div by 0	N/A	N/A
Provider IDs with Entity Type = Individual					
Number of provider IDs with entity type = individual	0	2	Div by 0	30% (+/-)	N/A
% a sole proprietorship	0.0	50.0	Div by 0	30% (+/-)	N/A
% not a sole proprietorship	0.0	50.0	Div by 0	30% (+/-)	N/A
% not answered	0.0	0.0	Div by 0	N/A	N/A
Provider IDs with Entity Type = Organization					
Number of provider IDs with entity type = organization	148	155	4.73	30% (+/-)	Yes
% organization is a subpart	3.4	3.9	14.59	30% (+/-)	Yes
% organization is not a subpart	92.6	93.5	1.06	30% (+/-)	Yes
% not answered	4.1	2.6	-36.33	N/A	N/A

Source: Medicaid Analytic eXtract (MAX) Provider Characteristics Files, 2009-2010.

[a] "Yes" signifies that either (1) the percent change between 2009 and 2010 is within the cross-year expected range or (2) both the 2009 and the 2010 values are less than 10. "No" signifies that both (1) the percent change between 2009 and 2010 is over or under the cross-year expected range and (2) either the 2009 or the 2010 value is greater than 10.

2009-2010 MAX LT Billing Provider Characteristics Validation Table
State: DC
Produced: 04/18/2013

Measure	2009 Value	2010 Value	% Change 2009-2010	Cross Year Expected Range	Cross Year Within Range[a]
LT Providers					
Number of provider IDs	238	236	-0.84	30% (+/-)	Yes
% billing provider on LT claim	58.8	57.6	-2.03	N/A	N/A
% NPI billing provider on LT claim	41.2	42.4	2.91	N/A	N/A
% also a provider on IP claim	5.9	0.4	-92.79	N/A	N/A
% also a provider on OT claim	71.4	58.9	-17.54	N/A	N/A
% also a provider on RX claim	2.5	3.4	34.47	N/A	N/A
% provider IDs with NPI	98.3	98.3	-0.01	30% (+/-)	Yes
% provider IDs linked to NPPES	98.3	98.3	-0.01	30% (+/-)	Yes
% provider IDs with or without NPI but linked to state provider file	0.0	0.0	Div by 0	N/A	N/A
average number of LT claims	333.1	385.6	15.77	30% (+/-)	Yes
average number of beneficiaries with LT claims	38.1	46.7	22.45	30% (+/-)	Yes
Provider IDs with NPI					
Number of provider IDs with NPI	234	232	-0.85	30% (+/-)	Yes
% NPI source = MSIS	100.0	99.6	-0.43	30% (+/-)	Yes
% NPI source = NPPES	0.0	0.4	Div by 0	30% (+/-)	N/A
% NPI source = state cross-reference file	0.0	0.0	Div by 0	N/A	N/A
Provider IDs Linked to NPPES					
Number of provider IDs linked to NPPES	234	232	-0.85	30% (+/-)	Yes
% linked via NPI	100.0	99.6	-0.43	30% (+/-)	Yes
% linked via Medicaid legacy provider ID	0.0	0.4	Div by 0	30% (+/-)	N/A
% linked via Medicare UPIN	0.0	0.0	Div by 0	30% (+/-)	N/A
% with name prefix	0.0	0.0	Div by 0	30% (+/-)	N/A
% with first name	0.0	0.0	Div by 0	30% (+/-)	N/A
% with middle name	0.0	0.0	Div by 0	30% (+/-)	N/A
% with last name	0.0	0.0	Div by 0	30% (+/-)	N/A
% with name suffix	0.0	0.0	Div by 0	30% (+/-)	N/A
% male	0.0	0.0	Div by 0	30% (+/-)	N/A
% female	0.0	0.0	Div by 0	30% (+/-)	N/A
% with credential	0.0	0.0	Div by 0	30% (+/-)	N/A
% with business name	100.0	100.0	0.00	30% (+/-)	Yes
% with address line 1	100.0	100.0	0.00	30% (+/-)	Yes
% with city	100.0	100.0	0.00	30% (+/-)	Yes
% with state	100.0	100.0	0.00	30% (+/-)	Yes
% state = LT state code	67.9	67.7	-0.41	30% (+/-)	Yes
% with zip code	100.0	100.0	0.00	30% (+/-)	Yes
% with primary taxonomy	100.0	99.1	-0.86	30% (+/-)	Yes
% with provider entity type = individual	0.0	0.0	Div by 0	30% (+/-)	N/A
% with provider entity type = organization	100.0	100.0	0.00	30% (+/-)	Yes
Provider IDs with or without NPI but linked to state provider file					
Number of provider IDs with or without NPI linked to state provider file	0	0	Div by 0	N/A	N/A
Provider IDs with NPPES Primary Taxonomy					
Number of provider IDs with NPPES primary taxonomy	234	230	-1.71	30% (+/-)	Yes
% individual or group of individuals	0.0	0.0	Div by 0	30% (+/-)	N/A
% allopathic and osteopathic physicians	0.0	0.0	Div by 0	30% (+/-)	N/A
% behavioral health and social service providers	0.0	0.0	Div by 0	30% (+/-)	N/A

Source: Medicaid Analytic eXtract (MAX) Provider Characteristics Files, 2009-2010.

[a] "Yes" signifies that either (1) the percent change between 2009 and 2010 is within the cross-year expected range or (2) both the 2009 and the 2010 values are less than 10. "No" signifies that both (1) the percent change between 2009 and 2010 is over or under the cross-year expected range and (2) either the 2009 or the 2010 value is greater than 10.

2009-2010 MAX LT Billing Provider Characteristics Validation Table
State: DC
Produced: 04/18/2013

Measure	2009 Value	2010 Value	% Change 2009-2010	Cross Year Expected Range	Cross Year Within Range[a]
% chiropractic providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% dental providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% dietary and nutritional service providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% emergency medical service providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% eye and vision service providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% nursing service providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% nursing service-related providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% other service providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% pharmacy service providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% physician assistants and advanced practice nursing providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% podiatric medicine and surgery service providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% respiratory, developmental, rehabilitative, and restorative service providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% speech, language, and hearing service providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% student health care	0.0	0.0	Div by 0	30% (+/-)	N/A
% technologists, technicians, and other technical service providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% group of individuals with multi- or single specialty	0.0	0.0	Div by 0	30% (+/-)	N/A
% nonindividuals	100.0	100.0	0.00	30% (+/-)	Yes
% agencies	0.9	2.6	205.15	30% (+/-)	Yes
% ambulatory health care facilities	0.0	0.0	Div by 0	30% (+/-)	N/A
% hospital units	0.0	0.0	Div by 0	30% (+/-)	N/A
% hospitals	3.8	6.1	58.27	30% (+/-)	Yes
% laboratories	0.0	0.0	Div by 0	30% (+/-)	N/A
% managed care organizations	0.0	0.0	Div by 0	30% (+/-)	N/A
% nursing and custodial care facilities	85.5	60.4	-29.29	30% (+/-)	Yes
% residential treatment facilities	9.4	30.9	228.33	30% (+/-)	No
% respite care facility	0.0	0.0	Div by 0	30% (+/-)	N/A
% suppliers	0.4	0.0	-100.00	30% (+/-)	Yes
% transportation services	0.0	0.0	Div by 0	30% (+/-)	N/A
% nonmedical	0.0	0.0	Div by 0	N/A	N/A
Provider IDs with Entity Type = Individual					
Number of provider IDs with entity type = individual	0	0	Div by 0	30% (+/-)	N/A
% a sole proprietorship	0.0	0.0	Div by 0	30% (+/-)	N/A
% not a sole proprietorship	0.0	0.0	Div by 0	30% (+/-)	N/A
% not answered	0.0	0.0	Div by 0	N/A	N/A
Provider IDs with Entity Type = Organization					
Number of provider IDs with entity type = organization	234	232	-0.85	30% (+/-)	Yes
% organization is a subpart	3.0	3.0	0.87	30% (+/-)	Yes
% organization is not a subpart	56.0	62.1	10.87	30% (+/-)	Yes
% not answered	41.0	34.9	-14.90	N/A	N/A

Source: Medicaid Analytic eXtract (MAX) Provider Characteristics Files, 2009-2010.

[a] "Yes" signifies that either (1) the percent change between 2009 and 2010 is within the cross-year expected range or (2) both the 2009 and the 2010 values are less than 10. "No" signifies that both (1) the percent change between 2009 and 2010 is over or under the cross-year expected range and (2) either the 2009 or the 2010 value is greater than 10.

2009-2010 MAX OT Servicing Provider Characteristics Validation Table
State: DC
Produced: 04/18/2013

Measure	2009 Value	2010 Value	% Change 2009-2010	Cross Year Expected Range	Cross Year Within Range[a]
OT Providers					
Number of provider IDs	10,302	8,832	-14.27	30% (+/-)	Yes
% billing provider on OT claim	29.1	43.5	49.40	N/A	N/A
% servicing provider on OT claim	74.7	54.7	-26.78	N/A	N/A
% NPI servicing provider on OT claim	25.7	45.3	76.38	N/A	N/A
% also a provider on IP claim	1.2	1.4	20.35	N/A	N/A
% also a provider on LT claim	0.7	0.6	-5.37	N/A	N/A
% also a provider on RX claim	20.9	29.8	42.54	N/A	N/A
% provider IDs with NPI	56.1	71.2	27.04	30% (+/-)	Yes
% provider IDs linked to NPPES	54.2	71.1	31.23	30% (+/-)	No
% provider IDs with or without NPI but linked to state provider file	0.0	0.0	Div by 0	N/A	N/A
average number of OT claims	1,209.1	1,691.0	39.86	30% (+/-)	No
average number of beneficiaries with OT claims	137.0	202.5	47.89	30% (+/-)	No
Provider IDs with NPI					
Number of provider IDs with NPI	5,777	6,292	8.91	30% (+/-)	Yes
% NPI source = MSIS	94.2	94.3	0.07	30% (+/-)	Yes
% NPI source = NPPES	5.8	5.7	-1.07	30% (+/-)	Yes
% NPI source = state cross-reference file	0.0	0.0	Div by 0	N/A	N/A
Provider IDs Linked to NPPES					
Number of provider IDs linked to NPPES	5,582	6,280	12.50	30% (+/-)	Yes
% linked via NPI	94.0	94.3	0.27	30% (+/-)	Yes
% linked via Medicaid legacy provider ID	6.0	5.7	-3.92	30% (+/-)	Yes
% linked via Medicare UPIN	0.0	0.0	-55.56	30% (+/-)	Yes
% with name prefix	22.8	26.6	16.81	30% (+/-)	Yes
% with first name	50.8	59.5	17.04	30% (+/-)	Yes
% with middle name	33.2	38.2	15.30	30% (+/-)	Yes
% with last name	50.8	59.5	17.04	30% (+/-)	Yes
% with name suffix	1.4	1.7	21.59	30% (+/-)	Yes
% male	30.7	35.5	15.65	30% (+/-)	Yes
% female	20.1	24.0	19.17	30% (+/-)	Yes
% with credential	47.6	55.3	16.22	30% (+/-)	Yes
% with business name	49.2	40.1	-18.47	30% (+/-)	Yes
% with address line 1	100.0	99.6	-0.41	30% (+/-)	Yes
% with city	100.0	99.6	-0.41	30% (+/-)	Yes
% with state	100.0	99.6	-0.41	30% (+/-)	Yes
% state = OT state code	51.1	55.5	8.54	30% (+/-)	Yes
% with zip code	100.0	99.6	-0.41	30% (+/-)	Yes
% with primary taxonomy	99.4	97.6	-1.84	30% (+/-)	Yes
% with provider entity type = individual	50.8	59.5	17.04	30% (+/-)	Yes
% with provider entity type = organization	49.2	40.1	-18.47	30% (+/-)	Yes
Provider IDs with or without NPI but linked to state provider file					
Number of provider IDs with or without NPI linked to state provider file	0	0	Div by 0	N/A	N/A
Provider IDs with NPPES Primary Taxonomy					
Number of provider IDs with NPPES primary taxonomy	5,583	6,128	9.76	30% (+/-)	Yes
% individual or group of individuals	58.2	75.2	29.28	30% (+/-)	Yes
% allopathic and osteopathic physicians	44.6	63.5	42.52	30% (+/-)	No

Source: Medicaid Analytic eXtract (MAX) Provider Characteristics Files, 2009-2010.

[a] "Yes" signifies that either (1) the percent change between 2009 and 2010 is within the cross-year expected range or (2) both the 2009 and the 2010 values are less than 10. "No" signifies that both (1) the percent change between 2009 and 2010 is over or under the cross-year expected range and (2) either the 2009 or the 2010 value is greater than 10.

2009-2010 MAX OT Servicing Provider Characteristics Validation Table
State: DC
Produced: 04/18/2013

Measure	2009 Value	2010 Value	% Change 2009-2010	Cross Year Expected Range	Cross Year Within Range[a]
% behavioral health and social service providers	0.5	0.4	-8.88	30% (+/-)	Yes
% chiropractic providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% dental providers	3.9	3.2	-17.37	30% (+/-)	Yes
% dietary and nutritional service providers	0.0	0.0	-100.00	30% (+/-)	Yes
% emergency medical service providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% eye and vision service providers	0.4	0.4	-1.56	30% (+/-)	Yes
% nursing service providers	0.2	0.1	-31.63	30% (+/-)	Yes
% nursing service-related providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% other service providers	1.1	2.7	147.85	30% (+/-)	Yes
% pharmacy service providers	0.0	0.0	172.22	30% (+/-)	Yes
% physician assistants and advanced practice nursing providers	3.2	2.5	-20.22	30% (+/-)	Yes
% podiatric medicine and surgery service providers	1.2	1.6	25.40	30% (+/-)	Yes
% respiratory, developmental, rehabilitative, and restorative service providers	0.0	0.0	-100.00	30% (+/-)	Yes
% speech, language, and hearing service providers	0.1	0.2	44.00	30% (+/-)	Yes
% student health care	0.1	0.5	265.60	30% (+/-)	Yes
% technologists, technicians, and other technical service providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% group of individuals with multi- or single specialty	2.8	0.0	-100.00	30% (+/-)	Yes
% nonindividuals	41.8	24.8	-40.73	30% (+/-)	No
% agencies	2.8	2.9	5.22	30% (+/-)	Yes
% ambulatory health care facilities	6.2	4.4	-28.76	30% (+/-)	Yes
% hospital units	0.1	0.0	-31.94	30% (+/-)	Yes
% hospitals	21.4	5.5	-74.35	30% (+/-)	No
% laboratories	2.3	1.3	-42.10	30% (+/-)	Yes
% managed care organizations	0.0	0.2	Div by 0	30% (+/-)	N/A
% nursing and custodial care facilities	1.1	0.6	-50.05	30% (+/-)	Yes
% residential treatment facilities	1.2	1.7	37.30	30% (+/-)	Yes
% respite care facility	0.0	0.0	-100.00	30% (+/-)	Yes
% suppliers	6.3	7.8	22.76	30% (+/-)	Yes
% transportation services	0.4	0.3	-8.94	30% (+/-)	Yes
% nonmedical	0.0	0.0	Div by 0	N/A	N/A
Provider IDs with Entity Type = Individual					
Number of provider IDs with entity type = individual	2,838	3,737	31.68	30% (+/-)	No
% a sole proprietorship	21.9	26.4	20.39	30% (+/-)	Yes
% not a sole proprietorship	71.5	67.2	-5.98	30% (+/-)	Yes
% not answered	6.6	6.4	-2.93	N/A	N/A
Provider IDs with Entity Type = Organization					
Number of provider IDs with entity type = organization	2,744	2,517	-8.27	30% (+/-)	Yes
% organization is a subpart	4.0	6.2	55.04	30% (+/-)	Yes
% organization is not a subpart	86.2	80.4	-6.70	30% (+/-)	Yes
% not answered	9.8	13.4	36.47	N/A	N/A

Source: Medicaid Analytic eXtract (MAX) Provider Characteristics Files, 2009-2010.

[a] "Yes" signifies that either (1) the percent change between 2009 and 2010 is within the cross-year expected range or (2) both the 2009 and the 2010 values are less than 10. "No" signifies that both (1) the percent change between 2009 and 2010 is over or under the cross-year expected range and (2) either the 2009 or the 2010 value is greater than 10.

2009-2010 MAX OT Billing Provider Characteristics Validation Table
State: DC
Produced: 04/18/2013

Measure	2009 Value	2010 Value	% Change 2009-2010	Cross Year Expected Range	Cross Year Within Range[a]
OT Providers					
Number of provider IDs	3,362	4,197	24.84	30% (+/-)	Yes
% billing provider on OT claim	100.0	100.0	0.00	N/A	N/A
% servicing provider on OT claim	89.1	91.6	2.80	N/A	N/A
% NPI servicing provider on OT claim	0.5	0.0	-100.00	N/A	N/A
% also a provider on IP claim	2.1	1.7	-18.71	N/A	N/A
% also a provider on LT claim	3.2	2.0	-36.38	N/A	N/A
% also a provider on RX claim	49.0	52.1	6.27	N/A	N/A
% provider IDs with NPI	44.9	38.9	-13.31	30% (+/-)	Yes
% provider IDs linked to NPPES	43.1	38.8	-9.95	30% (+/-)	Yes
% provider IDs with or without NPI but linked to state provider file	0.0	0.0	Div by 0	N/A	N/A
average number of OT claims	2,118.4	2,583.9	21.97	30% (+/-)	Yes
average number of beneficiaries with OT claims	248.2	331.4	33.50	30% (+/-)	No
Provider IDs with NPI					
Number of provider IDs with NPI	1,508	1,632	8.22	30% (+/-)	Yes
% NPI source = MSIS	80.8	77.3	-4.34	30% (+/-)	Yes
% NPI source = NPPES	19.2	22.7	18.31	30% (+/-)	Yes
% NPI source = state cross-reference file	0.0	0.0	Div by 0	N/A	N/A
Provider IDs Linked to NPPES					
Number of provider IDs linked to NPPES	1,450	1,630	12.41	30% (+/-)	Yes
% linked via NPI	80.1	77.3	-3.46	30% (+/-)	Yes
% linked via Medicaid legacy provider ID	19.9	22.7	13.89	30% (+/-)	Yes
% linked via Medicare UPIN	0.0	0.0	Div by 0	30% (+/-)	N/A
% with name prefix	25.2	23.7	-5.68	30% (+/-)	Yes
% with first name	48.0	44.4	-7.46	30% (+/-)	Yes
% with middle name	31.8	29.1	-8.34	30% (+/-)	Yes
% with last name	48.0	44.4	-7.46	30% (+/-)	Yes
% with name suffix	1.7	1.5	-7.31	30% (+/-)	Yes
% male	31.7	28.4	-10.27	30% (+/-)	Yes
% female	16.3	16.0	-2.04	30% (+/-)	Yes
% with credential	46.0	42.3	-7.98	30% (+/-)	Yes
% with business name	52.0	55.1	5.95	30% (+/-)	Yes
% with address line 1	100.0	99.5	-0.49	30% (+/-)	Yes
% with city	100.0	99.5	-0.49	30% (+/-)	Yes
% with state	100.0	99.5	-0.49	30% (+/-)	Yes
% state = OT state code	54.1	51.8	-4.36	30% (+/-)	Yes
% with zip code	100.0	99.5	-0.49	30% (+/-)	Yes
% with primary taxonomy	99.7	98.4	-1.25	30% (+/-)	Yes
% with provider entity type = individual	48.0	44.4	-7.46	30% (+/-)	Yes
% with provider entity type = organization	52.0	55.1	5.95	30% (+/-)	Yes
Provider IDs with or without NPI but linked to state provider file					
Number of provider IDs with or without NPI linked to state provider file	0	0	Div by 0	N/A	N/A
Provider IDs with NPPES Primary Taxonomy					
Number of provider IDs with NPPES primary taxonomy	1,457	1,604	10.09	30% (+/-)	Yes
% individual or group of individuals	55.5	53.1	-4.45	30% (+/-)	Yes
% allopathic and osteopathic physicians	43.7	39.7	-9.16	30% (+/-)	Yes

Source: Medicaid Analytic eXtract (MAX) Provider Characteristics Files, 2009-2010.

[a] "Yes" signifies that either (1) the percent change between 2009 and 2010 is within the cross-year expected range or (2) both the 2009 and the 2010 values are less than 10. "No" signifies that both (1) the percent change between 2009 and 2010 is over or under the cross-year expected range and (2) either the 2009 or the 2010 value is greater than 10.

2009-2010 MAX OT Billing Provider Characteristics Validation Table
State: DC
Produced: 04/18/2013

Measure	2009 Value	2010 Value	% Change 2009-2010	Cross Year Expected Range	Cross Year Within Range[a]
% behavioral health and social service providers	0.5	0.9	81.88	30% (+/-)	Yes
% chiropractic providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% dental providers	3.8	4.6	18.39	30% (+/-)	Yes
% dietary and nutritional service providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% emergency medical service providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% eye and vision service providers	0.9	0.8	-9.19	30% (+/-)	Yes
% nursing service providers	0.0	0.1	Div by 0	30% (+/-)	N/A
% nursing service-related providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% other service providers	1.4	2.4	72.54	30% (+/-)	Yes
% pharmacy service providers	0.1	0.1	81.16	30% (+/-)	Yes
% physician assistants and advanced practice nursing providers	2.0	2.0	0.25	30% (+/-)	Yes
% podiatric medicine and surgery service providers	2.4	2.3	-3.96	30% (+/-)	Yes
% respiratory, developmental, rehabilitative, and restorative service providers	0.1	0.0	-100.00	30% (+/-)	Yes
% speech, language, and hearing service providers	0.1	0.1	81.16	30% (+/-)	Yes
% student health care	0.1	0.1	81.16	30% (+/-)	Yes
% technologists, technicians, and other technical service providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% group of individuals with multi- or single specialty	0.6	0.0	-100.00	30% (+/-)	Yes
% nonindividuals	44.5	46.9	5.55	30% (+/-)	Yes
% agencies	5.2	6.2	18.33	30% (+/-)	Yes
% ambulatory health care facilities	9.7	6.9	-29.63	30% (+/-)	Yes
% hospital units	0.1	0.1	-8.76	30% (+/-)	Yes
% hospitals	4.9	7.5	52.65	30% (+/-)	Yes
% laboratories	2.2	2.4	7.88	30% (+/-)	Yes
% managed care organizations	0.0	0.1	Div by 0	30% (+/-)	N/A
% nursing and custodial care facilities	6.5	2.9	-55.06	30% (+/-)	Yes
% residential treatment facilities	3.0	5.1	73.23	30% (+/-)	Yes
% respite care facility	0.1	0.0	-100.00	30% (+/-)	Yes
% suppliers	12.1	15.2	25.41	30% (+/-)	Yes
% transportation services	0.6	0.6	0.81	30% (+/-)	Yes
% nonmedical	0.0	0.0	Div by 0	N/A	N/A
Provider IDs with Entity Type = Individual					
Number of provider IDs with entity type = individual	696	724	4.02	30% (+/-)	Yes
% a sole proprietorship	32.9	30.5	-7.22	30% (+/-)	Yes
% not a sole proprietorship	62.1	65.2	5.03	30% (+/-)	Yes
% not answered	5.0	4.3	-14.85	N/A	N/A
Provider IDs with Entity Type = Organization					
Number of provider IDs with entity type = organization	754	898	19.10	30% (+/-)	Yes
% organization is a subpart	5.2	4.9	-5.26	30% (+/-)	Yes
% organization is not a subpart	75.1	79.3	5.62	30% (+/-)	Yes
% not answered	19.8	15.8	-19.98	N/A	N/A

Source: Medicaid Analytic eXtract (MAX) Provider Characteristics Files, 2009-2010.

[a] "Yes" signifies that either (1) the percent change between 2009 and 2010 is within the cross-year expected range or (2) both the 2009 and the 2010 values are less than 10. "No" signifies that both (1) the percent change between 2009 and 2010 is over or under the cross-year expected range and (2) either the 2009 or the 2010 value is greater than 10.

2009-2010 MAX RX Billing Provider Characteristics Validation Table
State: DC
Produced: 04/18/2013

Measure	2009 Value	2010 Value	% Change 2009-2010	Cross Year Expected Range	Cross Year Within Range[a]
RX Providers					
Number of provider IDs	399	463	16.04	30% (+/-)	Yes
% billing provider on RX claim	53.1	50.1	-5.69	N/A	N/A
% prescribing provider on RX claim	7.3	2.4	-67.31	N/A	N/A
% NPI billing provider on RX claim	46.9	49.9	6.45	N/A	N/A
% also a provider on IP claim	0.0	0.0	Div by 0	N/A	N/A
% also a provider on LT claim	0.0	0.0	Div by 0	N/A	N/A
% also a provider on OT claim	26.6	44.3	66.66	N/A	N/A
% provider IDs with NPI	95.7	99.6	4.00	30% (+/-)	Yes
% provider IDs linked to NPPES	93.7	99.6	6.22	30% (+/-)	Yes
% provider IDs with or without NPI but linked to state provider file	0.0	0.0	Div by 0	N/A	N/A
average number of RX claims	2,651.0	4,727.3	78.32	30% (+/-)	No
average number of beneficiaries with RX claims	190.9	306.3	60.48	30% (+/-)	No
Provider IDs with NPI					
Number of provider IDs with NPI	382	461	20.68	30% (+/-)	Yes
% NPI source = MSIS	98.4	100.0	1.60	30% (+/-)	Yes
% NPI source = NPPES	1.6	0.0	-100.00	30% (+/-)	Yes
% NPI source = state cross-reference file	0.0	0.0	Div by 0	N/A	N/A
Provider IDs Linked to NPPES					
Number of provider IDs linked to NPPES	374	461	23.26	30% (+/-)	Yes
% linked via NPI	98.4	100.0	1.63	30% (+/-)	Yes
% linked via Medicaid legacy provider ID	1.6	0.0	-100.00	30% (+/-)	Yes
% linked via Medicare UPIN	0.0	0.0	Div by 0	30% (+/-)	N/A
% with name prefix	0.0	0.0	Div by 0	30% (+/-)	N/A
% with first name	0.0	0.2	Div by 0	30% (+/-)	N/A
% with middle name	0.0	0.2	Div by 0	30% (+/-)	N/A
% with last name	0.0	0.2	Div by 0	30% (+/-)	N/A
% with name suffix	0.0	0.0	Div by 0	30% (+/-)	N/A
% male	0.0	0.2	Div by 0	30% (+/-)	N/A
% female	0.0	0.0	Div by 0	30% (+/-)	N/A
% with credential	0.0	0.2	Div by 0	30% (+/-)	N/A
% with business name	100.0	98.0	-1.95	30% (+/-)	Yes
% with address line 1	100.0	98.3	-1.74	30% (+/-)	Yes
% with city	100.0	98.3	-1.74	30% (+/-)	Yes
% with state	100.0	98.3	-1.74	30% (+/-)	Yes
% state = RX state code	54.5	49.0	-10.12	30% (+/-)	Yes
% with zip code	100.0	98.3	-1.74	30% (+/-)	Yes
% with primary taxonomy	96.8	96.5	-0.27	30% (+/-)	Yes
% with provider entity type = individual	0.0	0.2	Div by 0	30% (+/-)	N/A
% with provider entity type = organization	100.0	98.0	-1.95	30% (+/-)	Yes
Provider IDs with or without NPI but linked to state provider file					
Number of provider IDs with or without NPI linked to state provider file	0	0	Div by 0	N/A	N/A
Provider IDs with NPPES Primary Taxonomy					
Number of provider IDs with NPPES primary taxonomy	362	445	22.93	30% (+/-)	Yes
% individual or group of individuals	0.8	1.1	35.59	30% (+/-)	Yes
% allopathic and osteopathic physicians	0.0	0.2	Div by 0	30% (+/-)	N/A

Source: Medicaid Analytic eXtract (MAX) Provider Characteristics Files, 2009-2010.

[a] "Yes" signifies that either (1) the percent change between 2009 and 2010 is within the cross-year expected range or (2) both the 2009 and the 2010 values are less than 10. "No" signifies that both (1) the percent change between 2009 and 2010 is over or under the cross-year expected range and (2) either the 2009 or the 2010 value is greater than 10.

2009-2010 MAX RX Billing Provider Characteristics Validation Table
State: DC
Produced: 04/18/2013

Measure	2009 Value	2010 Value	% Change 2009-2010	Cross Year Expected Range	Cross Year Within Range[a]
% behavioral health and social service providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% chiropractic providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% dental providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% dietary and nutritional service providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% emergency medical service providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% eye and vision service providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% nursing service providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% nursing service-related providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% other service providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% pharmacy service providers	0.8	0.9	8.44	30% (+/-)	Yes
% physician assistants and advanced practice nursing providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% podiatric medicine and surgery service providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% respiratory, developmental, rehabilitative, and restorative service providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% speech, language, and hearing service providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% student health care	0.0	0.0	Div by 0	30% (+/-)	N/A
% technologists, technicians, and other technical service providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% group of individuals with multi- or single specialty	0.0	0.0	Div by 0	30% (+/-)	N/A
% nonindividuals	99.2	98.9	-0.30	30% (+/-)	Yes
% agencies	0.6	0.4	-18.66	30% (+/-)	Yes
% ambulatory health care facilities	0.0	0.0	Div by 0	30% (+/-)	N/A
% hospital units	0.0	0.0	Div by 0	30% (+/-)	N/A
% hospitals	0.0	0.0	Div by 0	30% (+/-)	N/A
% laboratories	0.0	0.0	Div by 0	30% (+/-)	N/A
% managed care organizations	0.0	0.0	Div by 0	30% (+/-)	N/A
% nursing and custodial care facilities	0.0	0.0	Div by 0	30% (+/-)	N/A
% residential treatment facilities	0.0	0.0	Div by 0	30% (+/-)	N/A
% respite care facility	0.0	0.0	Div by 0	30% (+/-)	N/A
% suppliers	98.6	98.4	-0.19	30% (+/-)	Yes
% transportation services	0.0	0.0	Div by 0	30% (+/-)	N/A
% nonmedical	0.0	0.0	Div by 0	N/A	N/A
Provider IDs with Entity Type = Individual					
Number of provider IDs with entity type = individual	0	1	Div by 0	30% (+/-)	N/A
% a sole proprietorship	0.0	0.0	Div by 0	30% (+/-)	N/A
% not a sole proprietorship	0.0	100.0	Div by 0	30% (+/-)	N/A
% not answered	0.0	0.0	Div by 0	N/A	N/A
Provider IDs with Entity Type = Organization					
Number of provider IDs with entity type = organization	374	452	20.86	30% (+/-)	Yes
% organization is a subpart	5.6	7.1	26.09	30% (+/-)	Yes
% organization is not a subpart	88.5	88.5	-0.01	30% (+/-)	Yes
% not answered	5.9	4.4	-24.77	N/A	N/A

Source: Medicaid Analytic eXtract (MAX) Provider Characteristics Files, 2009-2010.

[a] "Yes" signifies that either (1) the percent change between 2009 and 2010 is within the cross-year expected range or (2) both the 2009 and the 2010 values are less than 10. "No" signifies that both (1) the percent change between 2009 and 2010 is over or under the cross-year expected range and (2) either the 2009 or the 2010 value is greater than 10.

2009-2010 MAX RX Prescribing Provider Characteristics Validation Table
State: DC
Produced: 04/18/2013

Measure	2009 Value	2010 Value	% Change 2009-2010	Cross Year Expected Range	Cross Year Within Range[a]
RX Providers					
Number of provider IDs	2,494	2,741	9.90	30% (+/-)	Yes
% billing provider on RX claim	1.2	0.4	-65.52	N/A	N/A
% prescribing provider on RX claim	100.0	100.0	0.00	N/A	N/A
% NPI billing provider on RX claim	0.0	0.0	Div by 0	N/A	N/A
% also a provider on IP claim	1.1	0.8	-25.85	N/A	N/A
% also a provider on LT claim	0.2	0.3	21.16	N/A	N/A
% also a provider on OT claim	84.4	90.3	7.03	N/A	N/A
% provider IDs with NPI	33.4	32.1	-3.88	30% (+/-)	Yes
% provider IDs linked to NPPES	33.2	32.1	-3.41	30% (+/-)	Yes
% provider IDs with or without NPI but linked to state provider file	0.0	0.0	Div by 0	N/A	N/A
average number of RX claims	513.6	419.9	-18.25	30% (+/-)	Yes
average number of beneficiaries with RX claims	41.2	36.4	-11.69	30% (+/-)	Yes
Provider IDs with NPI					
Number of provider IDs with NPI	833	880	5.64	30% (+/-)	Yes
% NPI source = MSIS	63.0	64.7	2.59	30% (+/-)	Yes
% NPI source = NPPES	37.0	35.3	-4.42	30% (+/-)	Yes
% NPI source = state cross-reference file	0.0	0.0	Div by 0	N/A	N/A
Provider IDs Linked to NPPES					
Number of provider IDs linked to NPPES	829	880	6.15	30% (+/-)	Yes
% linked via NPI	62.8	64.7	2.88	30% (+/-)	Yes
% linked via Medicaid legacy provider ID	37.0	35.3	-4.57	30% (+/-)	Yes
% linked via Medicare UPIN	0.1	0.0	-100.00	30% (+/-)	Yes
% with name prefix	38.6	31.6	-18.16	30% (+/-)	Yes
% with first name	76.7	59.1	-22.98	30% (+/-)	Yes
% with middle name	50.4	38.5	-23.60	30% (+/-)	Yes
% with last name	76.7	59.1	-22.98	30% (+/-)	Yes
% with name suffix	2.7	2.2	-18.65	30% (+/-)	Yes
% male	49.0	36.3	-25.98	30% (+/-)	Yes
% female	27.7	22.8	-17.67	30% (+/-)	Yes
% with credential	73.6	57.0	-22.48	30% (+/-)	Yes
% with business name	23.3	40.5	73.77	30% (+/-)	No
% with address line 1	100.0	99.5	-0.45	30% (+/-)	Yes
% with city	100.0	99.5	-0.45	30% (+/-)	Yes
% with state	100.0	99.5	-0.45	30% (+/-)	Yes
% state = RX state code	68.5	64.1	-6.46	30% (+/-)	Yes
% with zip code	100.0	99.5	-0.45	30% (+/-)	Yes
% with primary taxonomy	99.6	97.6	-2.03	30% (+/-)	Yes
% with provider entity type = individual	76.7	59.1	-22.98	30% (+/-)	Yes
% with provider entity type = organization	23.3	40.5	73.77	30% (+/-)	No
Provider IDs with or without NPI but linked to state provider file					
Number of provider IDs with or without NPI linked to state provider file	0	0	Div by 0	N/A	N/A
Provider IDs with NPPES Primary Taxonomy					
Number of provider IDs with NPPES primary taxonomy	828	859	3.74	30% (+/-)	Yes
% individual or group of individuals	87.1	87.0	-0.13	30% (+/-)	Yes
% allopathic and osteopathic physicians	69.0	69.8	1.29	30% (+/-)	Yes

Source: Medicaid Analytic eXtract (MAX) Provider Characteristics Files, 2009-2010.

[a] "Yes" signifies that either (1) the percent change between 2009 and 2010 is within the cross-year expected range or (2) both the 2009 and the 2010 values are less than 10. "No" signifies that both (1) the percent change between 2009 and 2010 is over or under the cross-year expected range and (2) either the 2009 or the 2010 value is greater than 10.

2009-2010 MAX RX Prescribing Provider Characteristics Validation Table
State: DC
Produced: 04/18/2013

Measure	2009 Value	2010 Value	% Change 2009-2010	Cross Year Expected Range	Cross Year Within Range[a]
% behavioral health and social service providers	0.2	0.1	-52.07	30% (+/-)	Yes
% chiropractic providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% dental providers	4.8	5.4	10.85	30% (+/-)	Yes
% dietary and nutritional service providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% emergency medical service providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% eye and vision service providers	0.2	0.6	140.50	30% (+/-)	Yes
% nursing service providers	0.1	0.1	-4.13	30% (+/-)	Yes
% nursing service-related providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% other service providers	1.7	3.5	106.51	30% (+/-)	Yes
% pharmacy service providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% physician assistants and advanced practice nursing providers	4.8	4.3	-10.85	30% (+/-)	Yes
% podiatric medicine and surgery service providers	3.1	3.0	-3.60	30% (+/-)	Yes
% respiratory, developmental, rehabilitative, and restorative service providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% speech, language, and hearing service providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% student health care	0.0	0.1	Div by 0	30% (+/-)	N/A
% technologists, technicians, and other technical service providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% group of individuals with multi- or single specialty	3.0	0.0	-100.00	30% (+/-)	Yes
% nonindividuals	12.9	13.0	0.89	30% (+/-)	Yes
% agencies	0.7	0.7	-3.72	30% (+/-)	Yes
% ambulatory health care facilities	3.5	3.6	3.06	30% (+/-)	Yes
% hospital units	0.4	0.3	-3.59	30% (+/-)	Yes
% hospitals	3.3	5.7	74.92	30% (+/-)	Yes
% laboratories	0.0	0.0	Div by 0	30% (+/-)	N/A
% managed care organizations	0.0	0.6	Div by 0	30% (+/-)	N/A
% nursing and custodial care facilities	0.2	0.6	140.50	30% (+/-)	Yes
% residential treatment facilities	0.1	0.2	92.56	30% (+/-)	Yes
% respite care facility	0.0	0.0	Div by 0	30% (+/-)	N/A
% suppliers	4.6	1.2	-74.63	30% (+/-)	Yes
% transportation services	0.1	0.1	-4.13	30% (+/-)	Yes
% nonmedical	0.0	0.0	Div by 0	N/A	N/A
Provider IDs with Entity Type = Individual					
Number of provider IDs with entity type = individual	636	520	-18.24	30% (+/-)	Yes
% a sole proprietorship	30.3	32.9	8.37	30% (+/-)	Yes
% not a sole proprietorship	64.8	62.3	-3.82	30% (+/-)	Yes
% not answered	4.9	4.8	-1.35	N/A	N/A
Provider IDs with Entity Type = Organization					
Number of provider IDs with entity type = organization	193	356	84.46	30% (+/-)	No
% organization is a subpart	3.6	2.2	-38.05	30% (+/-)	Yes
% organization is not a subpart	86.0	87.9	2.22	30% (+/-)	Yes
% not answered	10.4	9.8	-5.13	N/A	N/A

Source: Medicaid Analytic eXtract (MAX) Provider Characteristics Files, 2009-2010.

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2009-2010 MAX All Provider Characteristics Validation Table
State: DC
Produced: 04/18/2013

Measure	2009 Value	2010 Value	% Change 2009-2010	Cross Year Expected Range	Cross Year Within Range[a]
All Providers					
Number of provider IDs	11,429	9,815	-14.12	30%(+/-)	Yes
% billing provider on IP claim	0.8	0.8	7.14	N/A	N/A
% NPI billing provider on IP claim	0.9	0.8	-12.93	N/A	N/A
% billing provider on LT claim	1.2	1.4	13.14	N/A	N/A
% NPI billing provider on LT claim	0.9	1.0	18.90	N/A	N/A
% billing provider on OT claim	29.4	42.8	45.37	N/A	N/A
% servicing provider on OT claim	67.3	49.2	-26.90	N/A	N/A
% NPI servicing provider on OT claim	23.2	40.8	76.07	N/A	N/A
% billing provider on RX claim	1.9	2.4	27.44	N/A	N/A
% prescribing provider on RX claim	21.8	27.9	27.98	N/A	N/A
% NPI billing provider on RX claim	1.6	2.4	43.89	N/A	N/A
% billing provider	31.4	44.9	43.06	N/A	N/A
% NPI billing provider	3.4	4.2	23.98	N/A	N/A
% servicing provider	67.3	49.2	-26.90	N/A	N/A
% NPI servicing provider	23.2	40.8	76.07	N/A	N/A
% prescribing provider	21.8	27.9	27.98	N/A	N/A
% provider IDs with NPI	55.6	69.5	24.92	30%(+/-)	Yes
% provider IDs linked to NPPES	53.8	69.4	29.06	30%(+/-)	Yes
% provider IDs with or without NPI but linked to state provider file	0.0	0.0	Div by 0	N/A	N/A
average number of claims	1,310.5	2,110.0	61.01	30%(+/-)	No
average number of beneficiaries with claims	144.5	239.2	65.56	30%(+/-)	No
Provider IDs with NPI					
Number of provider IDs with NPI	6,360	6,823	7.28	30%(+/-)	Yes
% NPI source = MSIS	93.3	93.8	0.45	30%(+/-)	Yes
% NPI source = NPPES	6.7	6.2	-6.34	30%(+/-)	Yes
% NPI source = state cross-reference file	0.0	0.0	Div by 0	N/A	N/A
Provider IDs Linked to NPPES					
Number of provider IDs linked to NPPES	6,145	6,811	10.84	30%(+/-)	Yes
% linked via NPI	93.1	93.7	0.69	30%(+/-)	Yes
% linked via Medicaid legacy provider ID	6.9	6.2	-9.13	30%(+/-)	Yes
% linked via Medicare UPIN	0.0	0.0	-54.55	30%(+/-)	Yes
% with name prefix	20.9	24.6	18.02	30%(+/-)	Yes
% with first name	46.8	55.2	17.84	30%(+/-)	Yes
% with middle name	30.5	35.5	16.23	30%(+/-)	Yes
% with last name	46.8	55.2	17.84	30%(+/-)	Yes
% with name suffix	1.2	1.5	23.44	30%(+/-)	Yes
% male	28.3	32.9	16.45	30%(+/-)	Yes
% female	18.6	22.3	19.95	30%(+/-)	Yes
% with credential	43.9	51.3	16.96	30%(+/-)	Yes
% with business name	53.2	44.3	-16.65	30%(+/-)	Yes
% with address line 1	100.0	99.5	-0.50	30%(+/-)	Yes
% with city	100.0	99.5	-0.50	30%(+/-)	Yes
% with state	100.0	99.5	-0.50	30%(+/-)	Yes
% state = claim file state code	51.0	55.0	7.69	30%(+/-)	Yes
% with zip code	100.0	99.5	-0.50	30%(+/-)	Yes

Source: Medicaid Analytic eXtract (MAX) Provider Characteristics Files, 2009-2010.

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2009-2010 MAX All Provider Characteristics Validation Table
State: DC
Produced: 04/18/2013

Measure	2009 Value	2010 Value	% Change 2009-2010	Cross Year Expected Range	Cross Year Within Range[a]
% with primary taxonomy	99.3	97.5	-1.78	30%(+/-)	Yes
% with provider entity type = individual	46.8	55.2	17.84	30%(+/-)	Yes
% with provider entity type = organization	53.2	44.3	-16.65	30%(+/-)	Yes
Provider IDs with or without NPI but linked to state provider file					
Number of provider IDs with or without NPI linked to state provider file	0	0	Div by 0	N/A	N/A
Provider IDs with NPPES Primary Taxonomy					
Number of provider IDs with NPPES primary taxonomy	6,134	6,641	8.27	30%(+/-)	Yes
% individual or group of individuals	54.2	70.4	29.71	30%(+/-)	Yes
% allopathic and osteopathic physicians	41.6	59.3	42.47	30%(+/-)	No
% behavioral health and social service providers	0.4	0.4	-7.50	30%(+/-)	Yes
% chiropractic providers	0.0	0.0	Div by 0	30%(+/-)	N/A
% dental providers	3.5	3.0	-14.95	30%(+/-)	Yes
% dietary and nutritional service providers	0.0	0.0	-100.00	30%(+/-)	Yes
% emergency medical service providers	0.0	0.0	Div by 0	30%(+/-)	N/A
% eye and vision service providers	0.4	0.4	-0.25	30%(+/-)	Yes
% nursing service providers	0.2	0.1	-30.61	30%(+/-)	Yes
% nursing service-related providers	0.0	0.0	Div by 0	30%(+/-)	N/A
% other service providers	1.0	2.5	144.01	30%(+/-)	Yes
% pharmacy service providers	0.0	0.1	53.06	30%(+/-)	Yes
% physician assistants and advanced practice nursing providers	3.0	2.5	-17.67	30%(+/-)	Yes
% podiatric medicine and surgery service providers	1.2	1.4	23.68	30%(+/-)	Yes
% respiratory, developmental, rehabilitative, and restorative service providers	0.0	0.0	-100.00	30%(+/-)	Yes
% speech, language, and hearing service providers	0.1	0.2	45.61	30%(+/-)	Yes
% student health care	0.1	0.4	270.18	30%(+/-)	Yes
% technologists, technicians, and other technical service providers	0.0	0.0	Div by 0	30%(+/-)	N/A
% group of individuals with multi- or single specialty	2.5	0.0	-100.00	30%(+/-)	Yes
% nonindividuals	45.8	29.6	-35.21	30%(+/-)	No
% agencies	2.6	2.8	7.57	30%(+/-)	Yes
% ambulatory health care facilities	5.7	4.1	-27.27	30%(+/-)	Yes
% hospital units	0.1	0.2	32.46	30%(+/-)	Yes
% hospitals	20.3	5.6	-72.62	30%(+/-)	No
% laboratories	2.1	1.2	-41.27	30%(+/-)	Yes
% managed care organizations	0.0	0.2	Div by 0	30%(+/-)	N/A
% nursing and custodial care facilities	3.3	2.3	-31.63	30%(+/-)	Yes
% residential treatment facilities	1.4	2.2	61.90	30%(+/-)	Yes
% respite care facility	0.0	0.0	-100.00	30%(+/-)	Yes
% suppliers	9.9	10.8	8.79	30%(+/-)	Yes
% transportation services	0.3	0.3	-7.67	30%(+/-)	Yes
% nonmedical	0.0	0.0	Div by 0	N/A	N/A
Provider IDs with Entity Type = Individual					
Number of provider IDs with entity type = individual	2,878	3,759	30.61	30%(+/-)	No
% a sole proprietorship	21.6	26.3	21.67	30%(+/-)	Yes
% not a sole proprietorship	71.9	67.3	-6.33	30%(+/-)	Yes
% not answered	6.5	6.4	-2.15	N/A	N/A
Provider IDs with Entity Type = Organization					
Number of provider IDs with entity type = organization	3,267	3,018	-7.62	30%(+/-)	Yes
% organization is a subpart	4.1	6.3	53.17	30%(+/-)	Yes
% organization is not a subpart	84.8	80.0	-5.67	30%(+/-)	Yes
% not answered	11.1	13.7	23.46	N/A	N/A

Source: Medicaid Analytic eXtract (MAX) Provider Characteristics Files, 2009-2010.

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