

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

**State-Specific Validation Tables,
2010**

Nevada

May 31, 2013

Deo Bencio
Mei-ling Mason



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Policy Research

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ACRONYMS

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

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INTRODUCTION

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

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

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

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

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: NV

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	393	431	9.67	30% (+/-)	Yes
% billing provider on IP claim	51.9	51.3	-1.22	N/A	N/A
% NPI billing provider on IP claim	48.1	48.7	1.31	N/A	N/A
% also a provider on LT claim	3.8	3.9	3.33	N/A	N/A
% also a provider on OT claim	47.6	48.3	1.42	N/A	N/A
% also a provider on RX claim	3.1	1.9	-39.21	N/A	N/A
% provider IDs with NPI	100.0	100.0	0.00	30% (+/-)	Yes
% provider IDs linked to NPPES	100.0	100.0	0.00	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	237.8	223.3	-6.09	30% (+/-)	Yes
average number of beneficiaries with IP claims	171.0	158.3	-7.43	30% (+/-)	Yes
Provider IDs with NPI					
Number of provider IDs with NPI	393	431	9.67	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	393	431	9.67	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	45.5	42.2	-7.29	30% (+/-)	Yes
% with zip code	100.0	100.0	0.00	30% (+/-)	Yes
% with primary taxonomy	100.0	99.5	-0.46	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	393	429	9.16	30% (+/-)	Yes
% 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 IP Billing Provider Characteristics Validation Table

State: NV

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	98.7	100.0	1.29	30% (+/-)	Yes
% agencies	0.0	0.0	Div by 0	30% (+/-)	N/A
% ambulatory health care facilities	20.4	21.4	5.35	30% (+/-)	Yes
% hospital units	1.5	1.4	-8.38	30% (+/-)	Yes
% hospitals	74.8	77.2	3.14	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	0.5	0.0	-100.00	30% (+/-)	Yes
% residential treatment facilities	1.0	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	0.5	0.0	-100.00	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	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	393	431	9.67	30% (+/-)	Yes
% organization is a subpart	9.9	11.1	12.22	30% (+/-)	Yes
% organization is not a subpart	84.0	82.8	-1.36	30% (+/-)	Yes
% not answered	6.1	6.0	-1.23	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: NV

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	234	239	2.14	30% (+/-)	Yes
% billing provider on LT claim	49.6	49.8	0.44	N/A	N/A
% NPI billing provider on LT claim	50.4	50.2	-0.43	N/A	N/A
% also a provider on IP claim	6.4	7.1	10.97	N/A	N/A
% also a provider on OT claim	5.6	7.5	35.55	N/A	N/A
% also a provider on RX claim	0.9	1.3	46.78	N/A	N/A
% provider IDs with NPI	99.1	99.2	0.02	30% (+/-)	Yes
% provider IDs linked to NPPES	99.1	99.2	0.02	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	621.1	627.9	1.10	30% (+/-)	Yes
average number of beneficiaries with LT claims	62.2	67.4	8.35	30% (+/-)	Yes
Provider IDs with NPI					
Number of provider IDs with NPI	232	237	2.16	30% (+/-)	Yes
% NPI source = MSIS	99.6	100.0	0.43	30% (+/-)	Yes
% NPI source = NPPES	0.4	0.0	-100.00	30% (+/-)	Yes
% NPI source = state cross-reference file	0.0	0.0	Div by 0	N/A	N/A
Provider IDs Linked to NPPES					
Number of provider IDs linked to NPPES	232	237	2.16	30% (+/-)	Yes
% linked via NPI	99.6	100.0	0.43	30% (+/-)	Yes
% linked via Medicaid legacy provider ID	0.4	0.0	-100.00	30% (+/-)	Yes
% linked via Medicare UPIN	0.0	0.0	Div by 0	30% (+/-)	N/A
% with name prefix	0.0	0.0	Div by 0	30% (+/-)	N/A
% with first name	0.0	0.0	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	54.7	56.1	2.52	30% (+/-)	Yes
% with zip code	100.0	100.0	0.00	30% (+/-)	Yes
% with primary taxonomy	97.4	95.8	-1.68	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	226	227	0.44	30% (+/-)	Yes
% individual or group of individuals	0.9	0.0	-100.00	30% (+/-)	Yes
% allopathic and osteopathic physicians	0.9	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 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: NV

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	99.1	100.0	0.89	30% (+/-)	Yes
% agencies	0.0	0.0	Div by 0	30% (+/-)	N/A
% ambulatory health care facilities	0.0	0.9	Div by 0	30% (+/-)	N/A
% hospital units	0.9	0.0	-100.00	30% (+/-)	Yes
% hospitals	11.9	13.7	14.30	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	55.3	59.9	8.32	30% (+/-)	Yes
% residential treatment facilities	30.1	25.6	-15.08	30% (+/-)	Yes
% respite care facility	0.0	0.0	Div by 0	30% (+/-)	N/A
% suppliers	0.9	0.0	-100.00	30% (+/-)	Yes
% transportation services	0.0	0.0	Div by 0	30% (+/-)	N/A
% nonmedical	0.0	0.0	Div by 0	N/A	N/A
Provider IDs with Entity Type = Individual					
Number of provider IDs with entity type = individual	0	0	Div by 0	30% (+/-)	N/A
% a sole proprietorship	0.0	0.0	Div by 0	30% (+/-)	N/A
% not a sole proprietorship	0.0	0.0	Div by 0	30% (+/-)	N/A
% not answered	0.0	0.0	Div by 0	N/A	N/A
Provider IDs with Entity Type = Organization					
Number of provider IDs with entity type = organization	232	237	2.16	30% (+/-)	Yes
% organization is a subpart	10.3	10.1	-2.11	30% (+/-)	Yes
% organization is not a subpart	64.7	66.7	3.11	30% (+/-)	Yes
% not answered	25.0	23.2	-7.17	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: NV

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	19,950	20,683	3.67	30% (+/-)	Yes
% billing provider on OT claim	0.0	0.0	Div by 0	N/A	N/A
% servicing provider on OT claim	50.4	50.2	-0.39	N/A	N/A
% NPI servicing provider on OT claim	49.6	49.8	0.40	N/A	N/A
% also a provider on IP claim	0.7	0.7	10.86	N/A	N/A
% also a provider on LT claim	0.1	0.1	26.15	N/A	N/A
% also a provider on RX claim	24.4	24.3	-0.39	N/A	N/A
% provider IDs with NPI	99.5	99.9	0.47	30% (+/-)	Yes
% provider IDs linked to NPPES	93.1	94.2	1.16	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	518.6	538.6	3.86	30% (+/-)	Yes
average number of beneficiaries with OT claims	94.6	98.9	4.55	30% (+/-)	Yes
Provider IDs with NPI					
Number of provider IDs with NPI	19,847	20,672	4.16	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	18,573	19,479	4.88	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	35.1	34.9	-0.67	30% (+/-)	Yes
% with first name	83.3	83.4	0.04	30% (+/-)	Yes
% with middle name	61.8	61.9	0.06	30% (+/-)	Yes
% with last name	83.3	83.4	0.04	30% (+/-)	Yes
% with name suffix	1.8	1.7	-6.37	30% (+/-)	Yes
% male	56.8	55.7	-1.95	30% (+/-)	Yes
% female	26.5	27.7	4.29	30% (+/-)	Yes
% with credential	80.7	80.7	0.00	30% (+/-)	Yes
% with business name	16.7	16.3	-2.31	30% (+/-)	Yes
% with address line 1	100.0	99.6	-0.35	30% (+/-)	Yes
% with city	100.0	99.6	-0.35	30% (+/-)	Yes
% with state	100.0	99.6	-0.35	30% (+/-)	Yes
% state = OT state code	68.5	67.8	-1.00	30% (+/-)	Yes
% with zip code	100.0	99.6	-0.35	30% (+/-)	Yes
% with primary taxonomy	99.2	98.1	-1.05	30% (+/-)	Yes
% with provider entity type = individual	83.3	83.4	0.04	30% (+/-)	Yes
% with provider entity type = organization	16.7	16.3	-2.31	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	18,532	19,113	3.14	30% (+/-)	Yes
% individual or group of individuals	83.6	84.9	1.64	30% (+/-)	Yes
% allopathic and osteopathic physicians	60.0	58.7	-2.19	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 OT Servicing Provider Characteristics Validation Table

State: NV

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	4.2	4.7	10.78	30% (+/-)	Yes
% chiropractic providers	0.2	0.2	-20.68	30% (+/-)	Yes
% dental providers	4.4	4.4	-0.18	30% (+/-)	Yes
% dietary and nutritional service providers	0.1	0.0	-88.37	30% (+/-)	Yes
% emergency medical service providers	0.0	0.1	20.93	30% (+/-)	Yes
% eye and vision service providers	1.8	2.0	9.38	30% (+/-)	Yes
% nursing service providers	0.2	0.1	-29.90	30% (+/-)	Yes
% nursing service-related providers	0.1	0.1	-3.70	30% (+/-)	Yes
% other service providers	1.7	2.4	41.27	30% (+/-)	Yes
% pharmacy service providers	0.0	0.0	-100.00	30% (+/-)	Yes
% physician assistants and advanced practice nursing providers	5.3	6.4	21.05	30% (+/-)	Yes
% podiatric medicine and surgery service providers	0.7	0.6	-10.85	30% (+/-)	Yes
% respiratory, developmental, rehabilitative, and restorative service providers	3.3	3.9	17.59	30% (+/-)	Yes
% speech, language, and hearing service providers	1.2	1.3	7.43	30% (+/-)	Yes
% student health care	0.1	0.1	44.62	30% (+/-)	Yes
% technologists, technicians, and other technical service providers	0.1	0.1	-3.08	30% (+/-)	Yes
% group of individuals with multi- or single specialty	0.1	0.0	-100.00	30% (+/-)	Yes
% nonindividuals	16.4	15.1	-8.36	30% (+/-)	Yes
% agencies	1.8	1.5	-16.60	30% (+/-)	Yes
% ambulatory health care facilities	2.3	2.2	-3.93	30% (+/-)	Yes
% hospital units	0.0	0.0	-46.94	30% (+/-)	Yes
% hospitals	4.4	4.2	-4.13	30% (+/-)	Yes
% laboratories	0.8	0.4	-50.19	30% (+/-)	Yes
% managed care organizations	0.0	0.1	118.60	30% (+/-)	Yes
% nursing and custodial care facilities	0.2	0.2	-10.82	30% (+/-)	Yes
% residential treatment facilities	0.3	0.1	-78.52	30% (+/-)	Yes
% respite care facility	0.0	0.0	-4.55	30% (+/-)	Yes
% suppliers	5.7	5.5	-3.49	30% (+/-)	Yes
% transportation services	0.8	0.8	0.85	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	15,478	16,239	4.92	30% (+/-)	Yes
% a sole proprietorship	18.4	19.2	4.41	30% (+/-)	Yes
% not a sole proprietorship	73.7	74.2	0.73	30% (+/-)	Yes
% not answered	7.9	6.6	-17.07	N/A	N/A
Provider IDs with Entity Type = Organization					
Number of provider IDs with entity type = organization	3,095	3,171	2.46	30% (+/-)	Yes
% organization is a subpart	15.8	16.8	6.17	30% (+/-)	Yes
% organization is not a subpart	71.2	72.6	1.94	30% (+/-)	Yes
% not answered	12.9	10.6	-18.26	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: NV

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	6,091	6,233	2.33	30% (+/-)	Yes
% billing provider on OT claim	100.0	100.0	0.00	N/A	N/A
% servicing provider on OT claim	0.0	0.0	Div by 0	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	0.9	0.9	-0.46	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 RX claim	0.4	0.5	13.41	N/A	N/A
% provider IDs with NPI	16.6	15.6	-6.24	30% (+/-)	Yes
% provider IDs linked to NPPES	16.6	15.6	-6.24	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	1,457.5	1,602.6	9.95	30% (+/-)	Yes
average number of beneficiaries with OT claims	209.5	223.3	6.59	30% (+/-)	Yes
Provider IDs with NPI					
Number of provider IDs with NPI	1,013	972	-4.05	30% (+/-)	Yes
% NPI source = MSIS	7.7	8.5	10.90	30% (+/-)	Yes
% NPI source = NPPES	92.3	91.5	-0.91	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	1,013	972	-4.05	30% (+/-)	Yes
% linked via NPI	7.7	8.5	10.90	30% (+/-)	Yes
% linked via Medicaid legacy provider ID	92.1	91.3	-0.92	30% (+/-)	Yes
% linked via Medicare UPIN	0.2	0.2	4.57	30% (+/-)	Yes
% with name prefix	19.6	19.8	0.55	30% (+/-)	Yes
% with first name	40.7	40.6	-0.08	30% (+/-)	Yes
% with middle name	32.0	31.9	-0.28	30% (+/-)	Yes
% with last name	40.7	40.6	-0.08	30% (+/-)	Yes
% with name suffix	1.3	0.9	-27.83	30% (+/-)	Yes
% male	30.2	30.2	0.13	30% (+/-)	Yes
% female	10.5	10.4	-0.70	30% (+/-)	Yes
% with credential	40.4	40.4	0.14	30% (+/-)	Yes
% with business name	59.3	59.4	0.06	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	89.5	89.2	-0.38	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	40.7	40.6	-0.08	30% (+/-)	Yes
% with provider entity type = organization	59.3	59.4	0.06	30% (+/-)	Yes
Provider IDs with or without NPI but linked to state provider file					
Number of provider IDs with or without NPI linked to state provider file	0	0	Div by 0	N/A	N/A
Provider IDs with NPPES Primary Taxonomy					
Number of provider IDs with NPPES primary taxonomy	1,013	972	-4.05	30% (+/-)	Yes
% individual or group of individuals	63.2	62.6	-0.99	30% (+/-)	Yes
% allopathic and osteopathic physicians	45.1	44.0	-2.40	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 OT Billing Provider Characteristics Validation Table

State: NV

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	2.1	2.5	19.10	30% (+/-)	Yes
% chiropractic providers	0.2	0.2	4.57	30% (+/-)	Yes
% dental providers	2.2	2.0	-9.99	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	4.1	4.3	4.22	30% (+/-)	Yes
% nursing service providers	0.1	0.1	4.04	30% (+/-)	Yes
% nursing service-related providers	0.2	0.2	4.57	30% (+/-)	Yes
% other service providers	2.3	3.3	45.02	30% (+/-)	Yes
% pharmacy service providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% physician assistants and advanced practice nursing providers	2.0	1.7	-11.40	30% (+/-)	Yes
% podiatric medicine and surgery service providers	1.4	1.3	-3.26	30% (+/-)	Yes
% respiratory, developmental, rehabilitative, and restorative service providers	2.1	1.9	-10.66	30% (+/-)	Yes
% speech, language, and hearing service providers	0.7	0.9	34.01	30% (+/-)	Yes
% student health care	0.0	0.0	Div by 0	30% (+/-)	N/A
% technologists, technicians, and other technical service providers	0.3	0.1	-65.20	30% (+/-)	Yes
% group of individuals with multi- or single specialty	0.5	0.0	-100.00	30% (+/-)	Yes
% nonindividuals	36.8	37.4	1.71	30% (+/-)	Yes
% agencies	5.7	5.1	-10.16	30% (+/-)	Yes
% ambulatory health care facilities	10.2	10.7	5.23	30% (+/-)	Yes
% hospital units	0.0	0.0	Div by 0	30% (+/-)	N/A
% hospitals	4.3	4.7	8.95	30% (+/-)	Yes
% laboratories	0.5	0.5	4.05	30% (+/-)	Yes
% managed care organizations	0.3	0.6	108.45	30% (+/-)	Yes
% nursing and custodial care facilities	0.6	0.6	4.22	30% (+/-)	Yes
% residential treatment facilities	0.9	0.7	-18.92	30% (+/-)	Yes
% respite care facility	0.0	0.0	Div by 0	30% (+/-)	N/A
% suppliers	12.3	12.3	0.05	30% (+/-)	Yes
% transportation services	2.0	2.1	4.26	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	412	395	-4.13	30% (+/-)	Yes
% a sole proprietorship	35.7	37.0	3.59	30% (+/-)	Yes
% not a sole proprietorship	64.3	63.0	-1.99	30% (+/-)	Yes
% 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	601	577	-3.99	30% (+/-)	Yes
% organization is a subpart	13.6	13.5	-0.92	30% (+/-)	Yes
% organization is not a subpart	86.4	86.5	0.15	30% (+/-)	Yes
% 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 RX Billing Provider Characteristics Validation Table

State: NV

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	1,039	1,047	0.77	30% (+/-)	Yes
% billing provider on RX claim	50.0	50.0	-0.19	N/A	N/A
% prescribing provider on RX claim	15.9	8.3	-47.68	N/A	N/A
% NPI billing provider on RX claim	50.0	50.0	0.19	N/A	N/A
% also a provider on IP claim	0.0	0.1	Div by 0	N/A	N/A
% also a provider on LT claim	0.0	0.1	Div by 0	N/A	N/A
% also a provider on OT claim	31.3	33.4	6.87	N/A	N/A
% provider IDs with NPI	99.9	99.9	0.00	30% (+/-)	Yes
% provider IDs linked to NPPES	98.2	99.9	1.77	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	3,208.0	3,444.8	7.38	30% (+/-)	Yes
average number of beneficiaries with RX claims	247.3	257.6	4.14	30% (+/-)	Yes
Provider IDs with NPI					
Number of provider IDs with NPI	1,038	1,046	0.77	30% (+/-)	Yes
% NPI source = MSIS	100.0	99.9	-0.10	30% (+/-)	Yes
% NPI source = NPPES	0.0	0.1	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	1,020	1,046	2.55	30% (+/-)	Yes
% linked via NPI	100.0	99.9	-0.10	30% (+/-)	Yes
% linked via Medicaid legacy provider ID	0.0	0.1	Div by 0	30% (+/-)	N/A
% linked via Medicare UPIN	0.0	0.0	Div by 0	30% (+/-)	N/A
% with name prefix	0.2	0.2	-2.55	30% (+/-)	Yes
% with first name	0.4	0.4	-2.55	30% (+/-)	Yes
% with middle name	0.2	0.2	-2.55	30% (+/-)	Yes
% with last name	0.4	0.4	-2.55	30% (+/-)	Yes
% with name suffix	0.0	0.0	Div by 0	30% (+/-)	N/A
% male	0.4	0.4	-2.55	30% (+/-)	Yes
% female	0.0	0.0	Div by 0	30% (+/-)	N/A
% with credential	0.4	0.4	-2.55	30% (+/-)	Yes
% with business name	99.6	98.9	-0.76	30% (+/-)	Yes
% with address line 1	100.0	99.2	-0.77	30% (+/-)	Yes
% with city	100.0	99.2	-0.77	30% (+/-)	Yes
% with state	100.0	99.2	-0.77	30% (+/-)	Yes
% state = RX state code	87.5	84.8	-3.14	30% (+/-)	Yes
% with zip code	100.0	99.2	-0.77	30% (+/-)	Yes
% with primary taxonomy	100.0	98.6	-1.43	30% (+/-)	Yes
% with provider entity type = individual	0.4	0.4	-2.55	30% (+/-)	Yes
% with provider entity type = organization	99.6	98.9	-0.76	30% (+/-)	Yes
Provider IDs with or without NPI but linked to state provider file					
Number of provider IDs with or without NPI linked to state provider file	0	0	Div by 0	N/A	N/A
Provider IDs with NPPES Primary Taxonomy					
Number of provider IDs with NPPES primary taxonomy	1,038	1,031	-0.67	30% (+/-)	Yes
% individual or group of individuals	0.0	1.7	Div by 0	30% (+/-)	N/A
% allopathic and osteopathic physicians	0.0	0.6	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: NV

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	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	1.2	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	98.3	-1.75	30% (+/-)	Yes
% agencies	0.0	0.2	Div by 0	30% (+/-)	N/A
% ambulatory health care facilities	0.0	0.2	Div by 0	30% (+/-)	N/A
% hospital units	0.0	0.0	Div by 0	30% (+/-)	N/A
% hospitals	0.0	0.4	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	0.4	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	100.0	97.1	-2.91	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	4	4	0.00	30% (+/-)	Yes
% a sole proprietorship	100.0	100.0	0.00	30% (+/-)	Yes
% 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	1,016	1,034	1.77	30% (+/-)	Yes
% organization is a subpart	30.3	33.1	9.10	30% (+/-)	Yes
% organization is not a subpart	64.4	61.8	-3.99	30% (+/-)	Yes
% not answered	5.3	5.1	-3.56	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: NV

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	9,687	9,849	1.67	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	1.7	0.9	-48.15	N/A	N/A
% also a provider on IP claim	0.1	0.1	-42.74	N/A	N/A
% also a provider on LT claim	0.0	0.0	-4.76	N/A	N/A
% also a provider on OT claim	48.4	48.4	-0.09	N/A	N/A
% provider IDs with NPI	49.6	49.3	-0.56	30% (+/-)	Yes
% provider IDs linked to NPPES	49.4	49.3	-0.20	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	245.3	229.2	-6.54	30% (+/-)	Yes
average number of beneficiaries with RX claims	27.6	25.9	-6.05	30% (+/-)	Yes
Provider IDs with NPI					
Number of provider IDs with NPI	4,800	4,853	1.10	30% (+/-)	Yes
% NPI source = MSIS	98.6	98.7	0.10	30% (+/-)	Yes
% NPI source = NPPES	1.4	1.3	-6.92	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	4,783	4,853	1.46	30% (+/-)	Yes
% linked via NPI	98.6	98.7	0.10	30% (+/-)	Yes
% linked via Medicaid legacy provider ID	1.3	1.2	-10.78	30% (+/-)	Yes
% linked via Medicare UPIN	0.1	0.1	37.14	30% (+/-)	Yes
% with name prefix	42.0	42.4	0.91	30% (+/-)	Yes
% with first name	95.3	96.8	1.63	30% (+/-)	Yes
% with middle name	71.2	72.7	2.03	30% (+/-)	Yes
% with last name	95.3	96.8	1.63	30% (+/-)	Yes
% with name suffix	2.1	2.0	-4.44	30% (+/-)	Yes
% male	67.6	68.1	0.85	30% (+/-)	Yes
% female	27.7	28.7	3.54	30% (+/-)	Yes
% with credential	93.6	95.2	1.68	30% (+/-)	Yes
% with business name	4.7	2.7	-42.18	30% (+/-)	Yes
% with address line 1	100.0	99.6	-0.43	30% (+/-)	Yes
% with city	100.0	99.6	-0.43	30% (+/-)	Yes
% with state	100.0	99.6	-0.43	30% (+/-)	Yes
% state = RX state code	85.5	84.0	-1.76	30% (+/-)	Yes
% with zip code	100.0	99.6	-0.43	30% (+/-)	Yes
% with primary taxonomy	99.4	98.4	-0.94	30% (+/-)	Yes
% with provider entity type = individual	95.3	96.8	1.63	30% (+/-)	Yes
% with provider entity type = organization	4.7	2.7	-42.18	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	4,763	4,777	0.29	30% (+/-)	Yes
% individual or group of individuals	94.9	97.7	2.95	30% (+/-)	Yes
% allopathic and osteopathic physicians	73.2	73.1	-0.21	30% (+/-)	Yes

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

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

2009-2010 MAX RX Prescribing Provider Characteristics Validation Table

State: NV

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	0.3	0.1	-41.67	30% (+/-)	Yes
% chiropractic providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% dental providers	6.5	6.5	0.02	30% (+/-)	Yes
% dietary and nutritional service providers	0.0	0.0	-100.00	30% (+/-)	Yes
% emergency medical service providers	0.0	0.0	0.00	30% (+/-)	Yes
% eye and vision service providers	2.3	2.8	22.39	30% (+/-)	Yes
% nursing service providers	0.4	0.3	-23.81	30% (+/-)	Yes
% nursing service-related providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% other service providers	2.3	3.3	43.66	30% (+/-)	Yes
% pharmacy service providers	0.0	0.0	-50.00	30% (+/-)	Yes
% physician assistants and advanced practice nursing providers	8.3	10.3	23.56	30% (+/-)	Yes
% podiatric medicine and surgery service providers	1.1	1.1	-0.36	30% (+/-)	Yes
% respiratory, developmental, rehabilitative, and restorative service providers	0.1	0.1	0.00	30% (+/-)	Yes
% speech, language, and hearing service providers	0.0	0.0	Div by 0	30% (+/-)	N/A
% student health care	0.1	0.1	-20.00	30% (+/-)	Yes
% technologists, technicians, and other technical service providers	0.1	0.0	-100.00	30% (+/-)	Yes
% group of individuals with multi- or single specialty	0.3	0.0	-100.00	30% (+/-)	Yes
% nonindividuals	5.1	2.3	-54.86	30% (+/-)	Yes
% agencies	0.1	0.1	-50.00	30% (+/-)	Yes
% ambulatory health care facilities	0.3	0.3	-0.32	30% (+/-)	Yes
% hospital units	0.0	0.0	Div by 0	30% (+/-)	N/A
% hospitals	0.8	0.1	-84.62	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	-100.00	30% (+/-)	Yes
% 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	3.8	1.8	-53.74	30% (+/-)	Yes
% transportation services	0.0	0.0	0.00	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	4,558	4,700	3.12	30% (+/-)	Yes
% a sole proprietorship	17.9	18.6	3.63	30% (+/-)	Yes
% not a sole proprietorship	75.1	75.7	0.72	30% (+/-)	Yes
% not answered	7.0	5.8	-17.06	N/A	N/A
Provider IDs with Entity Type = Organization					
Number of provider IDs with entity type = organization	225	132	-41.33	30% (+/-)	No
% organization is a subpart	27.1	22.0	-18.96	30% (+/-)	Yes
% organization is not a subpart	61.8	65.9	6.69	30% (+/-)	Yes
% not answered	11.1	12.1	9.09	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: NV

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	32,125	33,106	3.05	30%(+/-)	Yes
% billing provider on IP claim	0.6	0.7	5.20	N/A	N/A
% NPI billing provider on IP claim	0.6	0.6	7.82	N/A	N/A
% billing provider on LT claim	0.4	0.4	-0.55	N/A	N/A
% NPI billing provider on LT claim	0.4	0.4	-1.36	N/A	N/A
% billing provider on OT claim	19.0	18.8	-0.70	N/A	N/A
% servicing provider on OT claim	31.3	31.4	0.21	N/A	N/A
% NPI servicing provider on OT claim	30.8	31.1	1.00	N/A	N/A
% billing provider on RX claim	1.6	1.6	-2.41	N/A	N/A
% prescribing provider on RX claim	30.2	29.8	-1.34	N/A	N/A
% NPI billing provider on RX claim	1.6	1.6	-2.04	N/A	N/A
% billing provider	21.3	21.2	-0.71	N/A	N/A
% NPI billing provider	2.5	2.5	0.12	N/A	N/A
% servicing provider	31.3	31.4	0.21	N/A	N/A
% NPI servicing provider	30.8	31.1	1.00	N/A	N/A
% prescribing provider	30.2	29.8	-1.34	N/A	N/A
% provider IDs with NPI	68.7	69.0	0.47	30%(+/-)	Yes
% provider IDs linked to NPPES	64.6	65.4	1.14	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	761.0	809.0	6.31	30%(+/-)	Yes
average number of beneficiaries with claims	111.6	117.1	4.92	30%(+/-)	Yes
Provider IDs with NPI					
Number of provider IDs with NPI	22,054	22,835	3.54	30%(+/-)	Yes
% NPI source = MSIS	95.4	95.8	0.39	30%(+/-)	Yes
% NPI source = NPPES	4.6	4.2	-8.22	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	20,765	21,642	4.22	30%(+/-)	Yes
% linked via NPI	95.2	95.6	0.45	30%(+/-)	Yes
% linked via Medicaid legacy provider ID	4.8	4.4	-9.04	30%(+/-)	Yes
% linked via Medicare UPIN	0.0	0.0	23.53	30%(+/-)	Yes
% with name prefix	32.5	32.4	-0.34	30%(+/-)	Yes
% with first name	76.8	77.1	0.41	30%(+/-)	Yes
% with middle name	57.1	57.3	0.37	30%(+/-)	Yes
% with last name	76.8	77.1	0.41	30%(+/-)	Yes
% with name suffix	1.7	1.6	-7.02	30%(+/-)	Yes
% male	52.5	51.6	-1.55	30%(+/-)	Yes
% female	24.4	25.5	4.63	30%(+/-)	Yes
% with credential	74.4	74.7	0.37	30%(+/-)	Yes
% with business name	23.2	22.5	-2.88	30%(+/-)	Yes
% with address line 1	100.0	99.6	-0.35	30%(+/-)	Yes
% with city	100.0	99.6	-0.35	30%(+/-)	Yes
% with state	100.0	99.6	-0.35	30%(+/-)	Yes
% state = claim file state code	69.6	68.6	-1.32	30%(+/-)	Yes
% with zip code	100.0	99.6	-0.35	30%(+/-)	Yes

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

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2009-2010 MAX All Provider Characteristics Validation Table

State: NV

Produced: 02/28/2013

Measure	2009 Value	2010 Value	% Change 2009-2010	Cross Year Expected Range	Cross Year Within Range ^a
% with primary taxonomy	99.2	98.2	-1.03	30%(+/-)	Yes
% with provider entity type = individual	76.8	77.1	0.41	30%(+/-)	Yes
% with provider entity type = organization	23.2	22.5	-2.88	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	20,732	21,250	2.50	30%(+/-)	Yes
% individual or group of individuals	78.1	79.6	1.93	30%(+/-)	Yes
% allopathic and osteopathic physicians	56.1	55.0	-1.90	30%(+/-)	Yes
% behavioral health and social service providers	3.9	4.3	11.46	30%(+/-)	Yes
% chiropractic providers	0.2	0.2	-19.37	30%(+/-)	Yes
% dental providers	4.1	4.1	0.10	30%(+/-)	Yes
% dietary and nutritional service providers	0.1	0.0	-88.31	30%(+/-)	Yes
% emergency medical service providers	0.0	0.0	20.51	30%(+/-)	Yes
% eye and vision service providers	1.8	2.0	8.67	30%(+/-)	Yes
% nursing service providers	0.2	0.1	-27.87	30%(+/-)	Yes
% nursing service-related providers	0.1	0.1	-3.45	30%(+/-)	Yes
% other service providers	1.6	2.3	42.26	30%(+/-)	Yes
% pharmacy service providers	0.0	0.1	133.33	30%(+/-)	Yes
% physician assistants and advanced practice nursing providers	4.9	5.9	20.55	30%(+/-)	Yes
% podiatric medicine and surgery service providers	0.7	0.6	-11.46	30%(+/-)	Yes
% respiratory, developmental, rehabilitative, and restorative service providers	3.0	3.5	17.13	30%(+/-)	Yes
% speech, language, and hearing service providers	1.1	1.2	8.60	30%(+/-)	Yes
% student health care	0.1	0.1	46.55	30%(+/-)	Yes
% technologists, technicians, and other technical service providers	0.1	0.1	-15.28	30%(+/-)	Yes
% group of individuals with multi- or single specialty	0.2	0.0	-100.00	30%(+/-)	Yes
% nonindividuals	21.9	20.4	-6.89	30%(+/-)	Yes
% agencies	1.9	1.6	-15.79	30%(+/-)	Yes
% ambulatory health care facilities	2.6	2.6	-2.07	30%(+/-)	Yes
% hospital units	0.1	0.1	-36.59	30%(+/-)	Yes
% hospitals	5.1	5.1	-0.96	30%(+/-)	Yes
% laboratories	0.7	0.4	-48.37	30%(+/-)	Yes
% managed care organizations	0.1	0.1	113.21	30%(+/-)	Yes
% nursing and custodial care facilities	0.8	0.8	1.16	30%(+/-)	Yes
% residential treatment facilities	0.6	0.4	-42.41	30%(+/-)	Yes
% respite care facility	0.0	0.0	0.00	30%(+/-)	Yes
% suppliers	9.1	8.6	-5.78	30%(+/-)	Yes
% transportation services	0.8	0.8	0.48	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	15,953	16,695	4.65	30%(+/-)	Yes
% a sole proprietorship	18.8	19.6	4.24	30%(+/-)	Yes
% not a sole proprietorship	73.5	74.0	0.67	30%(+/-)	Yes
% not answered	7.7	6.4	-16.86	N/A	N/A
Provider IDs with Entity Type = Organization					
Number of provider IDs with entity type = organization	4,812	4,871	1.23	30%(+/-)	Yes
% organization is a subpart	16.8	17.9	6.50	30%(+/-)	Yes
% organization is not a subpart	72.3	72.7	0.64	30%(+/-)	Yes
% not answered	11.0	9.4	-14.14	N/A	N/A

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

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