Medicaid Analytic Extract Provider Characteristics (MAXPC)

State-Specific Validation Tables, 2010

New Hampshire

May 31, 2013

Deo Bencio
Mei-ling Mason

MATHEMATICA
Policy Research

This page has been left blank for double-sided copying.

Medicaid Analytic Extract Provider Characteristics (MAXPC)

State-Specific Validation Tables, 2010

New Hampshire

May 31, 2013

Deo Bencio
Mei-ling Mason

MATHEMATICA
Policy Research

This page has been left blank for double-sided copying.

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

This page has been left blank for double-sided copying.

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: NH
Produced: 03/19/2013

Measure	2009 Value	2010 Value	% Change 2009-2010	Cross Year Expected Range	Cross Year Within Range[a]
IP Providers					
Number of provider IDs	184	194	5.43	30% (+/-)	Yes
% billing provider on IP claim	67.4	63.9	-5.15	N/A	N/A
% NPI billing provider on IP claim	32.6	36.1	10.65	N/A	N/A
% also a provider on LT claim	10.3	11.3	9.82	N/A	N/A
% also a provider on OT claim	55.4	53.6	-3.30	N/A	N/A
% also a provider on RX claim	0.0	0.0	Div by 0	N/A	N/A
% provider IDs with NPI	66.3	73.7	11.17	30% (+/-)	Yes
% provider IDs linked to NPPES	1.1	1.5	42.23	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	197.3	198.2	0.41	30% (+/-)	Yes
average number of beneficiaries with IP claims	165.3	164.8	-0.31	30% (+/-)	Yes
Provider IDs with NPI					
Number of provider IDs with NPI	122	143	17.21	30% (+/-)	Yes
% NPI source = MSIS	98.4	97.9	-0.47	30% (+/-)	Yes
% NPI source = NPPES	1.6	2.1	28.00	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	2	3	50.00	30% (+/-)	Yes
% linked via NPI	0.0	0.0	Div by 0	30% (+/-)	N/A
% linked via Medicaid legacy provider ID	100.0	100.0	0.00	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	0.0	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	50.0	66.7	33.33	30% (+/-)	No
% 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	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	100	3	-97.00	30% (+/-)	No
% individual or group of individuals	4.0	0.0	-100.00	30% (+/-)	Yes
% allopathic and osteopathic physicians	4.0	0.0	-100.00	30% (+/-)	Yes
% 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: NH
Produced: 03/19/2013

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	96.0	100.0	4.17	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	11.0	0.0	-100.00	30% (+/-)	No
% hospitals	85.0	100.0	17.65	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	0.0	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	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	2	3	50.00	30% (+/-)	Yes
% organization is a subpart	0.0	0.0	Div by 0	30% (+/-)	N/A
% organization is not a subpart	50.0	66.7	33.33	30% (+/-)	No
% not answered	50.0	33.3	-33.33	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: NH
Produced: 03/19/2013

Measure	2009 Value	2010 Value	% Change 2009-2010	Cross Year Expected Range	Cross Year Within Range[a]
LT Providers					
Number of provider IDs	192	200	4.17	30% (+/-)	Yes
% billing provider on LT claim	52.1	52.0	-0.16	N/A	N/A
% NPI billing provider on LT claim	47.9	48.0	0.17	N/A	N/A
% also a provider on IP claim	9.9	11.0	11.16	N/A	N/A
% also a provider on OT claim	8.3	9.5	14.00	N/A	N/A
% also a provider on RX claim	0.0	0.0	Div by 0	N/A	N/A
% provider IDs with NPI	97.9	98.5	0.60	30% (+/-)	Yes
% provider IDs linked to NPPES	1.0	1.5	43.95	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 LT claims	784.3	843.6	7.56	30% (+/-)	Yes
average number of beneficiaries with LT claims	69.1	69.7	0.79	30% (+/-)	Yes
Provider IDs with NPI					
Number of provider IDs with NPI	188	197	4.79	30% (+/-)	Yes
% NPI source = MSIS	98.9	98.5	-0.46	30% (+/-)	Yes
% NPI source = NPPES	1.1	1.5	43.14	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	2	3	50.00	30% (+/-)	Yes
% linked via NPI	0.0	0.0	Div by 0	30% (+/-)	N/A
% linked via Medicaid legacy provider ID	100.0	100.0	0.00	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	0.0	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	100.0	100.0	0.00	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	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	149	3	-97.99	30% (+/-)	No
% individual or group of individuals	1.3	0.0	-100.00	30% (+/-)	Yes
% allopathic and osteopathic physicians	1.3	0.0	-100.00	30% (+/-)	Yes
% 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: NH
Produced: 03/19/2013

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	98.7	100.0	1.36	30% (+/-)	Yes
% agencies	0.0	0.0	Div by 0	30% (+/-)	N/A
% ambulatory health care facilities	0.7	0.0	-100.00	30% (+/-)	Yes
% hospital units	0.7	0.0	-100.00	30% (+/-)	Yes
% hospitals	10.1	33.3	231.11	30% (+/-)	No
% 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	85.2	66.7	-21.78	30% (+/-)	Yes
% residential treatment facilities	2.0	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	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	2	3	50.00	30% (+/-)	Yes
% organization is a subpart	0.0	33.3	Div by 0	30% (+/-)	N/A
% organization is not a subpart	100.0	66.7	-33.33	30% (+/-)	No
% not answered	0.0	0.0	Div by 0	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: NH
Produced: 03/19/2013

Measure	2009 Value	2010 Value	% Change 2009-2010	Cross Year Expected Range	Cross Year Within Range[a]
OT Providers					
Number of provider IDs	18,620	19,899	6.87	30% (+/-)	Yes
% billing provider on OT claim	19.9	18.5	-6.94	N/A	N/A
% servicing provider on OT claim	58.9	58.3	-1.12	N/A	N/A
% NPI servicing provider on OT claim	41.1	41.7	1.61	N/A	N/A
% also a provider on IP claim	0.5	0.5	-6.39	N/A	N/A
% also a provider on LT claim	0.1	0.1	10.47	N/A	N/A
% also a provider on RX claim	1.4	1.2	-12.46	N/A	N/A
% provider IDs with NPI	85.3	85.7	0.46	30% (+/-)	Yes
% provider IDs linked to NPPES	5.5	4.7	-14.72	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	724.0	688.9	-4.84	30% (+/-)	Yes
average number of beneficiaries with OT claims	95.9	94.3	-1.71	30% (+/-)	Yes
Provider IDs with NPI					
Number of provider IDs with NPI	15,882	17,051	7.36	30% (+/-)	Yes
% NPI source = MSIS	94.2	94.7	0.59	30% (+/-)	Yes
% NPI source = NPPES	5.8	5.3	-9.58	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	1,026	935	-8.87	30% (+/-)	Yes
% linked via NPI	10.0	4.2	-58.45	30% (+/-)	No
% linked via Medicaid legacy provider ID	89.8	95.6	6.52	30% (+/-)	Yes
% linked via Medicare UPIN	0.2	0.2	9.74	30% (+/-)	Yes
% with name prefix	23.9	23.3	-2.36	30% (+/-)	Yes
% with first name	49.0	47.8	-2.48	30% (+/-)	Yes
% with middle name	39.5	37.8	-4.36	30% (+/-)	Yes
% with last name	49.0	47.8	-2.48	30% (+/-)	Yes
% with name suffix	1.2	1.4	18.80	30% (+/-)	Yes
% male	27.7	25.2	-8.81	30% (+/-)	Yes
% female	21.3	22.6	5.72	30% (+/-)	Yes
% with credential	48.1	46.7	-2.93	30% (+/-)	Yes
% with business name	51.0	52.2	2.39	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 = OT state code	81.2	82.1	1.17	30% (+/-)	Yes
% with zip code	100.0	100.0	0.00	30% (+/-)	Yes
% with primary taxonomy	95.2	94.5	-0.71	30% (+/-)	Yes
% with provider entity type = individual	49.0	47.8	-2.48	30% (+/-)	Yes
% with provider entity type = organization	51.0	52.2	2.39	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	11,469	884	-92.29	30% (+/-)	No
% individual or group of individuals	87.1	57.1	-34.39	30% (+/-)	No
% allopathic and osteopathic physicians	56.2	22.3	-60.32	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: NH
Produced: 03/19/2013

Measure	2009 Value	2010 Value	% Change 2009-2010	Cross Year Expected Range	Cross Year Within Range[a]
% behavioral health and social service providers	7.1	15.8	122.87	30% (+/-)	No
% chiropractic providers	0.7	0.0	-100.00	30% (+/-)	Yes
% dental providers	4.7	5.8	23.45	30% (+/-)	Yes
% dietary and nutritional service providers	0.2	0.0	-100.00	30% (+/-)	Yes
% emergency medical service providers	0.4	0.1	-70.57	30% (+/-)	Yes
% eye and vision service providers	1.6	2.1	36.19	30% (+/-)	Yes
% nursing service providers	0.3	0.1	-64.01	30% (+/-)	Yes
% nursing service-related providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% other service providers	0.8	1.1	35.13	30% (+/-)	Yes
% pharmacy service providers	0.4	0.3	-17.32	30% (+/-)	Yes
% physician assistants and advanced practice nursing providers	10.7	4.4	-58.86	30% (+/-)	No
% podiatric medicine and surgery service providers	0.6	0.9	46.20	30% (+/-)	Yes
% respiratory, developmental, rehabilitative, and restorative service providers	1.9	2.8	47.45	30% (+/-)	Yes
% speech, language, and hearing service providers	0.8	1.2	58.47	30% (+/-)	Yes
% student health care	0.0	0.0	-100.00	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	0.7	0.0	-100.00	30% (+/-)	Yes
% nonindividuals	12.9	42.9	231.55	30% (+/-)	No
% agencies	3.7	6.7	78.02	30% (+/-)	Yes
% ambulatory health care facilities	1.5	4.2	187.50	30% (+/-)	Yes
% hospital units	0.0	0.2	769.23	30% (+/-)	Yes
% hospitals	0.5	0.8	65.00	30% (+/-)	Yes
% laboratories	0.4	0.3	-9.60	30% (+/-)	Yes
% managed care organizations	0.0	0.0	-100.00	30% (+/-)	Yes
% nursing and custodial care facilities	0.3	0.6	123.72	30% (+/-)	Yes
% residential treatment facilities	0.5	1.0	94.65	30% (+/-)	Yes
% respite care facility	0.0	0.6	1,186.36	30% (+/-)	Yes
% suppliers	4.1	26.8	556.95	30% (+/-)	No
% transportation services	1.9	1.7	-11.94	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	503	447	-11.13	30% (+/-)	Yes
% a sole proprietorship	31.8	34.5	8.31	30% (+/-)	Yes
% not a sole proprietorship	61.0	60.2	-1.40	30% (+/-)	Yes
% not answered	7.2	5.4	-24.98	N/A	N/A
Provider IDs with Entity Type = Organization					
Number of provider IDs with entity type = organization	523	488	-6.69	30% (+/-)	Yes
% organization is a subpart	14.7	16.2	9.96	30% (+/-)	Yes
% organization is not a subpart	64.4	61.7	-4.28	30% (+/-)	Yes
% not answered	20.8	22.1	6.19	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: NH
Produced: 03/19/2013

Measure	2009 Value	2010 Value	% Change 2009-2010	Cross Year Expected Range	Cross Year Within Range[a]
OT Providers					
Number of provider IDs	4,496	4,511	0.33	30% (+/-)	Yes
% billing provider on OT claim	100.0	100.0	0.00	N/A	N/A
% servicing provider on OT claim	82.3	81.6	-0.87	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	2.3	2.2	-1.32	N/A	N/A
% also a provider on LT claim	0.3	0.3	7.87	N/A	N/A
% also a provider on RX claim	6.1	5.5	-9.49	N/A	N/A
% provider IDs with NPI	64.6	64.9	0.35	30% (+/-)	Yes
% provider IDs linked to NPPES	23.1	21.6	-6.66	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	1,906.2	1,967.4	3.21	30% (+/-)	Yes
average number of beneficiaries with OT claims	163.3	172.6	5.70	30% (+/-)	Yes
Provider IDs with NPI					
Number of provider IDs with NPI	2,906	2,926	0.69	30% (+/-)	Yes
% NPI source = MSIS	68.1	68.1	0.02	30% (+/-)	Yes
% NPI source = NPPES	31.9	31.9	-0.04	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	1,039	973	-6.35	30% (+/-)	Yes
% linked via NPI	10.8	4.1	-61.86	30% (+/-)	No
% linked via Medicaid legacy provider ID	89.0	95.7	7.48	30% (+/-)	Yes
% linked via Medicare UPIN	0.2	0.2	7.29	30% (+/-)	Yes
% with name prefix	16.4	15.7	-3.89	30% (+/-)	Yes
% with first name	26.5	26.0	-1.76	30% (+/-)	Yes
% with middle name	20.7	19.9	-3.65	30% (+/-)	Yes
% with last name	26.5	26.0	-1.76	30% (+/-)	Yes
% with name suffix	0.6	0.7	24.61	30% (+/-)	Yes
% male	12.0	10.9	-9.45	30% (+/-)	Yes
% female	14.4	15.1	4.65	30% (+/-)	Yes
% with credential	25.8	25.1	-2.78	30% (+/-)	Yes
% with business name	73.5	74.0	0.63	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 = OT state code	88.6	89.7	1.22	30% (+/-)	Yes
% with zip code	100.0	100.0	0.00	30% (+/-)	Yes
% with primary taxonomy	95.5	94.9	-0.64	30% (+/-)	Yes
% with provider entity type = individual	26.5	26.0	-1.76	30% (+/-)	Yes
% with provider entity type = organization	73.5	74.0	0.63	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	2,287	923	-59.64	30% (+/-)	No
% individual or group of individuals	59.9	56.4	-5.77	30% (+/-)	Yes
% allopathic and osteopathic physicians	18.5	25.8	39.08	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 Billing Provider Characteristics Validation Table
State: NH
Produced: 03/19/2013

Measure	2009 Value	2010 Value	% Change 2009-2010	Cross Year Expected Range	Cross Year Within Range[a]
% behavioral health and social service providers	17.3	13.3	-22.85	30% (+/-)	Yes
% chiropractic providers	1.4	0.0	-100.00	30% (+/-)	Yes
% dental providers	6.3	7.4	16.20	30% (+/-)	Yes
% dietary and nutritional service providers	0.3	0.0	-100.00	30% (+/-)	Yes
% emergency medical service providers	0.6	0.1	-82.35	30% (+/-)	Yes
% eye and vision service providers	3.2	2.3	-28.73	30% (+/-)	Yes
% nursing service providers	0.4	0.1	-75.29	30% (+/-)	Yes
% nursing service-related providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% other service providers	1.6	1.8	17.03	30% (+/-)	Yes
% pharmacy service providers	0.7	0.3	-50.46	30% (+/-)	Yes
% physician assistants and advanced practice nursing providers	1.1	0.8	-33.33	30% (+/-)	Yes
% podiatric medicine and surgery service providers	1.1	0.9	-23.75	30% (+/-)	Yes
% respiratory, developmental, rehabilitative, and restorative service providers	5.2	2.6	-50.45	30% (+/-)	Yes
% speech, language, and hearing service providers	1.3	1.1	-17.45	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	0.8	0.0	-100.00	30% (+/-)	Yes
% nonindividuals	40.1	43.6	8.62	30% (+/-)	Yes
% agencies	11.1	6.5	-41.24	30% (+/-)	No
% ambulatory health care facilities	3.8	5.4	44.07	30% (+/-)	Yes
% hospital units	0.1	0.2	65.65	30% (+/-)	Yes
% hospitals	2.3	1.4	-39.23	30% (+/-)	Yes
% laboratories	0.9	0.4	-50.51	30% (+/-)	Yes
% managed care organizations	0.0	0.0	-100.00	30% (+/-)	Yes
% nursing and custodial care facilities	0.8	0.7	-17.41	30% (+/-)	Yes
% residential treatment facilities	1.7	1.0	-42.82	30% (+/-)	Yes
% respite care facility	0.2	0.5	147.49	30% (+/-)	Yes
% suppliers	14.1	25.8	82.57	30% (+/-)	No
% transportation services	5.1	1.6	-67.96	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	275	253	-8.00	30% (+/-)	Yes
% a sole proprietorship	51.6	54.5	5.63	30% (+/-)	Yes
% not a sole proprietorship	43.3	42.3	-2.27	30% (+/-)	Yes
% not answered	5.1	3.2	-37.89	N/A	N/A
Provider IDs with Entity Type = Organization					
Number of provider IDs with entity type = organization	764	720	-5.76	30% (+/-)	Yes
% organization is a subpart	15.3	16.1	5.20	30% (+/-)	Yes
% organization is not a subpart	63.1	61.9	-1.81	30% (+/-)	Yes
% not answered	21.6	21.9	1.61	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: NH
Produced: 03/19/2013

Measure	2009 Value	2010 Value	% Change 2009-2010	Cross Year Expected Range	Cross Year Within Range[a]
RX Providers					
Number of provider IDs	726	680	-6.34	30% (+/-)	Yes
% billing provider on RX claim	52.2	50.3	-3.66	N/A	N/A
% prescribing provider on RX claim	0.0	0.0	Div by 0	N/A	N/A
% NPI billing provider on RX claim	47.8	49.7	4.00	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	37.5	36.3	-3.05	N/A	N/A
% provider IDs with NPI	95.6	94.6	-1.08	30% (+/-)	Yes
% provider IDs linked to NPPES	95.2	94.6	-0.65	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	3,614.5	4,343.6	20.17	30% (+/-)	Yes
average number of beneficiaries with RX claims	388.1	430.9	11.02	30% (+/-)	Yes
Provider IDs with NPI					
Number of provider IDs with NPI	694	643	-7.35	30% (+/-)	Yes
% NPI source = MSIS	81.0	72.9	-9.93	30% (+/-)	Yes
% NPI source = NPPES	19.0	27.1	42.28	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	691	643	-6.95	30% (+/-)	Yes
% linked via NPI	80.9	72.9	-9.84	30% (+/-)	Yes
% linked via Medicaid legacy provider ID	19.1	27.1	41.66	30% (+/-)	No
% 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	99.7	-0.31	30% (+/-)	Yes
% with address line 1	100.0	99.7	-0.31	30% (+/-)	Yes
% with city	100.0	99.7	-0.31	30% (+/-)	Yes
% with state	100.0	99.7	-0.31	30% (+/-)	Yes
% state = RX state code	76.6	76.7	0.15	30% (+/-)	Yes
% with zip code	100.0	99.7	-0.31	30% (+/-)	Yes
% with primary taxonomy	99.4	99.1	-0.36	30% (+/-)	Yes
% with provider entity type = individual	0.0	0.0	Div by 0	30% (+/-)	N/A
% with provider entity type = organization	100.0	99.7	-0.31	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	687	637	-7.28	30% (+/-)	Yes
% individual or group of individuals	2.8	1.9	-31.89	30% (+/-)	Yes
% allopathic and osteopathic physicians	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 RX Billing Provider Characteristics Validation Table
State: NH
Produced: 03/19/2013

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	0.4	0.0	-100.00	30% (+/-)	Yes
% 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	0.1	0.0	-100.00	30% (+/-)	Yes
% 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	2.2	1.9	-13.70	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	97.2	98.1	0.91	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	0.0	0.0	Div by 0	30% (+/-)	N/A
% hospitals	0.3	0.3	7.90	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	0.0	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	96.9	97.8	0.89	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	691	641	-7.24	30% (+/-)	Yes
% organization is a subpart	20.4	21.7	6.27	30% (+/-)	Yes
% organization is not a subpart	75.4	74.7	-0.89	30% (+/-)	Yes
% not answered	4.2	3.6	-14.51	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.

Measure	2009 Value	2010 Value	% Change 2009-2010	Cross Year Expected Range	Cross Year Within Range[a]
RX Providers					
Number of provider IDs	10,750	10,795	0.42	30% (+/-)	Yes
% billing provider on RX claim	0.0	0.0	Div by 0	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	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	0.0	0.0	Div by 0	N/A	N/A
% provider IDs with NPI	0.0	0.0	Div by 0	30% (+/-)	N/A
% provider IDs linked to NPPES	0.0	0.0	Div by 0	30% (+/-)	N/A
% 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	132.2	136.9	3.57	30% (+/-)	Yes
average number of beneficiaries with RX claims	25.3	26.4	4.25	30% (+/-)	Yes
Provider IDs with NPI					
Number of provider IDs with NPI	0	0	Div by 0	30% (+/-)	N/A
% NPI source = MSIS	0.0	0.0	Div by 0	30% (+/-)	N/A
% 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	0	0	Div by 0	30% (+/-)	N/A
% linked via NPI	0.0	0.0	Div by 0	30% (+/-)	N/A
% 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	0.0	0.0	Div by 0	30% (+/-)	N/A
% with address line 1	0.0	0.0	Div by 0	30% (+/-)	N/A
% with city	0.0	0.0	Div by 0	30% (+/-)	N/A
% with state	0.0	0.0	Div by 0	30% (+/-)	N/A
% state = RX state code	0.0	0.0	Div by 0	30% (+/-)	N/A
% with zip code	0.0	0.0	Div by 0	30% (+/-)	N/A
% with primary taxonomy	0.0	0.0	Div by 0	30% (+/-)	N/A
% with provider entity type = individual	0.0	0.0	Div by 0	30% (+/-)	N/A
% with provider entity type = organization	0.0	0.0	Div by 0	30% (+/-)	N/A
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	0	0	Div by 0	30% (+/-)	N/A
% 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

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: NH
Produced: 03/19/2013

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	0.0	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	0.0	0.0	Div by 0	30% (+/-)	N/A
% 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	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	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	0	0	Div by 0	30% (+/-)	N/A
% organization is a subpart	0.0	0.0	Div by 0	30% (+/-)	N/A
% organization is not a subpart	0.0	0.0	Div by 0	30% (+/-)	N/A
% not answered	0.0	0.0	Div by 0	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 All Provider Characteristics Validation Table
State: NH
Produced: 03/19/2013

Measure	2009 Value	2010 Value	% Change 2009-2010	Cross Year Expected Range	Cross Year Within Range[a]
All Providers					
Number of provider IDs	30,872	32,221	4.37	30%(+/-)	Yes
% billing provider on IP claim	0.4	0.4	-4.23	N/A	N/A
% NPI billing provider on IP claim	0.2	0.2	11.86	N/A	N/A
% billing provider on LT claim	0.3	0.3	-0.31	N/A	N/A
% NPI billing provider on LT claim	0.3	0.3	0.00	N/A	N/A
% billing provider on OT claim	14.6	14.0	-3.87	N/A	N/A
% servicing provider on OT claim	35.6	36.0	1.24	N/A	N/A
% NPI servicing provider on OT claim	24.8	25.8	4.05	N/A	N/A
% billing provider on RX claim	1.2	1.1	-13.60	N/A	N/A
% prescribing provider on RX claim	34.8	33.5	-3.79	N/A	N/A
% NPI billing provider on RX claim	1.1	1.0	-6.67	N/A	N/A
% billing provider	15.3	14.6	-4.04	N/A	N/A
% NPI billing provider	1.6	1.5	-3.64	N/A	N/A
% servicing provider	35.6	36.0	1.24	N/A	N/A
% NPI servicing provider	24.8	25.8	4.05	N/A	N/A
% prescribing provider	34.8	33.5	-3.79	N/A	N/A
% provider IDs with NPI	54.5	55.8	2.36	30%(+/-)	Yes
% provider IDs linked to NPPES	5.6	5.0	-10.67	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	610.7	610.7	0.01	30%(+/-)	Yes
average number of beneficiaries with claims	83.5	84.4	1.05	30%(+/-)	Yes
Provider IDs with NPI					
Number of provider IDs with NPI	16,838	17,989	6.84	30%(+/-)	Yes
% NPI source = MSIS	93.0	93.6	0.65	30%(+/-)	Yes
% NPI source = NPPES	7.0	6.4	-8.61	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	1,744	1,626	-6.77	30%(+/-)	Yes
% linked via NPI	32.1	28.8	-10.01	30%(+/-)	Yes
% linked via Medicaid legacy provider ID	67.8	71.0	4.72	30%(+/-)	Yes
% linked via Medicare UPIN	0.1	0.1	6.96	30%(+/-)	Yes
% with name prefix	14.7	14.1	-4.01	30%(+/-)	Yes
% with first name	30.1	28.9	-3.98	30%(+/-)	Yes
% with middle name	24.2	22.9	-5.45	30%(+/-)	Yes
% with last name	30.1	28.9	-3.98	30%(+/-)	Yes
% with name suffix	0.7	0.8	16.28	30%(+/-)	Yes
% male	17.0	15.3	-10.08	30%(+/-)	Yes
% female	13.1	13.6	3.97	30%(+/-)	Yes
% with credential	29.6	28.3	-4.38	30%(+/-)	Yes
% with business name	69.9	71.0	1.54	30%(+/-)	Yes
% with address line 1	100.0	99.9	-0.12	30%(+/-)	Yes
% with city	100.0	99.9	-0.12	30%(+/-)	Yes
% with state	100.0	99.9	-0.12	30%(+/-)	Yes
% state = claim file state code	77.9	78.8	1.18	30%(+/-)	Yes
% with zip code	100.0	99.9	-0.12	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 All Provider Characteristics Validation Table
State: NH
Produced: 03/19/2013

Measure	2009 Value	2010 Value	% Change 2009-2010	Cross Year Expected Range	Cross Year Within Range[a]
% with primary taxonomy	96.7	96.4	-0.37	30%(+/-)	Yes
% with provider entity type = individual	30.1	28.9	-3.98	30%(+/-)	Yes
% with provider entity type = organization	69.9	71.0	1.54	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	12,371	1,567	-87.33	30%(+/-)	No
% individual or group of individuals	82.7	47.7	-42.29	30%(+/-)	No
% allopathic and osteopathic physicians	53.4	23.2	-56.52	30%(+/-)	No
% behavioral health and social service providers	6.6	9.0	36.25	30%(+/-)	Yes
% chiropractic providers	0.6	0.0	-100.00	30%(+/-)	Yes
% dental providers	4.7	6.4	36.75	30%(+/-)	Yes
% dietary and nutritional service providers	0.2	0.0	-100.00	30%(+/-)	Yes
% emergency medical service providers	0.4	0.1	-82.02	30%(+/-)	Yes
% eye and vision service providers	1.5	1.3	-8.91	30%(+/-)	Yes
% nursing service providers	0.3	0.1	-78.01	30%(+/-)	Yes
% nursing service-related providers	0.0	0.0	Div by 0	30%(+/-)	N/A
% other service providers	0.9	1.5	63.66	30%(+/-)	Yes
% pharmacy service providers	0.5	0.8	63.33	30%(+/-)	Yes
% physician assistants and advanced practice nursing providers	10.0	2.6	-74.34	30%(+/-)	Yes
% podiatric medicine and surgery service providers	0.6	0.5	-10.98	30%(+/-)	Yes
% respiratory, developmental, rehabilitative, and restorative service providers	1.8	1.6	-10.29	30%(+/-)	Yes
% speech, language, and hearing service providers	0.7	0.7	-3.57	30%(+/-)	Yes
% student health care	0.0	0.0	-100.00	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	17.3	52.3	202.28	30%(+/-)	No
% agencies	3.5	3.8	9.65	30%(+/-)	Yes
% ambulatory health care facilities	1.5	3.3	120.08	30%(+/-)	Yes
% hospital units	0.1	0.1	13.27	30%(+/-)	Yes
% hospitals	0.9	1.0	3.80	30%(+/-)	Yes
% laboratories	0.4	0.3	-28.37	30%(+/-)	Yes
% managed care organizations	0.0	0.0	-100.00	30%(+/-)	Yes
% nursing and custodial care facilities	1.3	0.5	-59.22	30%(+/-)	Yes
% residential treatment facilities	0.5	0.6	12.77	30%(+/-)	Yes
% respite care facility	0.0	0.3	697.50	30%(+/-)	Yes
% suppliers	7.3	41.5	466.37	30%(+/-)	No
% transportation services	1.8	1.0	-46.42	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	525	470	-10.48	30%(+/-)	Yes
% a sole proprietorship	31.6	33.8	6.99	30%(+/-)	Yes
% not a sole proprietorship	61.0	60.4	-0.86	30%(+/-)	Yes
% not answered	7.4	5.7	-22.67	N/A	N/A
Provider IDs with Entity Type = Organization					
Number of provider IDs with entity type = organization	1,219	1,154	-5.33	30%(+/-)	Yes
% organization is a subpart	16.7	17.2	3.55	30%(+/-)	Yes
% organization is not a subpart	67.5	67.1	-0.66	30%(+/-)	Yes
% not answered	15.8	15.7	-0.93	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.

This page has been left blank for double-sided copying.

MATHEMATICA
Policy Research

www.mathematica-mpr.com