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2003-2005 MAX IP VALIDATION TABLE  
STATE: AK

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Change Within Expected Range
<b>All IP Claims</b>										
Total Number of Claims	N/A	21,029	N/A	17,584	N/A	18,078	N/A	-16.40	2.81	Yes
% Encounter Claims	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% Supplemental Claims	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	N/A
Total FFS Claims	N/A	21,029	N/A	17,584	N/A	18,078	N/A	-16.40	2.81	Yes
% Crossover	5-20	25.64	No	10.61	Yes	9.75	Yes	-58.60	-8.10	Yes
% Adjusted Claims	N/A	8.87	N/A	29.45	N/A	8.31	N/A	231.90	-71.80	No
% Standard Adjustments	> 1%	99.30	Yes	99.88	Yes	99.60	Yes	0.58	-0.28	Yes
Aver. Amt. Pd Adjust. ( include \$0)	N/A	\$14,180	N/A	\$8,253	N/A	\$11,224	N/A	-41.80	36.01	No
Total number of claims with missing Medicaid eligibility (excludes S-SCHIP only)	N/A	N/A	N/A	N/A	N/A	176	N/A	N/A	N/A	N/A
<b>FFS Non-Crossover Claims (Type of Claim=1, Crossover Claim Indicator=0)</b>										
Total Number of Claims	N/A	15,638	N/A	15,719	N/A	16,316	N/A	0.52	3.80	Yes
% Claims with> \$0 Paid	95-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with< \$0 Paid	0	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	N/A
Aver. Medicaid Amount Paid (claims with >\$0 paid)	\$2000 - \$7000	\$9,342	No	\$9,727	No	\$9,828	No	4.12	1.04	Yes
Aver. Medicaid Amt Paid per Covered Day (>\$0 paid and >0 days claims)	N/A	\$2,635	N/A	\$2,700	N/A	\$2,615	N/A	2.45	-3.13	Yes
% Claims with TPL	>0 - 10	2.33	Yes	2.88	Yes	2.86	Yes	23.81	-0.89	Yes
Aver. TPL Paid for claims with TPL	N/A	\$2,926	N/A	\$2,776	N/A	\$3,455	N/A	-5.12	24.48	No
% Claims with UB-92 Accommodation Codes	95-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
Average # UB-92 Accom. Codes (at least 1 accom code)	>1	1.11	Yes	1.10	Yes	1.10	Yes	-0.20	0.09	Yes
% Claims with UB-92 Ancillary Codes	95-100	75.86	No	78.90	No	80.23	No	4.01	1.69	Yes
Average # UB-92 Ancillary Codes (at least 1 Ancillary code)	>3	6.69	Yes	6.34	Yes	6.45	Yes	-5.34	1.80	Yes
Average LOS	2-<8	3.86	Yes	3.88	Yes	3.92	Yes	0.48	0.97	Yes
Average Covered Days (> 0 day)	2-<8	3.55	Yes	3.60	Yes	3.76	Yes	1.63	4.36	Yes
% Begin Date = Admit Date	95-100	99.06	Yes	99.11	Yes	99.12	Yes	0.05	0.01	Yes
% IP Claims (MAX TOS 01)	95-100	99.80	Yes	99.82	Yes	99.82	Yes	0.03	0.00	Yes
% Family Planning Claims (pgm type=2)	>0-5	0.20	Yes	0.18	Yes	0.18	Yes	-13.00	-0.22	Yes
% Claims with PDX	98-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
Average Number of DX Codes (at least 1 DX)	>=2	1.88	No	1.89	No	1.89	No	0.48	0.16	Yes
% Claims with PDX, where length=3	5-30	5.10	Yes	4.31	No	4.79	No	-15.50	10.98	Yes
% Claims with PDX, where length=4	15-75	17.70	Yes	18.08	Yes	17.71	Yes	2.14	-2.03	Yes
% Claims with PDX, where length=5	25-70	77.20	No	77.61	No	77.50	No	0.53	-0.14	Yes
% Claims with a procedure code	35-70	55.35	Yes	57.54	Yes	56.46	Yes	3.97	-1.88	Yes
Average Number of Procedures for claims with at least 1 procedure code	>1	1.54	Yes	1.54	Yes	1.52	Yes	-0.39	-1.40	Yes
% Claims with Procedures that have CPT-4 Indicator	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% Claims with Procedures that have ICD-9 Indicator	N/A	100.00	N/A	100.00	N/A	99.83	N/A	0.00	-0.17	Yes
% Claims with Procedures that have CPT-4 Indicator & CPT-4 format of 5n	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A

2003-2005 MAX IP VALIDATION TABLE  
STATE: AK

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Change Within Expected Range
% Claims with Procedures that have ICD-9-CM Indicator & ICD-9-CM Format 3n or 4n	N/A	99.99	N/A	100.00	N/A	100.00	N/A	0.01	0.00	Yes
% Claims with DRG	>=90	0.00	No	0.00	No	0.00	No	Div by 0	Div by 0	N/A
% Claims Maternal Delivery Indicator	N/A	26.49	N/A	26.82	N/A	27.30	N/A	1.26	1.78	Yes
% Claims Newborn Delivery Indicator (only for separate infant delivery claims using mother's ID)	N/A	28.13	N/A	29.10	N/A	28.78	N/A	3.47	-1.11	Yes
<b>Patient Status</b>										
% Home	75-90	92.68	No	92.45	No	92.38	No	-0.25	-0.07	Yes
% Transferred	1-10	5.41	Yes	5.55	Yes	5.53	Yes	2.54	-0.23	Yes
% Still a Patient	>0 - 2	1.20	Yes	1.29	Yes	1.16	Yes	8.00	-10.30	Yes
% Died	>0 - 3	0.67	Yes	0.59	Yes	0.64	Yes	-11.90	7.74	Yes
<b>FFS Crossover Claims (Type of Claim=1, Crossover Claim Indicator=1)</b>										
Total Number of Claims	N/A	5,391	N/A	1,865	N/A	1,762	N/A	-65.40	-5.52	Yes
% Claims with > \$0 Paid	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
% Claims with < \$0 Paid	0	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	N/A
Aver. Medicaid Amount Paid (claims with >\$0 paid)	N/A	\$278	N/A	\$831	N/A	\$915	N/A	199.20	10.09	Yes
% Claims with TPL	N/A	0.17	N/A	0.32	N/A	0.34	N/A	92.71	5.85	Yes
Aver. TPL Paid -claims with TPL	N/A	\$5,144	N/A	\$480	N/A	\$413	N/A	-90.70	-13.90	Yes
% Claims with UB-92 Accommodation Codes	95-100	16.10	No	54.91	No	63.79	No	241.00	16.18	No
Average # UB-92 Accom. Codes (at least 1 accom code)	>1	1.18	Yes	1.19	Yes	1.19	Yes	0.91	0.07	Yes
% Claims with UB-92 Ancillary Codes	95-100	82.32	No	35.98	No	38.48	No	-56.30	6.95	Yes
Average # UB-92 Ancillary Codes (at least 1 Ancillary code)	>3	2.86	No	9.54	Yes	11.20	Yes	233.00	17.42	No
Average LOS	2-<8	2.49	Yes	6.39	Yes	7.35	Yes	156.70	15.10	No
% Begin Date = Admit Date	95-100	99.98	Yes	100.00	Yes	99.89	Yes	0.02	-0.11	Yes
% Claims with IP TOS	95-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with DX	98-100	90.50	No	62.84	No	65.27	No	-30.60	3.86	Yes
Average Number of DX Codes (at least 1 DX)	>=2	1.36	No	1.94	No	1.99	No	43.13	2.68	Yes
% Claims with PDX, where length=3	5-30	5.53	Yes	8.53	Yes	9.91	Yes	54.18	16.18	No
% Claims with PDX, where length=4	15-75	46.51	Yes	42.06	Yes	41.04	Yes	-9.55	-2.43	Yes
% Claims with PDX, where length=5	25-70	47.96	Yes	49.40	Yes	49.04	Yes	3.01	-0.73	Yes
% Claims with a procedure code	35-70	10.65	No	30.35	No	29.74	No	185.00	-2.01	Yes
Average Number of Procedures for claims with at least 1 procedure code	>1	1.59	Yes	1.54	Yes	1.53	Yes	-2.93	-0.53	Yes
% Claims with Procedures that have CPT-4 Indicator	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% Claims with Procedures that have ICD-9 Indicator	N/A	96.34	N/A	99.65	N/A	100.00	N/A	3.43	0.35	Yes
% Claims with Procedures that have CPT-4 Indicator & CPT-4 format of 5n	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A
% Claims with Procedures that have ICD-9-CM Indicator & ICD-9-CM Format 3n or 4n	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
% Claims with DRG	>=90	0.00	No	0.00	No	0.00	No	Div by 0	Div by 0	N/A

2003-2005 MAX LT VALIDATION TABLE  
STATE: AK

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Change Within Expected Range
<b>All LT Claims</b>										
Total Number of Claims	N/A	18,044	N/A	18,873	N/A	19,080	N/A	4.59	1.10	Yes
% Encounter Claims	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% Supplemental Claims	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
Total FFS Claims	N/A	18,044	N/A	18,873	N/A	19,080	N/A	4.59	1.10	Yes
% Crossover	5-20	2.43	No	3.40	No	4.52	No	40.14	32.81	No
% Adjusted Claims	> 1%	7.78	Yes	12.64	Yes	10.22	Yes	62.41	-19.10	No
% Standard Adjustments	N/A	98.15	N/A	98.99	N/A	97.74	N/A	0.86	-1.26	Yes
Aver. Amt. Pd Adjust. ( include \$0)	N/A	\$4,945	N/A	\$8,234	N/A	\$9,461	N/A	66.49	14.91	Yes
Total number of claims with missing Medicaid eligibility (excludes S-SCHIP only)	N/A	N/A	N/A	N/A	N/A	1	N/A	N/A	N/A	N/A
<b>FFS Non-Crossover Claims (Type of Claim=1 Crossover Claim Indicator=0)</b>										
Total Number of Claims	N/A	17,606	N/A	18,231	N/A	18,218	N/A	3.55	-0.07	Yes
% Claims with> \$0 Paid	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
% Claims with< \$0 Paid	0	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	N/A
<b>Average Medicaid Amount Paid Per Covered Day (claims with &gt;\$0 paid)</b>										
NF (TOS 07)	\$50-\$100	\$315	No	\$340	No	\$354	No	8.16	3.99	Yes
ICF/MR (TOS 05)	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A
Aged/MH (TOS 02)	N/A	\$740	N/A	\$814	N/A	\$814	N/A	9.99	-0.08	Yes
IP Psych. < 21 (TOS 04)	N/A	\$314	N/A	\$326	N/A	\$334	N/A	3.57	2.66	Yes
% NF (TOS 07)	75-99	37.05	No	36.23	No	37.34	No	-2.21	3.07	Yes
% NF claims with NF Covered Days	N/A	100.00	N/A	99.98	N/A	99.99	N/A	-0.02	0.00	Yes
Avg days for NF claims with Covered Days	N/A	28	N/A	28	N/A	28	N/A	-0.01	0.53	Yes
% ICF/MR (TOS 05)	>0-20	0.00	No	0.00	No	0.00	No	Div by 0	Div by 0	N/A
% ICF/MR claims with ICF/MR Covered Days	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A
Avg days for ICF/MR claims with Covered Days	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A
% Aged/MH (TOS 02)	>0-10	0.03	Yes	0.03	Yes	0.03	Yes	-3.43	0.07	Yes
% Aged/MH claims with Aged/MH Covered Days	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
Avg days for Aged/MH claims with Covered Days	N/A	14	N/A	14	N/A	13	N/A	1.41	-8.33	Yes
% IP Psych. < 21 (TOS 04)	>0-5	62.92	No	63.74	No	62.63	No	1.31	-1.75	Yes
% IP Psych. < 21 claims with IP Psych Covered Days	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
Avg days for IP Psych. < 21 claims with Covered Days	N/A	17	N/A	18	N/A	19	N/A	5.59	4.47	Yes
% Claims with Leave Days	1-20	1.23	Yes	1.23	Yes	1.57	Yes	0.13	27.20	No
% Claims with DX	95-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with DX, where length=3	5-30	9.95	Yes	10.02	Yes	6.61	Yes	0.76	-34.10	No
% Claims with DX, where length=4	15-75	25.17	Yes	23.30	Yes	21.79	Yes	-7.44	-6.48	Yes
% Claims with DX, where length=5	25-70	64.89	Yes	66.68	Yes	71.61	No	2.77	7.38	Yes
<b>Patient Status</b>										
% Home	1-5	5.62	No	6.08	No	6.01	No	8.19	-1.10	Yes
% Still a Patient	8-98	90.02	Yes	90.35	Yes	90.32	Yes	0.37	-0.03	Yes
% Died	>0-5	0.97	Yes	0.72	Yes	0.81	Yes	-25.50	12.20	Yes
<b>FFS Crossover Claims (Type of Claim=1, Crossover Claim Indicator=1)</b>										
Total Number of Claims	N/A	438	N/A	642	N/A	862	N/A	46.58	34.27	No
% Claims with> \$0 Paid	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
% Claims with< \$0 Paid	0	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	N/A

2003-2005 MAX LT VALIDATION TABLE  
STATE: AK

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Change Within Expected Range
Aver. Medicaid Amount Paid (claims with >\$0 paid)	N/A	\$939	N/A	\$813	N/A	\$646	N/A	-13.40	-20.60	No
% NF (TOS 07)	75-99	99.32	No	99.38	No	99.54	No	0.06	0.16	Yes
% ICF/MR (TOS 05)	>0-20	0.00	No	0.00	No	0.00	No	Div by 0	Div by 0	N/A
% Aged/MH (TOS 02)	>0-10	0.46	Yes	0.47	Yes	0.35	Yes	2.34	-25.50	No
% IP Psych. < 21 (TOS 04)	>0-5	0.23	Yes	0.16	Yes	0.12	Yes	-31.80	-25.50	No
% Claims with DX	95-100	20.32	No	19.16	No	18.45	No	-5.71	-3.72	Yes
% Claims with DX, where length=3	5-30	3.37	No	8.94	Yes	12.58	Yes	165.30	40.65	No
% Claims with DX, where length=4	15-75	48.31	Yes	29.27	Yes	22.64	Yes	-39.40	-22.60	No
% Claims with DX, where length=5	25-70	48.31	Yes	61.79	Yes	64.78	Yes	27.89	4.84	Yes
Patient Status										
% Home	1-5	2.05	Yes	2.02	Yes	2.09	Yes	-1.45	3.12	Yes
% Still a Patient	8-98	15.53	Yes	15.42	Yes	13.34	Yes	-0.67	-13.50	Yes
% Died	>0-5	0.68	Yes	0.62	Yes	0.35	Yes	-9.03	-44.10	No

2003-2005 MAX OT VALIDATION TABLE  
STATE: AK

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Change Within Expected Range
<b>All OT Claims</b>										
Total Number of Claims	N/A	3,163,780	N/A	3,618,030	N/A	4,390,835	N/A	14.36	21.36	No
% Encounter Claims (Claim Type=3)	N/A	0.11	N/A	0.07	N/A	0.03	N/A	-33.30	-62.80	No
% Supplemental Claims	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% Cap Claims (Claim Type=2, and MAX TOS 20,21,22)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
Total FFS Claims Excluding Capitation Payments	N/A	3,160,451	N/A	3,615,491	N/A	4,389,688	N/A	14.40	21.41	No
% Crossover	5-20	7.60	Yes	7.28	Yes	6.86	Yes	-4.19	-5.81	Yes
% Adjusted Claims	> 1%	1.51	Yes	3.86	Yes	1.55	Yes	156.30	-59.80	No
% Standard Adjustments	N/A	84.13	N/A	96.47	N/A	91.09	N/A	14.67	-5.58	Yes
Aver. Amt. Pd Adjust. ( include \$0)	N/A	\$216	N/A	\$317	N/A	\$220	N/A	47.22	-30.70	No
% Claims(TOC 1,2) TOS 20: HMO Cap Payment	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% Claims(TOC 1,2) TOS 21: PHP Cap Payments	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% Claims(TOC 1,2) TOS 22: PCCM Cap Pay.	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
Average Paid per HMO Cap Clms (TOS 20)	\$75-\$300	Div by 0	No	Div by 0	No	Div by 0	No	Div by 0	Div by 0	N/A
Average Paid per PHP Cap Clms (TOS 21)	\$20-\$250	Div by 0	No	Div by 0	No	Div by 0	No	Div by 0	Div by 0	N/A
Average Paid per PCCM Cap Clms (TOS 22)	3-5	Div by 0	No	Div by 0	No	Div by 0	No	Div by 0	Div by 0	N/A
Total number of claims with missing Medicaid eligibility (excludes S-SCHIP only)	N/A	N/A	N/A	N/A	N/A	10,374	N/A	N/A	N/A	N/A
<b>FFS Non-Crossover Claims (Type of Claim=1, Crossover Claim Indicator=0, excluding capitation claims)</b>										
Total Number of Claims	N/A	2,920,306	N/A	3,352,282	N/A	4,088,694	N/A	14.79	21.97	No
% Claims with> \$0 Paid	>95%	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with< \$0 Paid	0	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	N/A
% Claims with Span Bill	N/A	10.99	N/A	8.17	N/A	4.78	N/A	-25.60	-41.50	No
% OPD Claims with Span Bill/ All OPD Claims(TOS 11)	N/A	5.28	N/A	6.16	N/A	6.72	N/A	16.81	9.03	Yes
% HH Claims with Span Bill/All HH Claims (TOS 13)	N/A	55.32	N/A	68.09	N/A	70.88	N/A	23.08	4.10	Yes
% Other Claims with Span Bills/All Other Claims	N/A	11.27	N/A	8.21	N/A	4.72	N/A	-27.10	-42.60	No
% Claims W/ Service Place 11- Office	50-90	38.33	No	34.11	No	28.39	No	-11.00	-16.80	No
% Claims W/ Service Place 12 - Home	>0-5	16.82	No	23.75	No	37.79	No	41.17	59.09	No
% Claims W/ Service Place 21 - Hospital	>0-5	6.90	No	4.01	Yes	3.24	Yes	-41.80	-19.30	No
% Claims W/ Service Place 32 - NF	>0-5	0.50	Yes	0.16	Yes	0.02	Yes	-67.00	-90.30	No
% Claims W/ Service Place 23 - ER	1-10	2.68	Yes	2.32	Yes	2.22	Yes	-13.10	-4.47	Yes
% Claims w/ Service Place 22 - OPD	>0-10	8.82	Yes	8.73	Yes	7.70	Yes	-0.97	-11.80	Yes
% Claims W/ Service Place 99 - Unknown/Other	<5	6.47	No	0.82	Yes	0.39	Yes	-87.40	-52.70	No
% Claims with TPL	>0 - 15	0.66	Yes	0.63	Yes	0.61	Yes	-5.03	-3.36	Yes
Aver. TPL Paid -claims with TPL	N/A	\$99	N/A	\$103	N/A	\$87	N/A	3.83	-15.10	No
<b>PERCENT CLAIMS/MAX TOS</b>										
% claims MAX TOS 08: Physicians	10-35	16.45	Yes	14.49	Yes	12.73	Yes	-11.90	-12.10	Yes
% claims MAX TOS 09: Dental	2-20	9.76	Yes	9.04	Yes	7.37	Yes	-7.36	-18.50	No
% claims MAX TOS 10: Other Practioner	0.5-8	0.87	Yes	1.19	Yes	1.04	Yes	36.61	-12.60	Yes
% claims MAX TOS 11: OPD	3-25	4.85	Yes	3.05	Yes	2.31	No	-37.00	-24.50	No
% claims MAX TOS 12: Clinic	2-25	2.95	Yes	5.36	Yes	4.23	Yes	81.85	-21.10	No
% claims MAX TOS 13: HH	>0-25	0.04	Yes	0.04	Yes	0.03	Yes	6.41	-18.30	No
% claims MAX TOS 15: Lab/Xray	4-20	8.32	Yes	8.80	Yes	7.78	Yes	5.78	-11.60	Yes
% claims MAX TOS 16: Drugs	<3	1.37	Yes	0.66	Yes	0.14	Yes	-51.90	-78.10	No
% claims MAX TOS 19: Other Services	<25	2.00	Yes	2.62	Yes	3.90	Yes	30.74	49.00	No

2003-2005 MAX OT VALIDATION TABLE  
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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Change Within Expected Range
% claims MAX TOS 51: DME	>3	5.49	Yes	5.25	Yes	4.86	Yes	-4.29	-7.53	Yes
% claims MAX TOS 26: Transportation	>1	8.68	Yes	7.98	Yes	7.80	Yes	-8.02	-2.21	Yes
% claims MAX TOS 24: Sterilizations	N/A	0.02	N/A	0.01	N/A	0.01	N/A	-11.80	-19.40	No
% claims MAX TOS 25: Abortions	N/A	0.00	N/A	0.00	N/A	0.00	N/A	-100.00	Div by 0	N/A
% claims MAX TOS 30: PCS	>0	6.81	Yes	15.89	Yes	24.83	Yes	133.40	56.21	No
% claims MAX TOS 31: TCM	>0	1.26	Yes	1.05	Yes	0.95	Yes	-16.40	-10.00	Yes
% claims MAX TOS 33: Rehabilitation	>0	0.52	Yes	0.00	Yes	0.01	Yes	-99.20	180.00	No
% claims MAX TOS 34: PT/OT/hear/speech	>1	2.75	Yes	2.77	Yes	2.37	Yes	0.96	-14.50	Yes
% claims MAX TOS 35: Hospice	>0	0.00	Yes	0.00	Yes	0.00	Yes	26.17	21.03	No
% claims MAX TOS 36: Nurse Midwife	N/A	0.41	N/A	0.33	N/A	0.31	N/A	-21.20	-4.42	Yes
% claims MAX TOS 37: Nurse Practitioner	N/A	0.88	N/A	0.83	N/A	0.79	N/A	-4.80	-5.91	Yes
% claims MAX TOS 38: Private Nursing	N/A	0.11	N/A	0.10	N/A	0.06	N/A	-16.30	-41.40	No
% claims MAX TOS 39: Religious Non-Med.	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% claims MAX TOS 52: Residential Care	N/A	2.45	N/A	2.81	N/A	3.19	N/A	14.59	13.73	Yes
% claims MAX TOS 53: Psych. Services	>1	21.77	Yes	16.96	Yes	15.01	Yes	-22.10	-11.50	Yes
% claims MAX TOS 54: Adult Day Care	>0	1.70	Yes	0.73	Yes	0.28	Yes	-56.80	-61.90	No
% claims MAX TOS 99: Unknown	<1	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	N/A
Average Medicaid Amount Paid For Selected MAX TOS (excluding claims with <=\$0 paid)										
Total	N/A	\$160	N/A	\$154	N/A	\$136	N/A	-3.83	-11.50	Yes
08: Physicians	\$20-90	\$119	No	\$121	No	\$120	No	1.53	-0.48	Yes
09: Dental	\$10-60	\$68	No	\$70	No	\$72	No	3.75	3.03	Yes
10: Other Practioner	\$10-100	\$79	Yes	\$66	Yes	\$68	Yes	-15.90	2.56	Yes
11: OPD	\$20-100	\$346	No	\$455	No	\$476	No	31.62	4.59	Yes
12: Clinic	\$20-100	\$307	No	\$201	No	\$231	No	-34.50	14.64	Yes
13: HH	N/A	\$720	N/A	\$793	N/A	\$921	N/A	10.08	16.15	No
15: Lab/Xray	10-60	\$67	No	\$91	No	\$102	No	36.82	11.14	Yes
16: Drugs	10-60	\$17	Yes	\$17	Yes	\$22	Yes	-0.76	31.89	No
19: Other Services	N/A	\$265	N/A	\$261	N/A	\$289	N/A	-1.66	10.75	Yes
51: DME	N/A	\$88	N/A	\$93	N/A	\$97	N/A	6.07	3.82	Yes
26: Transportation	N/A	\$159	N/A	\$159	N/A	\$146	N/A	0.13	-8.31	Yes
30: PCS	N/A	\$359	N/A	\$169	N/A	\$92	N/A	-52.80	-45.90	No
31: Targeted Case Management	N/A	\$194	N/A	\$198	N/A	\$205	N/A	2.52	3.33	Yes
33: Rehabilitation	N/A	\$191	N/A	\$408	N/A	\$486	N/A	113.80	19.18	No
34: PT/OT/speech/hear	N/A	\$91	N/A	\$80	N/A	\$83	N/A	-12.20	3.60	Yes
35: Hospice	N/A	\$2,685	N/A	\$2,553	N/A	\$2,560	N/A	-4.88	0.27	Yes
52: Residential Care	N/A	\$960	N/A	\$611	N/A	\$352	N/A	-36.30	-42.40	No
53: Psych. Services	N/A	\$84	N/A	\$120	N/A	\$125	N/A	42.31	4.62	Yes
54: Adult Day Care	N/A	\$194	N/A	\$219	N/A	\$209	N/A	12.37	-4.27	Yes
PERCENT OF CLAIMS BY PROGRAM TYPE (claim type 1)										
% Family Planning (code 2)	N/A	0.24	N/A	0.19	N/A	0.16	N/A	-20.40	-18.40	No
% RHC (code 3)	N/A	0.03	N/A	0.02	N/A	0.01	N/A	-42.00	-17.60	No
% FQHC (code 4)	N/A	0.39	N/A	0.46	N/A	0.44	N/A	15.81	-4.63	Yes
% IHS (code 5)	N/A	3.99	N/A	4.34	N/A	3.91	N/A	8.81	-9.99	Yes
% Waiver (code 6,7)	N/A	9.94	N/A	10.68	N/A	11.63	N/A	7.43	8.96	Yes
AVERAGE EXPENDITURES BY PROGRAM										
Family Planning (code 2)	N/A	\$105	N/A	\$120	N/A	\$128	N/A	14.30	6.54	Yes

2003-2005 MAX OT VALIDATION TABLE  
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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Change Within Expected Range
RHC (code 3)	N/A	\$134	N/A	\$132	N/A	\$116	N/A	-1.00	-12.20	Yes
FQHC (code 4)	N/A	\$184	N/A	\$186	N/A	\$193	N/A	1.35	3.56	Yes
IHS (code 5)	N/A	\$57	N/A	\$72	N/A	\$79	N/A	27.74	9.10	Yes
Waiver (code 6, 7)	N/A	\$384	N/A	\$313	N/A	\$251	N/A	-18.30	-20.00	No
% Claims with DX	> 60	66.24	Yes	61.31	Yes	56.85	No	-7.45	-7.27	Yes
% Claims with DX (MAX TOS 8, 11, 12)	85-100	99.91	Yes	99.93	Yes	99.95	Yes	0.02	0.02	Yes
% Claims with 1 DX that have 2 DX	N/A	31.77	N/A	28.11	N/A	24.27	N/A	-11.50	-13.70	Yes
% Claims with DX, where length=3	5-25	5.04	Yes	5.29	Yes	6.37	Yes	4.90	20.51	No
% Claims with DX, where length=4	40-70	39.68	No	40.17	Yes	39.04	No	1.25	-2.81	Yes
% Claims with DX, where length=5	20-55	55.22	No	54.25	Yes	54.30	Yes	-1.75	0.09	Yes
% OPD Claims with Service Code or UB-92/OPD Claims (TOS 11)	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
% HH Claims with Service Code or UB-92/HH Claims (TOS13)	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
% Other Claims with Service Codes /All Other Claims (Excluding OPD/HH)	98-100	99.04	Yes	98.02	Yes	98.17	Yes	-1.03	0.15	Yes
% CPT-4 Service Code Indicator (code 01)/Claims with Service Codes	N/A	35.40	N/A	34.30	N/A	29.73	N/A	-3.12	-13.30	Yes
% HCPCS (II & III) Service Codes Indicator (code 06)/Claims with Service Codes	N/A	21.63	N/A	59.62	N/A	69.60	N/A	175.60	16.75	No
% Other National Code Indicator (codes 2-5, 7- 9)/Claims with Service Codes	N/A	0.67	N/A	0.64	N/A	0.58	N/A	-5.11	-8.80	Yes
% State Specific Serv. Indicator (10-87)/Claims with Service Codes	N/A	41.02	N/A	5.43	N/A	0.07	N/A	-86.80	-98.70	No
% CPT-4 Format Codes- 5n/Claims with CPT-4	98-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% HCPCS Format Codes Cnnnn or Cnnn /Claims with HCPCS	98-100	100.00	Yes	81.70	No	87.54	No	-18.30	7.15	Yes
% Claims with TOS 08 with Physician Specialty	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
PERCENT OF CLAIMS BY CLTC CODE										
CLTC 00: not a CLTC claim	N/A	N/A	N/A	N/A	N/A	60.64	N/A	N/A	N/A	N/A
CLTC Non-Waiver Claims (11-20)	N/A	N/A	N/A	N/A	N/A	27.76	N/A	N/A	N/A	N/A
CLTC 11: Non-Waiver Personal Care	N/A	N/A	N/A	N/A	N/A	22.34	N/A	N/A	N/A	N/A
CLTC 12: Non-Waiver PDN	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A
CLTC 13: Non-Waiver Adult Day	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A
CLTC 14: Non-Waiver HH	N/A	N/A	N/A	N/A	N/A	0.03	N/A	N/A	N/A	N/A
CLTC 15: Non-Waiver Residential Care	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A
CLTC 16: Non-Waiver Rehab	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A
CLTC 17: Non-Waiver TCM	N/A	N/A	N/A	N/A	N/A	0.01	N/A	N/A	N/A	N/A
CLTC 18: Non-Waiver Transportation	N/A	N/A	N/A	N/A	N/A	2.05	N/A	N/A	N/A	N/A
CLTC 19: Non-Waiver Hospice	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A
CLTC 20: Non-Waiver DME	N/A	N/A	N/A	N/A	N/A	3.33	N/A	N/A	N/A	N/A
CLTC Waiver Claims (30-40)	N/A	N/A	N/A	N/A	N/A	11.61	N/A	N/A	N/A	N/A
CLTC 30: Other Waiver	N/A	N/A	N/A	N/A	N/A	3.90	N/A	N/A	N/A	N/A
CLTC 31: Waiver Personal Care	N/A	N/A	N/A	N/A	N/A	2.42	N/A	N/A	N/A	N/A
CLTC 32: Waiver PDN	N/A	N/A	N/A	N/A	N/A	0.06	N/A	N/A	N/A	N/A
CLTC 33: Waiver Adult Day	N/A	N/A	N/A	N/A	N/A	0.28	N/A	N/A	N/A	N/A
CLTC 34: Waiver HH	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A



2003-2005 MAX OT VALIDATION TABLE  
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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Change Within Expected Range
CLTC 35: Waiver Residential Care	N/A	N/A	N/A	N/A	N/A	3.19	N/A	N/A	N/A	N/A
CLTC 36: Waiver Rehab	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A
CLTC 37: Waiver TCM	N/A	N/A	N/A	N/A	N/A	0.91	N/A	N/A	N/A	N/A
CLTC 38: Waiver Transportation	N/A	N/A	N/A	N/A	N/A	0.64	N/A	N/A	N/A	N/A
CLTC 39: Waiver Hospice	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A
CLTC 40: Waiver DME	N/A	N/A	N/A	N/A	N/A	0.21	N/A	N/A	N/A	N/A
<b>FFS Crossover Claims (Type of Claim=1), Crossover Claim Indicator=1, excluding capitation claims)</b>										
Total Number of Claims	N/A	240,145	N/A	263,209	N/A	300,994	N/A	9.60	14.36	Yes
% Claims with> \$0 Paid	>95%	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with< \$0 Paid	0	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	N/A
% Claims with Span Bill	N/A	2.81	N/A	3.01	N/A	2.86	N/A	7.06	-4.87	Yes
% OPD Claims with Span Bill/ All OPD Claims(TOS 11)	N/A	8.22	N/A	6.47	N/A	6.72	N/A	-21.20	3.74	Yes
% HH Claims with Span Bill/All HH Claims (TOS 13)	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A
% Other Claims with Span Bills/All Other Claims	N/A	2.03	N/A	2.52	N/A	2.38	N/A	24.11	-5.67	Yes
<b>PERCENT CLAIMS/MAX TOS (excluding 20-22)</b>										
% claims MAX TOS 08: Physicians	N/A	40.19	N/A	38.95	N/A	39.25	N/A	-3.10	0.77	Yes
% claims MAX TOS 10: Other Practioner	N/A	2.01	N/A	2.04	N/A	2.16	N/A	1.33	5.65	Yes
% claims MAX TOS 11: OPD	N/A	12.59	N/A	12.35	N/A	11.17	N/A	-1.95	-9.57	Yes
% claims MAX TOS 12: Clinic	N/A	7.08	N/A	7.45	N/A	8.64	N/A	5.21	15.93	No
% claims MAX TOS 13: HH	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% claims MAX TOS 15: Lab/Xray	N/A	15.67	N/A	16.17	N/A	15.54	N/A	3.20	-3.88	Yes
% claims MAX TOS 19: Other Services	N/A	0.95	N/A	1.56	N/A	1.72	N/A	64.57	10.67	Yes
% claims MAX TOS 51: DME	N/A	9.80	N/A	10.44	N/A	10.34	N/A	6.53	-0.96	Yes
% claims MAX TOS 26: Transportation	N/A	3.14	N/A	2.94	N/A	2.88	N/A	-6.20	-2.02	Yes
% claims MAX TOS 30: PCS	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% claims MAX TOS 31: TCM	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% claims MAX TOS 33: Rehabilitation	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	-100.00	No
% claims MAX TOS 34: PT/OT/hear/speech	N/A	2.57	N/A	2.53	N/A	2.54	N/A	-1.37	0.36	Yes
% claims MAX TOS 35: Hospice	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% claims MAX TOS 52: Residential Care	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% claims MAX TOS 53: Psych. Services	N/A	5.03	N/A	4.75	N/A	4.71	N/A	-5.65	-0.87	Yes
% claims MAX TOS 54: Adult Day Care	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
Average Amount Paid	N/A	\$38	N/A	\$45	N/A	\$44	N/A	19.91	-2.34	Yes
% Claims with DX	N/A	84.64	N/A	87.10	N/A	89.13	N/A	2.90	2.34	Yes
% Claims with DX (MAX TOS 8, 11, 12)	85-100	80.47	No	81.91	No	84.27	No	1.79	2.87	Yes
% Claims with 1 DX that have 2 DX	N/A	6.87	N/A	7.25	N/A	7.06	N/A	5.52	-2.60	Yes
% Claims with DX, where length=3	5-25	10.49	Yes	9.13	Yes	8.00	Yes	-12.90	-12.40	Yes
% Claims with DX, where length=4	40-70	42.91	Yes	42.23	Yes	41.27	Yes	-1.57	-2.28	Yes
% Claims with DX, where length=5	20-55	46.59	Yes	48.61	Yes	50.73	Yes	4.33	4.37	Yes
% OPD Claims with Service Code or UB-92/OPD Claims (TOS 11)	N/A	69.20	N/A	75.53	N/A	75.69	N/A	9.16	0.21	Yes
% HH Claims with Service Code or UB-92/HH Claims (TOS13)	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A
% Other Claims with Service Codes/All Other Claims (Excluding OPD/HH)	98-100	94.09	No	87.07	No	88.42	No	-7.46	1.55	Yes

2003-2005 MAX OT VALIDATION TABLE  
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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Change Within Expected Range
% CPT-4 Service Code Indicator (code 01)/Claims with Service Codes	N/A	82.76	N/A	80.22	N/A	79.93	N/A	-3.07	-0.35	Yes
% HCPCS (II & III) Service Codes Indicator (code 06)/Claims with Service Codes	N/A	16.86	N/A	19.50	N/A	20.07	N/A	15.67	2.91	Yes
% Other Codes Indicator /Claims with Service Codes	N/A	0.38	N/A	0.29	N/A	0.00	N/A	-25.30	-100.00	No

2003-2005 MAX RX VALIDATION TABLE  
STATE: AK

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Change Within Expected Range
<b>All RX Claims</b>										
Total Number of Claims	N/A	1,624,729	N/A	1,778,973	N/A	1,887,481	N/A	9.49	6.10	Yes
% Encounter Claims	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% Supplemental Claims	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
Total FFS Claims	N/A	1,624,729	N/A	1,778,973	N/A	1,887,481	N/A	9.49	6.10	Yes
% Adjusted Claims	N/A	0.67	N/A	1.46	N/A	2.90	N/A	116.20	98.65	No
% Standard Adjustments	> 1%	67.78	Yes	99.48	Yes	99.91	Yes	46.77	0.44	Yes
Aver. Amt. Pd Adjust. ( include \$0)	N/A	\$82	N/A	\$73	N/A	\$64	N/A	-10.40	-12.90	Yes
Total number of claims with missing Medicaid eligibility (excludes S-SCHIP only)	N/A	N/A	N/A	N/A	N/A	3,283	N/A	N/A	N/A	N/A
<b>FFS Claims (Type of Claim=1)</b>										
Total Number of Claims	N/A	1,624,729	N/A	1,778,973	N/A	1,887,481	N/A	9.49	6.10	Yes
% Claims with> \$0 Paid	95-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with< \$0 Paid	0	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	N/A
Aver. Medicaid Amount Paid (claims with >\$0 paid)	\$15-\$60	\$63	No	\$67	No	\$72	No	6.90	6.98	Yes
% Claims with TPL	>0 - 15	0.06	Yes	0.03	Yes	0.08	Yes	-41.40	138.30	No
Aver. TPL Paid for claims with TPL	N/A	\$1,251	N/A	\$167	N/A	\$127	N/A	-86.70	-23.90	No
% Family Planning Claims (program type=2)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% Drug Claims (TOS 16)	95-99	100.00	No	100.00	No	100.00	No	0.00	0.00	Yes
% DME Claims (TOS 51)	>0 - 6	0.00	No	0.00	No	0.00	No	Div by 0	Div by 0	N/A
% Drug Claims with Quantity	>98	99.99	Yes	100.00	Yes	100.00	Yes	0.01	0.00	Yes
% Drug Claims with Days Supply	>98	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with HICL	98-100	94.94	No	95.04	No	98.10	Yes	0.11	3.22	Yes
% Claims with Medispan	98-100	94.62	No	94.86	No	97.96	No	0.26	3.27	Yes
% Claims with AHFS	98-100	94.94	No	95.04	No	98.10	Yes	0.11	3.22	Yes
% Claims with Generic (GTC)	98-100	94.94	No	95.04	No	98.10	Yes	0.11	3.22	Yes
% Claims with GC3	98-100	94.94	No	95.04	No	98.10	Yes	0.11	3.22	Yes
<b>NDC Configuration Indicator</b>										
% Prescription (codes 0-3)	N/A	74.97	N/A	72.41	N/A	71.90	N/A	-3.41	-0.71	Yes
% Products (codes 4-6)	N/A	19.96	N/A	22.62	N/A	26.20	N/A	13.35	15.80	No
% HRI (code 7)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	-52.90	No
% Claims with Smart Key	98-100	94.94	No	95.04	No	98.10	Yes	0.11	3.22	Yes
% OTC-Drug Class	N/A	1.71	N/A	1.53	N/A	1.64	N/A	-11.00	7.34	Yes
% Prescription-Drug Class	N/A	93.22	N/A	93.52	N/A	96.46	N/A	0.32	3.15	Yes
% Multiple Source (Code Y)	N/A	43.62	N/A	45.61	N/A	51.18	N/A	4.57	12.21	Yes
% Single Source (Code N)	N/A	44.39	N/A	40.85	N/A	40.45	N/A	-7.98	-0.96	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: AK

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
<b>All Records</b>											
Total Number of Records	N/A	129,876	N/A	131,300	N/A	133,699	N/A	1.10	1.83	10% (+/-)	Yes
Total Medicaid Amount Paid	N/A	\$842,758,889	N/A	\$932,683,411	N/A	\$1,007,049,538	N/A	10.67	7.97	15% (+/-)	Yes
% with no services (Code 0)	N/A	13.62	N/A	13.32	N/A	13.30	N/A	-2.21	-0.19	N/A	N/A
% with FFS only claims (Code 1)	N/A	84.26	N/A	85.10	N/A	85.96	N/A	0.99	1.01	N/A	N/A
% with only cap claims (Code 2)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A	N/A
% with only encounter claims (Code 3)	N/A	0.16	N/A	0.11	N/A	0.05	N/A	-34.70	-52.30	N/A	N/A
% with FFS and cap claims (Code 4)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A	N/A
% with cap and encounter claims only (Code 5)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A	N/A
% with FFS and encounter claims only (Code 6)	N/A	1.95	N/A	1.47	N/A	0.70	N/A	-24.50	-52.80	N/A	N/A
% with FFS, cap and encounter records (Code 7)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A	N/A
# with claims and missing Medicaid eligibility (excludes S-SCHIP only)	N/A	1,225	N/A	1,469	N/A	849	N/A	19.92	-42.20	N/A	N/A
% with claims and missing Medicaid eligibility (excludes S-SCHIP only)	<2%	0.94	Yes	1.12	Yes	0.64	Yes	18.62	-43.20	N/A	N/A
# with FFS claims and missing Medicaid eligibility (excludes S-SCHIP only)	N/A	N/A	N/A	N/A	N/A	849	N/A	N/A	N/A	N/A	N/A
% with FFS claims and missing Medicaid eligibility (excludes S-SCHIP only)	N/A	N/A	N/A	N/A	N/A	0.64	N/A	N/A	N/A	N/A	N/A
Expenditures for people missing Medicaid eligibility (excludes S-SCHIP only enrollees)	N/A	\$6,108,176	N/A	\$7,328,761	N/A	\$2,841,183	N/A	19.98	-61.20	N/A	N/A
Expenditures for people with FFS claims and missing Medicaid eligibility (excludes S-SCHIP only)	N/A	N/A	N/A	N/A	N/A	\$2,841,183	N/A	N/A	N/A	N/A	N/A
<b>S-SCHIP ENROLLMENT</b>											
# with ONLY S-SCHIP enrollment	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	N/A	N/A
% with ONLY S-SCHIP enrollment	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A	N/A
# with ANY S-SCHIP enrollment	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	N/A	N/A
% with ANY S-SCHIP enrollment	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A	N/A
Total PYE ANY S-SCHIP enrollment	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	N/A	N/A
<b>Total Medicaid Enrollees (excludes people with missing Medicaid eligibility information or S-SCHIP only)</b>											
Total Medicaid Enrollees	N/A	128,651	N/A	129,831	N/A	132,850	N/A	0.92	2.33	10% (+/-)	Yes
Total Medicaid PYE (Person Years of Enrollment)	N/A	93,496	N/A	94,769	N/A	96,318	N/A	1.36	1.63	10% (+/-)	Yes
# with any M-SCHIP enrollment (Medicaid enrollees)	N/A	18,920	N/A	18,099	N/A	19,336	N/A	-4.34	6.84	N/A	N/A
Total PYE any M-SCHIP	N/A	11,915	N/A	10,978	N/A	10,174	N/A	-7.86	-7.33	N/A	N/A
<b>Eligibility Demographics</b>											
% Records with Valid SSN Format	>=95%	95.29	Yes	95.38	Yes	97.16	Yes	0.09	1.87	10% (+/-)	Yes
% Records whose MSIS SSN passed High Group Test (Code 1)	>95%	N/A	No	N/A	No	97.01	No	N/A	N/A	10% (+/-)	No
% Records whose MSIS SSN failed High Group Test due to invalid AAA (Code 2)	N/A	N/A	N/A	N/A	N/A	0.03	N/A	N/A	N/A	N/A	N/A
% Records whose MSIS SSN failed High Group Test due to GG = 00 (Code 3)	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A	N/A
% Records whose MSIS SSN failed High Group Test due to SSSS = 0000 (Code 4)	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A	N/A
% Records whose MSIS SSN failed High Group Test due to GG not yet issued (Code 5)	N/A	N/A	N/A	N/A	N/A	0.12	N/A	N/A	N/A	N/A	N/A
% Records whose MSIS SSN failed High Group Test due to RR with invalid DOB (Code 6)	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A	N/A
#SSNs with duplicate records	0	24	No	13	No	49	No	-45.80	276.90	N/A	N/A
% with External SSN from EDB (Code 1)	N/A	N/A	N/A	N/A	N/A	11.11	N/A	N/A	N/A	10% (+/-)	No
% with External SSN from state-provided cross-reference file Code 2)	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	10% (+/-)	No
% with County Code	>=98%	99.66	Yes	99.70	Yes	99.42	Yes	0.05	-0.28	10% (+/-)	Yes
% with Valid 5 Digit Zip Code Format	>=95%	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	10% (+/-)	Yes
% Enrollees who Died During Year	0.1-3%	0.43	Yes	0.43	Yes	0.55	Yes	-0.38	27.34	10% (+/-)	No
% White	N/A	42.54	N/A	42.19	N/A	41.55	N/A	-0.831	-1.52	10% (+/-)	Yes
% Black	N/A	5.25	N/A	5.15	N/A	5.30	N/A	-1.83	2.94	10% (+/-)	Yes
% Native American/Alaskan Native	N/A	36.28	N/A	37.27	N/A	38.08	N/A	2.743	2.17	10% (+/-)	Yes
% Asian	N/A	4.98	N/A	5.25	N/A	5.66	N/A	5.513	7.82	N/A	N/A
% Native Hawaiian or other Pacific Islander	N/A	2.55	N/A	2.69	N/A	2.83	N/A	5.473	5.24	N/A	N/A
% More than one race	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A	N/A
% Unknown race	<5%	4.70	Yes	3.84	Yes	6.58	No	-18.2	71.18	N/A	N/A
% Hispanic/Latino (included with race categories prior to 2005)	N/A	3.71	N/A	3.61	N/A	3.57	N/A	-2.74	-1.06	10% (+/-)	Yes
% of Hispanic/Latino with unknown race	N/A	N/A	N/A	N/A	N/A	100.00	N/A	N/A	N/A	N/A	N/A
% Age 0	2-8%	4.44	Yes	4.36	Yes	4.52	Yes	-1.67	3.51	10% (+/-)	Yes
% Age 0-20 Years	49-74%	68.06	Yes	67.88	Yes	67.14	Yes	-0.26	-1.09	10% (+/-)	Yes
% Age > 64 Years	5-18%	5.88	Yes	5.96	Yes	6.14	Yes	1.37	2.95	10% (+/-)	Yes
% with century of birth '18', '19', '20'	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	N/A	N/A
% with Sex Code 'M' or 'F'	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	N/A	N/A
% Enrollees with 12 months enrollment	40-65%	37.08	No	38.00	No	36.99	No	2.47	-2.64	10% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: AK

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
<b>EDB Dual Eligibles</b>											
Total EDB Duals (Duals confirmed by EDB)	N/A	12,167	N/A	12,533	N/A	13,143	N/A	3.01	4.87	10% (+/-)	Yes
Total EDB Dual PYE	N/A	10,541	N/A	10,931	N/A	11,382	N/A	3.71	4.13	15% (+/-)	Yes
% Age > 64 Years who are EDB Duals	>=90%	90.51	Yes	89.98	No	88.50	No	-0.59	-1.64	10% (+/-)	Yes
% MAX Aged Groups (11,21,31,41,51) who are EDB Duals	>=90%	89.70	No	90.26	Yes	88.87	No	0.62	-1.54	10% (+/-)	Yes
% MAX Disabled Groups (12,22,32,42,52) who are EDB Duals	30-55%	43.22	Yes	43.48	Yes	43.41	Yes	0.60	-0.16	10% (+/-)	Yes
% EDB Only (50)	<5%	8.75	No	9.42	No	5.04	No	7.65	-46.50	N/A	N/A
% EDB QMB Only (51)	N/A	0.01	N/A	0.03	N/A	0.05	N/A	288.30	66.88	N/A	N/A
% EDB QMB Plus (52)	N/A	66.33	N/A	65.34	N/A	65.49	N/A	-1.49	0.23	N/A	N/A
% EDB SLMB Only (53)	N/A	1.31	N/A	1.17	N/A	1.34	N/A	-10.20	14.17	N/A	N/A
% EDB SLMB Plus (54)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A	N/A
% EDB ODWI (55)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A	N/A
% EDB QI-1 (56)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A	N/A
% EDB QI-2 (57)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A	N/A
% EDB Other (58)	N/A	23.60	N/A	24.03	N/A	28.08	N/A	1.81	16.86	N/A	N/A
% EDB dual type unknown (59)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A	N/A
% EDB dual status unknown (98)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A	N/A
Total Non-EDB Duals (Duals rptd in MSIS, not found in EDB)	N/A	53	N/A	59	N/A	192	N/A	11.32	225.40	10% (+/-)	No
% Non-EDB Duals Without Valid SSN	N/A	1.89	N/A	1.69	N/A	0.52	N/A	-10.20	-69.30	10% (+/-)	No
% Non-EDB Duals who are Children/Adults	N/A	1.89	N/A	1.69	N/A	2.60	N/A	-10.20	53.65	10% (+/-)	No
% EDB Duals with Spanish Language	N/A	0.61	N/A	0.63	N/A	0.67	N/A	3.64	6.22	15% (+/-)	Yes
% EDB Duals with EDB Date of Death During Year	6-10%	5.66	No	5.25	No	5.44	No	-7.29	3.62	15% (+/-)	Yes
% EDB Duals with Medicaid Reported HIC	N/A	87.82	N/A	87.27	N/A	82.48	N/A	-0.63	-5.48	15% (+/-)	Yes
% EDB Duals with Medicaid reported HIC = Medicare HIC	N/A	98.32	N/A	98.93	N/A	98.91	N/A	0.62	-0.02	15% (+/-)	Yes
TOTAL EDB DUAL ENROLLEES IN JUNE	N/A	11,523	N/A	11,897	N/A	12,472	N/A	3.25	4.83	10% (+/-)	Yes
<b>June Medicare Type</b>											
June % with Part A Medicare	N/A	1.21	N/A	0.92	N/A	1.29	N/A	-23.90	39.62	15% (+/-)	No
June % with Part B Medicare	N/A	0.62	N/A	0.58	N/A	0.61	N/A	-5.87	5.07	15% (+/-)	Yes
June % Part A/B Medicare	N/A	98.17	N/A	98.50	N/A	98.10	N/A	0.33	-0.40	15% (+/-)	Yes
<b>Original Reason for Medicare Entitlement</b>											
% Aged (Code 0)	N/A	47.99	N/A	47.08	N/A	46.02	N/A	-1.91	-2.23	15% (+/-)	Yes
% Disabled (Code 1)	N/A	50.73	N/A	51.59	N/A	52.68	N/A	1.70	2.11	15% (+/-)	Yes
% ESRD (Code 2)	N/A	0.52	N/A	0.61	N/A	0.45	N/A	17.11	-26.00	15% (+/-)	No
% Disabled with ESRD (Code 3)	N/A	0.76	N/A	0.73	N/A	0.84	N/A	-5.01	16.32	15% (+/-)	No
<b>Other Eligibility Characteristics (All Enrollees)</b>											
% MAX Aged Groups (11,21,31,41,51) >64 Years	>=99%	98.17	No	99.64	Yes	99.55	Yes	1.50	-0.10	10% (+/-)	Yes
% MAX Disabled Groups (12,22,32,42,52) >64 Years	N/A	4.68	N/A	5.07	N/A	5.67	N/A	8.21	11.88	10% (+/-)	No
% MAX Child Grps (14,16, 24, 34, 44, 48, 54) <21 Years	>=98%	99.73	Yes	99.75	Yes	99.72	Yes	0.02	-0.03	10% (+/-)	Yes
% MAX Adult Groups (15,17,25,35,45,55) >20 Years	>=80%	82.56	Yes	82.08	Yes	82.14	Yes	-0.58	0.07	10% (+/-)	Yes
% MAX 1115 expansion enrollees (MASBOE=51,52,54,55) with 1115 waiver enrollment (Waiver Type=1,5,6,A,F)	100%	N/A	N/A	N/A	N/A	100.00	No	N/A	N/A	N/A	N/A
% MAX 1115 waiver enrollees (Waiver Type=1,5,6,A,F) in MAX 1115 expansion group (MASBOE=51,52,54,55)	N/A	N/A	N/A	N/A	N/A	88.21	N/A	N/A	N/A	N/A	N/A
<b>MAX Aged Total</b>											
11: Aged, Cash	N/A	7,040	N/A	7,032	N/A	7,306	N/A	-0.11	3.90	10% (+/-)	Yes
21: Aged, MN	N/A	5,894	N/A	5,984	N/A	6,148	N/A	1.53	2.74	10% (+/-)	Yes
31: Aged, Poverty	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
41: Other Aged	N/A	210	N/A	113	N/A	131	N/A	-46.20	15.93	10% (+/-)	No
51: Other Aged	N/A	936	N/A	935	N/A	1,027	N/A	-0.11	9.84	10% (+/-)	Yes
51: 1115 Aged	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
<b>MAX Disabled Total</b>											
12: Disabled, Cash	N/A	13,234	N/A	13,946	N/A	14,987	N/A	5.38	7.47	10% (+/-)	Yes
22: Disabled, MN	N/A	12,027	N/A	12,547	N/A	13,480	N/A	4.32	7.44	10% (+/-)	Yes
32: Disabled, Poverty	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
42: Other Disabled	N/A	66	N/A	200	N/A	229	N/A	203.00	14.50	10% (+/-)	No
52: 1115 Disabled	N/A	1,141	N/A	1,199	N/A	1,278	N/A	5.08	6.59	10% (+/-)	Yes
52: 1115 Disabled	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
<b>MAX Child Total</b>											
14: AFDC Child, Cash	N/A	81,179	N/A	81,498	N/A	82,319	N/A	0.39	1.01	10% (+/-)	Yes
14: AFDC Child, Cash	N/A	17,429	N/A	16,643	N/A	16,808	N/A	-4.51	0.99	10% (+/-)	Yes

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16: AFDC-U Child, Cash	N/A	556	N/A	454	N/A	252	N/A	-18.30	-44.50	10% (+/-)	No
24: AFDC Child, MN	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
34: Child Poverty	N/A	56,568	N/A	57,824	N/A	55,672	N/A	2.22	-3.72	10% (+/-)	Yes
44: Other Child	N/A	4,302	N/A	3,954	N/A	3,675	N/A	-8.09	-7.06	10% (+/-)	Yes
48: Foster Care Child	N/A	2,324	N/A	2,623	N/A	2,949	N/A	12.87	12.43	10% (+/-)	No
54: 1115 Child	N/A	0	N/A	0	N/A	2,963	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Adult Total	N/A	27,198	N/A	27,355	N/A	28,238	N/A	0.58	3.23	10% (+/-)	Yes
15: AFDC Adult, Cash	N/A	14,794	N/A	14,649	N/A	15,466	N/A	-0.98	5.58	10% (+/-)	Yes
17: AFDC-U Adult, Cash	N/A	1,149	N/A	1,063	N/A	718	N/A	-7.48	-32.50	10% (+/-)	No
25: AFDC Adult, MN	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
35: Adult, Poverty	N/A	8,918	N/A	9,390	N/A	9,913	N/A	5.29	5.57	10% (+/-)	Yes
45: Other Adult	N/A	2,337	N/A	2,253	N/A	2,141	N/A	-3.59	-4.97	10% (+/-)	Yes
55: 1115 Adult	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
<b>Long-Term Care Enrollees</b>											
<b>INSTITUTIONAL STATUS</b>											
# enrollees with any ILTC claims (includes NF, ICF/MR, Aged Mental Hospital, IP Psych. < 21 years)	N/A	2,259	N/A	2,358	N/A	2,375	N/A	4.38	0.72	N/A	N/A
% enrollees with any ILTC claims	N/A	1.76	N/A	1.82	N/A	1.79	N/A	3.43	-1.57	N/A	N/A
% AGED enrollees with any ILTC claims	N/A	9.12	N/A	8.96	N/A	9.13	N/A	-1.76	1.90	N/A	N/A
% DISABLED enrollees with any ILTC claims	N/A	3.03	N/A	2.86	N/A	2.84	N/A	-5.58	-0.88	N/A	N/A
% CHILD enrollees with any ILTC claims	N/A	1.43	N/A	1.54	N/A	1.46	N/A	7.40	-5.10	N/A	N/A
% ADULT enrollees with any ILTC claims	N/A	0.19	N/A	0.27	N/A	0.28	N/A	41.49	4.73	N/A	N/A
<b>COMMUNITY LONG-TERM CARE STATUS</b>											
# enrollees with any CLTC claims (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	6,784	N/A	N/A	N/A	15% (+/-)	No
% enrollees with any CLTC claims (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	5.11	N/A	N/A	N/A	15% (+/-)	No
% AGED enrollees with any CLTC claims (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	37.42	N/A	N/A	N/A	15% (+/-)	No
% DISABLED enrollees with any CLTC claims (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	25.26	N/A	N/A	N/A	15% (+/-)	No
% CHILD enrollees with any CLTC claims (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	0.16	N/A	N/A	N/A	15% (+/-)	No
% ADULT enrollees with any CLTC claims (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	0.48	N/A	N/A	N/A	15% (+/-)	No
# enrollees with ILTC claims and CLTC claims (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	296	N/A	N/A	N/A	15% (+/-)	No
<b>Section 1915(c) Waiver Enrollment - Most Recent</b>											
# ever enrolled in any Section 1915(c) waiver	N/A	N/A	N/A	N/A	N/A	3,594	N/A	N/A	N/A	15% (+/-)	No
% enrolled in any Section 1915(c) waiver	N/A	N/A	N/A	N/A	N/A	2.71	N/A	N/A	N/A	15% (+/-)	No
% AGED enrollees in Section 1915(c) waiver	N/A	N/A	N/A	N/A	N/A	19.52	N/A	N/A	N/A	15% (+/-)	No
% DISABLED enrollees in Section 1915(c) waiver	N/A	N/A	N/A	N/A	N/A	14.27	N/A	N/A	N/A	15% (+/-)	No
% CHILD enrollees in Section 1915(c) waiver	N/A	N/A	N/A	N/A	N/A	0.04	N/A	N/A	N/A	15% (+/-)	No
% ADULT enrollees in Section 1915(c) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
# with Section 1915(c) waiver for Aged and Disabled (Code G)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
# with Section 1915(c) waiver for Aged (Code H)	N/A	N/A	N/A	N/A	N/A	1,416	N/A	N/A	N/A	15% (+/-)	No
# with Section 1915(c) waiver for Physically Disabled (Code I)	N/A	N/A	N/A	N/A	N/A	941	N/A	N/A	N/A	15% (+/-)	No
# with Section 1915(c) waiver for People with Brain Injuries (Code J)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
# with Section 1915(c) waiver for People with HIV/AIDS (Code K)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
# with Section 1915(c) waiver for MR/DD (Code L)	N/A	N/A	N/A	N/A	N/A	1,029	N/A	N/A	N/A	15% (+/-)	No
# with Section 1915(c) waiver for People with MI/SED (Code M)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
# with Section 1915(c) waiver for Technologically Dependent/Medically Fragile (Code N)	N/A	N/A	N/A	N/A	N/A	208	N/A	N/A	N/A	15% (+/-)	No
# with Section 1915(c) waiver enrollment for unspecified or unknown populations (Code O)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
% of Section 1915(c) waiver enrollees with no waiver claim (Program Type 6 or 7)	<10%	N/A	No	N/A	No	2.34	Yes	N/A	N/A	15% (+/-)	No
% of Section 1915(c) claim (Program Type 6 or 7) recipients with no waiver enrollment	<10%	N/A	No	N/A	No	18.12	Yes	N/A	N/A	15% (+/-)	No
% of Section 1915(c) waiver enrollees with any HMO/HIO enrollment	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
<b>Other Waiver Enrollment (Enrolled Any Time During the Year)</b>											
# with any 1115 waiver (Codes 1,5,6,A,F)	N/A	N/A	N/A	N/A	N/A	3,359	N/A	N/A	N/A	15% (+/-)	No
% AGED enrollees with any 1115 waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% DISABLED enrollees with any 1115 waiver	N/A	N/A	N/A	N/A	N/A	0.01	N/A	N/A	N/A	15% (+/-)	No
% CHILD enrollees with any 1115 waiver	N/A	N/A	N/A	N/A	N/A	4.07	N/A	N/A	N/A	15% (+/-)	No
% ADULT enrollees with any 1115 waiver	N/A	N/A	N/A	N/A	N/A	0.03	N/A	N/A	N/A	15% (+/-)	No
% with any HMO/HIO enrollment	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
# with any 1915(b) waiver (Code 2)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No

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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
% AGED enrollees with any 1915(b) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% DISABLED enrollees with any 1915(b) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% CHILD enrollees with any 1915(b) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% ADULT enrollees with any 1915(b) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% with any HMO/HIO enrollment	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
# with any combined 1915(b)(c) waiver (Code 4)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
% AGED enrollees with any combined 1915(b)(c) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% DISABLED enrollees with any combined 1915(b)(c) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% CHILD enrollees with any combined 1915(b)(c) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% ADULT enrollees with any combined 1915(b)(c) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% with any HMO/HIO enrollment	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
# with 1115 HIFA waiver (Code 5)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
# with 1115 Pharmacy waiver coverage (Code 6)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
% AGED enrollees with Pharmacy waiver coverage	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% DISABLED enrollees with any Pharmacy waiver coverage	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% CHILD enrollees with any Pharmacy waiver coverage	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% ADULT enrollees with any combined 1915(b)(c) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% with any HMO/HIO enrollment	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
# with other type of waiver (Code 7)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
# with unknown type of waiver (Code 9)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
# with 1115 disaster-related waiver (Code A)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
# with 1115 Family Planning Only waiver (Code F)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
<b>Enrollees with Restricted Benefits</b>											
<i>Family Planning enrollees with Restricted Benefits (Code 6)</i>											
# with ONLY Family Planning Only enrollment	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	N/A	N/A
# with ANY Family Planning Only enrollment	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	N/A	N/A
# PYE ANY FP Only	N/A	Div by 0	N/A	Div by 0	N/A	0	N/A	Div by 0	Div by 0	N/A	N/A
<i>Aliens with Restricted Benefits (Code 2)</i>											
# Aliens with ONLY restricted benefits	N/A	1	N/A	3	N/A	8	N/A	200.00	166.70	N/A	N/A
# Aliens with ANY restricted benefits	N/A	2	N/A	3	N/A	8	N/A	50.00	166.70	N/A	N/A
# PYE Aliens with ANY restricted benefits	N/A	0	N/A	0	N/A	1	N/A	50.00	233.30	N/A	N/A
<i>EDB Duals with Restricted Benefits (Medicare Cost Sharing Only - Code 3)</i>											
# EDB Duals with ONLY restricted benefits enrollment	N/A	155	N/A	163	N/A	176	N/A	5.16	7.98	N/A	N/A
# EDB Duals with ANY restricted benefits enrollment	N/A	188	N/A	183	N/A	202	N/A	-2.66	10.38	N/A	N/A
# PYE EDB Duals with ANY restricted benefits	N/A	120	N/A	128	N/A	139	N/A	7.11	8.85	N/A	N/A
% EDB Duals with ONLY restricted benefits enrollment	N/A	N/A	N/A	N/A	N/A	1.34	N/A	N/A	N/A	15% (+/-)	No
<i>Prescription Drug Enrollees (Codes X, Y, or Z)</i>											
# with ONLY Prescription Drug enrollment (may also have a month or more of Code 3)	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	N/A	N/A
# with ANY Prescription Drug enrollment	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	N/A	N/A
# PYE ANY Prescription Drug enrollment	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	N/A	N/A
<i>Dual Prescription Drug Enrollees</i>											
# with ONLY prescription drugs who are also EDB duals	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	N/A	N/A
<b>June Eligibility Profile</b>											
<b>TOTAL ENROLLEES IN JUNE</b>											
June % Full Scope Benefits (Code 1)	>80%	99.88	Yes	99.86	Yes	99.86	Yes	-0.01	-0.01	15% (+/-)	Yes
June % Restricted Benefits Alien (Code 2)	<5%	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	15% (+/-)	N/A
June % Restricted Benefits Dual (Code 3)	<5%	0.12	Yes	0.14	Yes	0.14	Yes	9.61	6.12	15% (+/-)	Yes
June % Restricted Benefits Pregnant (Code 4)	<5%	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	15% (+/-)	N/A
June % Restricted Benefits Other (Code 5)	0%	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	15% (+/-)	N/A
June % Restricted Benefits Family Planning (Code 6)	<5%	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	15% (+/-)	N/A
June % Unknown Benefits (Code 9)	0%	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	15% (+/-)	N/A
June % Restricted Benefits Pharm Plus Non-Dual Enrollee (Code X)	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
June % Restricted Benefits Pharm Plus Dual Receiving Medicare Cost Sharing (Code Y)	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
June % Restricted Benefits Pharm Plus Dual Not Receiving Medicare Cost Sharing (Code Z)	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
June % Private Health Insurance (Codes 2-4)	2-12%	51.30	No	52.32	No	52.75	No	1.98	0.83	15% (+/-)	Yes

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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
June Total Enrollees with TANF Flag (Code 2)	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
June # with M-SCHIP (Code 2) - Child (<19 Years)	N/A	12,259	N/A	11,231	N/A	10,742	N/A	-8.39	-4.35	15% (+/-)	Yes
June # with M-SCHIP (Code 2) - Adult (>18 Years)	N/A	223	N/A	258	N/A	241	N/A	15.70	-6.59	15% (+/-)	Yes
June # with S-SCHIP Flag (Code 3) - Child (<19 Years)	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
June # with S-SCHIP Flag (Code 3) - Adult (>18 Years)	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
<b>Medicaid Expenditures</b>											
Total Medicaid Amt Paid	N/A	\$836,650,713	N/A	\$925,354,650	N/A	\$1,004,208,355	N/A	10.60	8.52	15% (+/-)	Yes
Average Medicaid Amt Paid per Enrollee	N/A	\$6,503	N/A	\$7,127	N/A	\$7,559	N/A	9.60	6.06	15% (+/-)	Yes
25th Percentile	N/A	\$221	N/A	\$238	N/A	\$259	N/A	7.69	8.82	15% (+/-)	Yes
50th Percentile (Median)	N/A	\$989	N/A	\$1,086	N/A	\$1,175	N/A	9.81	8.20	15% (+/-)	Yes
75th Percentile	N/A	\$4,043	N/A	\$4,596	N/A	\$4,901	N/A	13.68	6.64	15% (+/-)	Yes
95th Percentile	N/A	\$31,192	N/A	\$35,602	N/A	\$37,876	N/A	14.14	6.39	15% (+/-)	Yes
99th Percentile	N/A	\$97,158	N/A	\$103,305	N/A	\$109,935	N/A	6.33	6.42	15% (+/-)	Yes
<b>AVG MEDICAID AMT PD/ENROLLEE BY MAX ELIGIBILITY GROUP</b>											
MAX Aged	N/A	\$18,099	N/A	\$20,800	N/A	\$22,436	N/A	14.92	7.87	15% (+/-)	Yes
MAX Disabled	N/A	\$22,536	N/A	\$24,375	N/A	\$24,929	N/A	8.16	2.27	10% (+/-)	Yes
MAX Child	N/A	\$3,568	N/A	\$3,749	N/A	\$3,938	N/A	5.09	5.03	10% (+/-)	Yes
MAX Adult	N/A	\$4,462	N/A	\$4,883	N/A	\$5,047	N/A	9.44	3.35	10% (+/-)	Yes
<b>AVG MEDICAID AMT PD/EDB DUAL ENROLLEE</b>											
All EDB Dual Enrollees	N/A	\$18,607	N/A	\$20,819	N/A	\$22,137	N/A	11.88	6.33	15% (+/-)	Yes
MAX Aged	N/A	\$18,150	N/A	\$20,801	N/A	\$22,871	N/A	14.61	9.95	10% (+/-)	Yes
MAX Disabled	N/A	\$19,363	N/A	\$21,090	N/A	\$21,631	N/A	8.92	2.57	10% (+/-)	Yes
<b>AVG MEDICAID AMT PD/LONG-TERM CARE ENROLLEE</b>											
Enrollees with ILTC claims	N/A	N/A	N/A	N/A	N/A	\$77,845	N/A	N/A	N/A	15% (+/-)	No
Enrollees with CLTC claims (excluding CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	\$48,435	N/A	N/A	N/A	15% (+/-)	No
Enrollees with ILTC and CLTC claims (excluding CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	\$78,595	N/A	N/A	N/A	15% (+/-)	No
<b>AVG MEDICAID AMT PD PER ENROLLEE IN 1915(c) WAIVER - MOST RECENT</b>											
All Section 1915(c) enrollees	N/A	N/A	N/A	N/A	N/A	\$62,614	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for Aged and Disabled (Code G)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for Aged (Code H)	N/A	N/A	N/A	N/A	N/A	\$44,203	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for Physically Disabled (Code I)	N/A	N/A	N/A	N/A	N/A	\$64,352	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for People with Brain Injuries (Code J)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for People with HIV/AIDS (Code K)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for MR/DD (Code L)	N/A	N/A	N/A	N/A	N/A	\$79,248	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for People with MI/SED (Code M)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for Technologically Dependent/Medically Fragile (Code N)	N/A	N/A	N/A	N/A	N/A	\$97,793	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for none of the above (Code O)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
<b>AVG 1915(c) WAIVER AMT PD (PROGRAM TYPES 6/7) PER ENROLLEE IN ANY 1915(c) WAIVER - MOST RECENT</b>											
All Section 1915(c) enrollees	N/A	N/A	N/A	N/A	N/A	\$33,012	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for Aged and Disabled (Code G)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for Aged (Code H)	N/A	N/A	N/A	N/A	N/A	\$20,293	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for Physically Disabled (Code I)	N/A	N/A	N/A	N/A	N/A	\$15,830	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for People with Brain Injuries (Code J)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for People with HIV/AIDS (Code K)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for MR/DD (Code L)	N/A	N/A	N/A	N/A	N/A	\$64,724	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for People with MI/SED (Code M)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for Technologically Dependent/Medically Fragile (Code N)	N/A	N/A	N/A	N/A	N/A	\$40,460	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for none of the above (Code O)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
<b>EXPENDITURES FOR RESTRICTED BENEFIT ENROLLEES</b>											
<i>Expenditures for Family Planning enrollees with Restricted Benefits</i>											
Expenditures for ONLY FP Only enrollees	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A	N/A
Average Medicaid Paid for ONLY FP Only enrollees	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A	N/A
<i>Expenditures for Aliens with Restricted Benefits</i>											
Expend for Aliens with restricted benefits ONLY enrollment	N/A	\$3,152	N/A	\$9,275	N/A	\$127,685	N/A	194.30	1,277.00	N/A	N/A
Avg Medicaid Paid for Alien enrollees with restricted benefits ONLY	N/A	\$3,152	N/A	\$3,092	N/A	\$15,961	N/A	-1.91	416.20	N/A	N/A
<i>Expenditures for EDB Duals with Restricted Benefits (Medicare Cost Sharing Only - Code 3)</i>											



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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
Expenditures for EDB Duals with only restricted benefits enrollment	N/A	\$29,032	N/A	\$1,856	N/A	\$1,424	N/A	-93.60	-23.30	N/A	N/A
Avg Medicaid Paid for EDB Duals with only restricted benefit enrollment	N/A	\$187	N/A	\$11	N/A	\$8	N/A	-93.90	-28.90	N/A	N/A
<b>Prescription Drug Enrollees</b>											
Expenditures for Prescription Drug ONLY enrollees (may also have a month or more of Code 3)	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A	N/A
Avg Medicaid Paid for Prescription Drug ONLY enrollees	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A	N/A
<b>Dual Prescription Drug Enrollees</b>											
Expenditures for Prescription Drug ONLY enrollees who are also EDB duals	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A	N/A
<b>MEDICAID ENROLLEES - EXCLUDING SELECT RESTRICTED BENEFIT GROUPS (excludes people with missing eligibility information, S-SCHIP only, FP Only, Aliens with only restricted benefits, duals with restricted benefits only, and prescription drug only enrollees) ---- NOTE: S-SCHIP only, FP Only, duals with restricted benefits, and Aliens with restricted benefits were NOT excluded prior to 2001. Prescription drug only enrollees were NOT excluded prior to 2003.</b>											
Total Medicaid Enrollees	N/A	128,495	N/A	129,665	N/A	132,666	N/A	0.91	2.31	10% (+/-)	Yes
MAX Aged Total	N/A	6,943	N/A	6,927	N/A	7,187	N/A	-0.23	3.75	10% (+/-)	Yes
MAX Disabled Total	N/A	13,176	N/A	13,888	N/A	14,927	N/A	5.40	7.48	10% (+/-)	Yes
MAX Child Total	N/A	81,179	N/A	81,497	N/A	82,319	N/A	0.39	1.01	10% (+/-)	Yes
MAX Adult Total	N/A	27,197	N/A	27,353	N/A	28,233	N/A	0.57	3.22	10% (+/-)	Yes
Total Medicaid PYE (Person Years of Enrollment)	N/A	93,389	N/A	94,648	N/A	96,187	N/A	1.35	1.63	10% (+/-)	Yes
Total EDB Duals	N/A	12,012	N/A	12,370	N/A	12,967	N/A	2.98	4.83	10% (+/-)	Yes
MAX Aged	N/A	6,218	N/A	6,242	N/A	6,374	N/A	0.39	2.12	10% (+/-)	Yes
MAX Disabled	N/A	5,662	N/A	6,006	N/A	6,449	N/A	6.08	7.38	10% (+/-)	Yes
<b>Total Medicaid Amount Paid</b>											
Total Medicaid Amt Paid	N/A	\$836,618,529	N/A	\$925,343,519	N/A	\$1,004,079,246	N/A	10.61	8.51	15% (+/-)	Yes
Average Medicaid Amt Paid per Enrollee	N/A	\$6,511	N/A	\$7,136	N/A	\$7,568	N/A	9.61	6.05	15% (+/-)	Yes
<b>AVG MEDICAID AMT PD/ENROLLEE BY MAX ELIGIBILITY GROUP</b>											
MAX Aged	N/A	\$18,350	N/A	\$21,115	N/A	\$22,807	N/A	15.07	8.02	15% (+/-)	Yes
MAX Disabled	N/A	\$22,634	N/A	\$24,477	N/A	\$25,023	N/A	8.14	2.23	10% (+/-)	Yes
MAX Child	N/A	\$3,568	N/A	\$3,749	N/A	\$3,938	N/A	5.09	5.02	10% (+/-)	Yes
MAX Adult	N/A	\$4,462	N/A	\$4,884	N/A	\$5,047	N/A	9.44	3.34	10% (+/-)	Yes
<b>AVG MEDICAID AMT PD/EDB DUAL ENROLLEE</b>											
All EDB Dual Enrollees	N/A	\$18,845	N/A	\$21,093	N/A	\$22,437	N/A	11.93	6.37	15% (+/-)	Yes
MAX Aged	N/A	\$18,431	N/A	\$21,151	N/A	\$23,298	N/A	14.76	10.15	10% (+/-)	No
MAX Disabled	N/A	\$19,559	N/A	\$21,294	N/A	\$21,822	N/A	8.87	2.48	10% (+/-)	Yes
<b>MANAGED CARE PLAN INFORMATION (Enrollees in Capitated Plans - PCCM, HMO, HIO, &amp; PHPs, excludes people with missing eligibility information, S-SCHIP only, FP Only, Aliens with only restricted benefits, duals with restricted benefits only, and prescription drug only enrollees) ---- NOTE: FP Only, duals with restricted benefits, and Aliens with restricted benefits were NOT excluded prior to 2003. Prescription drug only enrollees were NOT excluded prior to 2003.</b>											
% Total Enrollees in MC Anytime During Year	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
Total MC Enrollees	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	25% (+)	N/A
Aged	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	25% (+)	N/A
Disabled	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	25% (+)	N/A
Child	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	25% (+)	N/A
Adult	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	25% (+)	N/A
% of MC Enrollees in HMO/HIO (Dups)	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	25% (+)	N/A
% of MC Enrollees in Dental (Dups)	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	25% (+)	N/A
% of MC Enrollees in BHO (Dups)	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	25% (+)	N/A
% of MC Enrollees in Prenatal (Dups)	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	25% (+)	N/A
% of MC Enrollees in LTC (Dups)	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	25% (+)	N/A
% of MC Enrollees in PACE (Dups)	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	25% (+)	N/A
% of MC Enrollees in PCCM (Dups)	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	25% (+)	N/A
% of MC Enrollees in Other MC (Dups)	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	25% (+)	N/A
% EDB Duals ever enrolled in HMO/HIOs	<20%	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	25% (+)	N/A
% EDB Duals in PHP only or PHP/PCCM only	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
% EDB Duals in PCCM only	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
% Section 1915(c) waiver enrollees ever enrolled in HMO/HIOs	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	25% (+)	No
% Section 1915(c) waiver enrollees in PHP only or PHP/PCCM only	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	25% (+)	No
% Section 1915(c) waiver enrollees in PCCM only	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	25% (+)	No
TOTAL ENROLLEES IN JUNE	N/A	96,969	N/A	98,032	N/A	99,312	N/A	1.10	1.31	25% (+)	Yes
June % HMO/HIO only (Code 1)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A

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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
June % Dental Plan only (Code 2)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % BHO only (Code 3)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % PCCM only (Code 4)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % Other MC only (Code 5)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % HMO/HIO & Dental (Code 6)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % HMO/HIO & BHO (Code 7)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % HMO/HIO & Other MC (Code 8)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % HMO/HIO & Dental & BHO (Code 9)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % Dental & PCCM (Code 10)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % BHO & PCCM (Code 11)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % Other MC & PCCM (Code 12)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % Dental & BHO & PCCM (Code 13)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % Dental & BHO (Code 14)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % Other Combinations (Code 15)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % FFS Only (Code 16)	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	25% (+)	Yes
June % MC Status Unknown (Code 99)	<5%	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	25% (+)	N/A
<b>CAPITATION CLAIMS</b>											
Total Cap Payments	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
HMO/HIO	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
PHP	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
PCCM	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Ratio of Cap Claims to PME (person mo. enroll.) in MC	.9-2	Div by 0	No	Div by 0	No	Div by 0	No	Div by 0	Div by 0	15% (+/-)	N/A
HMO/HIO	.9-2	Div by 0	No	Div by 0	No	Div by 0	No	Div by 0	Div by 0	15% (+/-)	N/A
PHP	.9-2	Div by 0	No	Div by 0	No	Div by 0	No	Div by 0	Div by 0	15% (+/-)	N/A
PCCM	.9-2	Div by 0	No	Div by 0	No	Div by 0	No	Div by 0	Div by 0	15% (+/-)	N/A
Average Cap Payment for PME in MC	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
HMO/HIO	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
PHP	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
PCCM	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
<b>Persons enrolled in PHP only or PHP/PCCM only</b>											
Total Cap Payments	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Total Medicaid Amt Paid	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Count of Enrollees	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
<b>Persons enrolled in PCCM only</b>											
Total Cap Payments	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Count of Enrollees	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
<b>Persons ever enrolled in HMO/HIOs during year</b>											
Count of Enrollees	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Aged	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	25% (+)	N/A
Disabled	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	25% (+)	N/A
Child	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	25% (+)	N/A
Adult	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	25% (+)	N/A
Total Ever Enrolled in HMO/HIO PYE	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	25% (+)	N/A
Total Cap Payments	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Average Cap Payments	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Aged	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Disabled	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Child	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Adult	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Total FFS Payments	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Average FFS Payments per enrollee	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Aged	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Disabled	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Child	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Adult	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Total FFS Payments by Type of Service											
IP	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A

2003-2005 MAX PSF VALIDATION TABLE  
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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
ILTC	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Drug	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
All Other (excluding cap payments)	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Average FFS Payments by Type of Service											
IP	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
ILTC	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Drug	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
All Other (excluding cap payments)	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
<b>FFS INFORMATION FOR NON-DUAL MEDICAID ENROLLEES (excludes EDB Duals, people ever enrolled in HMO/HIOS, with missing eligibility information, S-SCHIP only, FP Only, Aliens with restricted benefits only, and prescription drug only enrollees) ---- NOTE: S-SCHIP only, FP Only, and Aliens with restricted benefits were NOT excluded prior to 2001. Prescription drug only enrollees were NOT excluded prior to 2003.</b>											
Total Non-Dual FFS Enrollees	N/A	116,483	N/A	117,295	N/A	119,699	N/A	0.70	2.05	15% (+/-)	Yes
Total Non-Dual FFS Recipients	N/A	99,350	N/A	100,431	N/A	102,688	N/A	1.09	2.25	15% (+/-)	Yes
Total Non-Dual FFS PYE	N/A	82,955	N/A	83,838	N/A	84,934	N/A	1.06	1.31	15% (+/-)	Yes
MAX Aged Total	N/A	725	N/A	685	N/A	813	N/A	-5.52	18.69	10% (+/-)	No
11: Aged, Cash	N/A	591	N/A	638	N/A	777	N/A	7.95	21.79	10% (+/-)	No
21: Aged, MN	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
31: Aged, Poverty	N/A	100	N/A	4	N/A	5	N/A	-96.00	25.00	10% (+/-)	No
41: Other Aged	N/A	34	N/A	43	N/A	31	N/A	26.47	-27.90	10% (+/-)	No
51: 1115 Aged	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Disabled Total	N/A	7,514	N/A	7,882	N/A	8,478	N/A	4.90	7.56	10% (+/-)	Yes
12: Disabled, Cash	N/A	6,820	N/A	7,042	N/A	7,552	N/A	3.26	7.24	10% (+/-)	Yes
22: Disabled, MN	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
32: Disabled, Poverty	N/A	1	N/A	139	N/A	160	N/A	13,800.00	15.11	10% (+/-)	No
42: Other Disabled	N/A	693	N/A	701	N/A	766	N/A	1.15	9.27	10% (+/-)	Yes
52: 1115 Disabled	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Child Total	N/A	81,173	N/A	81,495	N/A	82,317	N/A	0.40	1.01	10% (+/-)	Yes
14: AFDC Child, Cash	N/A	17,429	N/A	16,643	N/A	16,808	N/A	-4.51	0.99	10% (+/-)	Yes
16: AFDC-U Child, Cash	N/A	556	N/A	454	N/A	252	N/A	-18.30	-44.50	10% (+/-)	No
24: AFDC Child, MN	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
34: Child Poverty	N/A	56,566	N/A	57,823	N/A	55,671	N/A	2.22	-3.72	10% (+/-)	Yes
44: Other Child	N/A	4,299	N/A	3,952	N/A	3,674	N/A	-8.07	-7.03	10% (+/-)	Yes
48: Foster Care Child	N/A	2,323	N/A	2,623	N/A	2,949	N/A	12.91	12.43	10% (+/-)	No
54: 1115 Child	N/A	0	N/A	0	N/A	2,963	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Adult Total	N/A	27,071	N/A	27,233	N/A	28,091	N/A	0.60	3.15	10% (+/-)	Yes
15: AFDC Adult, Cash	N/A	14,689	N/A	14,552	N/A	15,348	N/A	-0.93	5.47	10% (+/-)	Yes
17: AFDC-U Adult, Cash	N/A	1,143	N/A	1,061	N/A	717	N/A	-7.17	-32.40	10% (+/-)	No
25: AFDC Adult, MN	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
35: Adult, Poverty	N/A	8,912	N/A	9,379	N/A	9,905	N/A	5.24	5.61	10% (+/-)	Yes
45: Other Adult	N/A	2,327	N/A	2,241	N/A	2,121	N/A	-3.70	-5.35	10% (+/-)	Yes
55: 1115 Adult	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
# Non-Dual FFS Enrollees w/ MSIS Dual Code/No EDB Confirmation	N/A	53	N/A	59	N/A	192	N/A	11.32	225.40	10% (+/-)	No
Total FFS Medicaid Amt Paid	N/A	\$610,250,688	N/A	\$664,425,357	N/A	\$713,134,329	N/A	8.88	7.33	15% (+/-)	Yes
Average FFS Medicaid Amt Paid per Non-Dual FFS Enrollee	N/A	\$5,239	N/A	\$5,665	N/A	\$5,958	N/A	8.12	5.18	15% (+/-)	Yes
Avg FFS Medicaid Amt Paid per Non-Dual FFS Recipient (User of any service)	N/A	\$6,142	N/A	\$6,616	N/A	\$6,945	N/A	7.71	4.97	15% (+/-)	Yes
<b>AVG FFS MEDICAID AMT PD/NON-DUAL FFS ENROLLEE BY MAX ELIG GRP</b>											
All Aged	N/A	\$17,654	N/A	\$20,786	N/A	\$18,958	N/A	17.74	-8.80	15% (+/-)	Yes
11: Aged, Cash	N/A	\$17,679	N/A	\$20,005	N/A	\$18,438	N/A	13.16	-7.83	15% (+/-)	Yes
21: Aged, MN	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
31: Aged, Poverty	N/A	\$10,285	N/A	\$0	N/A	\$0	N/A	-100.00	Div by 0	15% (+/-)	N/A
41: Other Aged	N/A	\$38,905	N/A	\$34,303	N/A	\$35,036	N/A	-11.80	2.14	15% (+/-)	Yes
51: 1115 Aged	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
All Disabled	N/A	\$24,951	N/A	\$26,902	N/A	\$27,458	N/A	7.82	2.07	15% (+/-)	Yes
12: Disabled, Cash	N/A	\$24,380	N/A	\$26,826	N/A	\$27,524	N/A	10.03	2.60	15% (+/-)	Yes
22: Disabled, MN	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
32: Disabled, Poverty	N/A	\$0	N/A	\$9,063	N/A	\$15,680	N/A	Div by 0	73.02	15% (+/-)	No
42: Other Disabled	N/A	\$30,601	N/A	\$31,201	N/A	\$29,270	N/A	1.96	-6.19	15% (+/-)	Yes
52: 1115 Disabled	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A

2003-2005 MAX PSF VALIDATION TABLE  
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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
All Child	N/A	\$3,567	N/A	\$3,749	N/A	\$3,938	N/A	5.13	5.02	15% (+/-)	Yes
14: AFDC Child, Cash	N/A	\$2,304	N/A	\$2,456	N/A	\$2,647	N/A	6.58	7.79	15% (+/-)	Yes
16: AFDC-U Child, Cash	N/A	\$1,932	N/A	\$1,991	N/A	\$1,742	N/A	3.02	-12.50	15% (+/-)	Yes
24: AFDC Child, MN	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
34: Child, Poverty	N/A	\$3,370	N/A	\$3,537	N/A	\$3,697	N/A	4.96	4.53	15% (+/-)	Yes
44: Other Child	N/A	\$8,494	N/A	\$7,670	N/A	\$8,791	N/A	-9.70	14.62	15% (+/-)	Yes
48: Foster Care Child	N/A	\$9,111	N/A	\$11,049	N/A	\$11,095	N/A	21.27	0.41	15% (+/-)	Yes
54: 1115 Child	N/A	Div by 0	N/A	Div by 0	N/A	\$2,830	N/A	Div by 0	Div by 0	15% (+/-)	N/A
All Adult	N/A	\$4,450	N/A	\$4,868	N/A	\$5,012	N/A	9.41	2.95	15% (+/-)	Yes
15: AFDC Adult, Cash	N/A	\$4,236	N/A	\$4,626	N/A	\$4,812	N/A	9.22	4.02	15% (+/-)	Yes
17: AFDC-U Adult, Cash	N/A	\$3,102	N/A	\$3,231	N/A	\$3,262	N/A	4.18	0.95	15% (+/-)	Yes
25: AFDC Adult, MN	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
35: Adult, Poverty	N/A	\$5,225	N/A	\$5,660	N/A	\$5,675	N/A	8.33	0.26	15% (+/-)	Yes
45: Other Adult	N/A	\$3,495	N/A	\$3,903	N/A	\$3,954	N/A	11.67	1.32	15% (+/-)	Yes
55: 1115 Adult	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
<b>FFS EXPENDITURES AND USERS BY MAX TOS</b>											
IP: Total Medicaid Paid (TOS 01)	N/A	\$142,594,091	N/A	\$148,083,343	N/A	\$156,875,788	N/A	3.85	5.94	15% (+/-)	Yes
IP: Number of Users	N/A	12,245	N/A	12,477	N/A	13,039	N/A	1.90	4.50	15% (+/-)	Yes
IP: Average Medicaid Pd per User	N/A	\$11,645	N/A	\$11,869	N/A	\$12,031	N/A	1.92	1.37	15% (+/-)	Yes
IP: Average Medicaid Covered Days Per User	N/A	4	N/A	4	N/A	5	N/A	-0.70	5.05	15% (+/-)	Yes
MH Aged: Total Medicaid Paid (TOS 02)	N/A	\$0	N/A	\$18,179	N/A	\$17,739	N/A	Div by 0	-2.42	15% (+/-)	Yes
MH Aged: Number of Users	N/A	0	N/A	1	N/A	1	N/A	Div by 0	0.00	15% (+/-)	Yes
MH Aged: Avg Medicaid Pd per User	N/A	Div by 0	N/A	\$18,179	N/A	\$17,739	N/A	Div by 0	-2.42	15% (+/-)	Yes
IP Psych < 21: Total Medicaid Paid (TOS 04)	N/A	\$58,521,705	N/A	\$67,271,046	N/A	\$70,852,614	N/A	14.95	5.32	15% (+/-)	Yes
IP Psych < 21: Number of Users	N/A	1,334	N/A	1,445	N/A	1,420	N/A	8.32	-1.73	15% (+/-)	Yes
IP Psych<21 :Avg Medicaid Pd per User	N/A	\$43,869	N/A	\$46,554	N/A	\$49,896	N/A	6.12	7.18	15% (+/-)	Yes
ICF/MR: Total Medicaid Pd (TOS 05)	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
ICF/MR: Number of Users	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
ICF/MR: Avg Medicaid Pd per User	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
NF: Total Medicaid Paid (TOS 07)	N/A	\$8,983,105	N/A	\$10,620,591	N/A	\$10,200,191	N/A	18.23	-3.96	15% (+/-)	Yes
NF Number of Users	N/A	173	N/A	167	N/A	168	N/A	-3.47	0.60	15% (+/-)	Yes
NF:Avg Medicaid Pd per User	N/A	\$51,925	N/A	\$63,596	N/A	\$60,715	N/A	22.48	-4.53	15% (+/-)	Yes
Physician: Total Medicaid Paid (TOS 08)	N/A	\$55,327,572	N/A	\$56,616,992	N/A	\$60,769,436	N/A	2.33	7.33	15% (+/-)	Yes
Physician: Number of Users	N/A	73,174	N/A	73,090	N/A	75,290	N/A	-0.12	3.01	15% (+/-)	Yes
Physician: Avg Medicaid Pd per User	N/A	\$756	N/A	\$775	N/A	\$807	N/A	2.45	4.20	15% (+/-)	Yes
Dental: Total Medicaid Paid (TOS 09)	N/A	\$18,645,554	N/A	\$20,557,886	N/A	\$20,934,103	N/A	10.26	1.83	15% (+/-)	Yes
Dental: Number of Users	N/A	36,495	N/A	39,213	N/A	39,075	N/A	7.45	-0.35	15% (+/-)	Yes
Dental: Avg Medicaid Pd per User	N/A	\$511	N/A	\$524	N/A	\$536	N/A	2.61	2.19	15% (+/-)	Yes
Other Practitioner: Total Medicaid Pd (TOS 10)	N/A	\$1,826,740	N/A	\$2,382,844	N/A	\$2,592,276	N/A	30.44	8.79	15% (+/-)	Yes
Other Practitioner: Number of Users	N/A	12,628	N/A	16,174	N/A	16,687	N/A	28.08	3.17	15% (+/-)	Yes
Other Practitioner: Avg Medicaid Pd per User	N/A	\$145	N/A	\$147	N/A	\$155	N/A	1.84	5.45	15% (+/-)	Yes
OPD: Total Medicaid Paid (TOS 11)	N/A	\$47,812,418	N/A	\$45,424,087	N/A	\$44,088,247	N/A	-5.00	-2.94	15% (+/-)	Yes
OPD Number of Users	N/A	45,805	N/A	37,305	N/A	37,156	N/A	-18.60	-0.40	15% (+/-)	Yes
OPD: Avg Medicaid Pd per User	N/A	\$1,044	N/A	\$1,218	N/A	\$1,187	N/A	16.65	-2.55	15% (+/-)	Yes
Clinic: Total Medicaid Paid (TOS 12)	N/A	\$24,670,502	N/A	\$33,337,533	N/A	\$37,351,343	N/A	35.13	12.04	15% (+/-)	Yes
Clinic: Number of Users	N/A	25,372	N/A	26,730	N/A	30,230	N/A	5.35	13.09	15% (+/-)	Yes
Clinic: Avg Medicaid Pd per User	N/A	\$972	N/A	\$1,247	N/A	\$1,236	N/A	28.27	-0.93	15% (+/-)	Yes
HH: Total Medicaid Paid (TOS 13)	N/A	\$669,165	N/A	\$894,116	N/A	\$1,121,233	N/A	33.62	25.40	15% (+/-)	No
HH: Number of Users	N/A	258	N/A	334	N/A	364	N/A	29.46	8.98	15% (+/-)	Yes
HH: Avg Medicaid Pd per User	N/A	\$2,594	N/A	\$2,677	N/A	\$3,080	N/A	3.21	15.07	15% (+/-)	No
Lab/Xray: Total Medicaid Paid (TOS 15)	N/A	\$15,670,134	N/A	\$26,060,141	N/A	\$31,567,259	N/A	66.30	21.13	15% (+/-)	No
Lab/Xray: Number of Users	N/A	44,203	N/A	51,142	N/A	55,289	N/A	15.70	8.11	15% (+/-)	Yes
Lab/Xray:Avg Medicaid Pd per User	N/A	\$355	N/A	\$510	N/A	\$571	N/A	43.74	12.05	15% (+/-)	Yes
Drugs: Total Medicaid Paid (TOS 16)	N/A	\$54,733,391	N/A	\$63,690,190	N/A	\$71,184,878	N/A	16.36	11.77	15% (+/-)	Yes
Drugs: Number of Users	N/A	64,537	N/A	64,621	N/A	66,299	N/A	0.13	2.60	15% (+/-)	Yes
Drugs: Avg Medicaid Pd per User	N/A	\$848	N/A	\$986	N/A	\$1,074	N/A	16.21	8.94	15% (+/-)	Yes
Other Services: Total Medicaid Paid (TOS 19)	N/A	\$12,437,674	N/A	\$7,894,373	N/A	\$14,616,403	N/A	-36.50	85.15	15% (+/-)	No

2003-2005 MAX PSF VALIDATION TABLE  
STATE: AK

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
Other Services: Number of Users	N/A	11,620	N/A	5,319	N/A	5,211	N/A	-54.20	-2.03	15% (+/-)	Yes
Other Services: Avg Medicaid Pd per User	N/A	\$1,070	N/A	\$1,484	N/A	\$2,805	N/A	38.66	88.99	15% (+/-)	No
Transportation: Total Medicaid Paid (TOS 26)	N/A	\$33,656,849	N/A	\$35,512,234	N/A	\$39,363,612	N/A	5.51	10.85	15% (+/-)	Yes
Transportation: Number of Users	N/A	17,219	N/A	17,850	N/A	18,287	N/A	3.67	2.45	15% (+/-)	Yes
Transportation: Avg Medicaid Pd per User	N/A	\$1,955	N/A	\$1,989	N/A	\$2,153	N/A	1.78	8.20	15% (+/-)	Yes
PCS: Total Medicaid Paid (TOS 30)	N/A	\$25,274,273	N/A	\$31,254,055	N/A	\$31,761,983	N/A	23.66	1.63	15% (+/-)	Yes
PCS: Number of Users	N/A	1,576	N/A	1,693	N/A	1,698	N/A	7.42	0.30	15% (+/-)	Yes
PCS: Avg Medicaid Pd per User	N/A	\$16,037	N/A	\$18,461	N/A	\$18,706	N/A	15.11	1.33	15% (+/-)	Yes
Target Case Management: Total Medicaid Pd (TOS 31)	N/A	\$2,587,452	N/A	\$2,578,965	N/A	\$3,055,749	N/A	-0.33	18.49	15% (+/-)	No
Target Case Management: Number of Users	N/A	1,546	N/A	1,602	N/A	2,134	N/A	3.62	33.21	15% (+/-)	No
Target Case Management: Avg Medicaid Pd per User	N/A	\$1,674	N/A	\$1,610	N/A	\$1,432	N/A	-3.81	-11.10	15% (+/-)	Yes
Rehab Services: Total Medicaid Pd (TOS 33)	N/A	\$2,655,201	N/A	\$55,051	N/A	\$224,044	N/A	-97.90	307.00	15% (+/-)	No
Rehab Services: Number of Users	N/A	1,284	N/A	87	N/A	163	N/A	-93.20	87.36	15% (+/-)	No
Rehab Services: Avg Medicaid Pd per User	N/A	\$2,068	N/A	\$633	N/A	\$1,375	N/A	-69.40	117.20	15% (+/-)	No
PT/OT/Speech/Hear: Total Medicaid Paid (TOS 34)	N/A	\$6,835,797	N/A	\$7,282,663	N/A	\$7,839,025	N/A	6.54	7.64	15% (+/-)	Yes
PT/OT/Speech/Hear: Number of Users	N/A	4,583	N/A	5,161	N/A	5,497	N/A	12.61	6.51	15% (+/-)	Yes
PT/OT/Speech/Hear: Avg Medicaid Pd per User	N/A	\$1,492	N/A	\$1,411	N/A	\$1,426	N/A	-5.39	1.06	15% (+/-)	Yes
Hospice: Total Medicaid Paid (TOS 35)	N/A	\$76,848	N/A	\$84,822	N/A	\$156,673	N/A	10.38	84.71	15% (+/-)	No
Hospice: Number of Users	N/A	7	N/A	17	N/A	23	N/A	142.90	35.29	15% (+/-)	No
Hospice: Avg Medicaid Pd per User	N/A	\$10,978	N/A	\$4,990	N/A	\$6,812	N/A	-54.60	36.52	15% (+/-)	No
DME: Total Medicaid Paid (TOS 51)	N/A	\$10,052,183	N/A	\$10,910,221	N/A	\$12,995,604	N/A	8.54	19.11	15% (+/-)	No
DME: Number of Users	N/A	19,378	N/A	21,563	N/A	23,306	N/A	11.28	8.08	15% (+/-)	Yes
DME: Avg Medicaid Pd per User	N/A	\$519	N/A	\$506	N/A	\$558	N/A	-2.46	10.21	15% (+/-)	Yes
Residential Care: Total Medicaid Paid (TOS 52)	N/A	\$32,728,001	N/A	\$27,907,959	N/A	\$24,353,035	N/A	-14.70	-12.70	15% (+/-)	Yes
Residential Care: Number of Users	N/A	789	N/A	760	N/A	509	N/A	-3.68	-33.00	15% (+/-)	No
Residential Care: Avg Medicaid Pd per User	N/A	\$41,480	N/A	\$36,721	N/A	\$47,845	N/A	-11.50	30.29	15% (+/-)	No
Psych. Services: Total Medicaid Paid (TOS 53)	N/A	\$43,600,983	N/A	\$59,221,258	N/A	\$66,517,792	N/A	35.83	12.32	15% (+/-)	Yes
Psych. Services: Number of Users	N/A	12,399	N/A	14,355	N/A	14,490	N/A	15.78	0.94	15% (+/-)	Yes
Psych. Services: Avg Medicaid Pd per User	N/A	\$3,516	N/A	\$4,125	N/A	\$4,591	N/A	17.32	11.27	15% (+/-)	Yes
Adult Day Care: Total Medicaid Paid (TOS 54)	N/A	\$5,564,333	N/A	\$2,295,073	N/A	\$263,243	N/A	-58.80	-88.50	15% (+/-)	No
Adult Day Care: Number of Users	N/A	485	N/A	324	N/A	68	N/A	-33.20	-79.00	15% (+/-)	No
Adult Day Care: Avg Medicaid Pd per User	N/A	\$11,473	N/A	\$7,084	N/A	\$3,871	N/A	-38.30	-45.30	15% (+/-)	No
<b>AVG FFS MEDICAID AMT PD/NON-DUAL FFS ENROLLEE BY MAX TOS</b>											
Inpatient Hospital (TOS 01)	N/A	\$1,224	N/A	\$1,262	N/A	\$1,311	N/A	3.13	3.81	15% (+/-)	Yes
Aged	N/A	\$2,568	N/A	\$2,677	N/A	\$1,273	N/A	4.24	-52.50	15% (+/-)	No
Disabled	N/A	\$3,893	N/A	\$4,143	N/A	\$4,441	N/A	6.43	7.19	15% (+/-)	Yes
Child	N/A	\$917	N/A	\$907	N/A	\$928	N/A	-1.17	2.32	15% (+/-)	Yes
Adult	N/A	\$1,367	N/A	\$1,458	N/A	\$1,489	N/A	6.64	2.13	15% (+/-)	Yes
ILTC (TOS=02,04,05,07)	N/A	\$580	N/A	\$664	N/A	\$677	N/A	14.61	1.97	15% (+/-)	Yes
Aged	N/A	\$2,757	N/A	\$3,255	N/A	\$2,732	N/A	18.06	-16.10	15% (+/-)	No
Disabled	N/A	\$1,692	N/A	\$1,813	N/A	\$1,852	N/A	7.17	2.14	15% (+/-)	Yes
Child	N/A	\$630	N/A	\$727	N/A	\$732	N/A	15.31	0.72	15% (+/-)	Yes
Adult	N/A	\$61	N/A	\$80	N/A	\$103	N/A	31.66	29.54	15% (+/-)	No
Drugs (TOS=16)	N/A	\$470	N/A	\$543	N/A	\$595	N/A	15.56	9.52	15% (+/-)	Yes
Aged	N/A	\$1,623	N/A	\$2,028	N/A	\$2,206	N/A	24.96	8.76	15% (+/-)	Yes
Disabled	N/A	\$3,497	N/A	\$4,185	N/A	\$4,258	N/A	19.68	1.75	15% (+/-)	Yes
Child	N/A	\$189	N/A	\$192	N/A	\$243	N/A	1.81	26.52	15% (+/-)	No
Adult	N/A	\$441	N/A	\$501	N/A	\$472	N/A	13.49	-5.78	15% (+/-)	Yes
All Other Services	N/A	\$2,965	N/A	\$3,195	N/A	\$3,375	N/A	7.74	5.64	15% (+/-)	Yes
Aged	N/A	\$10,706	N/A	\$12,825	N/A	\$12,747	N/A	19.79	-0.61	15% (+/-)	Yes
Disabled	N/A	\$15,869	N/A	\$16,760	N/A	\$16,907	N/A	5.62	0.87	15% (+/-)	Yes
Child	N/A	\$1,830	N/A	\$1,924	N/A	\$2,035	N/A	5.12	5.77	15% (+/-)	Yes
Adult	N/A	\$2,581	N/A	\$2,830	N/A	\$2,948	N/A	9.66	4.17	15% (+/-)	Yes
<b>% OF NON-DUAL FFS ENROLLEES WITH CLAIMS BY SELECTED MAX TOS</b>											
% Non-Dual FFS Enrollees with IP Claims (TOS=01)	N/A	10.51	N/A	10.64	N/A	10.89	N/A	1.19	2.41	15% (+/-)	Yes
Aged	N/A	16.00	N/A	13.87	N/A	13.90	N/A	-13.30	0.22	15% (+/-)	Yes
Disabled	N/A	15.68	N/A	15.64	N/A	15.68	N/A	-0.22	0.21	15% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: AK

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
Child	N/A	7.53	N/A	7.60	N/A	7.79	N/A	0.89	2.52	15% (+/-)	Yes
Adult	N/A	17.88	N/A	18.21	N/A	18.46	N/A	1.85	1.40	15% (+/-)	Yes
% Non-Dual FFS Enrollees with ILTC Claims (TOS=02,04,05,07)	N/A	1.29	N/A	1.38	N/A	1.33	N/A	6.29	-3.53	15% (+/-)	Yes
Aged	N/A	2.90	N/A	3.50	N/A	3.57	N/A	20.96	1.81	15% (+/-)	Yes
Disabled	N/A	3.61	N/A	3.30	N/A	3.26	N/A	-8.54	-1.31	15% (+/-)	Yes
Child	N/A	1.43	N/A	1.54	N/A	1.46	N/A	7.48	-5.10	15% (+/-)	Yes
Adult	N/A	0.19	N/A	0.27	N/A	0.28	N/A	41.46	4.81	15% (+/-)	Yes
% with ratio of ILTC days/enroll days > 1	N/A	5.04	N/A	5.02	N/A	4.91	N/A	-0.43	-2.19	15% (+/-)	Yes
% Non-Dual FFS Enrollees with Drug Claims (TOS=16)	N/A	55.09	N/A	55.09	N/A	55.39	N/A	-0.56	0.54	15% (+/-)	Yes
Aged	N/A	78.07	N/A	79.27	N/A	82.29	N/A	1.54	3.81	15% (+/-)	Yes
Disabled	N/A	82.86	N/A	82.26	N/A	80.77	N/A	-0.72	-1.81	15% (+/-)	Yes
Child	N/A	49.36	N/A	48.54	N/A	49.11	N/A	-1.67	1.17	15% (+/-)	Yes
Adult	N/A	65.29	N/A	66.23	N/A	65.34	N/A	1.44	-1.33	15% (+/-)	Yes
% Non-Dual FFS Enrollees with All Other Claims	N/A	83.77	N/A	84.22	N/A	84.39	N/A	0.53	0.20	15% (+/-)	Yes
Aged	N/A	86.48	N/A	84.82	N/A	87.58	N/A	-1.93	3.25	15% (+/-)	Yes
Disabled	N/A	91.44	N/A	92.03	N/A	91.12	N/A	0.65	-0.99	15% (+/-)	Yes
Child	N/A	83.57	N/A	83.92	N/A	84.15	N/A	0.42	0.28	15% (+/-)	Yes
Adult	N/A	82.18	N/A	82.84	N/A	82.96	N/A	0.81	0.14	15% (+/-)	Yes
Avg # IP Days per Non-Dual FFS User	N/A	4	N/A	4	N/A	5	N/A	-0.70	5.05	15% (+/-)	Yes
Aged	N/A	6	N/A	7	N/A	6	N/A	11.62	-14.50	15% (+/-)	Yes
Disabled	N/A	11	N/A	11	N/A	12	N/A	2.44	2.35	15% (+/-)	Yes
Child	N/A	4	N/A	4	N/A	4	N/A	-4.04	6.13	15% (+/-)	Yes
Adult	N/A	3	N/A	3	N/A	3	N/A	0.93	4.62	15% (+/-)	Yes
Avg # ILTC Days per Non-Dual FFS User	N/A	142	N/A	147	N/A	151	N/A	2.95	2.73	15% (+/-)	Yes
Aged	N/A	257	N/A	236	N/A	196	N/A	-7.91	-16.90	15% (+/-)	No
Disabled	N/A	147	N/A	160	N/A	157	N/A	8.61	-1.87	15% (+/-)	Yes
Child	N/A	141	N/A	145	N/A	151	N/A	2.92	4.00	15% (+/-)	Yes
Adult	N/A	100	N/A	94	N/A	106	N/A	-6.08	12.50	15% (+/-)	Yes
% Non-Dual FFS Enrollees with Delivery	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	15% (+/-)	No
<b>FFS EXPENDITURES AND USERS BY MAX PGM TYPE</b>											
FP: Total Medicaid Paid (Program Type 2)	N/A	\$874,728	N/A	\$910,188	N/A	\$938,423	N/A	4.05	3.10	15% (+/-)	Yes
FP: Number of Users	N/A	2,961	N/A	2,825	N/A	2,841	N/A	-4.59	0.57	15% (+/-)	Yes
FP: Average Medicaid Pd per User	N/A	\$295	N/A	\$322	N/A	\$330	N/A	9.06	2.52	15% (+/-)	Yes
RHC: Total Medicaid Paid (Program Type 3)	N/A	\$110,192	N/A	\$74,822	N/A	\$49,462	N/A	-32.10	-33.90	15% (+/-)	No
RHC: Number of Users	N/A	261	N/A	171	N/A	95	N/A	-34.50	-44.40	15% (+/-)	No
RHC: Avg Medicaid Pd per User	N/A	\$422	N/A	\$438	N/A	\$521	N/A	3.64	18.99	15% (+/-)	No
FOHC: Total Medicaid Paid (Program Type 4)	N/A	\$1,974,219	N/A	\$2,695,576	N/A	\$3,285,994	N/A	36.54	21.90	15% (+/-)	No
FOHC: Number of Users	N/A	3,568	N/A	4,264	N/A	5,114	N/A	19.51	19.93	15% (+/-)	No
FOHC: Avg Medicaid Pd per User	N/A	\$553	N/A	\$632	N/A	\$643	N/A	14.25	1.64	15% (+/-)	Yes
IHS: Total Medicaid Pd (Program Type 5)	N/A	\$83,654,333	N/A	\$90,749,687	N/A	\$93,414,042	N/A	8.48	2.94	15% (+/-)	Yes
IHS: Number of Users	N/A	24,693	N/A	27,046	N/A	27,951	N/A	9.53	3.35	15% (+/-)	Yes
IHS: Avg Medicaid Pd per User	N/A	\$3,388	N/A	\$3,355	N/A	\$3,342	N/A	-0.96	-0.40	15% (+/-)	Yes
Section 1915(c) Waiver: Total Medicaid Paid (Program Types 6 and 7)	N/A	\$48,686,126	N/A	\$47,495,089	N/A	\$49,745,917	N/A	-2.45	4.74	15% (+/-)	Yes
Section 1915(c) Waiver: Number of Users	N/A	1,556	N/A	1,614	N/A	1,732	N/A	3.73	7.31	15% (+/-)	Yes
Section 1915(c) Waiver: Avg Medicaid Pd per User	N/A	\$31,289	N/A	\$29,427	N/A	\$28,722	N/A	-5.95	-2.40	15% (+/-)	Yes
<b>FFS COMMUNITY-BASED LONG-TERM CARE EXPENDITURES AND USERS</b>											
Total FFS CLTC Expenditures (all codes - overestimate)	N/A	N/A	N/A	N/A	N/A	\$93,659,379	N/A	N/A	N/A	15% (+/-)	No
Number of FFS Non-Dual CLTC Users (all codes - overestimate)	N/A	N/A	N/A	N/A	N/A	6,177	N/A	N/A	N/A	15% (+/-)	No
Average FFS CLTC Expenditures per FFS Non-Dual User (all codes - overestimate)	N/A	N/A	N/A	N/A	N/A	\$15,163	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$14,289	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$15,566	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$8,315	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$8,589	N/A	N/A	N/A	15% (+/-)	No
% Non-Dual FFS Enrollees with CLTC Claims (all codes - overestimate)	N/A	N/A	N/A	N/A	N/A	5.16	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	68.39	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	63.35	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	0.16	N/A	N/A	N/A	15% (+/-)	No

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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
Adult	N/A	N/A	N/A	N/A	N/A	0.43	N/A	N/A	N/A	15% (+/-)	No
Total FFS CLTC Expenditures (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	\$78,891,012	N/A	N/A	N/A	15% (+/-)	No
Number of Non-Dual CLTC Users (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	2,747	N/A	N/A	N/A	15% (+/-)	No
Average FFS CLTC Expenditures per Non-Dual User (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	\$28,719	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$24,956	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$31,480	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$8,315	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$8,589	N/A	N/A	N/A	15% (+/-)	No
% Non-Dual FFS Enrollees with CLTC Claims (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	2.29	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	34.44	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	26.15	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	0.16	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	0.43	N/A	N/A	N/A	15% (+/-)	No
Total FFS CLTC Expenditures (Section 1915(c) claims only - excludes CLTC Codes 11-20)	N/A	N/A	N/A	N/A	N/A	\$49,745,917	N/A	N/A	N/A	15% (+/-)	No
Number of Non-Dual CLTC Users (Section 1915(c) claims only - excludes CLTC Codes 11-20)	N/A	N/A	N/A	N/A	N/A	1,732	N/A	N/A	N/A	15% (+/-)	No
Average FFS CLTC Expenditures per Non-Dual User (Section 1915(c) claims only - excludes CLTC Codes 11-20)	N/A	N/A	N/A	N/A	N/A	\$28,722	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$13,372	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$30,136	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$17,869	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$444	N/A	N/A	N/A	15% (+/-)	No
% Non-Dual FFS Enrollees with CLTC Claims (Section 1915(c) claims only - excludes CLTC Codes 11-20)	N/A	N/A	N/A	N/A	N/A	1.45	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	11.56	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	18.65	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	0.06	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	0.04	N/A	N/A	N/A	15% (+/-)	No
<b>FFS INFORMATION FOR DUAL MEDICAID ENROLLEES (excludes non-EDB duals, duals ever enrolled in HMO/HIOs, duals with only restricted benefits, duals with missing eligibility information, and prescription drug only enrollees)—NOTE: non-EDB duals and duals with restricted benefits were not excluded prior to 2001. Prescription drug only enrollees were NOT excluded prior to 2003.</b>											
Total EDB Dual FFS Enrollees	N/A	12,012	N/A	12,370	N/A	12,967	N/A	2.98	4.83	15% (+/-)	Yes
Number of EDB Dual FFS Recipients	N/A	11,382	N/A	11,756	N/A	12,301	N/A	3.29	4.64	15% (+/-)	Yes
Total EDB Dual FFS PYE	N/A	10,433	N/A	10,811	N/A	11,253	N/A	3.62	4.09	15% (+/-)	Yes
% EDB Only Dual (Code 50)	N/A	8.75	N/A	9.41	N/A	5.04	N/A	7.55	-46.50	15% (+/-)	No
% QMB Only (Code 51)	N/A	0.00	N/A	0.01	N/A	0.00	N/A	Div by 0	-100.00	15% (+/-)	No
% QMB Plus (Code 52)	N/A	67.18	N/A	66.20	N/A	66.38	N/A	-1.46	0.27	15% (+/-)	Yes
% SLMB Only (Code 53)	N/A	0.16	N/A	0.03	N/A	0.12	N/A	-79.60	281.60	15% (+/-)	No
% SLMB Plus (Code 54)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	15% (+/-)	N/A
% QDWI (Code 55)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	15% (+/-)	N/A
% QI 1 (Code 56)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	15% (+/-)	N/A
% QI 2 (Code 57)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	15% (+/-)	N/A
% Other Type Dual (Code 58)	N/A	23.91	N/A	24.35	N/A	28.46	N/A	1.84	16.90	15% (+/-)	No
% Dual Type Unknown (Code 59)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	15% (+/-)	N/A
MAX Aged EDB Dual FFS Total	N/A	6,218	N/A	6,242	N/A	6,374	N/A	0.39	2.12	10% (+/-)	Yes
11: Aged, Cash	N/A	5,303	N/A	5,346	N/A	5,371	N/A	0.81	0.47	10% (+/-)	Yes
21: Aged, MN	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
31: Aged, Poverty	N/A	13	N/A	4	N/A	7	N/A	-69.20	75.00	10% (+/-)	No
41: Other Aged	N/A	902	N/A	892	N/A	996	N/A	-1.11	11.66	10% (+/-)	No
51: 1115 Aged	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Disabled EDB Dual FFS Total	N/A	5,662	N/A	6,006	N/A	6,449	N/A	6.08	7.38	10% (+/-)	Yes
12: Disabled, Cash	N/A	5,207	N/A	5,505	N/A	5,928	N/A	5.72	7.68	10% (+/-)	Yes
22: Disabled, MN	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
32: Disabled, Poverty	N/A	7	N/A	3	N/A	12	N/A	-57.10	300.00	10% (+/-)	No
42: Other Disabled	N/A	448	N/A	498	N/A	509	N/A	11.16	2.21	10% (+/-)	Yes
52: 1115 Disabled	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
Total FFS Medicaid Amt Paid	N/A	\$226,367,841	N/A	\$260,918,162	N/A	\$290,944,917	N/A	15.26	11.51	15% (+/-)	Yes
Average FFS Medicaid Amt Paid per FFS Dual	N/A	\$18,845	N/A	\$21,093	N/A	\$22,437	N/A	11.93	6.37	15% (+/-)	Yes



2003-2005 MAX PSF VALIDATION TABLE  
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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
Average FFS Medicaid Amt Paid per FFS Dual Recipient (User of any service)	N/A	\$19,888	N/A	\$22,194	N/A	\$23,652	N/A	11.60	6.57	15% (+/-)	Yes
<b>AVG FFS MEDICAID AMT PD/FFS DUAL BY MAX ELIGIBILITY GROUP</b>											
All Aged	N/A	\$18,431	N/A	\$21,151	N/A	\$23,298	N/A	14.76	10.15	15% (+/-)	Yes
11: Aged, Cash	N/A	\$11,815	N/A	\$14,060	N/A	\$15,730	N/A	18.99	11.88	15% (+/-)	Yes
21: Aged, MN	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
31: Aged, Poverty	N/A	\$1,651	N/A	\$13,149	N/A	\$2,672	N/A	696.50	-79.70	15% (+/-)	No
41: Other Aged	N/A	\$57,566	N/A	\$63,686	N/A	\$64,253	N/A	10.63	0.89	15% (+/-)	Yes
51: 1115 Aged	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
All Disabled	N/A	\$19,559	N/A	\$21,294	N/A	\$21,822	N/A	8.87	2.48	15% (+/-)	Yes
12: Disabled, Cash	N/A	\$17,676	N/A	\$19,258	N/A	\$20,041	N/A	8.95	4.07	15% (+/-)	Yes
22: Disabled, MN	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
32: Disabled, Poverty	N/A	\$3,519	N/A	\$11,990	N/A	\$2,555	N/A	240.80	-78.70	15% (+/-)	No
42: Other Disabled	N/A	\$41,701	N/A	\$43,855	N/A	\$43,025	N/A	5.16	-1.89	15% (+/-)	Yes
52: 1115 Disabled	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
<b>FFS EXPENDITURES AND USERS BY MAX TOS</b>											
IP: Total Medicaid Paid (TOS 01)	N/A	\$2,848,391	N/A	\$3,682,759	N/A	\$3,656,464	N/A	29.29	-0.71	15% (+/-)	Yes
IP: Number of Users	N/A	2,098	N/A	1,677	N/A	1,552	N/A	-20.10	-7.45	15% (+/-)	Yes
IP: Average Medicaid Pd per User	N/A	\$1,358	N/A	\$2,196	N/A	\$2,356	N/A	61.75	7.28	15% (+/-)	Yes
IP: Average Medicaid Covered Days Per User	N/A	7	N/A	8	N/A	9	N/A	13.60	14.83	15% (+/-)	Yes
MH Aged: Total Medicaid Paid (TOS 02)	N/A	\$53,411	N/A	\$43,086	N/A	\$38,707	N/A	-19.30	-10.20	15% (+/-)	Yes
MH Aged: Number of Users	N/A	3	N/A	4	N/A	5	N/A	33.33	25.00	15% (+/-)	No
MH Aged: Avg Medicaid Pd per User	N/A	\$17,804	N/A	\$10,772	N/A	\$7,741	N/A	-39.50	-28.10	15% (+/-)	No
IP Psych < 21: Total Medicaid Paid (TOS 04)	N/A	\$132,882	N/A	\$65,788	N/A	\$48,746	N/A	-50.50	-25.90	15% (+/-)	No
IP Psych < 21: Number of Users	N/A	6	N/A	2	N/A	3	N/A	-66.70	50.00	15% (+/-)	No
IP Psych<21 :Avg Medicaid Pd per User	N/A	\$22,147	N/A	\$32,894	N/A	\$16,249	N/A	48.53	-50.60	15% (+/-)	No
ICF/MR: Total Medicaid Pd (TOS 05)	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
ICF/MR: Number of Users	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
ICF/MR: Avg Medicaid Pd per User	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
NF: Total Medicaid Paid (TOS 07)	N/A	\$48,790,265	N/A	\$52,619,646	N/A	\$58,051,983	N/A	7.85	10.32	15% (+/-)	Yes
NF Number of Users	N/A	742	N/A	739	N/A	779	N/A	-0.40	5.41	15% (+/-)	Yes
NF:Avg Medicaid Pd per User	N/A	\$65,755	N/A	\$71,204	N/A	\$74,521	N/A	8.29	4.66	15% (+/-)	Yes
Physician: Total Medicaid Paid (TOS 08)	N/A	\$3,602,834	N/A	\$5,112,652	N/A	\$5,368,490	N/A	41.91	5.00	15% (+/-)	Yes
Physician: Number of Users	N/A	8,534	N/A	9,020	N/A	9,556	N/A	5.70	5.94	15% (+/-)	Yes
Physician: Avg Medicaid Pd per User	N/A	\$422	N/A	\$567	N/A	\$562	N/A	34.26	-0.89	15% (+/-)	Yes
Dental: Total Medicaid Paid (TOS 09)	N/A	\$600,688	N/A	\$683,739	N/A	\$821,963	N/A	13.83	20.22	15% (+/-)	No
Dental: Number of Users	N/A	1,425	N/A	1,593	N/A	1,689	N/A	11.79	6.03	15% (+/-)	Yes
Dental: Avg Medicaid Pd per User	N/A	\$422	N/A	\$429	N/A	\$487	N/A	1.82	13.38	15% (+/-)	Yes
Other Practitioner: Total Medicaid Pd (TOS 10)	N/A	\$253,502	N/A	\$363,420	N/A	\$419,596	N/A	43.36	15.46	15% (+/-)	No
Other Practitioner: Number of Users	N/A	2,660	N/A	3,193	N/A	3,404	N/A	20.04	6.61	15% (+/-)	Yes
Other Practitioner: Avg Medicaid Pd per User	N/A	\$95	N/A	\$114	N/A	\$123	N/A	19.43	8.30	15% (+/-)	Yes
OPD: Total Medicaid Paid (TOS 11)	N/A	\$3,839,141	N/A	\$3,991,915	N/A	\$3,986,719	N/A	3.98	-0.13	15% (+/-)	Yes
OPD Number of Users	N/A	6,913	N/A	6,502	N/A	6,829	N/A	-5.95	5.03	15% (+/-)	Yes
OPD: Avg Medicaid Pd per User	N/A	\$555	N/A	\$614	N/A	\$584	N/A	10.55	-4.91	15% (+/-)	Yes
Clinic: Total Medicaid Paid (TOS 12)	N/A	\$2,541,011	N/A	\$3,771,880	N/A	\$3,859,128	N/A	48.44	2.31	15% (+/-)	Yes
Clinic: Number of Users	N/A	3,645	N/A	4,238	N/A	4,718	N/A	16.27	11.33	15% (+/-)	Yes
Clinic: Avg Medicaid Pd per User	N/A	\$697	N/A	\$890	N/A	\$818	N/A	27.67	-8.10	15% (+/-)	Yes
HH: Total Medicaid Paid (TOS 13)	N/A	\$72,018	N/A	\$115,101	N/A	\$37,457	N/A	59.82	-67.50	15% (+/-)	No
HH: Number of Users	N/A	22	N/A	23	N/A	15	N/A	4.55	-34.80	15% (+/-)	No
HH: Avg Medicaid Pd per User	N/A	\$3,274	N/A	\$5,004	N/A	\$2,497	N/A	52.87	-50.10	15% (+/-)	No
Lab/Xray: Total Medicaid Paid (TOS 15)	N/A	\$1,209,341	N/A	\$1,848,236	N/A	\$1,950,022	N/A	52.83	5.51	15% (+/-)	Yes
Lab/Xray: Number of Users	N/A	6,762	N/A	7,327	N/A	7,682	N/A	8.36	4.85	15% (+/-)	Yes
Lab/Xray:Avg Medicaid Pd per User	N/A	\$179	N/A	\$252	N/A	\$254	N/A	41.04	0.63	15% (+/-)	Yes
Drugs: Total Medicaid Paid (TOS 16)	N/A	\$47,020,325	N/A	\$55,423,150	N/A	\$64,461,239	N/A	17.87	16.31	15% (+/-)	No
Drugs: Number of Users	N/A	10,654	N/A	10,998	N/A	11,458	N/A	3.23	4.18	15% (+/-)	Yes
Drugs: Avg Medicaid Pd per User	N/A	\$4,413	N/A	\$5,039	N/A	\$5,626	N/A	14.18	11.64	15% (+/-)	Yes
Other Services: Total Medicaid Paid (TOS 19)	N/A	\$3,139,687	N/A	\$14,931,832	N/A	\$31,597,081	N/A	375.60	111.60	15% (+/-)	No
Other Services: Number of Users	N/A	2,980	N/A	2,864	N/A	2,975	N/A	-3.89	3.88	15% (+/-)	Yes



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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
Other Services: Avg Medicaid Pd per User	N/A	\$1,054	N/A	\$5,214	N/A	\$10,621	N/A	394.80	103.70	15% (+/-)	No
Transportation: Total Medicaid Paid (TOS 26)	N/A	\$7,223,198	N/A	\$7,767,426	N/A	\$8,274,901	N/A	7.53	6.53	15% (+/-)	Yes
Transportation: Number of Users	N/A	4,173	N/A	4,323	N/A	4,368	N/A	3.60	1.04	15% (+/-)	Yes
Transportation: Avg Medicaid Pd per User	N/A	\$1,731	N/A	\$1,797	N/A	\$1,894	N/A	3.80	5.44	15% (+/-)	Yes
PCS: Total Medicaid Paid (TOS 30)	N/A	\$44,941,213	N/A	\$57,639,221	N/A	\$60,923,823	N/A	28.25	5.70	15% (+/-)	Yes
PCS: Number of Users	N/A	2,614	N/A	2,964	N/A	3,070	N/A	13.39	3.58	15% (+/-)	Yes
PCS: Avg Medicaid Pd per User	N/A	\$17,193	N/A	\$19,446	N/A	\$19,845	N/A	13.11	2.05	15% (+/-)	Yes
Target Case Management: Total Medicaid Pd (TOS 31)	N/A	\$4,317,374	N/A	\$4,257,959	N/A	\$4,822,451	N/A	-1.38	13.26	15% (+/-)	Yes
Target Case Management: Number of Users	N/A	2,405	N/A	2,399	N/A	2,529	N/A	-0.25	5.42	15% (+/-)	Yes
Target Case Management: Avg Medicaid Pd per User	N/A	\$1,795	N/A	\$1,775	N/A	\$1,907	N/A	-1.13	7.44	15% (+/-)	Yes
Rehab Services: Total Medicaid Pd (TOS 33)	N/A	\$204,418	N/A	\$76	N/A	\$0	N/A	-100.00	-100.00	15% (+/-)	No
Rehab Services: Number of Users	N/A	110	N/A	1	N/A	0	N/A	-99.10	-100.00	15% (+/-)	No
Rehab Services: Avg Medicaid Pd per User	N/A	\$1,858	N/A	\$76	N/A	Div by 0	N/A	-95.90	Div by 0	15% (+/-)	N/A
PT/OT/Speech/Hear: Total Medicaid Paid (TOS 34)	N/A	\$605,992	N/A	\$340,401	N/A	\$422,815	N/A	-43.80	24.21	15% (+/-)	No
PT/OT/Speech/Hear: Number of Users	N/A	1,006	N/A	877	N/A	1,022	N/A	-12.80	16.53	15% (+/-)	No
PT/OT/Speech/Hear: Avg Medicaid Pd per User	N/A	\$602	N/A	\$388	N/A	\$414	N/A	-35.60	6.59	15% (+/-)	Yes
Hospice: Total Medicaid Paid (TOS 35)	N/A	\$1,003	N/A	\$22,422	N/A	\$442	N/A	2,135.00	-98.00	15% (+/-)	No
Hospice: Number of Users	N/A	1	N/A	2	N/A	1	N/A	100.00	-50.00	15% (+/-)	No
Hospice: Avg Medicaid Pd per User	N/A	\$1,003	N/A	\$11,211	N/A	\$442	N/A	1,018.00	-96.10	15% (+/-)	No
DME: Total Medicaid Paid (TOS 51)	N/A	\$4,589,504	N/A	\$6,164,099	N/A	\$7,064,138	N/A	34.31	14.60	15% (+/-)	Yes
DME: Number of Users	N/A	5,803	N/A	6,587	N/A	7,085	N/A	13.51	7.56	15% (+/-)	Yes
DME: Avg Medicaid Pd per User	N/A	\$791	N/A	\$936	N/A	\$997	N/A	18.32	6.55	15% (+/-)	Yes
Residential Care: Total Medicaid Paid (TOS 52)	N/A	\$35,341,098	N/A	\$29,349,355	N/A	\$21,604,903	N/A	-17.00	-26.40	15% (+/-)	No
Residential Care: Number of Users	N/A	1,029	N/A	977	N/A	352	N/A	-5.05	-64.00	15% (+/-)	No
Residential Care: Avg Medicaid Pd per User	N/A	\$34,345	N/A	\$30,040	N/A	\$61,378	N/A	-12.50	104.30	15% (+/-)	No
Psych. Services: Total Medicaid Paid (TOS 53)	N/A	\$10,304,158	N/A	\$9,372,461	N/A	\$11,103,237	N/A	-9.04	18.47	15% (+/-)	No
Psych. Services: Number of Users	N/A	2,431	N/A	2,555	N/A	2,908	N/A	5.10	13.82	15% (+/-)	Yes
Psych. Services: Avg Medicaid Pd per User	N/A	\$4,239	N/A	\$3,668	N/A	\$3,818	N/A	-13.50	4.09	15% (+/-)	Yes
Adult Day Care: Total Medicaid Paid (TOS 54)	N/A	\$3,997,141	N/A	\$3,032,570	N/A	\$2,121,591	N/A	-24.10	-30.00	15% (+/-)	No
Adult Day Care: Number of Users	N/A	424	N/A	440	N/A	371	N/A	3.77	-15.70	15% (+/-)	No
Adult Day Care: Avg Medicaid Pd per User	N/A	\$9,427	N/A	\$6,892	N/A	\$5,719	N/A	-26.90	-17.00	15% (+/-)	No
<b>AVG FFS MEDICAID AMT PD/FFS DUAL BY SELECTED TYPE OF SERVICE</b>											
Inpatient Hospital (TOS=01)	N/A	\$237	N/A	\$298	N/A	\$282	N/A	25.55	-5.29	15% (+/-)	Yes
Aged	N/A	\$157	N/A	\$203	N/A	\$155	N/A	29.04	-23.50	15% (+/-)	No
Disabled	N/A	\$306	N/A	\$384	N/A	\$378	N/A	25.71	-1.63	15% (+/-)	Yes
ILTC (TOS=02,04,05,07)	N/A	\$4,077	N/A	\$4,263	N/A	\$4,484	N/A	4.55	5.19	15% (+/-)	Yes
Aged	N/A	\$6,415	N/A	\$6,846	N/A	\$7,557	N/A	6.71	10.39	15% (+/-)	Yes
Disabled	N/A	\$1,595	N/A	\$1,665	N/A	\$1,546	N/A	4.40	-7.13	15% (+/-)	Yes
Drugs (TOS=16)	N/A	\$3,914	N/A	\$4,480	N/A	\$4,971	N/A	14.46	10.95	15% (+/-)	Yes
Aged	N/A	\$2,731	N/A	\$3,168	N/A	\$3,634	N/A	15.98	14.72	15% (+/-)	Yes
Disabled	N/A	\$5,259	N/A	\$5,873	N/A	\$6,323	N/A	11.68	7.66	15% (+/-)	Yes
All Other Services	N/A	\$10,616	N/A	\$12,052	N/A	\$12,701	N/A	13.52	5.38	15% (+/-)	Yes
Aged	N/A	\$9,127	N/A	\$10,934	N/A	\$11,952	N/A	19.81	9.30	15% (+/-)	Yes
Disabled	N/A	\$12,400	N/A	\$13,372	N/A	\$13,575	N/A	7.84	1.52	15% (+/-)	Yes
<b>% OF FFS DUALS WITH CLAIMS BY SELECTED TYPE OF SERVICE</b>											
% FFS Duals with IP Claims (TOS=01)	N/A	17.47	N/A	13.56	N/A	11.97	N/A	-22.40	-11.70	15% (+/-)	Yes
Aged	N/A	18.53	N/A	14.77	N/A	13.18	N/A	-20.30	-10.80	15% (+/-)	Yes
Disabled	N/A	16.30	N/A	12.27	N/A	10.64	N/A	-24.70	-13.30	15% (+/-)	Yes
% FFS Duals with ILTC Claims (TOS=02,04,05,07)	N/A	6.25	N/A	6.02	N/A	6.07	N/A	-3.67	0.77	15% (+/-)	Yes
Aged	N/A	9.97	N/A	9.71	N/A	10.01	N/A	-2.63	3.10	15% (+/-)	Yes
Disabled	N/A	2.30	N/A	2.31	N/A	2.31	N/A	0.80	-0.17	15% (+/-)	Yes
% FFS Duals with Drug Claims (TOS=16)	N/A	88.69	N/A	88.91	N/A	88.36	N/A	0.24	-0.61	15% (+/-)	Yes
Aged	N/A	88.18	N/A	88.77	N/A	88.12	N/A	0.67	-0.73	15% (+/-)	Yes
Disabled	N/A	89.40	N/A	89.16	N/A	88.57	N/A	-0.27	-0.66	15% (+/-)	Yes
% FFS Duals with All Other Claims	N/A	91.92	N/A	92.82	N/A	92.62	N/A	0.98	-0.22	15% (+/-)	Yes
Aged	N/A	91.64	N/A	92.71	N/A	92.17	N/A	1.17	-0.58	15% (+/-)	Yes
Disabled	N/A	92.42	N/A	93.04	N/A	93.04	N/A	0.67	0.00	15% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: AK

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
Avg # IP Days per FFS Dual User (TOS 01)	N/A	7	N/A	8	N/A	9	N/A	13.60	14.83	15% (+/-)	Yes
Aged	N/A	6	N/A	7	N/A	8	N/A	15.17	13.91	15% (+/-)	Yes
Disabled	N/A	7	N/A	8	N/A	9	N/A	11.10	16.60	15% (+/-)	No
Avg # ILTC Days per FFS Dual User (TOS 02, 04, 05, 07)	N/A	206	N/A	208	N/A	209	N/A	1.04	0.49	15% (+/-)	Yes
Aged	N/A	204	N/A	208	N/A	216	N/A	2.21	3.45	15% (+/-)	Yes
Disabled	N/A	214	N/A	205	N/A	179	N/A	-4.21	-12.40	15% (+/-)	Yes
<b>FFS EXPENDITURES AND USERS BY MAX PROGRAM TYPE</b>											
FP: Total Medicaid Paid (Program Type 2)	N/A	\$10,927	N/A	\$11,849	N/A	\$15,840	N/A	8.44	33.68	15% (+/-)	No
FP: Number of Users	N/A	65	N/A	74	N/A	72	N/A	13.85	-2.70	15% (+/-)	Yes
FP: Average Medicaid Pd per User	N/A	\$168	N/A	\$160	N/A	\$220	N/A	-4.75	37.40	15% (+/-)	No
RHC: Total Medicaid Paid (Program Type 3)	N/A	\$6,806	N/A	\$3,685	N/A	\$20,867	N/A	-45.90	466.30	15% (+/-)	No
RHC: Number of Users	N/A	13	N/A	15	N/A	15	N/A	15.38	0.00	15% (+/-)	Yes
RHC: Avg Medicaid Pd per User	N/A	\$524	N/A	\$246	N/A	\$1,391	N/A	-53.10	466.30	15% (+/-)	No
FQHC: Total Medicaid Paid (Program Type 4)	N/A	\$135,274	N/A	\$159,176	N/A	\$277,684	N/A	17.67	74.45	15% (+/-)	No
FQHC: Number of Users	N/A	689	N/A	980	N/A	1,355	N/A	42.24	38.27	15% (+/-)	No
FQHC: Avg Medicaid Pd per User	N/A	\$196	N/A	\$162	N/A	\$205	N/A	-17.30	26.17	15% (+/-)	No
IHS: Total Medicaid Pd (Program Type 5)	N/A	\$6,498,206	N/A	\$7,831,898	N/A	\$9,098,001	N/A	20.52	16.17	15% (+/-)	No
IHS: Number of Users	N/A	3,113	N/A	3,069	N/A	3,029	N/A	-1.41	-1.30	15% (+/-)	Yes
IHS: Avg Medicaid Pd per User	N/A	\$2,087	N/A	\$2,552	N/A	\$3,004	N/A	22.25	17.70	15% (+/-)	No
Section 1915(c) Waiver: Total Medicaid Paid (Program Types 6 and 7)	N/A	\$61,082,555	N/A	\$63,335,350	N/A	\$69,282,665	N/A	3.69	9.39	15% (+/-)	Yes
Section 1915(c) Waiver: Number of Users	N/A	2,421	N/A	2,426	N/A	2,554	N/A	0.21	5.28	15% (+/-)	Yes
Section 1915(c) Waiver: Avg Medicaid Pd per User	N/A	\$25,230	N/A	\$26,107	N/A	\$27,127	N/A	3.47	3.91	15% (+/-)	Yes
<b>FFS COMMUNITY-BASED LONG-TERM CARE EXPENDITURES AND USERS</b>											
Total FFS CLTC Expenditures (all codes - overestimate)	N/A	N/A	N/A	N/A	N/A	\$136,335,490	N/A	N/A	N/A	15% (+/-)	No
Number of Dual CLTC Users (all codes - overestimate)	N/A	N/A	N/A	N/A	N/A	8,947	N/A	N/A	N/A	15% (+/-)	No
Average FFS CLTC Expenditures per FFS Dual User (all codes - overestimate)	N/A	N/A	N/A	N/A	N/A	\$15,238	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$14,788	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$15,746	N/A	N/A	N/A	15% (+/-)	No
% FFS Dual Enrollees with CLTC Claims (all codes - overestimate)	N/A	N/A	N/A	N/A	N/A	69.00	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	73.50	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	65.86	N/A	N/A	N/A	15% (+/-)	No
Total FFS CLTC Expenditures (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	\$123,623,755	N/A	N/A	N/A	15% (+/-)	No
Number of Dual CLTC Users (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	4,036	N/A	N/A	N/A	15% (+/-)	No
Average FFS CLTC Expenditures per Dual User (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	\$30,630	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$25,112	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$39,444	N/A	N/A	N/A	15% (+/-)	No
% FFS Dual Enrollees with CLTC Claims (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	31.13	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	38.48	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	24.31	N/A	N/A	N/A	15% (+/-)	No
Total FFS CLTC Expenditures (Section 1915(c) claims only - excludes CLTC Codes 11-20)	N/A	N/A	N/A	N/A	N/A	\$69,282,665	N/A	N/A	N/A	15% (+/-)	No
Number of Dual CLTC Users (Section 1915(c) claims only - excludes CLTC Codes 11-20)	N/A	N/A	N/A	N/A	N/A	2,554	N/A	N/A	N/A	15% (+/-)	No
Average CLTC Expenditures per Dual User (Section 1915(c) claims only - excludes CLTC Codes 11-20)	N/A	N/A	N/A	N/A	N/A	\$27,127	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$18,907	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$39,221	N/A	N/A	N/A	15% (+/-)	No
% FFS Dual Enrollees with CLTC Claims (Section 1915(c) claims only - excludes CLTC Codes 11-20)	N/A	N/A	N/A	N/A	N/A	19.70	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	23.74	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	16.08	N/A	N/A	N/A	15% (+/-)	No
<b>FFS INFORMATION FOR TOTAL MEDICAID ENROLLEES (excludes people ever enrolled in HMO/HIOs, with missing eligibility information, S-SCHIP only, FP Only, Aliens with only restricted benefits, duals with restricted benefits only, and prescription drug only enrollees) --- NOTE: S-SCHIP only, FP Only, duals with restricted benefits, and Aliens with restricted benefits were NOT excluded prior to 2001. Prescription drug only enrollees were NOT excluded prior to 2003.</b>											
Total FFS Enrollees	N/A	128,495	N/A	129,665	N/A	132,666	N/A	0.91	2.31	15% (+/-)	Yes
# FFS Recipients	N/A	110,732	N/A	112,187	N/A	114,989	N/A	1.31	2.50	15% (+/-)	Yes
% FFS Enrollees who are Recipients	65-90%	86.18	Yes	86.52	Yes	86.68	Yes	0.40	0.18	15% (+/-)	Yes
% Aged who are Recipients	90-100%	94.15	Yes	94.50	Yes	94.43	Yes	0.37	-0.07	15% (+/-)	Yes
% Disabled who are Recipients	85-100%	93.69	Yes	93.81	Yes	93.29	Yes	0.13	-0.56	15% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: AK

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
% Child who are Recipients	80-100%	84.86	Yes	85.11	Yes	85.30	Yes	0.30	0.22	15% (+/-)	Yes
% Adults who are Recipients	80-100%	84.44	Yes	85.01	Yes	85.23	Yes	0.68	0.26	15% (+/-)	Yes
Total FFS PYE	N/A	93,389	N/A	94,648	N/A	96,187	N/A	1.35	1.63	15% (+/-)	Yes
MAX Aged Total	N/A	6,943	N/A	6,927	N/A	7,187	N/A	-0.23	3.75	10% (+/-)	Yes
11: Aged, Cash	N/A	5,894	N/A	5,984	N/A	6,148	N/A	1.53	2.74	10% (+/-)	Yes
21: Aged, MN	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
31: Aged, Poverty	N/A	113	N/A	8	N/A	12	N/A	-92.90	50.00	10% (+/-)	No
41: Other Aged	N/A	936	N/A	935	N/A	1,027	N/A	-0.11	9.84	10% (+/-)	Yes
51: 1115 Aged	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Disabled Total	N/A	13,176	N/A	13,888	N/A	14,927	N/A	5.40	7.48	10% (+/-)	Yes
12: Disabled, Cash	N/A	12,027	N/A	12,547	N/A	13,480	N/A	4.32	7.44	10% (+/-)	Yes
22: Disabled, MN	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
32: Disabled, Poverty	N/A	8	N/A	142	N/A	172	N/A	1,675.00	21.13	10% (+/-)	No
42: Other Disabled	N/A	1,141	N/A	1,199	N/A	1,275	N/A	5.08	6.34	10% (+/-)	Yes
52: 1115 Disabled	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Child Total	N/A	81,179	N/A	81,497	N/A	82,319	N/A	0.39	1.01	10% (+/-)	Yes
14: AFDC Child, Cash	N/A	17,429	N/A	16,643	N/A	16,808	N/A	-4.51	0.99	10% (+/-)	Yes
16: AFDC-U Child, Cash	N/A	556	N/A	454	N/A	252	N/A	-18.30	-44.50	10% (+/-)	No
24: AFDC Child, MN	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
34: Child Poverty	N/A	56,568	N/A	57,824	N/A	55,672	N/A	2.22	-3.72	10% (+/-)	Yes
44: Other Child	N/A	4,302	N/A	3,953	N/A	3,675	N/A	-8.11	-7.03	10% (+/-)	Yes
48: Foster Care Child	N/A	2,324	N/A	2,623	N/A	2,949	N/A	12.87	12.43	10% (+/-)	No
54: 1115 Child	N/A	0	N/A	0	N/A	2,963	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Adult Total	N/A	27,197	N/A	27,353	N/A	28,233	N/A	0.57	3.22	10% (+/-)	Yes
15: AFDC Adult, Cash	N/A	14,794	N/A	14,649	N/A	15,466	N/A	-0.98	5.58	10% (+/-)	Yes
17: AFDC-U Adult, Cash	N/A	1,149	N/A	1,063	N/A	718	N/A	-7.48	-32.50	10% (+/-)	No
25: AFDC Adult, MN	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
35: Adult, Poverty	N/A	8,918	N/A	9,390	N/A	9,913	N/A	5.29	5.57	10% (+/-)	Yes
45: Other Adult	N/A	2,336	N/A	2,251	N/A	2,136	N/A	-3.64	-5.11	10% (+/-)	Yes
55: 1115 Adult	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
Total FFS Medicaid Amt Paid	N/A	\$836,618,529	N/A	\$925,343,519	N/A	\$1,004,079,246	N/A	10.61	8.51	15% (+/-)	Yes
Average FFS Medicaid Amt Paid per FFS Enrollee	N/A	\$6,511	N/A	\$7,136	N/A	\$7,568	N/A	9.61	6.05	15% (+/-)	Yes
Average FFS Medicaid Amt Paid per FFS Recipient (User of any svc)	N/A	\$7,555	N/A	\$8,248	N/A	\$8,732	N/A	9.17	5.87	15% (+/-)	Yes
<b>AVG FFS MEDICAID AMT PD/FFS ENROLLEE BY MAX ELIGIBILITY GROUP</b>											
All Aged	N/A	\$18,350	N/A	\$21,115	N/A	\$22,807	N/A	15.07	8.02	15% (+/-)	Yes
11: Aged, Cash	N/A	\$12,403	N/A	\$14,694	N/A	\$16,073	N/A	18.46	9.38	15% (+/-)	Yes
21: Aged, MN	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
31: Aged, Poverty	N/A	\$9,292	N/A	\$6,575	N/A	\$1,559	N/A	-29.20	-76.30	15% (+/-)	No
41: Other Aged	N/A	\$56,888	N/A	\$62,335	N/A	\$63,371	N/A	9.58	1.66	15% (+/-)	Yes
51: 1115 Aged	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
All Disabled	N/A	\$22,634	N/A	\$24,477	N/A	\$25,023	N/A	8.14	2.23	15% (+/-)	Yes
12: Disabled, Cash	N/A	\$21,477	N/A	\$23,506	N/A	\$24,233	N/A	9.44	3.10	15% (+/-)	Yes
22: Disabled, MN	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
32: Disabled, Poverty	N/A	\$3,079	N/A	\$9,125	N/A	\$14,765	N/A	196.40	61.81	15% (+/-)	No
42: Other Disabled	N/A	\$34,960	N/A	\$36,457	N/A	\$34,761	N/A	4.28	-4.65	15% (+/-)	Yes
52: 1115 Disabled	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
All Child	N/A	\$3,568	N/A	\$3,749	N/A	\$3,938	N/A	5.09	5.02	15% (+/-)	Yes
14: AFDC Child, Cash	N/A	\$2,304	N/A	\$2,456	N/A	\$2,647	N/A	6.58	7.79	15% (+/-)	Yes
16: AFDC-U Child, Cash	N/A	\$1,932	N/A	\$1,991	N/A	\$1,742	N/A	3.02	-12.50	15% (+/-)	Yes
24: AFDC Child, MN	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
34: Child, Poverty	N/A	\$3,370	N/A	\$3,537	N/A	\$3,697	N/A	4.96	4.54	15% (+/-)	Yes
44: Other Child	N/A	\$8,499	N/A	\$7,668	N/A	\$8,790	N/A	-9.77	14.63	15% (+/-)	Yes
48: Foster Care Child	N/A	\$9,135	N/A	\$11,049	N/A	\$11,095	N/A	20.96	0.41	15% (+/-)	Yes
54: 1115 Child	N/A	Div by 0	N/A	Div by 0	N/A	\$2,830	N/A	Div by 0	Div by 0	15% (+/-)	N/A
All Adult	N/A	\$4,462	N/A	\$4,884	N/A	\$5,047	N/A	9.44	3.34	15% (+/-)	Yes
15: AFDC Adult, Cash	N/A	\$4,264	N/A	\$4,658	N/A	\$4,873	N/A	9.26	4.61	15% (+/-)	Yes
17: AFDC-U Adult, Cash	N/A	\$3,094	N/A	\$3,245	N/A	\$3,261	N/A	4.86	0.51	15% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: AK

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
25: AFDC Adult, MN	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
35: Adult, Poverty	N/A	\$5,223	N/A	\$5,656	N/A	\$5,678	N/A	8.30	0.37	15% (+/-)	Yes
45: Other Adult	N/A	\$3,491	N/A	\$3,899	N/A	\$3,974	N/A	11.70	1.93	15% (+/-)	Yes
55: 1115 Adult	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
<b>FFS EXPENDITURES AND USERS BY MAX TOS</b>											
IP: Total Medicaid Paid (TOS 01)	N/A	\$145,442,482	N/A	\$151,766,102	N/A	\$160,532,252	N/A	4.35	5.78	15% (+/-)	Yes
IP: Number of Users	N/A	14,343	N/A	14,154	N/A	14,591	N/A	-1.32	3.09	15% (+/-)	Yes
IP: Average Medicaid Pd per User	N/A	\$10,140	N/A	\$10,722	N/A	\$11,002	N/A	5.74	2.61	15% (+/-)	Yes
IP: Average Medicaid Covered Days Per User	N/A	5	N/A	5	N/A	5	N/A	0.37	5.86	15% (+/-)	Yes
MH Aged: Total Medicaid Paid (TOS 02)	N/A	\$53,411	N/A	\$61,265	N/A	\$56,446	N/A	14.70	-7.87	15% (+/-)	Yes
MH Aged: Number of Users	N/A	3	N/A	5	N/A	6	N/A	66.67	20.00	15% (+/-)	No
MH Aged: Avg Medicaid Pd per User	N/A	\$17,804	N/A	\$12,253	N/A	\$9,408	N/A	-31.20	-23.20	15% (+/-)	No
IP Psych < 21: Total Medicaid Paid (TOS 04)	N/A	\$58,654,587	N/A	\$67,336,834	N/A	\$70,901,360	N/A	14.80	5.29	15% (+/-)	Yes
IP Psych < 21: Number of Users	N/A	1,340	N/A	1,447	N/A	1,423	N/A	7.99	-1.66	15% (+/-)	Yes
IP Psych<21 :Avg Medicaid Pd per User	N/A	\$43,772	N/A	\$46,535	N/A	\$49,825	N/A	6.31	7.07	15% (+/-)	Yes
ICF/MR: Total Medicaid Pd (TOS 05)	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
ICF/MR: Number of Users	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
ICF/MR: Avg Medicaid Pd per User	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
NF: Total Medicaid Paid (TOS 07)	N/A	\$57,773,370	N/A	\$63,240,237	N/A	\$68,252,174	N/A	9.46	7.93	15% (+/-)	Yes
NF Number of Users	N/A	915	N/A	906	N/A	947	N/A	-0.98	4.53	15% (+/-)	Yes
NF:Avg Medicaid Pd per User	N/A	\$63,140	N/A	\$69,802	N/A	\$72,072	N/A	10.55	3.25	15% (+/-)	Yes
Physician: Total Medicaid Paid (TOS 08)	N/A	\$58,930,406	N/A	\$61,729,644	N/A	\$66,137,926	N/A	4.75	7.14	15% (+/-)	Yes
Physician: Number of Users	N/A	81,708	N/A	82,110	N/A	84,846	N/A	0.49	3.33	15% (+/-)	Yes
Physician: Avg Medicaid Pd per User	N/A	\$721	N/A	\$752	N/A	\$780	N/A	4.24	3.69	15% (+/-)	Yes
Dental: Total Medicaid Paid (TOS 09)	N/A	\$19,246,242	N/A	\$21,241,625	N/A	\$21,756,066	N/A	10.37	2.42	15% (+/-)	Yes
Dental: Number of Users	N/A	37,920	N/A	40,806	N/A	40,764	N/A	7.61	-0.10	15% (+/-)	Yes
Dental: Avg Medicaid Pd per User	N/A	\$508	N/A	\$521	N/A	\$534	N/A	2.56	2.53	15% (+/-)	Yes
Other Practitioner: Total Medicaid Pd (TOS 10)	N/A	\$2,080,242	N/A	\$2,746,264	N/A	\$3,011,872	N/A	32.02	9.67	15% (+/-)	Yes
Other Practitioner: Number of Users	N/A	15,288	N/A	19,367	N/A	20,091	N/A	26.68	3.74	15% (+/-)	Yes
Other Practitioner: Avg Medicaid Pd per User	N/A	\$136	N/A	\$142	N/A	\$150	N/A	4.21	5.72	15% (+/-)	Yes
OPD: Total Medicaid Paid (TOS 11)	N/A	\$51,651,559	N/A	\$49,416,002	N/A	\$48,074,966	N/A	-4.33	-2.71	15% (+/-)	Yes
OPD Number of Users	N/A	52,718	N/A	43,807	N/A	43,985	N/A	-16.90	0.41	15% (+/-)	Yes
OPD: Avg Medicaid Pd per User	N/A	\$980	N/A	\$1,128	N/A	\$1,093	N/A	15.13	-3.11	15% (+/-)	Yes
Clinic: Total Medicaid Paid (TOS 12)	N/A	\$27,211,513	N/A	\$37,109,413	N/A	\$41,210,471	N/A	36.37	11.05	15% (+/-)	Yes
Clinic: Number of Users	N/A	29,017	N/A	30,968	N/A	34,948	N/A	6.72	12.85	15% (+/-)	Yes
Clinic: Avg Medicaid Pd per User	N/A	\$938	N/A	\$1,198	N/A	\$1,179	N/A	27.78	-1.60	15% (+/-)	Yes
HH: Total Medicaid Paid (TOS 13)	N/A	\$741,183	N/A	\$1,009,217	N/A	\$1,158,690	N/A	36.16	14.81	15% (+/-)	Yes
HH: Number of Users	N/A	280	N/A	357	N/A	379	N/A	27.50	6.16	15% (+/-)	Yes
HH: Avg Medicaid Pd per User	N/A	\$2,647	N/A	\$2,827	N/A	\$3,057	N/A	6.80	8.15	15% (+/-)	Yes
Lab/Xray: Total Medicaid Paid (TOS 15)	N/A	\$16,879,475	N/A	\$27,908,377	N/A	\$33,517,281	N/A	65.34	20.10	15% (+/-)	No
Lab/Xray: Number of Users	N/A	50,965	N/A	58,469	N/A	62,971	N/A	14.72	7.70	15% (+/-)	Yes
Lab/Xray:Avg Medicaid Pd per User	N/A	\$331	N/A	\$477	N/A	\$532	N/A	44.12	11.51	15% (+/-)	Yes
Drugs: Total Medicaid Paid (TOS 16)	N/A	\$101,753,716	N/A	\$119,113,340	N/A	\$135,646,117	N/A	17.06	13.88	15% (+/-)	Yes
Drugs: Number of Users	N/A	75,191	N/A	75,619	N/A	77,757	N/A	0.57	2.83	15% (+/-)	Yes
Drugs: Avg Medicaid Pd per User	N/A	\$1,353	N/A	\$1,575	N/A	\$1,744	N/A	16.40	10.75	15% (+/-)	Yes
Other Services: Total Medicaid Paid (TOS 19)	N/A	\$15,577,361	N/A	\$22,826,205	N/A	\$46,213,484	N/A	46.53	102.50	15% (+/-)	No
Other Services: Number of Users	N/A	14,600	N/A	8,183	N/A	8,186	N/A	-44.00	0.04	15% (+/-)	Yes
Other Services: Avg Medicaid Pd per User	N/A	\$1,067	N/A	\$2,789	N/A	\$5,645	N/A	161.40	102.40	15% (+/-)	No
Transportation: Total Medicaid Paid (TOS 26)	N/A	\$40,880,047	N/A	\$43,279,660	N/A	\$47,638,513	N/A	5.87	10.07	15% (+/-)	Yes
Transportation: Number of Users	N/A	21,392	N/A	22,173	N/A	22,655	N/A	3.65	2.17	15% (+/-)	Yes
Transportation: Avg Medicaid Pd per User	N/A	\$1,911	N/A	\$1,952	N/A	\$2,103	N/A	2.14	7.73	15% (+/-)	Yes
PCS: Total Medicaid Paid (TOS 30)	N/A	\$70,215,486	N/A	\$88,893,276	N/A	\$92,685,806	N/A	26.60	4.27	15% (+/-)	Yes
PCS: Number of Users	N/A	4,190	N/A	4,657	N/A	4,768	N/A	11.15	2.38	15% (+/-)	Yes
PCS: Avg Medicaid Pd per User	N/A	\$16,758	N/A	\$19,088	N/A	\$19,439	N/A	13.91	1.84	15% (+/-)	Yes
Target Case Management: Total Medicaid Pd (TOS 31)	N/A	\$6,904,826	N/A	\$6,836,924	N/A	\$7,878,200	N/A	-0.98	15.23	15% (+/-)	No
Target Case Management: Number of Users	N/A	3,951	N/A	4,001	N/A	4,663	N/A	1.27	16.55	15% (+/-)	No
Target Case Management: Avg Medicaid Pd per User	N/A	\$1,748	N/A	\$1,709	N/A	\$1,690	N/A	-2.22	-1.13	15% (+/-)	Yes

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STATE: AK

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
Rehab Services: Total Medicaid Pd (TOS 33)	N/A	\$2,859,619	N/A	\$55,127	N/A	\$224,044	N/A	-98.10	306.40	15% (+/-)	No
Rehab Services: Number of Users	N/A	1,394	N/A	88	N/A	163	N/A	-93.70	85.23	15% (+/-)	No
Rehab Services: Avg Medicaid Pd per User	N/A	\$2,051	N/A	\$626	N/A	\$1,375	N/A	-69.50	119.40	15% (+/-)	No
PT/OT/Speech/Hear: Total Medicaid Paid (TOS 34)	N/A	\$7,441,789	N/A	\$7,623,064	N/A	\$8,261,840	N/A	2.44	8.38	15% (+/-)	Yes
PT/OT/Speech/Hear: Number of Users	N/A	5,589	N/A	6,038	N/A	6,519	N/A	8.03	7.97	15% (+/-)	Yes
PT/OT/Speech/Hear: Avg Medicaid Pd per User	N/A	\$1,332	N/A	\$1,263	N/A	\$1,267	N/A	-5.18	0.38	15% (+/-)	Yes
Hospice: Total Medicaid Paid (TOS 35)	N/A	\$77,851	N/A	\$107,244	N/A	\$157,115	N/A	37.76	46.50	15% (+/-)	No
Hospice: Number of Users	N/A	8	N/A	19	N/A	24	N/A	137.50	26.32	15% (+/-)	No
Hospice: Avg Medicaid Pd per User	N/A	\$9,731	N/A	\$5,644	N/A	\$6,546	N/A	-42.00	15.98	15% (+/-)	No
DME: Total Medicaid Paid (TOS 51)	N/A	\$14,641,687	N/A	\$17,074,320	N/A	\$20,059,742	N/A	16.61	17.48	15% (+/-)	No
DME: Number of Users	N/A	25,181	N/A	28,150	N/A	30,391	N/A	11.79	7.96	15% (+/-)	Yes
DME: Avg Medicaid Pd per User	N/A	\$581	N/A	\$607	N/A	\$660	N/A	4.32	8.82	15% (+/-)	Yes
Residential Care: Total Medicaid Paid (TOS 52)	N/A	\$68,069,099	N/A	\$57,257,314	N/A	\$45,957,938	N/A	-15.90	-19.70	15% (+/-)	No
Residential Care: Number of Users	N/A	1,818	N/A	1,737	N/A	861	N/A	-4.46	-50.40	15% (+/-)	No
Residential Care: Avg Medicaid Pd per User	N/A	\$37,442	N/A	\$32,963	N/A	\$53,377	N/A	-12.00	61.93	15% (+/-)	No
Psych. Services: Total Medicaid Paid (TOS 53)	N/A	\$53,905,141	N/A	\$68,593,719	N/A	\$77,621,029	N/A	27.25	13.16	15% (+/-)	Yes
Psych. Services: Number of Users	N/A	14,830	N/A	16,910	N/A	17,398	N/A	14.03	2.89	15% (+/-)	Yes
Psych. Services: Avg Medicaid Pd per User	N/A	\$3,635	N/A	\$4,056	N/A	\$4,461	N/A	11.60	9.99	15% (+/-)	Yes
Adult Day Care: Total Medicaid Paid (TOS 54)	N/A	\$9,561,474	N/A	\$5,327,643	N/A	\$2,384,834	N/A	-44.30	-55.20	15% (+/-)	No
Adult Day Care: Number of Users	N/A	909	N/A	764	N/A	439	N/A	-16.00	-42.50	15% (+/-)	No
Adult Day Care: Avg Medicaid Pd per User	N/A	\$10,519	N/A	\$6,973	N/A	\$5,432	N/A	-33.70	-22.10	15% (+/-)	No
AVG FFS MEDICAID AMT PD/FFS ENROLLEE BY SELECTED MAX TOS											
Inpatient Hospital (TOS=01)	N/A	\$1,132	N/A	\$1,170	N/A	\$1,210	N/A	3.41	3.38	15% (+/-)	Yes
Aged	N/A	\$409	N/A	\$448	N/A	\$282	N/A	9.44	-37.10	15% (+/-)	No
Disabled	N/A	\$2,351	N/A	\$2,517	N/A	\$2,686	N/A	7.06	6.68	15% (+/-)	Yes
Child	N/A	\$918	N/A	\$907	N/A	\$928	N/A	-1.18	2.32	15% (+/-)	Yes
Adult	N/A	\$1,366	N/A	\$1,455	N/A	\$1,489	N/A	6.58	2.34	15% (+/-)	Yes
ILTC (TOS=02,04,05,07)	N/A	\$907	N/A	\$1,008	N/A	\$1,049	N/A	11.14	4.15	15% (+/-)	Yes
Aged	N/A	\$6,033	N/A	\$6,491	N/A	\$7,011	N/A	7.58	8.02	15% (+/-)	Yes
Disabled	N/A	\$1,650	N/A	\$1,749	N/A	\$1,720	N/A	6.00	-1.67	15% (+/-)	Yes
Child	N/A	\$631	N/A	\$727	N/A	\$732	N/A	15.18	0.72	15% (+/-)	Yes
Adult	N/A	\$60	N/A	\$79	N/A	\$103	N/A	31.69	29.46	15% (+/-)	No
Drugs (TOS=16)	N/A	\$792	N/A	\$919	N/A	\$1,022	N/A	16.00	11.30	15% (+/-)	Yes
Aged	N/A	\$2,616	N/A	\$3,055	N/A	\$3,472	N/A	16.80	13.66	15% (+/-)	Yes
Disabled	N/A	\$4,254	N/A	\$4,915	N/A	\$5,151	N/A	15.54	4.79	15% (+/-)	Yes
Child	N/A	\$189	N/A	\$192	N/A	\$244	N/A	1.70	26.58	15% (+/-)	No
Adult	N/A	\$448	N/A	\$512	N/A	\$487	N/A	14.32	-4.85	15% (+/-)	Yes
All Other Services	N/A	\$3,681	N/A	\$4,040	N/A	\$4,287	N/A	9.76	6.11	15% (+/-)	Yes
Aged	N/A	\$9,292	N/A	\$11,121	N/A	\$12,042	N/A	19.69	8.28	15% (+/-)	Yes
Disabled	N/A	\$14,378	N/A	\$15,295	N/A	\$15,467	N/A	6.38	1.13	15% (+/-)	Yes
Child	N/A	\$1,830	N/A	\$1,924	N/A	\$2,035	N/A	5.11	5.77	15% (+/-)	Yes
Adult	N/A	\$2,589	N/A	\$2,837	N/A	\$2,967	N/A	9.58	4.60	15% (+/-)	Yes
% OF FFS ENROLLEES WITH CLAIMS BY SELECTED MAX TYPE OF SERVICE											
% FFS Enrollees with IP Claims (TOS=01)	N/A	11.16	N/A	10.92	N/A	11.00	N/A	-2.21	0.76	15% (+/-)	Yes
Aged	N/A	18.26	N/A	14.68	N/A	13.26	N/A	-19.60	-9.68	15% (+/-)	Yes
Disabled	N/A	15.95	N/A	14.18	N/A	13.50	N/A	-11.00	-4.84	15% (+/-)	Yes
Child	N/A	7.53	N/A	7.60	N/A	7.79	N/A	0.88	2.52	15% (+/-)	Yes
Adult	N/A	17.87	N/A	18.19	N/A	18.46	N/A	1.78	1.48	15% (+/-)	Yes
% FFS Enrollees with ILTC Claims (TOS=02,04,05,07)	N/A	1.76	N/A	1.82	N/A	1.79	N/A	3.49	-1.56	15% (+/-)	Yes
Aged	N/A	9.23	N/A	9.09	N/A	9.28	N/A	-1.49	2.04	15% (+/-)	Yes
Disabled	N/A	3.04	N/A	2.87	N/A	2.85	N/A	-5.60	-0.90	15% (+/-)	Yes
Child	N/A	1.43	N/A	1.54	N/A	1.46	N/A	7.40	-5.10	15% (+/-)	Yes
Adult	N/A	0.19	N/A	0.27	N/A	0.28	N/A	41.50	4.74	15% (+/-)	Yes
% FFS Enrollees with Drug Claims (TOS=16)	N/A	58.52	N/A	58.32	N/A	58.61	N/A	-0.34	0.50	15% (+/-)	Yes
Aged	N/A	87.12	N/A	87.83	N/A	87.46	N/A	0.81	-0.42	15% (+/-)	Yes
Disabled	N/A	85.67	N/A	85.25	N/A	84.14	N/A	-0.50	-1.29	15% (+/-)	Yes
Child	N/A	49.37	N/A	48.54	N/A	49.11	N/A	-1.68	1.18	15% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
Adult	N/A	65.37	N/A	66.31	N/A	65.47	N/A	1.44	-1.27	15% (+/-)	Yes
% FFS Enrollees with All Other Claims	N/A	84.53	N/A	85.04	N/A	85.19	N/A	0.60	0.18	15% (+/-)	Yes
Aged	N/A	91.10	N/A	91.93	N/A	91.65	N/A	0.91	-0.30	15% (+/-)	Yes
Disabled	N/A	91.86	N/A	92.47	N/A	91.95	N/A	0.66	-0.56	15% (+/-)	Yes
Child	N/A	83.57	N/A	83.92	N/A	84.15	N/A	0.42	0.28	15% (+/-)	Yes
Adult	N/A	82.19	N/A	82.86	N/A	83.01	N/A	0.82	0.18	15% (+/-)	Yes
Avg # IP Days per FFS User	N/A	5	N/A	5	N/A	5	N/A	0.37	5.86	15% (+/-)	Yes
Aged	N/A	6	N/A	7	N/A	8	N/A	14.84	10.57	15% (+/-)	Yes
Disabled	N/A	9	N/A	10	N/A	11	N/A	7.83	7.35	15% (+/-)	Yes
Child	N/A	4	N/A	4	N/A	4	N/A	-4.04	6.13	15% (+/-)	Yes
Adult	N/A	3	N/A	3	N/A	3	N/A	1.19	4.71	15% (+/-)	Yes
Avg # ILTC Days per FFS User	N/A	163	N/A	166	N/A	170	N/A	1.53	2.39	15% (+/-)	Yes
Aged	N/A	206	N/A	210	N/A	215	N/A	1.86	2.53	15% (+/-)	Yes
Disabled	N/A	169	N/A	175	N/A	165	N/A	3.99	-6.13	15% (+/-)	Yes
Child	N/A	141	N/A	145	N/A	151	N/A	2.89	4.00	15% (+/-)	Yes
Adult	N/A	100	N/A	94	N/A	106	N/A	-6.08	12.50	15% (+/-)	Yes
<b>FFS EXPENDITURES AND USERS BY MAX PGM TYPE</b>											
FP: Total Medicaid Paid (Program Type 2)	N/A	\$885,655	N/A	\$922,037	N/A	\$954,263	N/A	4.11	3.50	15% (+/-)	Yes
FP: Number of Users	N/A	3,026	N/A	2,899	N/A	2,913	N/A	-4.20	0.48	15% (+/-)	Yes
FP: Average Medicaid Pd per User	N/A	\$293	N/A	\$318	N/A	\$328	N/A	8.67	3.00	15% (+/-)	Yes
RHC: Total Medicaid Paid (Program Type 3)	N/A	\$116,998	N/A	\$78,507	N/A	\$70,329	N/A	-32.90	-10.40	15% (+/-)	Yes
RHC: Number of Users	N/A	274	N/A	186	N/A	110	N/A	-32.10	-40.90	15% (+/-)	No
RHC: Avg Medicaid Pd per User	N/A	\$427	N/A	\$422	N/A	\$639	N/A	-1.15	51.48	15% (+/-)	No
FOHC: Total Medicaid Paid (Program Type 4)	N/A	\$2,109,493	N/A	\$2,854,752	N/A	\$3,563,678	N/A	35.33	24.83	15% (+/-)	No
FOHC: Number of Users	N/A	4,257	N/A	5,244	N/A	6,469	N/A	23.19	23.36	15% (+/-)	No
FOHC: Avg Medicaid Pd per User	N/A	\$496	N/A	\$544	N/A	\$551	N/A	9.86	1.19	15% (+/-)	Yes
IHS: Total Medicaid Pd (Program Type 5)	N/A	\$90,152,539	N/A	\$98,581,585	N/A	\$102,512,043	N/A	9.35	3.99	15% (+/-)	Yes
IHS: Number of Users	N/A	27,806	N/A	30,115	N/A	30,980	N/A	8.30	2.87	15% (+/-)	Yes
IHS: Avg Medicaid Pd per User	N/A	\$3,242	N/A	\$3,274	N/A	\$3,309	N/A	0.97	1.08	15% (+/-)	Yes
Section 1915(c) Waiver: Total Medicaid Paid (Program Types 6 and 7)	N/A	\$109,768,681	N/A	\$110,830,439	N/A	\$119,028,582	N/A	0.97	7.40	15% (+/-)	Yes
Section 1915(c) Waiver: Number of Users	N/A	3,977	N/A	4,040	N/A	4,286	N/A	1.58	6.09	15% (+/-)	Yes
Section 1915(c) Waiver: Avg Medicaid Pd per User	N/A	\$27,601	N/A	\$27,433	N/A	\$27,771	N/A	-0.61	1.23	15% (+/-)	Yes
<b>FFS COMMUNITY-BASED LONG-TERM CARE EXPENDITURES AND USERS</b>											
Total FFS CLTC Expenditures (all codes - overestimate)	N/A	N/A	N/A	N/A	N/A	\$229,994,869	N/A	N/A	N/A	15% (+/-)	No
Number of CLTC Users (all codes - overestimate)	N/A	N/A	N/A	N/A	N/A	15,124	N/A	N/A	N/A	15% (+/-)	No
Average FFS CLTC Expenditures per User (all codes - overestimate)	N/A	N/A	N/A	N/A	N/A	\$15,207	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$14,736	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$15,645	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$8,315	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$8,941	N/A	N/A	N/A	15% (+/-)	No
% FFS Enrollees with CLTC Claims (all codes - overestimate)	N/A	N/A	N/A	N/A	N/A	11.40	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	72.92	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	64.43	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	0.16	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	0.48	N/A	N/A	N/A	15% (+/-)	No
Total FFS CLTC Expenditures (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	\$202,514,767	N/A	N/A	N/A	15% (+/-)	No
Number of CLTC Users (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	6,783	N/A	N/A	N/A	15% (+/-)	No
Average FFS CLTC Expenditures per User (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	\$29,856	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$25,096	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$34,779	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$8,315	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$8,941	N/A	N/A	N/A	15% (+/-)	No
% FFS Enrollees with CLTC Claims (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	5.11	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	38.03	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	25.36	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	0.16	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	0.48	N/A	N/A	N/A	15% (+/-)	No

2003-2005 MAX PSF VALIDATION TABLE  
STATE: AK

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
Total FFS CLTC Expenditures (Section 1915(c) claims only - excludes CLTC Codes 11-20)	N/A	N/A	N/A	N/A	N/A	\$119,028,582	N/A	N/A	N/A	15% (+/-)	No
Number of CLTC Users (Section 1915(c) claims only - excludes CLTC Codes 11-20)	N/A	N/A	N/A	N/A	N/A	4,286	N/A	N/A	N/A	15% (+/-)	No
Average FFS CLTC Expenditures per User (Section 1915(c) claims only - excludes CLTC Codes 11-20)	N/A	N/A	N/A	N/A	N/A	\$27,771	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$18,583	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$33,735	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$17,869	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$623	N/A	N/A	N/A	15% (+/-)	No
% FFS Enrollees with CLTC Claims (Section 1915(c) claims only - excludes CLTC Codes 11-20)	N/A	N/A	N/A	N/A	N/A	3.23	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	22.36	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	17.54	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	0.06	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	0.05	N/A	N/A	N/A	15% (+/-)	No