

**Medicaid Analytic Extract
Provider Characteristics
(MAXPC)**

**State-Specific Validation Tables,
2010**

South Carolina

May 31, 2013

Deo Bencio
Mei-ling Mason

MATHEMATICA
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

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: SC

Produced: 02/28/2013

Measure	2009 Value	2010 Value	% Change 2009-2010	Cross Year Expected Range	Cross Year Within Range ^a
IP Providers					
Number of provider IDs	222	242	9.01	30% (+/-)	Yes
% billing provider on IP claim	100.0	100.0	0.00	N/A	N/A
% NPI billing provider on IP claim	100.0	100.0	0.00	N/A	N/A
% also a provider on LT claim	4.1	3.3	-18.45	N/A	N/A
% also a provider on OT claim	69.4	66.1	-4.69	N/A	N/A
% also a provider on RX claim	5.9	6.6	12.91	N/A	N/A
% provider IDs with NPI	100.0	100.0	0.00	30% (+/-)	Yes
% provider IDs linked to NPPES	99.6	100.0	0.45	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	487.6	398.2	-18.32	30% (+/-)	Yes
average number of beneficiaries with IP claims	405.8	328.1	-19.15	30% (+/-)	Yes
Provider IDs with NPI					
Number of provider IDs with NPI	222	242	9.01	30% (+/-)	Yes
% NPI source = MSIS	100.0	100.0	0.00	30% (+/-)	Yes
% NPI source = NPPES	0.0	0.0	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	221	242	9.50	30% (+/-)	Yes
% linked via NPI	100.0	100.0	0.00	30% (+/-)	Yes
% linked via Medicaid legacy provider ID	0.0	0.0	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 = IP state code	38.9	37.2	-4.43	30% (+/-)	Yes
% with zip code	100.0	100.0	0.00	30% (+/-)	Yes
% with primary taxonomy	100.0	99.2	-0.83	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	222	240	8.11	30% (+/-)	Yes
% individual or group of individuals	2.7	0.4	-84.57	30% (+/-)	Yes
% allopathic and osteopathic physicians	2.7	0.4	-84.57	30% (+/-)	Yes
% behavioral health and social service providers	0.0	0.0	Div by 0	30% (+/-)	N/A

Source: Medicaid Analytic eExtract (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: SC

Produced: 02/28/2013

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	97.3	99.6	2.35	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	8.1	7.5	-7.50	30% (+/-)	Yes
% hospitals	87.8	90.8	3.41	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	0.0	0.4	Div by 0	30% (+/-)	N/A
% residential treatment facilities	1.4	0.8	-38.34	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	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	221	242	9.50	30% (+/-)	Yes
% organization is a subpart	11.3	12.4	9.59	30% (+/-)	Yes
% organization is not a subpart	74.7	76.0	1.84	30% (+/-)	Yes
% not answered	14.0	11.6	-17.52	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: SC
Produced: 02/28/2013

Measure	2009 Value	2010 Value	% Change 2009-2010	Cross Year Expected Range	Cross Year Within Range ^a
LT Providers					
Number of provider IDs	285	287	0.70	30% (+/-)	Yes
% billing provider on LT claim	100.0	100.0	0.00	N/A	N/A
% NPI billing provider on LT claim	9.8	10.8	9.93	N/A	N/A
% also a provider on IP claim	3.2	2.8	-11.75	N/A	N/A
% also a provider on OT claim	2.1	1.7	-17.24	N/A	N/A
% also a provider on RX claim	0.7	1.0	48.86	N/A	N/A
% provider IDs with NPI	79.3	80.1	1.06	30% (+/-)	Yes
% provider IDs linked to NPPES	79.3	80.1	1.06	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 LT claims	590.9	590.7	-0.05	30% (+/-)	Yes
average number of beneficiaries with LT claims	70.8	70.4	-0.61	30% (+/-)	Yes
Provider IDs with NPI					
Number of provider IDs with NPI	226	230	1.77	30% (+/-)	Yes
% NPI source = MSIS	12.4	13.5	8.79	30% (+/-)	Yes
% NPI source = NPPES	87.6	86.5	-1.24	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	226	230	1.77	30% (+/-)	Yes
% linked via NPI	12.4	13.5	8.79	30% (+/-)	Yes
% linked via Medicaid legacy provider ID	87.6	86.5	-1.24	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	0.0	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	98.7	99.1	0.46	30% (+/-)	Yes
% with zip code	100.0	100.0	0.00	30% (+/-)	Yes
% with primary taxonomy	99.6	100.0	0.44	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	225	230	2.22	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 eExtract (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: SC

Produced: 02/28/2013

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	0.0	0.0	Div by 0	30% (+/-)	N/A
% ambulatory health care facilities	0.0	0.0	Div by 0	30% (+/-)	N/A
% hospital units	1.3	0.9	-34.73	30% (+/-)	Yes
% hospitals	5.3	7.0	30.45	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	86.7	85.7	-1.17	30% (+/-)	Yes
% residential treatment facilities	6.7	6.5	-2.17	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	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	226	230	1.77	30% (+/-)	Yes
% organization is a subpart	7.1	9.6	35.10	30% (+/-)	Yes
% organization is not a subpart	41.2	44.3	7.77	30% (+/-)	Yes
% not answered	51.8	46.1	-10.98	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 OT Servicing Provider Characteristics Validation Table

State: SC

Produced: 02/28/2013

Measure	2009 Value	2010 Value	% Change 2009-2010	Cross Year Expected Range	Cross Year Within Range ^a
OT Providers					
Number of provider IDs	25,129	25,807	2.70	30% (+/-)	Yes
% billing provider on OT claim	24.2	21.3	-11.83	N/A	N/A
% servicing provider on OT claim	100.0	100.0	0.00	N/A	N/A
% NPI servicing provider on OT claim	0.0	0.0	Div by 0	N/A	N/A
% also a provider on IP claim	0.2	0.0	-74.17	N/A	N/A
% also a provider on LT claim	0.0	0.0	50.00	N/A	N/A
% also a provider on RX claim	52.7	54.2	2.90	N/A	N/A
% provider IDs with NPI	1.3	47.9	3,607.42	30% (+/-)	No
% provider IDs linked to NPPES	1.3	47.9	3,607.42	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	904.4	790.0	-12.65	30% (+/-)	Yes
average number of beneficiaries with OT claims	146.2	130.1	-11.01	30% (+/-)	Yes
Provider IDs with NPI					
Number of provider IDs with NPI	325	12,371	3,706.46	30% (+/-)	No
% NPI source = MSIS	44.9	98.4	119.06	30% (+/-)	No
% NPI source = NPPES	55.1	1.6	-97.11	30% (+/-)	No
% 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	325	12,371	3,706.46	30% (+/-)	No
% linked via NPI	44.9	98.4	119.06	30% (+/-)	No
% linked via Medicaid legacy provider ID	47.4	1.5	-96.83	30% (+/-)	No
% linked via Medicare UPIN	7.7	0.1	-98.84	30% (+/-)	Yes
% with name prefix	25.2	47.1	86.68	30% (+/-)	No
% with first name	48.9	97.8	99.84	30% (+/-)	No
% with middle name	40.0	83.8	109.44	30% (+/-)	No
% with last name	48.9	97.8	99.84	30% (+/-)	No
% with name suffix	2.8	8.8	217.91	30% (+/-)	Yes
% male	32.3	65.2	101.84	30% (+/-)	No
% female	16.6	32.6	95.97	30% (+/-)	No
% with credential	45.8	95.8	109.02	30% (+/-)	No
% with business name	51.1	1.9	-96.38	30% (+/-)	No
% with address line 1	100.0	99.6	-0.38	30% (+/-)	Yes
% with city	100.0	99.6	-0.38	30% (+/-)	Yes
% with state	100.0	99.6	-0.38	30% (+/-)	Yes
% state = OT state code	85.2	78.4	-8.00	30% (+/-)	Yes
% with zip code	100.0	99.6	-0.38	30% (+/-)	Yes
% with primary taxonomy	98.8	99.0	0.20	30% (+/-)	Yes
% with provider entity type = individual	48.9	97.8	99.84	30% (+/-)	No
% with provider entity type = organization	51.1	1.9	-96.38	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	321	12,243	3,714.02	30% (+/-)	No
% individual or group of individuals	49.5	98.6	99.00	30% (+/-)	No
% allopathic and osteopathic physicians	28.3	74.3	161.96	30% (+/-)	No

Source: Medicaid Analytic eExtract (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: SC

Produced: 02/28/2013

Measure	2009 Value	2010 Value	% Change 2009-2010	Cross Year Expected Range	Cross Year Within Range ^a
% behavioral health and social service providers	3.7	0.4	-89.94	30% (+/-)	Yes
% chiropractic providers	3.1	0.1	-97.11	30% (+/-)	Yes
% dental providers	1.9	6.6	250.51	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	2.5	2.1	-15.13	30% (+/-)	Yes
% nursing service providers	0.0	0.1	Div by 0	30% (+/-)	N/A
% nursing service-related providers	0.3	0.0	-100.00	30% (+/-)	Yes
% other service providers	5.3	3.1	-41.71	30% (+/-)	Yes
% pharmacy service providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% physician assistants and advanced practice nursing providers	0.9	10.7	1,048.77	30% (+/-)	No
% podiatric medicine and surgery service providers	0.0	0.8	Div by 0	30% (+/-)	N/A
% respiratory, developmental, rehabilitative, and restorative service providers	1.2	0.1	-91.49	30% (+/-)	Yes
% speech, language, and hearing service providers	1.9	0.1	-93.90	30% (+/-)	Yes
% student health care	0.0	0.2	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	0.3	0.0	-100.00	30% (+/-)	Yes
% nonindividuals	50.5	1.4	-97.17	30% (+/-)	No
% agencies	12.5	0.7	-94.49	30% (+/-)	No
% ambulatory health care facilities	1.9	0.2	-91.28	30% (+/-)	Yes
% hospital units	0.3	0.0	-100.00	30% (+/-)	Yes
% hospitals	19.3	0.1	-99.49	30% (+/-)	No
% laboratories	0.6	0.0	-100.00	30% (+/-)	Yes
% managed care organizations	0.6	0.0	-98.72	30% (+/-)	Yes
% nursing and custodial care facilities	3.1	0.2	-92.39	30% (+/-)	Yes
% residential treatment facilities	0.6	0.0	-97.43	30% (+/-)	Yes
% respite care facility	0.3	0.0	-94.87	30% (+/-)	Yes
% suppliers	11.2	0.2	-98.18	30% (+/-)	No
% 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	159	12,095	7,506.92	30% (+/-)	No
% a sole proprietorship	18.2	13.5	-25.75	30% (+/-)	Yes
% not a sole proprietorship	73.0	81.6	11.86	30% (+/-)	Yes
% not answered	8.8	4.8	-44.97	N/A	N/A
Provider IDs with Entity Type = Organization					
Number of provider IDs with entity type = organization	166	229	37.95	30% (+/-)	No
% organization is a subpart	4.2	5.7	34.62	30% (+/-)	Yes
% organization is not a subpart	61.4	68.1	10.86	30% (+/-)	Yes
% not answered	34.3	26.2	-23.69	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: SC

Produced: 02/28/2013

Measure	2009 Value	2010 Value	% Change 2009-2010	Cross Year Expected Range	Cross Year Within Range ^a
OT Providers					
Number of provider IDs	9,896	9,934	0.38	30% (+/-)	Yes
% billing provider on OT claim	100.0	100.0	0.00	N/A	N/A
% servicing provider on OT claim	61.5	55.5	-9.80	N/A	N/A
% NPI servicing provider on OT claim	0.0	0.0	Div by 0	N/A	N/A
% also a provider on IP claim	1.5	1.6	4.91	N/A	N/A
% also a provider on LT claim	0.1	0.1	-18.03	N/A	N/A
% also a provider on RX claim	29.4	29.2	-0.83	N/A	N/A
% provider IDs with NPI	3.6	23.1	548.07	30% (+/-)	No
% provider IDs linked to NPPES	3.5	23.1	549.90	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	3,668.8	3,991.7	8.80	30% (+/-)	Yes
average number of beneficiaries with OT claims	480.2	496.9	3.49	30% (+/-)	Yes
Provider IDs with NPI					
Number of provider IDs with NPI	352	2,290	550.57	30% (+/-)	No
% NPI source = MSIS	54.5	91.6	67.88	30% (+/-)	No
% NPI source = NPPES	45.5	8.4	-81.46	30% (+/-)	No
% 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	351	2,290	552.42	30% (+/-)	No
% linked via NPI	54.4	91.6	68.28	30% (+/-)	No
% linked via Medicaid legacy provider ID	39.9	7.9	-80.07	30% (+/-)	No
% linked via Medicare UPIN	5.7	0.5	-91.58	30% (+/-)	Yes
% with name prefix	12.3	49.0	300.29	30% (+/-)	No
% with first name	19.9	76.2	282.09	30% (+/-)	No
% with middle name	16.8	67.0	298.52	30% (+/-)	No
% with last name	19.9	76.2	282.09	30% (+/-)	No
% with name suffix	1.1	9.3	719.74	30% (+/-)	Yes
% male	14.0	59.1	323.55	30% (+/-)	No
% female	6.0	17.1	185.38	30% (+/-)	No
% with credential	18.5	74.1	300.39	30% (+/-)	No
% with business name	80.1	23.3	-70.87	30% (+/-)	No
% with address line 1	100.0	99.5	-0.48	30% (+/-)	Yes
% with city	100.0	99.5	-0.48	30% (+/-)	Yes
% with state	100.0	99.5	-0.48	30% (+/-)	Yes
% state = OT state code	65.8	84.7	28.66	30% (+/-)	Yes
% with zip code	100.0	99.5	-0.48	30% (+/-)	Yes
% with primary taxonomy	98.6	98.4	-0.19	30% (+/-)	Yes
% with provider entity type = individual	19.9	76.2	282.09	30% (+/-)	No
% with provider entity type = organization	80.1	23.3	-70.87	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	347	2,253	549.28	30% (+/-)	No
% individual or group of individuals	29.4	85.1	189.61	30% (+/-)	No
% allopathic and osteopathic physicians	13.5	45.1	233.26	30% (+/-)	No

Source: Medicaid Analytic eExtract (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: SC

Produced: 02/28/2013

Measure	2009 Value	2010 Value	% Change 2009-2010	Cross Year Expected Range	Cross Year Within Range ^a
% behavioral health and social service providers	2.9	0.9	-67.66	30% (+/-)	Yes
% chiropractic providers	2.9	0.2	-93.82	30% (+/-)	Yes
% dental providers	2.3	24.1	943.69	30% (+/-)	No
% dietary and nutritional service providers	0.3	0.0	-84.72	30% (+/-)	Yes
% emergency medical service providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% eye and vision service providers	2.3	7.4	221.56	30% (+/-)	Yes
% nursing service providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% nursing service-related providers	0.3	0.0	-100.00	30% (+/-)	Yes
% other service providers	2.9	4.3	49.38	30% (+/-)	Yes
% pharmacy service providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% physician assistants and advanced practice nursing providers	0.0	0.9	Div by 0	30% (+/-)	N/A
% podiatric medicine and surgery service providers	0.0	1.6	Div by 0	30% (+/-)	N/A
% respiratory, developmental, rehabilitative, and restorative service providers	0.6	0.2	-69.10	30% (+/-)	Yes
% speech, language, and hearing service providers	1.4	0.3	-78.42	30% (+/-)	Yes
% 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	70.6	14.9	-78.94	30% (+/-)	No
% agencies	12.1	3.8	-68.83	30% (+/-)	No
% ambulatory health care facilities	1.2	1.4	23.16	30% (+/-)	Yes
% hospital units	0.9	0.1	-89.71	30% (+/-)	Yes
% hospitals	42.1	7.0	-83.44	30% (+/-)	No
% laboratories	0.3	0.0	-100.00	30% (+/-)	Yes
% managed care organizations	0.6	0.0	-100.00	30% (+/-)	Yes
% nursing and custodial care facilities	2.9	1.3	-55.34	30% (+/-)	Yes
% residential treatment facilities	0.9	0.1	-84.62	30% (+/-)	Yes
% respite care facility	0.3	0.0	-84.72	30% (+/-)	Yes
% suppliers	9.5	1.2	-87.87	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	70	1,745	2,392.86	30% (+/-)	No
% a sole proprietorship	25.7	36.2	40.62	30% (+/-)	No
% not a sole proprietorship	62.9	55.6	-11.47	30% (+/-)	Yes
% not answered	11.4	8.2	-28.30	N/A	N/A
Provider IDs with Entity Type = Organization					
Number of provider IDs with entity type = organization	281	534	90.04	30% (+/-)	No
% organization is a subpart	6.4	7.7	19.86	30% (+/-)	Yes
% organization is not a subpart	67.3	70.8	5.24	30% (+/-)	Yes
% not answered	26.3	21.5	-18.22	N/A	N/A

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

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2009-2010 MAX RX Billing Provider Characteristics Validation Table

State: SC

Produced: 02/28/2013

Measure	2009 Value	2010 Value	% Change 2009-2010	Cross Year Expected Range	Cross Year Within Range ^a
RX Providers					
Number of provider IDs	1,362	19,952	1,364.90	30% (+/-)	No
% billing provider on RX claim	93.3	6.4	-93.19	N/A	N/A
% prescribing provider on RX claim	18.6	93.8	402.87	N/A	N/A
% NPI billing provider on RX claim	6.7	93.6	1,301.66	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	56.0	65.3	16.50	N/A	N/A
% provider IDs with NPI	10.4	93.9	800.15	30% (+/-)	No
% provider IDs linked to NPPES	10.4	93.5	796.55	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 RX claims	3,144.8	410.3	-86.95	30% (+/-)	No
average number of beneficiaries with RX claims	425.5	66.4	-84.40	30% (+/-)	No
Provider IDs with NPI					
Number of provider IDs with NPI	142	18,725	13,086.62	30% (+/-)	No
% NPI source = MSIS	85.9	99.9	16.27	30% (+/-)	Yes
% NPI source = NPPES	14.1	0.1	-99.24	30% (+/-)	No
% 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	142	18,650	13,033.80	30% (+/-)	No
% linked via NPI	85.9	99.9	16.27	30% (+/-)	Yes
% linked via Medicaid legacy provider ID	12.0	0.1	-99.24	30% (+/-)	No
% linked via Medicare UPIN	2.1	0.0	-99.24	30% (+/-)	Yes
% with name prefix	37.3	47.9	28.46	30% (+/-)	Yes
% with first name	86.6	97.6	12.70	30% (+/-)	Yes
% with middle name	76.1	82.1	7.89	30% (+/-)	Yes
% with last name	86.6	97.6	12.70	30% (+/-)	Yes
% with name suffix	4.9	7.4	50.53	30% (+/-)	Yes
% male	59.9	61.8	3.23	30% (+/-)	Yes
% female	26.8	35.8	33.90	30% (+/-)	No
% with credential	85.9	95.1	10.66	30% (+/-)	Yes
% with business name	13.4	1.8	-86.65	30% (+/-)	No
% with address line 1	100.0	99.4	-0.59	30% (+/-)	Yes
% with city	100.0	99.4	-0.59	30% (+/-)	Yes
% with state	100.0	99.4	-0.59	30% (+/-)	Yes
% state = RX state code	90.8	62.7	-30.97	30% (+/-)	No
% with zip code	100.0	99.4	-0.59	30% (+/-)	Yes
% with primary taxonomy	100.0	98.6	-1.37	30% (+/-)	Yes
% with provider entity type = individual	86.6	97.6	12.70	30% (+/-)	Yes
% with provider entity type = organization	13.4	1.8	-86.65	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	142	18,395	12,854.23	30% (+/-)	No
% individual or group of individuals	52.1	99.3	90.64	30% (+/-)	No
% allopathic and osteopathic physicians	44.4	70.7	59.45	30% (+/-)	No

Source: Medicaid Analytic eExtract (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: SC

Produced: 02/28/2013

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	1.1	Div by 0	30% (+/-)	N/A
% chiropractic providers	0.0	0.2	Div by 0	30% (+/-)	N/A
% dental providers	0.0	7.2	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	1.8	Div by 0	30% (+/-)	N/A
% nursing service providers	0.0	0.2	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	2.9	106.18	30% (+/-)	Yes
% pharmacy service providers	1.4	0.2	-89.20	30% (+/-)	Yes
% physician assistants and advanced practice nursing providers	2.8	13.1	366.42	30% (+/-)	No
% podiatric medicine and surgery service providers	0.0	0.7	Div by 0	30% (+/-)	N/A
% respiratory, developmental, rehabilitative, and restorative service providers	1.4	0.3	-76.85	30% (+/-)	Yes
% speech, language, and hearing service providers	0.0	0.1	Div by 0	30% (+/-)	N/A
% student health care	0.0	0.7	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	0.7	0.0	-100.00	30% (+/-)	Yes
% nonindividuals	47.9	0.7	-98.64	30% (+/-)	No
% agencies	0.0	0.0	Div by 0	30% (+/-)	N/A
% ambulatory health care facilities	0.7	0.3	-55.26	30% (+/-)	Yes
% hospital units	0.0	0.0	Div by 0	30% (+/-)	N/A
% hospitals	19.0	0.1	-99.32	30% (+/-)	No
% laboratories	1.4	0.0	-99.64	30% (+/-)	Yes
% 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	26.8	0.1	-99.45	30% (+/-)	No
% 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	123	18,207	14,702.44	30% (+/-)	No
% a sole proprietorship	17.9	16.1	-9.90	30% (+/-)	Yes
% not a sole proprietorship	73.2	79.0	7.92	30% (+/-)	Yes
% not answered	8.9	4.9	-44.97	N/A	N/A
Provider IDs with Entity Type = Organization					
Number of provider IDs with entity type = organization	19	333	1,652.63	30% (+/-)	No
% organization is a subpart	26.3	7.5	-71.47	30% (+/-)	No
% organization is not a subpart	68.4	67.9	-0.81	30% (+/-)	Yes
% not answered	5.3	24.6	367.89	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: SC

Produced: 02/28/2013

Measure	2009 Value	2010 Value	% Change 2009-2010	Cross Year Expected Range	Cross Year Within Range ^a
RX Providers					
Number of provider IDs	47,294	23,527	-50.25	30% (+/-)	No
% billing provider on RX claim	0.3	0.1	-66.67	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	0.2	79.4	41,261.98	N/A	N/A
% also a provider on IP claim	0.0	0.1	151.85	N/A	N/A
% also a provider on LT claim	0.0	0.0	225.00	N/A	N/A
% also a provider on OT claim	27.2	57.7	111.82	N/A	N/A
% provider IDs with NPI	0.9	79.5	8,608.98	30% (+/-)	No
% provider IDs linked to NPPES	0.9	79.2	8,574.04	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 RX claims	109.0	183.4	68.31	30% (+/-)	No
average number of beneficiaries with RX claims	23.7	35.9	51.53	30% (+/-)	No
Provider IDs with NPI					
Number of provider IDs with NPI	432	18,707	4,230.32	30% (+/-)	No
% NPI source = MSIS	26.6	100.0	275.48	30% (+/-)	No
% NPI source = NPPES	73.4	0.0	-99.93	30% (+/-)	No
% 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	432	18,632	4,212.96	30% (+/-)	No
% linked via NPI	26.6	100.0	275.48	30% (+/-)	No
% linked via Medicaid legacy provider ID	29.4	0.0	-99.87	30% (+/-)	No
% linked via Medicare UPIN	44.0	0.0	-99.97	30% (+/-)	No
% with name prefix	45.1	48.0	6.23	30% (+/-)	Yes
% with first name	84.5	97.6	15.54	30% (+/-)	Yes
% with middle name	69.9	82.0	17.37	30% (+/-)	Yes
% with last name	84.5	97.6	15.54	30% (+/-)	Yes
% with name suffix	6.5	7.4	14.53	30% (+/-)	Yes
% male	55.6	61.8	11.19	30% (+/-)	Yes
% female	28.9	35.8	23.89	30% (+/-)	Yes
% with credential	82.9	95.1	14.73	30% (+/-)	Yes
% with business name	15.5	1.8	-88.48	30% (+/-)	No
% with address line 1	100.0	99.4	-0.59	30% (+/-)	Yes
% with city	100.0	99.4	-0.59	30% (+/-)	Yes
% with state	100.0	99.4	-0.59	30% (+/-)	Yes
% state = RX state code	53.5	62.7	17.19	30% (+/-)	Yes
% with zip code	100.0	99.4	-0.59	30% (+/-)	Yes
% with primary taxonomy	98.8	98.6	-0.21	30% (+/-)	Yes
% with provider entity type = individual	84.5	97.6	15.54	30% (+/-)	Yes
% with provider entity type = organization	15.5	1.8	-88.48	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	427	18,378	4,203.98	30% (+/-)	No
% individual or group of individuals	82.2	99.4	20.88	30% (+/-)	Yes
% allopathic and osteopathic physicians	57.1	70.7	23.77	30% (+/-)	Yes

Source: Medicaid Analytic eExtract (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: SC

Produced: 02/28/2013

Measure	2009 Value	2010 Value	% Change 2009-2010	Cross Year Expected Range	Cross Year Within Range ^a
% behavioral health and social service providers	3.3	1.1	-66.97	30% (+/-)	Yes
% chiropractic providers	3.7	0.2	-94.05	30% (+/-)	Yes
% dental providers	3.7	7.2	91.70	30% (+/-)	Yes
% dietary and nutritional service providers	0.2	0.0	-83.76	30% (+/-)	Yes
% emergency medical service providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% eye and vision service providers	2.3	1.8	-22.63	30% (+/-)	Yes
% nursing service providers	0.5	0.2	-48.93	30% (+/-)	Yes
% nursing service-related providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% other service providers	2.8	2.9	3.42	30% (+/-)	Yes
% pharmacy service providers	0.2	0.1	-39.74	30% (+/-)	Yes
% physician assistants and advanced practice nursing providers	6.1	13.2	116.08	30% (+/-)	No
% podiatric medicine and surgery service providers	0.0	0.7	Div by 0	30% (+/-)	N/A
% respiratory, developmental, rehabilitative, and restorative service providers	1.2	0.3	-72.16	30% (+/-)	Yes
% speech, language, and hearing service providers	0.5	0.1	-70.94	30% (+/-)	Yes
% student health care	0.0	0.7	Div by 0	30% (+/-)	N/A
% technologists, technicians, and other technical service providers	0.2	0.0	-95.30	30% (+/-)	Yes
% group of individuals with multi- or single specialty	0.2	0.0	-100.00	30% (+/-)	Yes
% nonindividuals	17.8	0.6	-96.42	30% (+/-)	No
% agencies	2.1	0.0	-99.24	30% (+/-)	Yes
% ambulatory health care facilities	1.4	0.3	-77.51	30% (+/-)	Yes
% hospital units	0.0	0.0	Div by 0	30% (+/-)	N/A
% hospitals	9.1	0.2	-97.80	30% (+/-)	Yes
% laboratories	0.9	0.0	-99.47	30% (+/-)	Yes
% managed care organizations	0.5	0.0	-96.58	30% (+/-)	Yes
% nursing and custodial care facilities	0.0	0.0	Div by 0	30% (+/-)	N/A
% residential treatment facilities	0.7	0.0	-98.44	30% (+/-)	Yes
% respite care facility	0.0	0.0	Div by 0	30% (+/-)	N/A
% suppliers	3.0	0.1	-98.23	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	365	18,189	4,883.29	30% (+/-)	No
% a sole proprietorship	20.0	16.1	-19.49	30% (+/-)	Yes
% not a sole proprietorship	72.3	79.0	9.19	30% (+/-)	Yes
% not answered	7.7	4.9	-35.85	N/A	N/A
Provider IDs with Entity Type = Organization					
Number of provider IDs with entity type = organization	67	333	397.01	30% (+/-)	No
% organization is a subpart	6.0	7.2	20.72	30% (+/-)	Yes
% organization is not a subpart	77.6	67.9	-12.55	30% (+/-)	Yes
% not answered	16.4	24.9	51.82	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: SC

Produced: 02/28/2013

Measure	2009 Value	2010 Value	% Change 2009-2010	Cross Year Expected Range	Cross Year Within Range ^a
All Providers					
Number of provider IDs	64,253	41,107	-36.02	30%(+/-)	No
% billing provider on IP claim	0.3	0.6	70.23	N/A	N/A
% NPI billing provider on IP claim	0.3	0.6	70.23	N/A	N/A
% billing provider on LT claim	0.4	0.7	57.21	N/A	N/A
% NPI billing provider on LT claim	0.0	0.1	70.45	N/A	N/A
% billing provider on OT claim	15.4	24.2	56.90	N/A	N/A
% servicing provider on OT claim	39.1	62.8	60.53	N/A	N/A
% NPI servicing provider on OT claim	0.0	0.0	Div by 0	N/A	N/A
% billing provider on RX claim	2.0	3.1	55.97	N/A	N/A
% prescribing provider on RX claim	73.6	57.2	-22.24	N/A	N/A
% NPI billing provider on RX claim	0.1	45.5	31,908.45	N/A	N/A
% billing provider	16.9	26.4	56.68	N/A	N/A
% NPI billing provider	0.5	46.1	8,814.31	N/A	N/A
% servicing provider	39.1	62.8	60.53	N/A	N/A
% NPI servicing provider	0.0	0.0	Div by 0	N/A	N/A
% prescribing provider	73.6	57.2	-22.24	N/A	N/A
% provider IDs with NPI	1.6	47.2	2,764.24	30%(+/-)	No
% provider IDs linked to NPPES	1.6	47.0	2,756.66	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 claims	817.6	1,361.5	66.52	30%(+/-)	No
average number of beneficiaries with claims	125.0	196.3	57.02	30%(+/-)	No
Provider IDs with NPI					
Number of provider IDs with NPI	1,058	19,392	1,732.89	30%(+/-)	No
% NPI source = MSIS	34.3	97.8	185.06	30%(+/-)	No
% NPI source = NPPES	65.7	2.2	-96.66	30%(+/-)	No
% 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	1,057	19,317	1,727.53	30%(+/-)	No
% linked via NPI	34.2	97.8	185.55	30%(+/-)	No
% linked via Medicaid legacy provider ID	45.2	2.1	-95.32	30%(+/-)	No
% linked via Medicare UPIN	20.5	0.1	-99.57	30%(+/-)	No
% with name prefix	22.1	46.4	109.62	30%(+/-)	No
% with first name	40.7	94.5	132.21	30%(+/-)	No
% with middle name	33.3	79.4	138.34	30%(+/-)	No
% with last name	40.7	94.5	132.21	30%(+/-)	No
% with name suffix	2.9	7.2	144.97	30%(+/-)	Yes
% male	26.6	59.8	124.85	30%(+/-)	No
% female	14.1	34.7	146.10	30%(+/-)	No
% with credential	38.9	91.9	136.46	30%(+/-)	No
% with business name	59.3	5.0	-91.63	30%(+/-)	No
% with address line 1	100.0	99.4	-0.57	30%(+/-)	Yes
% with city	100.0	99.4	-0.57	30%(+/-)	Yes
% with state	100.0	99.4	-0.57	30%(+/-)	Yes
% state = claim file state code	65.8	63.1	-4.03	30%(+/-)	Yes
% with zip code	100.0	99.4	-0.57	30%(+/-)	Yes

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

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2009-2010 MAX All Provider Characteristics Validation Table

State: SC

Produced: 02/28/2013

Measure	2009 Value	2010 Value	% Change 2009-2010	Cross Year Expected Range	Cross Year Within Range ^a
% with primary taxonomy	99.0	98.6	-0.32	30%(+/-)	Yes
% with provider entity type = individual	40.7	94.5	132.21	30%(+/-)	No
% with provider entity type = organization	59.3	5.0	-91.63	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	1,047	19,055	1,719.96	30%(+/-)	No
% individual or group of individuals	43.2	96.3	123.01	30%(+/-)	No
% allopathic and osteopathic physicians	27.0	68.4	152.92	30%(+/-)	No
% behavioral health and social service providers	2.5	1.1	-54.57	30%(+/-)	Yes
% chiropractic providers	2.5	0.2	-90.70	30%(+/-)	Yes
% dental providers	1.9	6.9	263.51	30%(+/-)	Yes
% dietary and nutritional service providers	0.2	0.0	-78.01	30%(+/-)	Yes
% emergency medical service providers	0.0	0.0	Div by 0	30%(+/-)	N/A
% eye and vision service providers	1.4	1.8	24.15	30%(+/-)	Yes
% nursing service providers	0.2	0.2	20.94	30%(+/-)	Yes
% nursing service-related providers	0.1	0.0	-94.79	30%(+/-)	Yes
% other service providers	2.7	2.9	7.55	30%(+/-)	Yes
% pharmacy service providers	0.3	0.1	-48.78	30%(+/-)	Yes
% physician assistants and advanced practice nursing providers	2.6	12.7	392.05	30%(+/-)	No
% podiatric medicine and surgery service providers	0.0	0.6	Div by 0	30%(+/-)	N/A
% respiratory, developmental, rehabilitative, and restorative service providers	0.9	0.3	-62.21	30%(+/-)	Yes
% speech, language, and hearing service providers	0.8	0.2	-77.36	30%(+/-)	Yes
% student health care	0.0	0.7	Div by 0	30%(+/-)	N/A
% technologists, technicians, and other technical service providers	0.1	0.0	-89.58	30%(+/-)	Yes
% group of individuals with multi- or single specialty	0.1	0.0	-100.00	30%(+/-)	Yes
% nonindividuals	56.8	3.7	-93.44	30%(+/-)	No
% agencies	5.0	0.5	-90.80	30%(+/-)	Yes
% ambulatory health care facilities	1.1	0.3	-69.55	30%(+/-)	Yes
% hospital units	1.8	0.1	-94.21	30%(+/-)	Yes
% hospitals	22.2	1.3	-94.10	30%(+/-)	No
% laboratories	0.4	0.0	-98.69	30%(+/-)	Yes
% managed care organizations	0.5	0.0	-96.65	30%(+/-)	Yes
% nursing and custodial care facilities	19.6	1.2	-93.89	30%(+/-)	No
% residential treatment facilities	1.8	0.1	-94.82	30%(+/-)	Yes
% respite care facility	0.1	0.0	-89.58	30%(+/-)	Yes
% suppliers	4.5	0.2	-95.21	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	430	18,248	4,143.72	30%(+/-)	No
% a sole proprietorship	20.7	16.1	-22.03	30%(+/-)	Yes
% not a sole proprietorship	71.6	78.9	10.21	30%(+/-)	Yes
% not answered	7.7	4.9	-35.87	N/A	N/A
Provider IDs with Entity Type = Organization					
Number of provider IDs with entity type = organization	627	959	52.95	30%(+/-)	No
% organization is a subpart	8.3	8.3	0.59	30%(+/-)	Yes
% organization is not a subpart	58.5	64.4	10.10	30%(+/-)	Yes
% not answered	33.2	27.2	-17.96	N/A	N/A

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

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