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2003-2005 MAX IP VALIDATION TABLE  
STATE: LA

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	463,183	N/A	384,228	N/A	258,472	N/A	-17.00	-32.70	No
% 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	463,183	N/A	384,228	N/A	258,472	N/A	-17.00	-32.70	No
% Crossover	5-20	70.96	No	63.22	No	44.48	No	-10.90	-29.60	No
% Adjusted Claims	N/A	3.46	N/A	3.55	N/A	4.90	N/A	2.65	38.07	No
% Standard Adjustments	> 1%	92.88	Yes	92.72	Yes	89.12	Yes	-0.17	-3.88	Yes
Aver. Amt. Pd Adjust. ( include \$0)	N/A	\$3,957	N/A	\$4,346	N/A	\$6,634	N/A	9.83	52.63	No
Total number of claims with missing Medicaid eligibility (excludes S-SCHIP only)	N/A	N/A	N/A	N/A	N/A	15,453	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	134,515	N/A	141,310	N/A	143,500	N/A	5.05	1.55	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	\$4,758	Yes	\$5,053	Yes	\$5,085	Yes	6.19	0.63	Yes
Aver. Medicaid Amt Paid per Covered Day (>\$0 paid and >0 days claims)	N/A	\$1,029	N/A	\$1,080	N/A	\$1,071	N/A	4.99	-0.83	Yes
% Claims with TPL	>0 - 10	0.78	Yes	0.75	Yes	0.87	Yes	-4.63	16.45	No
Aver. TPL Paid for claims with TPL	N/A	\$2,679	N/A	\$2,937	N/A	\$2,947	N/A	9.62	0.35	Yes
% 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	1.37	Yes	1.37	Yes	1.17	Yes	-0.11	-15.00	Yes
% Claims with UB-92 Ancillary Codes	95-100	99.84	Yes	99.85	Yes	99.79	Yes	0.01	-0.06	Yes
Average # UB-92 Ancillary Codes (at least 1 Ancillary code)	>3	9.75	Yes	9.86	Yes	9.94	Yes	1.13	0.84	Yes
Average LOS	2-<8	4.61	Yes	4.66	Yes	4.73	Yes	1.14	1.47	Yes
Average Covered Days (> 0 day)	2-<8	4.63	Yes	4.68	Yes	4.75	Yes	1.15	1.47	Yes
% Begin Date = Admit Date	95-100	97.36	Yes	97.41	Yes	97.77	Yes	0.05	0.38	Yes
% IP Claims (MAX TOS 01)	95-100	99.25	Yes	99.46	Yes	99.31	Yes	0.22	-0.15	Yes
% Family Planning Claims (pgm type=2)	>0-5	1.62	Yes	1.59	Yes	1.69	Yes	-1.71	5.91	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	3.50	Yes	3.55	Yes	3.59	Yes	1.48	1.01	Yes
% Claims with PDX, where length=3	5-30	8.76	Yes	8.08	Yes	8.12	Yes	-7.73	0.49	Yes
% Claims with PDX, where length=4	15-75	28.19	Yes	27.94	Yes	27.40	Yes	-0.90	-1.93	Yes
% Claims with PDX, where length=5	25-70	63.05	Yes	63.98	Yes	64.48	Yes	1.48	0.78	Yes
% Claims with a procedure code	35-70	57.21	Yes	58.74	Yes	57.47	Yes	2.68	-2.16	Yes
Average Number of Procedures for claims with at least 1 procedure code	>1	1.83	Yes	1.89	Yes	1.99	Yes	3.18	5.55	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	99.99	N/A	0.00	-0.01	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: LA

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	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
% Claims Maternal Delivery Indicator	N/A	26.59	N/A	26.93	N/A	26.01	N/A	1.30	-3.43	Yes
% Claims Newborn Delivery Indicator (only for separate infant delivery claims using mother's ID)	N/A	4.71	N/A	4.92	N/A	6.61	N/A	4.40	34.42	No
<b>Patient Status</b>										
% Home	75-90	89.27	Yes	88.55	Yes	88.38	Yes	-0.80	-0.19	Yes
% Transferred	1-10	7.51	Yes	8.15	Yes	8.28	Yes	8.44	1.60	Yes
% Still a Patient	>0 - 2	2.24	No	2.31	No	2.38	No	2.95	3.03	Yes
% Died	>0 - 3	0.98	Yes	0.99	Yes	0.96	Yes	1.63	-3.28	Yes
<b>FFS Crossover Claims (Type of Claim=1, Crossover Claim Indicator=1)</b>										
Total Number of Claims	N/A	328,668	N/A	242,918	N/A	114,972	N/A	-26.10	-52.70	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
Aver. Medicaid Amount Paid (claims with >\$0 paid)	N/A	\$227	N/A	\$185	N/A	\$339	N/A	-18.30	82.52	No
% Claims with TPL	N/A	0.95	N/A	0.55	N/A	1.19	N/A	-42.50	117.60	No
Aver. TPL Paid -claims with TPL	N/A	\$1,159	N/A	\$2,179	N/A	\$2,090	N/A	88.07	-4.10	Yes
% Claims with UB-92 Accommodation Codes	95-100	2.04	No	1.35	No	13.56	No	-33.90	907.10	No
Average # UB-92 Accom. Codes (at least 1 accom code)	>1	1.16	Yes	1.17	Yes	1.17	Yes	1.08	-0.47	Yes
% Claims with UB-92 Ancillary Codes	95-100	98.19	Yes	98.29	Yes	96.51	Yes	0.10	-1.80	Yes
Average # UB-92 Ancillary Codes (at least 1 Ancillary code)	>3	4.38	Yes	4.01	Yes	5.85	Yes	-8.33	45.63	No
Average LOS	2-<8	2.66	Yes	2.30	Yes	3.77	Yes	-13.70	63.99	No
% Begin Date = Admit Date	95-100	96.04	Yes	94.86	No	84.42	No	-1.24	-11.00	Yes
% Claims with IP TOS	95-100	99.99	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with DX	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	2.77	Yes	2.41	Yes	2.92	Yes	-12.90	21.34	No
% Claims with PDX, where length=3	5-30	5.09	Yes	6.34	Yes	6.57	Yes	24.47	3.63	Yes
% Claims with PDX, where length=4	15-75	38.95	Yes	45.88	Yes	45.44	Yes	17.77	-0.95	Yes
% Claims with PDX, where length=5	25-70	55.77	Yes	47.72	Yes	47.99	Yes	-14.40	0.57	Yes
% Claims with a procedure code	35-70	17.84	No	10.13	No	9.81	No	-43.20	-3.16	Yes
Average Number of Procedures for claims with at least 1 procedure code	>1	1.83	Yes	1.80	Yes	1.57	Yes	-1.53	-13.00	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	94.85	N/A	93.55	N/A	95.47	N/A	-1.37	2.05	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: LA

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	398,019	N/A	390,552	N/A	381,126	N/A	-1.88	-2.41	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	398,019	N/A	390,552	N/A	381,126	N/A	-1.88	-2.41	Yes
% Crossover	5-20	1.42	No	0.88	No	1.07	No	-38.10	21.89	No
% Adjusted Claims	> 1%	10.56	Yes	14.87	Yes	31.75	Yes	40.82	113.50	No
% Standard Adjustments	N/A	97.49	N/A	97.93	N/A	96.14	N/A	0.45	-1.83	Yes
Aver. Amt. Pd Adjust. ( include \$0)	N/A	\$6,177	N/A	\$3,964	N/A	\$3,437	N/A	-35.80	-13.30	Yes
Total number of claims with missing Medicaid eligibility (excludes S-SCHIP only)	N/A	N/A	N/A	N/A	N/A	336	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	392,366	N/A	387,116	N/A	377,039	N/A	-1.34	-2.60	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	\$70	Yes	\$76	Yes	\$83	Yes	8.22	9.28	Yes
ICF/MR (TOS 05)	N/A	\$197	N/A	\$205	N/A	\$217	N/A	4.00	5.71	Yes
Aged/MH (TOS 02)	N/A	\$353	N/A	\$486	N/A	\$527	N/A	37.40	8.53	Yes
IP Psych. < 21 (TOS 04)	N/A	\$397	N/A	\$478	N/A	\$505	N/A	20.48	5.62	Yes
% NF (TOS 07)	75-99	79.28	Yes	78.89	Yes	78.97	Yes	-0.50	0.11	Yes
% NF claims with NF Covered Days	N/A	93.27	N/A	92.32	N/A	91.98	N/A	-1.01	-0.37	Yes
Avg days for NF claims with Covered Days	N/A	29	N/A	29	N/A	28	N/A	-0.10	-2.00	Yes
% ICF/MR (TOS 05)	>0-20	17.03	Yes	17.02	Yes	17.09	Yes	-0.04	0.42	Yes
% ICF/MR claims with ICF/MR Covered Days	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
Avg days for ICF/MR claims with Covered Days	N/A	30	N/A	30	N/A	30	N/A	0.29	-0.52	Yes
% Aged/MH (TOS 02)	>0-10	2.04	Yes	2.18	Yes	2.07	Yes	6.76	-4.66	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	8	N/A	8	N/A	8	N/A	-0.84	7.69	Yes
% IP Psych. < 21 (TOS 04)	>0-5	1.65	Yes	1.92	Yes	1.86	Yes	15.89	-2.85	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	5	N/A	5	N/A	5	N/A	-3.14	-2.08	Yes
% Claims with Leave Days	1-20	12.08	Yes	11.94	Yes	11.42	Yes	-1.08	-4.43	Yes
% Claims with DX	95-100	12.71	No	34.37	No	73.85	No	170.50	114.90	No
% Claims with DX, where length=3	5-30	9.41	Yes	22.02	Yes	21.92	Yes	134.10	-0.43	Yes
% Claims with DX, where length=4	15-75	53.17	Yes	52.73	Yes	52.49	Yes	-0.83	-0.47	Yes
% Claims with DX, where length=5	25-70	37.42	Yes	25.25	Yes	25.59	Yes	-32.50	1.35	Yes
<b>Patient Status</b>										
% Home	1-5	2.84	Yes	3.01	Yes	2.95	Yes	6.07	-1.96	Yes
% Still a Patient	8-98	92.75	Yes	92.49	Yes	91.71	Yes	-0.28	-0.84	Yes
% Died	>0-5	1.02	Yes	0.89	Yes	0.91	Yes	-13.10	2.05	Yes
<b>FFS Crossover Claims (Type of Claim=1, Crossover Claim Indicator=1)</b>										
Total Number of Claims	N/A	5,653	N/A	3,436	N/A	4,087	N/A	-39.20	18.95	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: LA

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	\$701	N/A	\$594	N/A	\$658	N/A	-15.30	10.68	Yes
% NF (TOS 07)	75-99	0.00	No	0.00	No	0.00	No	Div by 0	Div by 0	N/A
% 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	99.47	No	99.42	No	99.39	No	-0.05	-0.03	Yes
% IP Psych. < 21 (TOS 04)	>0-5	0.53	Yes	0.58	Yes	0.61	Yes	9.68	5.09	Yes
% Claims with DX	95-100	99.96	Yes	100.00	Yes	99.98	Yes	0.04	-0.02	Yes
% Claims with DX, where length=3	5-30	7.06	Yes	7.10	Yes	6.09	Yes	0.57	-14.20	Yes
% Claims with DX, where length=4	15-75	14.42	No	8.41	No	9.94	No	-41.70	18.14	No
% Claims with DX, where length=5	25-70	78.50	No	84.49	No	83.97	No	7.63	-0.61	Yes
Patient Status										
% Home	1-5	41.82	No	40.08	No	41.79	No	-4.17	4.28	Yes
% Still a Patient	8-98	34.87	Yes	52.47	Yes	46.02	Yes	50.50	-12.30	Yes
% Died	>0-5	1.04	Yes	0.06	Yes	0.05	Yes	-94.40	-15.90	No

2003-2005 MAX OT VALIDATION TABLE  
STATE: LA

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	28,396,468	N/A	30,304,742	N/A	31,276,710	N/A	6.72	3.21	Yes
% Encounter Claims (Claim Type=3)	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
% Cap Claims (Claim Type=2, and MAX TOS 20,21,22)	N/A	20.27	N/A	27.54	N/A	27.63	N/A	35.86	0.35	Yes
Total FFS Claims Excluding Capitation Payments	N/A	22,640,575	N/A	21,959,288	N/A	22,633,702	N/A	-3.01	3.07	Yes
% Crossover	5-20	15.73	Yes	7.93	Yes	8.18	Yes	-49.60	3.11	Yes
% Adjusted Claims	> 1%	3.24	Yes	1.83	Yes	0.62	No	-43.50	-66.20	No
% Standard Adjustments	N/A	96.10	N/A	90.58	N/A	90.60	N/A	-5.75	0.02	Yes
Aver. Amt. Pd Adjust. ( include \$0)	N/A	\$47	N/A	\$97	N/A	\$185	N/A	104.60	91.40	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	20.27	N/A	27.54	N/A	27.63	N/A	35.86	0.35	Yes
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	\$3	No	\$3	No	\$3	No	0.00	0.00	Yes
Total number of claims with missing Medicaid eligibility (excludes S-SCHIP only)	N/A	N/A	N/A	N/A	N/A	1,851,536	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	19,078,890	N/A	20,217,068	N/A	20,782,202	N/A	5.97	2.80	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	3.45	N/A	3.51	N/A	4.26	N/A	1.77	21.33	No
% OPD Claims with Span Bill/ All OPD Claims(TOS 11)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	-93.80	888.50	No
% HH Claims with Span Bill/All HH Claims (TOS 13)	N/A	0.10	N/A	0.02	N/A	0.00	N/A	-83.60	-100.00	No
% Other Claims with Span Bills/All Other Claims	N/A	3.93	N/A	3.98	N/A	4.84	N/A	1.16	21.64	No
% Claims W/ Service Place 11- Office	50-90	39.55	No	39.15	No	37.42	No	-1.02	-4.41	Yes
% Claims W/ Service Place 12 - Home	>0-5	3.96	Yes	5.06	No	5.53	No	27.89	9.38	Yes
% Claims W/ Service Place 21 - Hospital	>0-5	26.27	No	26.31	No	26.29	No	0.18	-0.09	Yes
% Claims W/ Service Place 32 - NF	>0-5	0.22	Yes	0.19	Yes	0.15	Yes	-13.40	-21.80	No
% Claims W/ Service Place 23 - ER	1-10	5.97	Yes	6.84	Yes	7.21	Yes	14.57	5.45	Yes
% Claims w/ Service Place 22 - OPD	>0-10	4.23	Yes	3.99	Yes	3.81	Yes	-5.65	-4.32	Yes
% Claims W/ Service Place 99 - Unknown/Other	<5	11.52	No	6.72	No	6.45	No	-41.70	-3.94	Yes
% Claims with TPL	>0 - 15	0.15	Yes	0.14	Yes	0.15	Yes	-7.94	2.83	Yes
Aver. TPL Paid -claims with TPL	N/A	\$55	N/A	\$60	N/A	\$55	N/A	7.73	-7.28	Yes
<b>PERCENT CLAIMS/MAX TOS</b>										
% claims MAX TOS 08: Physicians	10-35	25.18	Yes	24.35	Yes	23.20	Yes	-3.31	-4.71	Yes
% claims MAX TOS 09: Dental	2-20	7.34	Yes	7.74	Yes	7.27	Yes	5.42	-6.10	Yes
% claims MAX TOS 10: Other Practioner	0.5-8	1.37	Yes	1.13	Yes	1.08	Yes	-17.20	-4.51	Yes
% claims MAX TOS 11: OPD	3-25	10.86	Yes	10.35	Yes	10.70	Yes	-4.69	3.33	Yes
% claims MAX TOS 12: Clinic	2-25	1.90	No	2.17	Yes	2.28	Yes	14.06	5.23	Yes
% claims MAX TOS 13: HH	>0-25	1.39	Yes	1.34	Yes	1.21	Yes	-3.72	-9.50	Yes
% claims MAX TOS 15: Lab/Xray	4-20	27.14	No	27.99	No	27.45	No	3.13	-1.92	Yes
% claims MAX TOS 16: Drugs	<3	2.89	Yes	0.02	Yes	0.05	Yes	-99.40	190.80	No
% claims MAX TOS 19: Other Services	<25	8.13	Yes	11.37	Yes	12.73	Yes	39.84	11.94	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
% claims MAX TOS 51: DME	>3	3.00	Yes	3.13	Yes	3.21	Yes	4.14	2.64	Yes
% claims MAX TOS 26: Transportation	>1	2.73	Yes	2.74	Yes	2.73	Yes	0.40	-0.31	Yes
% claims MAX TOS 24: Sterilizations	N/A	0.05	N/A	0.03	N/A	0.03	N/A	-25.60	-0.75	Yes
% claims MAX TOS 25: Abortions	N/A	0.00	N/A	0.00	N/A	0.00	N/A	-76.40	289.10	No
% claims MAX TOS 30: PCS	>0	0.11	Yes	0.40	Yes	1.08	Yes	266.20	170.20	No
% claims MAX TOS 31: TCM	>0	0.50	Yes	0.54	Yes	0.51	Yes	8.01	-5.52	Yes
% claims MAX TOS 33: Rehabilitation	>0	0.18	Yes	0.18	Yes	0.22	Yes	-1.23	22.02	No
% claims MAX TOS 34: PT/OT/hear/speech	>1	4.02	Yes	4.44	Yes	3.93	Yes	10.44	-11.30	Yes
% claims MAX TOS 35: Hospice	>0	0.05	Yes	0.06	Yes	0.07	Yes	20.79	14.24	Yes
% claims MAX TOS 36: Nurse Midwife	N/A	0.68	N/A	0.70	N/A	0.91	N/A	3.33	30.17	No
% claims MAX TOS 37: Nurse Practitioner	N/A	0.06	N/A	0.05	N/A	0.06	N/A	-8.44	17.00	No
% claims MAX TOS 38: Private Nursing	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 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	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	>1	1.07	Yes	1.06	Yes	1.28	Yes	-0.92	20.26	No
% claims MAX TOS 54: Adult Day Care	>0	0.32	Yes	0.22	Yes	0.00	No	-31.50	-100.00	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	\$60	N/A	\$64	N/A	\$66	N/A	7.85	2.64	Yes
08: Physicians	\$20-90	\$55	Yes	\$58	Yes	\$59	Yes	4.98	1.05	Yes
09: Dental	\$10-60	\$32	Yes	\$34	Yes	\$36	Yes	7.04	6.07	Yes
10: Other Practioner	\$10-100	\$54	Yes	\$74	Yes	\$80	Yes	37.70	7.32	Yes
11: OPD	\$20-100	\$72	Yes	\$75	Yes	\$70	Yes	3.86	-7.22	Yes
12: Clinic	\$20-100	\$101	No	\$101	No	\$101	No	-0.03	-0.09	Yes
13: HH	N/A	\$106	N/A	\$105	N/A	\$105	N/A	-0.87	0.01	Yes
15: Lab/Xray	10-60	\$30	Yes	\$28	Yes	\$29	Yes	-4.33	4.46	Yes
16: Drugs	10-60	\$9	No	\$30	Yes	\$64	No	221.20	111.30	No
19: Other Services	N/A	\$119	N/A	\$115	N/A	\$126	N/A	-3.76	10.39	Yes
51: DME	N/A	\$94	N/A	\$76	N/A	\$68	N/A	-18.70	-10.80	Yes
26: Transportation	N/A	\$73	N/A	\$72	N/A	\$74	N/A	-0.84	2.22	Yes
30: PCS	N/A	\$285	N/A	\$295	N/A	\$309	N/A	3.62	4.70	Yes
31: Targeted Case Management	N/A	\$155	N/A	\$170	N/A	\$174	N/A	9.45	2.34	Yes
33: Rehabilitation	N/A	\$31	N/A	\$30	N/A	\$37	N/A	-4.74	24.73	No
34: PT/OT/speech/hear	N/A	\$16	N/A	\$20	N/A	\$21	N/A	25.71	1.73	Yes
35: Hospice	N/A	\$1,599	N/A	\$1,749	N/A	\$1,834	N/A	9.42	4.87	Yes
52: Residential Care	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
53: Psych. Services	N/A	\$277	N/A	\$330	N/A	\$213	N/A	19.28	-35.40	No
54: Adult Day Care	N/A	\$692	N/A	\$966	N/A	Div by 0	N/A	39.66	Div by 0	N/A
PERCENT OF CLAIMS BY PROGRAM TYPE (claim type 1)										
% Family Planning (code 2)	N/A	0.88	N/A	0.73	N/A	0.67	N/A	-17.20	-8.70	Yes
% RHC (code 3)	N/A	0.82	N/A	0.81	N/A	0.96	N/A	-0.27	17.80	No
% FQHC (code 4)	N/A	0.39	N/A	0.37	N/A	0.41	N/A	-5.30	12.47	Yes
% IHS (code 5)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% Waiver (code 6,7)	N/A	3.51	N/A	3.81	N/A	4.32	N/A	8.65	13.47	Yes
AVERAGE EXPENDITURES BY PROGRAM										
Family Planning (code 2)	N/A	\$37	N/A	\$41	N/A	\$39	N/A	11.26	-5.59	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 Change Within Expected Range
RHC (code 3)	N/A	\$79	N/A	\$91	N/A	\$93	N/A	16.40	1.71	Yes
FQHC (code 4)	N/A	\$100	N/A	\$122	N/A	\$125	N/A	21.20	3.03	Yes
IHS (code 5)	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
Waiver (code 6, 7)	N/A	\$367	N/A	\$425	N/A	\$368	N/A	15.71	-13.40	Yes
% Claims with DX	> 60	86.66	Yes	87.50	Yes	86.59	Yes	0.97	-1.05	Yes
% Claims with DX (MAX TOS 8, 11, 12)	85-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with 1 DX that have 2 DX	N/A	21.66	N/A	32.23	N/A	38.44	N/A	48.77	19.29	No
% Claims with DX, where length=3	5-25	8.72	Yes	7.65	Yes	7.32	Yes	-12.20	-4.36	Yes
% Claims with DX, where length=4	40-70	60.28	Yes	59.51	Yes	58.46	Yes	-1.28	-1.76	Yes
% Claims with DX, where length=5	20-55	31.01	Yes	32.84	Yes	34.22	Yes	5.91	4.20	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	99.92	Yes	99.91	Yes	99.91	Yes	-0.01	0.00	Yes
% CPT-4 Service Code Indicator (code 01)/Claims with Service Codes	N/A	66.87	N/A	73.99	N/A	72.80	N/A	10.65	-1.61	Yes
% HCPCS (II & III) Service Codes Indicator (code 06)/Claims with Service Codes	N/A	26.07	N/A	22.60	N/A	22.57	N/A	-13.30	-0.10	Yes
% Other National Code Indicator (codes 2-5, 7- 9)/Claims with Service Codes	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% State Specific Serv. Indicator (10-87)/Claims with Service Codes	N/A	5.78	N/A	3.41	N/A	3.48	N/A	-40.90	1.94	Yes
% 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	100.00	Yes	100.00	Yes	0.00	0.00	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	90.17	N/A	N/A	N/A	N/A
CLTC Non-Waiver Claims (11-20)	N/A	N/A	N/A	N/A	N/A	5.52	N/A	N/A	N/A	N/A
CLTC 11: Non-Waiver Personal Care	N/A	N/A	N/A	N/A	N/A	1.08	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	1.19	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	0.37	N/A	N/A	N/A	N/A
CLTC 18: Non-Waiver Transportation	N/A	N/A	N/A	N/A	N/A	1.87	N/A	N/A	N/A	N/A
CLTC 19: Non-Waiver Hospice	N/A	N/A	N/A	N/A	N/A	0.07	N/A	N/A	N/A	N/A
CLTC 20: Non-Waiver DME	N/A	N/A	N/A	N/A	N/A	0.95	N/A	N/A	N/A	N/A
CLTC Waiver Claims (30-40)	N/A	N/A	N/A	N/A	N/A	4.32	N/A	N/A	N/A	N/A
CLTC 30: Other Waiver	N/A	N/A	N/A	N/A	N/A	4.01	N/A	N/A	N/A	N/A
CLTC 31: Waiver Personal Care	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A
CLTC 32: Waiver PDN	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A
CLTC 33: Waiver Adult Day	N/A	N/A	N/A	N/A	N/A	0.00	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



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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	0.00	N/A	N/A	N/A	N/A
CLTC 36: Waiver Rehab	N/A	N/A	N/A	N/A	N/A	0.21	N/A	N/A	N/A	N/A
CLTC 37: Waiver TCM	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A
CLTC 38: Waiver Transportation	N/A	N/A	N/A	N/A	N/A	0.00	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	0.10	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	3,561,685	N/A	1,742,220	N/A	1,851,500	N/A	-51.10	6.27	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	1.26	N/A	2.14	N/A	1.93	N/A	70.06	-9.84	Yes
% OPD Claims with Span Bill/ All OPD Claims(TOS 11)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% HH Claims with Span Bill/All HH Claims (TOS 13)	N/A	89.66	N/A	Div by 0	N/A	87.50	N/A	Div by 0	Div by 0	N/A
% Other Claims with Span Bills/All Other Claims	N/A	1.26	N/A	2.16	N/A	2.02	N/A	71.20	-6.76	Yes
<b>PERCENT CLAIMS/MAX TOS (excluding 20-22)</b>										
% claims MAX TOS 08: Physicians	N/A	60.22	N/A	46.02	N/A	42.42	N/A	-23.60	-7.81	Yes
% claims MAX TOS 10: Other Practioner	N/A	1.97	N/A	1.67	N/A	1.39	N/A	-15.30	-16.80	No
% claims MAX TOS 11: OPD	N/A	0.31	N/A	0.92	N/A	4.22	N/A	195.40	357.70	No
% claims MAX TOS 12: Clinic	N/A	1.93	N/A	3.84	N/A	3.98	N/A	98.65	3.77	Yes
% claims MAX TOS 13: HH	N/A	0.00	N/A	0.00	N/A	0.00	N/A	-100.00	Div by 0	N/A
% claims MAX TOS 15: Lab/Xray	N/A	16.18	N/A	24.74	N/A	27.70	N/A	52.90	11.95	Yes
% claims MAX TOS 19: Other Services	N/A	0.01	N/A	0.02	N/A	0.04	N/A	139.70	51.06	No
% claims MAX TOS 51: DME	N/A	9.25	N/A	10.01	N/A	9.62	N/A	8.18	-3.89	Yes
% claims MAX TOS 26: Transportation	N/A	7.79	N/A	9.90	N/A	8.01	N/A	27.08	-19.10	No
% 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	0.07	N/A	0.00	N/A	0.00	N/A	-94.60	-75.50	No
% claims MAX TOS 34: PT/OT/hear/speech	N/A	0.38	N/A	0.32	N/A	0.43	N/A	-16.70	37.04	No
% 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	1.69	N/A	2.51	N/A	2.12	N/A	48.77	-15.70	No
% 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	\$21	N/A	\$26	N/A	\$28	N/A	23.52	9.28	Yes
% Claims with DX	N/A	99.97	N/A	100.00	N/A	100.00	N/A	0.03	0.00	Yes
% Claims with DX (MAX TOS 8, 11, 12)	85-100	99.99	Yes	100.00	Yes	100.00	Yes	0.01	0.00	Yes
% Claims with 1 DX that have 2 DX	N/A	8.68	N/A	10.56	N/A	13.35	N/A	21.68	26.45	No
% Claims with DX, where length=3	5-25	11.20	Yes	9.83	Yes	8.49	Yes	-12.30	-13.60	Yes
% Claims with DX, where length=4	40-70	82.95	No	82.66	No	82.11	No	-0.35	-0.67	Yes
% Claims with DX, where length=5	20-55	5.85	No	7.51	No	9.40	No	28.38	25.15	No
% 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	Div by 0	N/A	100.00	N/A	Div by 0	Div by 0	N/A
% Other Claims with Service Codes/All Other Claims (Excluding OPD/HH)	98-100	98.20	Yes	95.10	No	91.19	No	-3.16	-4.11	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 Change Within Expected Range
% CPT-4 Service Code Indicator (code 01)/Claims with Service Codes	N/A	79.98	N/A	75.32	N/A	76.61	N/A	-5.82	1.71	Yes
% HCPCS (II & III) Service Codes Indicator (code 06)/Claims with Service Codes	N/A	19.77	N/A	24.38	N/A	23.39	N/A	23.30	-4.05	Yes
% Other Codes Indicator /Claims with Service Codes	N/A	0.25	N/A	0.31	N/A	0.00	N/A	20.25	-98.40	No

2003-2005 MAX RX VALIDATION TABLE  
STATE: LA

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	14,100,808	N/A	14,846,497	N/A	15,173,016	N/A	5.29	2.20	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	14,100,808	N/A	14,846,497	N/A	15,173,016	N/A	5.29	2.20	Yes
% Adjusted Claims	N/A	2.49	N/A	2.25	N/A	3.79	N/A	-9.72	68.50	No
% Standard Adjustments	> 1%	98.43	Yes	99.97	Yes	100.00	Yes	1.57	0.03	Yes
Aver. Amt. Pd Adjust. ( include \$0)	N/A	\$71	N/A	\$85	N/A	\$80	N/A	19.87	-6.27	Yes
Total number of claims with missing Medicaid eligibility (excludes S-SCHIP only)	N/A	N/A	N/A	N/A	N/A	440,202	N/A	N/A	N/A	N/A
<b>FFS Claims (Type of Claim=1)</b>										
Total Number of Claims	N/A	14,100,808	N/A	14,846,497	N/A	15,173,016	N/A	5.29	2.20	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	\$57	Yes	\$63	No	\$66	No	11.13	4.23	Yes
% Claims with TPL	>0 - 15	0.16	Yes	0.05	Yes	0.00	Yes	-69.10	-98.60	No
Aver. TPL Paid for claims with TPL	N/A	\$49	N/A	\$50	N/A	\$47	N/A	1.85	-6.84	Yes
% Family Planning Claims (program type=2)	N/A	1.25	N/A	1.30	N/A	1.28	N/A	4.31	-1.31	Yes
% Drug Claims (TOS 16)	95-99	99.43	No	99.41	No	99.38	No	-0.02	-0.03	Yes
% DME Claims (TOS 51)	>0 - 6	0.57	Yes	0.59	Yes	0.62	Yes	3.96	4.65	Yes
% Drug Claims with Quantity	>98	99.91	Yes	99.88	Yes	99.42	Yes	-0.03	-0.46	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	99.99	Yes	100.00	Yes	100.00	Yes	0.01	0.00	Yes
% Claims with Medispan	98-100	99.37	Yes	99.53	Yes	99.77	Yes	0.16	0.25	Yes
% Claims with AHFS	98-100	99.99	Yes	100.00	Yes	100.00	Yes	0.01	0.00	Yes
% Claims with Generic (GTC)	98-100	99.99	Yes	100.00	Yes	100.00	Yes	0.01	0.00	Yes
% Claims with GC3	98-100	99.99	Yes	100.00	Yes	100.00	Yes	0.01	0.00	Yes
<b>NDC Configuration Indicator</b>										
% Prescription (codes 0-3)	N/A	76.59	N/A	74.53	N/A	71.96	N/A	-2.69	-3.45	Yes
% Products (codes 4-6)	N/A	23.29	N/A	25.35	N/A	27.92	N/A	8.84	10.15	Yes
% HRI (code 7)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	30.12	-4.53	Yes
% Claims with Smart Key	98-100	99.99	Yes	100.00	Yes	100.00	Yes	0.01	0.00	Yes
% OTC-Drug Class	N/A	2.51	N/A	2.40	N/A	2.56	N/A	-4.52	6.90	Yes
% Prescription-Drug Class	N/A	97.48	N/A	97.60	N/A	97.44	N/A	0.12	-0.17	Yes
% Multiple Source (Code Y)	N/A	47.74	N/A	48.93	N/A	52.36	N/A	2.50	6.99	Yes
% Single Source (Code N)	N/A	45.95	N/A	41.97	N/A	40.26	N/A	-8.66	-4.07	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: LA

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	1,130,663	N/A	1,215,412	N/A	1,244,886	N/A	7.50	2.43	10% (+/-)	Yes
Total Medicaid Amount Paid	N/A	\$3,771,229,747	N/A	\$4,147,112,260	N/A	\$4,337,789,040	N/A	9.97	4.60	15% (+/-)	Yes
% with no services (Code 0)	N/A	8.57	N/A	8.64	N/A	9.39	N/A	0.84	8.66	N/A	N/A
% with FFS only claims (Code 1)	N/A	20.98	N/A	17.56	N/A	18.60	N/A	-16.30	5.89	N/A	N/A
% with only cap claims (Code 2)	N/A	6.42	N/A	7.59	N/A	7.54	N/A	18.17	-0.61	N/A	N/A
% with only encounter claims (Code 3)	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 cap claims (Code 4)	N/A	64.03	N/A	66.21	N/A	64.47	N/A	3.40	-2.62	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	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	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	72,984	N/A	45,899	N/A	78,733	N/A	-37.10	71.54	N/A	N/A
% with claims and missing Medicaid eligibility (excludes S-SCHIP only)	<2%	6.45	No	3.78	No	6.32	No	-41.50	67.47	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	74,753	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	6.00	N/A	N/A	N/A	N/A	N/A
Expenditures for people missing Medicaid eligibility (excludes S-SCHIP only enrollees)	N/A	\$160,827,637	N/A	\$68,997,281	N/A	\$197,630,240	N/A	-57.10	186.40	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	\$197,587,667	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	1,057,679	N/A	1,169,513	N/A	1,166,153	N/A	10.57	-0.29	10% (+/-)	Yes
Total Medicaid PYE (Person Years of Enrollment)	N/A	906,460	N/A	962,664	N/A	1,009,060	N/A	6.20	4.82	10% (+/-)	Yes
# with any M-SCHIP enrollment (Medicaid enrollees)	N/A	129,851	N/A	147,741	N/A	145,228	N/A	13.78	-1.70	N/A	N/A
Total PYE any M-SCHIP	N/A	90,037	N/A	102,560	N/A	108,544	N/A	13.91	5.83	N/A	N/A
<b>Eligibility Demographics</b>											
% Records with Valid SSN Format	>=95%	99.95	Yes	99.95	Yes	97.48	Yes	-0.01	-2.47	10% (+/-)	Yes
% Records whose MSIS SSN passed High Group Test (Code 1)	>95%	N/A	No	N/A	No	96.67	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	0.00	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	0.80	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	0	Yes	0	Yes	0	Yes	Div by 0	Div by 0	N/A	N/A
% with External SSN from EDB (Code 1)	N/A	N/A	N/A	N/A	N/A	16.68	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%	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	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%	1.47	Yes	1.31	Yes	1.50	Yes	-11.30	14.62	10% (+/-)	No
% White	N/A	36.18	N/A	36.73	N/A	37.19	N/A	1.504	1.25	10% (+/-)	Yes
% Black	N/A	56.40	N/A	55.50	N/A	54.70	N/A	-1.59	-1.44	10% (+/-)	Yes
% Native American/Alaskan Native	N/A	0.25	N/A	0.28	N/A	0.31	N/A	13.00	8.75	10% (+/-)	Yes
% Asian	N/A	0.49	N/A	0.63	N/A	0.73	N/A	26.77	17.13	N/A	N/A
% Native Hawaiian or other Pacific Islander	N/A	0.02	N/A	0.02	N/A	0.02	N/A	22.92	16.60	N/A	N/A
% More than one race	N/A	0.05	N/A	0.10	N/A	0.00	N/A	81.03	-100.00	N/A	N/A
% Unknown race	<5%	5.81	No	5.73	No	7.05	No	-1.48	23.14	N/A	N/A
% Hispanic/Latino (included with race categories prior to 2005)	N/A	0.79	N/A	1.02	N/A	1.22	N/A	28.74	19.02	10% (+/-)	No
% 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%	4.18	Yes	5.86	Yes	4.15	Yes	40.09	-29.10	10% (+/-)	No
% Age 0-20 Years	49-74%	66.60	Yes	67.96	Yes	66.22	Yes	2.04	-2.55	10% (+/-)	Yes
% Age > 64 Years	5-18%	10.08	Yes	9.39	Yes	9.58	Yes	-6.87	2.07	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	99.99	N/A	99.99	N/A	99.99	N/A	0.00	0.00	N/A	N/A
% Enrollees with 12 months enrollment	40-65%	70.96	No	66.42	No	73.69	No	-6.40	10.94	10% (+/-)	No

2003-2005 MAX PSF VALIDATION TABLE  
STATE: LA

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	161,794	N/A	168,452	N/A	174,572	N/A	4.12	3.63	10% (+/-)	Yes
Total EDB Dual PYE	N/A	144,870	N/A	150,843	N/A	157,625	N/A	4.12	4.50	15% (+/-)	Yes
% Age > 64 Years who are EDB Duals	>=90%	96.60	Yes	96.62	Yes	96.58	Yes	0.01	-0.04	10% (+/-)	Yes
% MAX Aged Groups (11,21,31,41,51) who are EDB Duals	>=90%	95.59	Yes	96.67	Yes	96.70	Yes	1.13	0.04	10% (+/-)	Yes
% MAX Disabled Groups (12,22,32,42,52) who are EDB Duals	30-55%	31.78	Yes	31.98	Yes	33.07	Yes	0.65	3.39	10% (+/-)	Yes
% EDB Only (50)	<5%	3.09	Yes	1.13	Yes	0.66	Yes	-63.40	-41.40	N/A	N/A
% EDB QMB Only (51)	N/A	17.02	N/A	18.51	N/A	21.74	N/A	8.75	17.48	N/A	N/A
% EDB QMB Plus (52)	N/A	65.56	N/A	51.93	N/A	46.29	N/A	-20.80	-10.90	N/A	N/A
% EDB SLMB Only (53)	N/A	9.36	N/A	10.12	N/A	10.69	N/A	8.10	5.66	N/A	N/A
% EDB SLMB Plus (54)	N/A	0.07	N/A	2.44	N/A	2.84	N/A	3,306.00	16.15	N/A	N/A
% EDB QDWI (55)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	-3.95	-100.00	N/A	N/A
% EDB QI-1 (56)	N/A	4.88	N/A	5.50	N/A	5.63	N/A	12.59	2.31	N/A	N/A
% EDB QI-2 (57)	N/A	0.01	N/A	0.00	N/A	0.00	N/A	-63.10	-3.51	N/A	N/A
% EDB Other (58)	N/A	0.01	N/A	10.37	N/A	12.14	N/A	129,000.00	17.13	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	2,263	N/A	3,576	N/A	2,865	N/A	58.02	-19.90	10% (+/-)	No
% Non-EDB Duals Without Valid SSN	N/A	0.09	N/A	0.20	N/A	0.07	N/A	121.50	-64.30	10% (+/-)	No
% Non-EDB Duals who are Children/Adults	N/A	1.94	N/A	2.13	N/A	1.33	N/A	9.31	-37.60	10% (+/-)	No
% EDB Duals with Spanish Language	N/A	0.41	N/A	0.42	N/A	0.44	N/A	3.48	3.43	15% (+/-)	Yes
% EDB Duals with EDB Date of Death During Year	6-10%	7.82	Yes	7.50	Yes	7.82	Yes	-4.13	4.34	15% (+/-)	Yes
% EDB Duals with Medicaid Reported HIC	N/A	96.25	N/A	98.72	N/A	99.26	N/A	2.57	0.55	15% (+/-)	Yes
% EDB Duals with Medicaid reported HIC = Medicare HIC	N/A	97.83	N/A	98.91	N/A	99.52	N/A	1.10	0.62	15% (+/-)	Yes
TOTAL EDB DUAL ENROLLEES IN JUNE	N/A	152,179	N/A	158,411	N/A	164,568	N/A	4.10	3.89	10% (+/-)	Yes
<b>June Medicare Type</b>											
June % with Part A Medicare	N/A	0.88	N/A	0.88	N/A	0.94	N/A	-0.13	7.04	15% (+/-)	Yes
June % with Part B Medicare	N/A	3.25	N/A	2.62	N/A	2.55	N/A	-19.40	-2.51	15% (+/-)	Yes
June % Part A/B Medicare	N/A	95.87	N/A	96.50	N/A	96.51	N/A	0.66	0.00	15% (+/-)	Yes
<b>Original Reason for Medicare Entitlement</b>											
% Aged (Code 0)	N/A	51.71	N/A	50.87	N/A	49.71	N/A	-1.62	-2.29	15% (+/-)	Yes
% Disabled (Code 1)	N/A	46.01	N/A	46.94	N/A	48.10	N/A	2.03	2.47	15% (+/-)	Yes
% ESRD (Code 2)	N/A	0.98	N/A	1.01	N/A	0.87	N/A	2.77	-13.60	15% (+/-)	Yes
% Disabled with ESRD (Code 3)	N/A	1.30	N/A	1.18	N/A	1.32	N/A	-9.29	11.88	15% (+/-)	Yes
<b>Other Eligibility Characteristics (All Enrollees)</b>											
% MAX Aged Groups (11,21,31,41,51) >64 Years	>=99%	98.14	No	100.00	Yes	99.96	Yes	1.90	-0.04	10% (+/-)	Yes
% MAX Disabled Groups (12,22,32,42,52) >64 Years	N/A	0.28	N/A	0.31	N/A	0.31	N/A	13.60	-2.19	10% (+/-)	Yes
% MAX Child Grps (14,16, 24, 34, 44, 48, 54) <21 Years	>=98%	99.99	Yes	99.99	Yes	99.98	Yes	0.00	-0.01	10% (+/-)	Yes
% MAX Adult Groups (15,17,25,35,45,55) >20 Years	>=80%	85.74	Yes	86.71	Yes	88.11	Yes	1.13	1.61	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	1.29	N/A	N/A	N/A	N/A	N/A
MAX Aged Total	N/A	108,134	N/A	109,186	N/A	111,175	N/A	0.97	1.82	10% (+/-)	Yes
11: Aged, Cash	N/A	42,371	N/A	41,310	N/A	38,621	N/A	-2.50	-6.51	10% (+/-)	Yes
21: Aged, MN	N/A	1,574	N/A	1,609	N/A	1,587	N/A	2.22	-1.37	10% (+/-)	Yes
31: Aged, Poverty	N/A	34,731	N/A	38,638	N/A	43,147	N/A	11.25	11.67	10% (+/-)	No
41: Other Aged	N/A	29,458	N/A	27,629	N/A	27,757	N/A	-6.21	0.46	10% (+/-)	Yes
51: 1115 Aged	N/A	0	N/A	0	N/A	63	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Disabled Total	N/A	182,079	N/A	195,020	N/A	201,014	N/A	7.11	3.07	10% (+/-)	Yes
12: Disabled, Cash	N/A	148,454	N/A	155,451	N/A	154,807	N/A	4.71	-0.41	10% (+/-)	Yes
22: Disabled, MN	N/A	2,329	N/A	2,327	N/A	2,564	N/A	-0.09	10.18	10% (+/-)	No
32: Disabled, Poverty	N/A	18,021	N/A	21,254	N/A	25,571	N/A	17.94	20.31	10% (+/-)	No
42: Other Disabled	N/A	13,275	N/A	15,988	N/A	18,070	N/A	20.44	13.02	10% (+/-)	No
52: 1115 Disabled	N/A	0	N/A	0	N/A	2	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Child Total	N/A	645,282	N/A	733,240	N/A	710,679	N/A	13.63	-3.08	10% (+/-)	Yes
14: AFDC Child, Cash	N/A	92,093	N/A	104,701	N/A	100,305	N/A	13.69	-4.20	10% (+/-)	Yes

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16: AFDC-U Child, Cash	N/A	3,094	N/A	4,980	N/A	6,393	N/A	60.96	28.37	10% (+/-)	No
24: AFDC Child, MN	N/A	644	N/A	909	N/A	880	N/A	41.15	-3.19	10% (+/-)	Yes
34: Child Poverty	N/A	496,873	N/A	541,040	N/A	535,904	N/A	8.89	-0.95	10% (+/-)	Yes
44: Other Child	N/A	43,155	N/A	71,902	N/A	57,072	N/A	66.61	-20.60	10% (+/-)	No
48: Foster Care Child	N/A	9,423	N/A	9,708	N/A	10,076	N/A	3.03	3.79	10% (+/-)	Yes
54: 1115 Child	N/A	0	N/A	0	N/A	49	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Adult Total	N/A	122,184	N/A	132,067	N/A	143,285	N/A	8.09	8.49	10% (+/-)	Yes
15: AFDC Adult, Cash	N/A	56,970	N/A	59,806	N/A	63,499	N/A	4.98	6.18	10% (+/-)	Yes
17: AFDC-U Adult, Cash	N/A	4,638	N/A	6,361	N/A	9,561	N/A	37.15	50.31	10% (+/-)	No
25: AFDC Adult, MN	N/A	7,897	N/A	8,835	N/A	8,942	N/A	11.88	1.21	10% (+/-)	Yes
35: Adult, Poverty	N/A	45,253	N/A	47,675	N/A	51,279	N/A	5.35	7.56	10% (+/-)	Yes
45: Other Adult	N/A	7,426	N/A	9,390	N/A	9,966	N/A	26.45	6.13	10% (+/-)	Yes
55: 1115 Adult	N/A	0	N/A	0	N/A	38	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	47,002	N/A	46,197	N/A	46,000	N/A	-1.71	-0.43	N/A	N/A
% enrollees with any ILTC claims	N/A	4.44	N/A	3.95	N/A	3.94	N/A	-11.10	-0.14	N/A	N/A
% AGED enrollees with any ILTC claims	N/A	25.04	N/A	23.86	N/A	23.33	N/A	-4.71	-2.20	N/A	N/A
% DISABLED enrollees with any ILTC claims	N/A	9.24	N/A	8.44	N/A	8.25	N/A	-8.67	-2.21	N/A	N/A
% CHILD enrollees with any ILTC claims	N/A	0.33	N/A	0.32	N/A	0.30	N/A	-1.44	-6.39	N/A	N/A
% ADULT enrollees with any ILTC claims	N/A	0.82	N/A	1.01	N/A	0.93	N/A	23.14	-7.90	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	31,332	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	2.69	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	4.61	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	9.24	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	0.94	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	0.67	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	2,469	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	9,325	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	0.80	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	2.68	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	3.12	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	0.01	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	3,835	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	0	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	4	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	5,486	N/A	N/A	N/A	15% (+/-)	No
# with Section 1915(c) waiver for People with M/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	0	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	1.17	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	49.93	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	11,762	N/A	N/A	N/A	15% (+/-)	No
% AGED enrollees with any 1115 waiver	N/A	N/A	N/A	N/A	N/A	0.29	N/A	N/A	N/A	15% (+/-)	No
% DISABLED enrollees with any 1115 waiver	N/A	N/A	N/A	N/A	N/A	0.27	N/A	N/A	N/A	15% (+/-)	No
% CHILD enrollees with any 1115 waiver	N/A	N/A	N/A	N/A	N/A	0.72	N/A	N/A	N/A	15% (+/-)	No
% ADULT enrollees with any 1115 waiver	N/A	N/A	N/A	N/A	N/A	4.05	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	854,251	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	0.99	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	57.93	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	89.51	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	70.20	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 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	11,762	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	514	N/A	746	N/A	903	N/A	45.14	21.05	N/A	N/A
# Aliens with ANY restricted benefits	N/A	548	N/A	799	N/A	984	N/A	45.80	23.15	N/A	N/A
# PYE Aliens with ANY restricted benefits	N/A	49	N/A	71	N/A	97	N/A	45.08	35.75	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	48,206	N/A	55,042	N/A	60,255	N/A	14.18	9.47	N/A	N/A
# EDB Duals with ANY restricted benefits enrollment	N/A	52,533	N/A	60,022	N/A	69,209	N/A	14.26	15.31	N/A	N/A
# PYE EDB Duals with ANY restricted benefits	N/A	44,079	N/A	50,607	N/A	56,758	N/A	14.81	12.16	N/A	N/A
% EDB Duals with ONLY restricted benefits enrollment	N/A	N/A	N/A	N/A	N/A	34.52	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>											
TOTAL ENROLLEES IN JUNE	N/A	903,078	N/A	957,557	N/A	1,003,751	N/A	6.03	4.82	15% (+/-)	Yes
June % Full Scope Benefits (Code 1)	>80%	91.80	Yes	91.47	Yes	91.10	Yes	-0.36	-0.41	15% (+/-)	Yes
June % Restricted Benefits Alien (Code 2)	<5%	0.01	Yes	0.01	Yes	0.01	Yes	1.86	62.53	15% (+/-)	No
June % Restricted Benefits Dual (Code 3)	<5%	4.93	Yes	5.33	No	5.66	No	8.21	6.19	15% (+/-)	Yes
June % Restricted Benefits Pregnant (Code 4)	<5%	2.67	Yes	2.52	Yes	2.56	Yes	-5.61	1.42	15% (+/-)	Yes
June % Restricted Benefits Other (Code 5)	0%	0.59	No	0.67	No	0.67	No	13.38	0.31	15% (+/-)	Yes
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%	4.03	Yes	3.83	Yes	4.21	Yes	-4.78	9.86	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	55,215	N/A	35,753	N/A	26,818	N/A	-35.20	-25.00	15% (+/-)	No
June # with M-SCHIP (Code 2) - Child (<19 Years)	N/A	86,831	N/A	98,839	N/A	105,025	N/A	13.83	6.26	15% (+/-)	Yes
June # with M-SCHIP (Code 2) - Adult (>18 Years)	N/A	2,644	N/A	3,184	N/A	3,440	N/A	20.42	8.04	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	\$3,610,402,110	N/A	\$4,078,114,979	N/A	\$4,140,158,800	N/A	12.95	1.52	15% (+/-)	Yes
Average Medicaid Amt Paid per Enrollee	N/A	\$3,414	N/A	\$3,487	N/A	\$3,550	N/A	2.15	1.81	15% (+/-)	Yes
25th Percentile	N/A	\$130	N/A	\$131	N/A	\$117	N/A	0.77	-10.70	15% (+/-)	Yes
50th Percentile (Median)	N/A	\$565	N/A	\$579	N/A	\$556	N/A	2.48	-3.97	15% (+/-)	Yes
75th Percentile	N/A	\$1,997	N/A	\$1,988	N/A	\$1,975	N/A	-0.45	-0.65	15% (+/-)	Yes
95th Percentile	N/A	\$16,043	N/A	\$15,840	N/A	\$15,961	N/A	-1.27	0.76	15% (+/-)	Yes
99th Percentile	N/A	\$49,605	N/A	\$51,085	N/A	\$52,834	N/A	2.98	3.42	15% (+/-)	Yes
<b>AVG MEDICAID AMT PD/ENROLLEE BY MAX ELIGIBILITY GROUP</b>											
MAX Aged	N/A	\$8,180	N/A	\$8,241	N/A	\$8,645	N/A	0.74	4.91	15% (+/-)	Yes
MAX Disabled	N/A	\$9,735	N/A	\$10,225	N/A	\$10,257	N/A	5.03	0.31	10% (+/-)	Yes
MAX Child	N/A	\$956	N/A	\$1,083	N/A	\$1,003	N/A	13.27	-7.36	10% (+/-)	Yes
MAX Adult	N/A	\$2,753	N/A	\$2,955	N/A	\$2,821	N/A	7.32	-4.52	10% (+/-)	Yes
<b>AVG MEDICAID AMT PD/EDB DUAL ENROLLEE</b>											
All EDB Dual Enrollees	N/A	\$8,619	N/A	\$8,689	N/A	\$9,031	N/A	0.82	3.93	15% (+/-)	Yes
MAX Aged	N/A	\$8,096	N/A	\$8,136	N/A	\$8,537	N/A	0.50	4.92	10% (+/-)	Yes
MAX Disabled	N/A	\$9,586	N/A	\$9,654	N/A	\$9,871	N/A	0.71	2.25	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	\$32,945	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	\$26,207	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	\$34,274	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	\$43,607	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	\$28,309	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	Div by 0	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	\$7,895	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	\$54,326	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	Div by 0	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	\$30,831	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	\$10,352	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	Div by 0	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	\$0	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	\$45,169	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	Div by 0	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>											
<b>Expenditures for Family Planning enrollees with Restricted Benefits</b>											
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
<b>Expenditures for Aliens with Restricted Benefits</b>											
Expend for Aliens with restricted benefits ONLY enrollment	N/A	\$1,463,140	N/A	\$2,505,898	N/A	\$3,057,509	N/A	71.27	22.01	N/A	N/A
Avg Medicaid Paid for Alien enrollees with restricted benefits ONLY	N/A	\$2,847	N/A	\$3,359	N/A	\$3,386	N/A	18.01	0.80	N/A	N/A
<b>Expenditures for EDB Duals with Restricted Benefits (Medicare Cost Sharing Only - Code 3)</b>											



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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	\$25,913,407	N/A	\$16,906,786	N/A	\$18,964,373	N/A	-34.80	12.17	N/A	N/A
Avg Medicaid Paid for EDB Duals with only restricted benefit enrollment	N/A	\$538	N/A	\$307	N/A	\$315	N/A	-42.90	2.47	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)											
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	1,008,959	N/A	1,113,725	N/A	1,104,995	N/A	10.38	-0.78	10% (+/-)	Yes
MAX Aged Total	N/A	75,839	N/A	72,575	N/A	71,539	N/A	-4.30	-1.43	10% (+/-)	Yes
MAX Disabled Total	N/A	166,150	N/A	176,568	N/A	180,363	N/A	6.27	2.15	10% (+/-)	Yes
MAX Child Total	N/A	645,251	N/A	733,185	N/A	710,617	N/A	13.63	-3.08	10% (+/-)	Yes
MAX Adult Total	N/A	121,719	N/A	131,397	N/A	142,476	N/A	7.95	8.43	10% (+/-)	Yes
Total Medicaid PYE (Person Years of Enrollment)	N/A	864,355	N/A	914,192	N/A	955,264	N/A	5.77	4.49	10% (+/-)	Yes
Total EDB Duals	N/A	113,588	N/A	113,410	N/A	114,316	N/A	-0.16	0.80	10% (+/-)	Yes
MAX Aged	N/A	71,075	N/A	68,947	N/A	67,881	N/A	-2.99	-1.55	10% (+/-)	Yes
MAX Disabled	N/A	41,942	N/A	43,932	N/A	45,841	N/A	4.75	4.35	10% (+/-)	Yes
<b>Total Medicaid Amount Paid</b>											
Total Medicaid Amt Paid	N/A	\$3,583,025,563	N/A	\$4,058,702,295	N/A	\$4,118,136,918	N/A	13.28	1.46	15% (+/-)	Yes
Average Medicaid Amt Paid per Enrollee	N/A	\$3,551	N/A	\$3,644	N/A	\$3,727	N/A	2.62	2.27	15% (+/-)	Yes
<b>AVG MEDICAID AMT PD/ENROLLEE BY MAX ELIGIBILITY GROUP</b>											
MAX Aged	N/A	\$11,462	N/A	\$12,266	N/A	\$13,287	N/A	7.01	8.32	15% (+/-)	Yes
MAX Disabled	N/A	\$10,601	N/A	\$11,250	N/A	\$11,382	N/A	6.12	1.17	10% (+/-)	Yes
MAX Child	N/A	\$956	N/A	\$1,083	N/A	\$1,003	N/A	13.25	-7.34	10% (+/-)	Yes
MAX Adult	N/A	\$2,756	N/A	\$2,955	N/A	\$2,820	N/A	7.20	-4.55	10% (+/-)	Yes
<b>AVG MEDICAID AMT PD/EDB DUAL ENROLLEE</b>											
All EDB Dual Enrollees	N/A	\$12,048	N/A	\$12,758	N/A	\$13,625	N/A	5.89	6.80	15% (+/-)	Yes
MAX Aged	N/A	\$11,561	N/A	\$12,320	N/A	\$13,364	N/A	6.57	8.47	10% (+/-)	Yes
MAX Disabled	N/A	\$12,967	N/A	\$13,534	N/A	\$14,131	N/A	4.37	4.41	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	76.95	N/A	80.95	N/A	79.32	N/A	5.20	-2.01	25% (+)	Yes
Total MC Enrollees	N/A	776,400	N/A	901,552	N/A	876,533	N/A	16.12	-2.78	25% (+)	Yes
Aged	N/A	1,716	N/A	1,002	N/A	1,103	N/A	-41.60	10.08	25% (+)	Yes
Disabled	N/A	107,283	N/A	116,796	N/A	118,003	N/A	8.87	1.03	25% (+)	Yes
Child	N/A	580,606	N/A	679,078	N/A	654,832	N/A	16.96	-3.57	25% (+)	Yes
Adult	N/A	86,795	N/A	104,676	N/A	102,595	N/A	20.60	-1.99	25% (+)	Yes
% of MC Enrollees in HMO/HIO (Dups)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
% of MC Enrollees in Dental (Dups)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
% of MC Enrollees in BHO (Dups)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
% of MC Enrollees in Prenatal (Dups)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
% of MC Enrollees in LTC (Dups)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
% of MC Enrollees in PACE (Dups)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
% of MC Enrollees in PCCM (Dups)	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	25% (+)	Yes
% of MC Enrollees in Other MC (Dups)	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 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	3.94	N/A	4.99	N/A	5.84	N/A	26.70	16.92	25% (+)	Yes
% 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	30.49	N/A	N/A	N/A	25% (+)	No
TOTAL ENROLLEES IN JUNE	N/A	861,334	N/A	909,469	N/A	950,310	N/A	5.59	4.49	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	58.11	N/A	79.36	N/A	79.94	N/A	36.57	0.72	25% (+)	Yes
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	41.89	N/A	20.64	N/A	20.06	N/A	-50.70	-2.78	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	\$16,173,904	N/A	\$24,647,975	N/A	\$24,689,716	N/A	52.39	0.17	15% (+/-)	Yes
HMO/HIO	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
PHP	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
PCCM	N/A	\$16,173,904	N/A	\$24,647,975	N/A	\$24,689,716	N/A	52.39	0.17	15% (+/-)	Yes
Ratio of Cap Claims to PME (person mo. enroll.) in MC	-9-2	0.92	Yes	0.95	Yes	0.92	Yes	3.70	-3.78	15% (+/-)	Yes
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	0.92	Yes	0.95	Yes	0.92	Yes	3.70	-3.78	15% (+/-)	Yes
Average Cap Payment for PME in MC	N/A	\$3	N/A	\$3	N/A	\$3	N/A	3.70	-3.78	15% (+/-)	Yes
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	\$3	N/A	\$3	N/A	\$3	N/A	3.70	-3.78	15% (+/-)	Yes
<b>Persons enrolled in PHP only or PHP/PCCM only</b>											
Total Cap Payments	N/A	\$0	N/A	\$0	N/A	\$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	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
<b>Persons enrolled in PCCM only</b>											
Total Cap Payments	N/A	\$16,173,904	N/A	\$24,647,975	N/A	\$24,689,716	N/A	52.39	0.17	15% (+/-)	Yes
Count of Enrollees	N/A	776,400	N/A	901,552	N/A	876,533	N/A	16.12	-2.78	15% (+/-)	Yes
<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	0	N/A	0	N/A	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	\$0	N/A	\$0	N/A	\$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	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
IP	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	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
ILTC	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Drug	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
All Other (excluding cap payments)	N/A	\$0	N/A	\$0	N/A	\$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	895,371	N/A	1,000,315	N/A	990,679	N/A	11.72	-0.96	15% (+/-)	Yes
Total Non-Dual FFS Recipients	N/A	761,534	N/A	846,809	N/A	825,313	N/A	11.20	-2.54	15% (+/-)	Yes
Total Non-Dual FFS PYE	N/A	761,545	N/A	811,756	N/A	851,351	N/A	6.59	4.88	15% (+/-)	Yes
MAX Aged Total	N/A	4,764	N/A	3,628	N/A	3,658	N/A	-23.80	0.83	10% (+/-)	Yes
11: Aged, Cash	N/A	1,931	N/A	1,957	N/A	1,840	N/A	1.35	-5.98	10% (+/-)	Yes
21: Aged, MN	N/A	86	N/A	94	N/A	106	N/A	9.30	12.77	10% (+/-)	No
31: Aged, Poverty	N/A	1,173	N/A	811	N/A	847	N/A	-30.90	4.44	10% (+/-)	Yes
41: Other Aged	N/A	1,574	N/A	766	N/A	821	N/A	-51.30	7.18	10% (+/-)	Yes
51: 1115 Aged	N/A	0	N/A	0	N/A	44	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Disabled Total	N/A	124,208	N/A	132,636	N/A	134,522	N/A	6.79	1.42	10% (+/-)	Yes
12: Disabled, Cash	N/A	118,583	N/A	125,174	N/A	125,124	N/A	5.56	-0.04	10% (+/-)	Yes
22: Disabled, MN	N/A	1,637	N/A	1,717	N/A	2,133	N/A	4.89	24.23	10% (+/-)	No
32: Disabled, Poverty	N/A	267	N/A	973	N/A	1,239	N/A	264.40	27.34	10% (+/-)	No
42: Other Disabled	N/A	3,721	N/A	4,772	N/A	6,024	N/A	28.25	26.24	10% (+/-)	No
52: 1115 Disabled	N/A	0	N/A	0	N/A	2	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Child Total	N/A	645,238	N/A	733,176	N/A	710,608	N/A	13.63	-3.08	10% (+/-)	Yes
14: AFDC Child, Cash	N/A	92,093	N/A	104,701	N/A	100,305	N/A	13.69	-4.20	10% (+/-)	Yes
16: AFDC-U Child, Cash	N/A	3,094	N/A	4,980	N/A	6,393	N/A	60.96	28.37	10% (+/-)	No
24: AFDC Child, MN	N/A	643	N/A	909	N/A	880	N/A	41.37	-3.19	10% (+/-)	Yes
34: Child Poverty	N/A	496,865	N/A	541,033	N/A	535,898	N/A	8.89	-0.95	10% (+/-)	Yes
44: Other Child	N/A	43,124	N/A	71,847	N/A	57,010	N/A	66.61	-20.70	10% (+/-)	No
48: Foster Care Child	N/A	9,419	N/A	9,706	N/A	10,073	N/A	3.05	3.78	10% (+/-)	Yes
54: 1115 Child	N/A	0	N/A	0	N/A	49	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Adult Total	N/A	121,161	N/A	130,875	N/A	141,891	N/A	8.02	8.42	10% (+/-)	Yes
15: AFDC Adult, Cash	N/A	56,771	N/A	59,640	N/A	63,288	N/A	5.05	6.12	10% (+/-)	Yes
17: AFDC-U Adult, Cash	N/A	4,594	N/A	6,315	N/A	9,487	N/A	37.46	50.23	10% (+/-)	No
25: AFDC Adult, MN	N/A	7,686	N/A	8,644	N/A	8,802	N/A	12.46	1.83	10% (+/-)	Yes
35: Adult, Poverty	N/A	45,171	N/A	47,578	N/A	51,147	N/A	5.33	7.50	10% (+/-)	Yes
45: Other Adult	N/A	6,939	N/A	8,698	N/A	9,131	N/A	25.35	4.98	10% (+/-)	Yes
55: 1115 Adult	N/A	0	N/A	0	N/A	36	N/A	Div by 0	Div by 0	10% (+/-)	N/A
# Non-Dual FFS Enrollees w/ MSIS Dual Code/No EDB Confirmation	N/A	2,263	N/A	3,576	N/A	2,865	N/A	58.02	-19.90	10% (+/-)	No
Total FFS Medicaid Amt Paid	N/A	\$2,198,409,564	N/A	\$2,587,278,503	N/A	\$2,536,033,066	N/A	17.69	-1.98	15% (+/-)	Yes
Average FFS Medicaid Amt Paid per Non-Dual FFS Enrollee	N/A	\$2,455	N/A	\$2,586	N/A	\$2,560	N/A	5.34	-1.03	15% (+/-)	Yes
Avg FFS Medicaid Amt Paid per Non-Dual FFS Recipient (User of any service)	N/A	\$2,887	N/A	\$3,055	N/A	\$3,073	N/A	5.84	0.57	15% (+/-)	Yes
<b>AVG FFS MEDICAID AMT PD/NON-DUAL FFS ENROLLEE BY MAX ELIG GRP</b>											
All Aged	N/A	\$9,991	N/A	\$11,242	N/A	\$11,855	N/A	12.52	5.45	15% (+/-)	Yes
11: Aged, Cash	N/A	\$10,626	N/A	\$11,293	N/A	\$11,886	N/A	6.28	5.26	15% (+/-)	Yes
21: Aged, MN	N/A	\$10,464	N/A	\$10,785	N/A	\$10,471	N/A	3.07	-2.92	15% (+/-)	Yes
31: Aged, Poverty	N/A	\$5,618	N/A	\$179	N/A	\$293	N/A	-96.80	63.58	15% (+/-)	No
41: Other Aged	N/A	\$12,444	N/A	\$22,880	N/A	\$24,476	N/A	83.87	6.98	15% (+/-)	Yes
51: 1115 Aged	N/A	Div by 0	N/A	Div by 0	N/A	\$907	N/A	Div by 0	Div by 0	15% (+/-)	N/A
All Disabled	N/A	\$9,782	N/A	\$10,467	N/A	\$10,420	N/A	7.00	-0.45	15% (+/-)	Yes
12: Disabled, Cash	N/A	\$9,251	N/A	\$9,905	N/A	\$9,825	N/A	7.07	-0.81	15% (+/-)	Yes
22: Disabled, MN	N/A	\$12,875	N/A	\$15,031	N/A	\$13,897	N/A	16.75	-7.54	15% (+/-)	Yes
32: Disabled, Poverty	N/A	\$393	N/A	\$12,183	N/A	\$13,029	N/A	3,001.00	6.94	15% (+/-)	Yes
42: Other Disabled	N/A	\$26,017	N/A	\$23,221	N/A	\$20,986	N/A	-10.70	-9.63	15% (+/-)	Yes
52: 1115 Disabled	N/A	Div by 0	N/A	Div by 0	N/A	\$54,575	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	\$937	N/A	\$1,057	N/A	\$976	N/A	12.81	-7.60	15% (+/-)	Yes
14: AFDC Child, Cash	N/A	\$914	N/A	\$1,002	N/A	\$885	N/A	9.72	-11.70	15% (+/-)	Yes
16: AFDC-U Child, Cash	N/A	\$970	N/A	\$1,112	N/A	\$913	N/A	14.57	-17.90	15% (+/-)	No
24: AFDC Child, MN	N/A	\$1,123	N/A	\$1,283	N/A	\$997	N/A	14.28	-22.30	15% (+/-)	No
34: Child, Poverty	N/A	\$855	N/A	\$926	N/A	\$934	N/A	8.36	0.80	15% (+/-)	Yes
44: Other Child	N/A	\$1,451	N/A	\$1,776	N/A	\$1,124	N/A	22.40	-36.70	15% (+/-)	No
48: Foster Care Child	N/A	\$3,091	N/A	\$3,526	N/A	\$3,334	N/A	14.06	-5.43	15% (+/-)	Yes
54: 1115 Child	N/A	Div by 0	N/A	Div by 0	N/A	\$4,047	N/A	Div by 0	Div by 0	15% (+/-)	N/A
All Adult	N/A	\$2,735	N/A	\$2,930	N/A	\$2,799	N/A	7.11	-4.46	15% (+/-)	Yes
15: AFDC Adult, Cash	N/A	\$2,570	N/A	\$2,816	N/A	\$2,554	N/A	9.59	-9.30	15% (+/-)	Yes
17: AFDC-U Adult, Cash	N/A	\$2,397	N/A	\$2,724	N/A	\$2,007	N/A	13.66	-26.30	15% (+/-)	No
25: AFDC Adult, MN	N/A	\$3,133	N/A	\$3,376	N/A	\$3,427	N/A	7.78	1.50	15% (+/-)	Yes
35: Adult, Poverty	N/A	\$3,107	N/A	\$3,246	N/A	\$3,336	N/A	4.46	2.77	15% (+/-)	Yes
45: Other Adult	N/A	\$1,451	N/A	\$1,683	N/A	\$1,695	N/A	15.98	0.73	15% (+/-)	Yes
55: 1115 Adult	N/A	Div by 0	N/A	Div by 0	N/A	\$5,609	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	\$539,801,149	N/A	\$649,600,945	N/A	\$602,258,787	N/A	20.34	-7.29	15% (+/-)	Yes
IP: Number of Users	N/A	85,529	N/A	96,058	N/A	90,122	N/A	12.31	-6.18	15% (+/-)	Yes
IP: Average Medicaid Pd per User	N/A	\$6,311	N/A	\$6,763	N/A	\$6,683	N/A	7.15	-1.18	15% (+/-)	Yes
IP: Average Medicaid Covered Days Per User	N/A	6	N/A	6	N/A	6	N/A	0.81	0.10	15% (+/-)	Yes
MH Aged: Total Medicaid Paid (TOS 02)	N/A	\$21,613,445	N/A	\$30,961,251	N/A	\$33,386,899	N/A	43.25	7.83	15% (+/-)	Yes
MH Aged: Number of Users	N/A	4,160	N/A	4,417	N/A	4,469	N/A	6.18	1.18	15% (+/-)	Yes
MH Aged: Avg Medicaid Pd per User	N/A	\$5,196	N/A	\$7,010	N/A	\$7,471	N/A	34.92	6.58	15% (+/-)	Yes
IP Psych < 21: Total Medicaid Paid (TOS 04)	N/A	\$12,195,201	N/A	\$16,458,904	N/A	\$16,013,148	N/A	34.96	-2.71	15% (+/-)	Yes
IP Psych < 21: Number of Users	N/A	3,094	N/A	3,509	N/A	3,240	N/A	13.41	-7.67	15% (+/-)	Yes
IP Psych<21 :Avg Medicaid Pd per User	N/A	\$3,942	N/A	\$4,690	N/A	\$4,942	N/A	19.00	5.37	15% (+/-)	Yes
ICF/MR: Total Medicaid Pd (TOS 05)	N/A	\$173,768,431	N/A	\$175,731,291	N/A	\$173,338,790	N/A	1.13	-1.36	15% (+/-)	Yes
ICF/MR: Number of Users	N/A	2,583	N/A	2,533	N/A	2,385	N/A	-1.94	-5.84	15% (+/-)	Yes
ICF/MR: Avg Medicaid Pd per User	N/A	\$67,274	N/A	\$69,377	N/A	\$72,679	N/A	3.13	4.76	15% (+/-)	Yes
NF: Total Medicaid Paid (TOS 07)	N/A	\$87,212,563	N/A	\$93,973,468	N/A	\$99,291,336	N/A	7.75	5.66	15% (+/-)	Yes
NF Number of Users	N/A	4,044	N/A	4,074	N/A	4,153	N/A	0.74	1.94	15% (+/-)	Yes
NF:Avg Medicaid Pd per User	N/A	\$21,566	N/A	\$23,067	N/A	\$23,908	N/A	6.96	3.65	15% (+/-)	Yes
Physician: Total Medicaid Paid (TOS 08)	N/A	\$232,592,317	N/A	\$268,064,691	N/A	\$245,644,201	N/A	15.25	-8.36	15% (+/-)	Yes
Physician: Number of Users	N/A	631,071	N/A	691,165	N/A	662,658	N/A	9.52	-4.12	15% (+/-)	Yes
Physician: Avg Medicaid Pd per User	N/A	\$369	N/A	\$388	N/A	\$371	N/A	5.23	-4.42	15% (+/-)	Yes
Dental: Total Medicaid Paid (TOS 09)	N/A	\$41,095,632	N/A	\$50,605,878	N/A	\$51,815,775	N/A	23.14	2.39	15% (+/-)	Yes
Dental: Number of Users	N/A	204,145	N/A	235,460	N/A	229,446	N/A	15.34	-2.55	15% (+/-)	Yes
Dental: Avg Medicaid Pd per User	N/A	\$201	N/A	\$215	N/A	\$226	N/A	6.77	5.08	15% (+/-)	Yes
Other Practitioner: Total Medicaid Pd (TOS 10)	N/A	\$13,551,263	N/A	\$16,699,645	N/A	\$17,390,674	N/A	23.23	4.14	15% (+/-)	Yes
Other Practitioner: Number of Users	N/A	147,907	N/A	159,248	N/A	153,571	N/A	7.67	-3.56	15% (+/-)	Yes
Other Practitioner: Avg Medicaid Pd per User	N/A	\$92	N/A	\$105	N/A	\$113	N/A	14.46	7.99	15% (+/-)	Yes
OPD: Total Medicaid Paid (TOS 11)	N/A	\$137,408,250	N/A	\$151,579,361	N/A	\$144,141,015	N/A	10.31	-4.91	15% (+/-)	Yes
OPD Number of Users	N/A	382,004	N/A	401,603	N/A	397,992	N/A	5.13	-0.90	15% (+/-)	Yes
OPD: Avg Medicaid Pd per User	N/A	\$360	N/A	\$377	N/A	\$362	N/A	4.93	-4.04	15% (+/-)	Yes
Clinic: Total Medicaid Paid (TOS 12)	N/A	\$32,529,308	N/A	\$40,987,915	N/A	\$43,380,670	N/A	26.00	5.84	15% (+/-)	Yes
Clinic: Number of Users	N/A	85,654	N/A	112,739	N/A	120,893	N/A	31.62	7.23	15% (+/-)	Yes
Clinic: Avg Medicaid Pd per User	N/A	\$380	N/A	\$364	N/A	\$359	N/A	-4.27	-1.30	15% (+/-)	Yes
HH: Total Medicaid Paid (TOS 13)	N/A	\$26,023,991	N/A	\$27,368,832	N/A	\$24,872,811	N/A	5.17	-9.12	15% (+/-)	Yes
HH: Number of Users	N/A	8,967	N/A	10,306	N/A	9,456	N/A	14.93	-8.25	15% (+/-)	Yes
HH: Avg Medicaid Pd per User	N/A	\$2,902	N/A	\$2,656	N/A	\$2,630	N/A	-8.50	-0.95	15% (+/-)	Yes
Lab/Xray: Total Medicaid Paid (TOS 15)	N/A	\$135,696,438	N/A	\$154,271,490	N/A	\$157,925,469	N/A	13.69	2.37	15% (+/-)	Yes
Lab/Xray: Number of Users	N/A	478,959	N/A	542,706	N/A	522,089	N/A	13.31	-3.80	15% (+/-)	Yes
Lab/Xray:Avg Medicaid Pd per User	N/A	\$283	N/A	\$284	N/A	\$302	N/A	0.33	6.41	15% (+/-)	Yes
Drugs: Total Medicaid Paid (TOS 16)	N/A	\$447,957,413	N/A	\$548,166,622	N/A	\$567,598,958	N/A	22.37	3.55	15% (+/-)	Yes
Drugs: Number of Users	N/A	614,213	N/A	676,204	N/A	666,184	N/A	10.09	-1.48	15% (+/-)	Yes
Drugs: Avg Medicaid Pd per User	N/A	\$729	N/A	\$811	N/A	\$852	N/A	11.15	5.10	15% (+/-)	Yes
Other Services: Total Medicaid Paid (TOS 19)	N/A	\$105,291,560	N/A	\$144,023,634	N/A	\$169,858,107	N/A	36.79	17.94	15% (+/-)	No

2003-2005 MAX PSF VALIDATION TABLE  
STATE: LA

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	318,778	N/A	435,454	N/A	403,452	N/A	36.60	-7.35	15% (+/-)	Yes
Other Services: Avg Medicaid Pd per User	N/A	\$330	N/A	\$331	N/A	\$421	N/A	0.14	27.29	15% (+/-)	No
Transportation: Total Medicaid Paid (TOS 26)	N/A	\$28,293,938	N/A	\$31,680,840	N/A	\$33,445,614	N/A	11.97	5.57	15% (+/-)	Yes
Transportation: Number of Users	N/A	59,091	N/A	67,136	N/A	67,452	N/A	13.61	0.47	15% (+/-)	Yes
Transportation: Avg Medicaid Pd per User	N/A	\$479	N/A	\$472	N/A	\$496	N/A	-1.45	5.08	15% (+/-)	Yes
PCS: Total Medicaid Paid (TOS 30)	N/A	\$3,115,663	N/A	\$11,790,931	N/A	\$18,784,058	N/A	278.40	59.31	15% (+/-)	No
PCS: Number of Users	N/A	1,248	N/A	2,006	N/A	2,570	N/A	60.74	28.12	15% (+/-)	No
PCS: Avg Medicaid Pd per User	N/A	\$2,497	N/A	\$5,878	N/A	\$7,309	N/A	135.40	24.35	15% (+/-)	No
Target Case Management: Total Medicaid Pd (TOS 31)	N/A	\$10,543,810	N/A	\$14,640,782	N/A	\$12,552,119	N/A	38.86	-14.30	15% (+/-)	Yes
Target Case Management: Number of Users	N/A	8,596	N/A	10,414	N/A	9,363	N/A	21.15	-10.10	15% (+/-)	Yes
Target Case Management: Avg Medicaid Pd per User	N/A	\$1,227	N/A	\$1,406	N/A	\$1,341	N/A	14.62	-4.64	15% (+/-)	Yes
Rehab Services: Total Medicaid Pd (TOS 33)	N/A	\$1,011,254	N/A	\$1,037,684	N/A	\$1,521,338	N/A	2.61	46.61	15% (+/-)	No
Rehab Services: Number of Users	N/A	2,328	N/A	2,572	N/A	4,761	N/A	10.48	85.11	15% (+/-)	No
Rehab Services: Avg Medicaid Pd per User	N/A	\$434	N/A	\$403	N/A	\$320	N/A	-7.12	-20.80	15% (+/-)	No
PT/OT/Speech/Hear: Total Medicaid Paid (TOS 34)	N/A	\$12,071,865	N/A	\$18,182,927	N/A	\$16,410,130	N/A	50.62	-9.75	15% (+/-)	Yes
PT/OT/Speech/Hear: Number of Users	N/A	68,338	N/A	77,254	N/A	68,107	N/A	13.05	-11.80	15% (+/-)	Yes
PT/OT/Speech/Hear: Avg Medicaid Pd per User	N/A	\$177	N/A	\$235	N/A	\$241	N/A	33.24	2.37	15% (+/-)	Yes
Hospice: Total Medicaid Paid (TOS 35)	N/A	\$3,668,639	N/A	\$5,717,114	N/A	\$6,909,286	N/A	55.84	20.85	15% (+/-)	No
Hospice: Number of Users	N/A	612	N/A	862	N/A	988	N/A	40.85	14.62	15% (+/-)	Yes
Hospice: Avg Medicaid Pd per User	N/A	\$5,995	N/A	\$6,632	N/A	\$6,993	N/A	10.64	5.44	15% (+/-)	Yes
DME: Total Medicaid Paid (TOS 51)	N/A	\$39,693,467	N/A	\$36,990,913	N/A	\$36,935,840	N/A	-6.81	-0.15	15% (+/-)	Yes
DME: Number of Users	N/A	220,816	N/A	237,755	N/A	240,066	N/A	7.67	0.97	15% (+/-)	Yes
DME: Avg Medicaid Pd per User	N/A	\$180	N/A	\$156	N/A	\$154	N/A	-13.40	-1.11	15% (+/-)	Yes
Residential Care: Total Medicaid Paid (TOS 52)	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Residential Care: Number of Users	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Residential Care: 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
Psych. Services: Total Medicaid Paid (TOS 53)	N/A	\$51,196,271	N/A	\$65,558,402	N/A	\$52,018,695	N/A	28.05	-20.70	15% (+/-)	No
Psych. Services: Number of Users	N/A	51,046	N/A	57,982	N/A	57,604	N/A	13.59	-0.65	15% (+/-)	Yes
Psych. Services: Avg Medicaid Pd per User	N/A	\$1,003	N/A	\$1,131	N/A	\$903	N/A	12.73	-20.10	15% (+/-)	No
Adult Day Care: Total Medicaid Paid (TOS 54)	N/A	\$24,414,156	N/A	\$24,301,123	N/A	\$0	N/A	-0.46	-100.00	15% (+/-)	No
Adult Day Care: Number of Users	N/A	2,517	N/A	2,487	N/A	0	N/A	-1.19	-100.00	15% (+/-)	No
Adult Day Care: Avg Medicaid Pd per User	N/A	\$9,700	N/A	\$9,771	N/A	Div by 0	N/A	0.74	Div by 0	15% (+/-)	N/A
<b>AVG FFS MEDICAID AMT PD/NON-DUAL FFS ENROLLEE BY MAX TOS</b>											
Inpatient Hospital (TOS 01)	N/A	\$603	N/A	\$649	N/A	\$608	N/A	7.72	-6.39	15% (+/-)	Yes
Aged	N/A	\$1,656	N/A	\$1,759	N/A	\$1,551	N/A	6.25	-11.80	15% (+/-)	Yes
Disabled	N/A	\$2,295	N/A	\$2,463	N/A	\$2,442	N/A	7.29	-0.83	15% (+/-)	Yes
Child	N/A	\$175	N/A	\$219	N/A	\$163	N/A	25.13	-25.80	15% (+/-)	No
Adult	N/A	\$1,103	N/A	\$1,189	N/A	\$1,074	N/A	7.84	-9.71	15% (+/-)	Yes
ILTC (TOS=02,04,05,07)	N/A	\$329	N/A	\$317	N/A	\$325	N/A	-3.71	2.54	15% (+/-)	Yes
Aged	N/A	\$3,846	N/A	\$5,255	N/A	\$5,785	N/A	36.66	10.08	15% (+/-)	Yes
Disabled	N/A	\$2,134	N/A	\$2,129	N/A	\$2,121	N/A	-0.25	-0.39	15% (+/-)	Yes
Child	N/A	\$14	N/A	\$16	N/A	\$16	N/A	15.30	-3.73	15% (+/-)	Yes
Adult	N/A	\$18	N/A	\$28	N/A	\$31	N/A	53.72	10.57	15% (+/-)	Yes
Drugs (TOS=16)	N/A	\$500	N/A	\$548	N/A	\$573	N/A	9.53	4.55	15% (+/-)	Yes
Aged	N/A	\$1,973	N/A	\$2,239	N/A	\$2,353	N/A	13.48	5.09	15% (+/-)	Yes
Disabled	N/A	\$1,978	N/A	\$2,210	N/A	\$2,237	N/A	11.68	1.24	15% (+/-)	Yes
Child	N/A	\$238	N/A	\$270	N/A	\$283	N/A	13.37	4.85	15% (+/-)	Yes
Adult	N/A	\$324	N/A	\$376	N/A	\$402	N/A	15.92	7.01	15% (+/-)	Yes
All Other Services	N/A	\$1,023	N/A	\$1,072	N/A	\$1,054	N/A	4.81	-1.69	15% (+/-)	Yes
Aged	N/A	\$2,516	N/A	\$1,989	N/A	\$2,166	N/A	-21.00	8.90	15% (+/-)	Yes
Disabled	N/A	\$3,374	N/A	\$3,666	N/A	\$3,620	N/A	8.65	-1.26	15% (+/-)	Yes
Child	N/A	\$509	N/A	\$551	N/A	\$515	N/A	8.24	-6.55	15% (+/-)	Yes
Adult	N/A	\$1,290	N/A	\$1,337	N/A	\$1,293	N/A	3.62	-3.33	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	9.55	N/A	9.60	N/A	9.10	N/A	0.53	-5.27	15% (+/-)	Yes
Aged	N/A	27.27	N/A	25.41	N/A	25.97	N/A	-6.80	2.19	15% (+/-)	Yes
Disabled	N/A	17.28	N/A	17.17	N/A	17.24	N/A	-0.63	0.41	15% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: LA

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	3.86	N/A	4.31	N/A	3.57	N/A	11.82	-17.20	15% (+/-)	No
Adult	N/A	31.26	N/A	31.12	N/A	28.61	N/A	-0.44	-8.05	15% (+/-)	Yes
% Non-Dual FFS Enrollees with ILTC Claims (TOS=02,04,05,07)	N/A	1.50	N/A	1.41	N/A	1.40	N/A	-5.92	-0.96	15% (+/-)	Yes
Aged	N/A	19.33	N/A	24.45	N/A	25.83	N/A	26.46	5.67	15% (+/-)	Yes
Disabled	N/A	7.58	N/A	7.19	N/A	7.01	N/A	-5.05	-2.52	15% (+/-)	Yes
Child	N/A	0.33	N/A	0.32	N/A	0.30	N/A	-1.39	-6.43	15% (+/-)	Yes
Adult	N/A	0.82	N/A	1.01	N/A	0.93	N/A	23.94	-7.83	15% (+/-)	Yes
% with ratio of ILTC days/enroll days > 1	N/A	0.75	N/A	1.03	N/A	0.61	N/A	36.59	-40.90	15% (+/-)	No
% Non-Dual FFS Enrollees with Drug Claims (TOS=16)	N/A	68.60	N/A	67.60	N/A	67.25	N/A	-1.46	-0.52	15% (+/-)	Yes
Aged	N/A	66.75	N/A	64.20	N/A	65.88	N/A	-3.83	2.63	15% (+/-)	Yes
Disabled	N/A	79.84	N/A	78.17	N/A	78.34	N/A	-2.09	0.22	15% (+/-)	Yes
Child	N/A	65.55	N/A	64.45	N/A	63.68	N/A	-1.67	-1.20	15% (+/-)	Yes
Adult	N/A	73.38	N/A	74.59	N/A	74.60	N/A	1.66	0.01	15% (+/-)	Yes
% Non-Dual FFS Enrollees with All Other Claims	N/A	83.47	N/A	83.16	N/A	81.54	N/A	-0.38	-1.94	15% (+/-)	Yes
Aged	N/A	72.59	N/A	68.27	N/A	72.31	N/A	-5.94	5.91	15% (+/-)	Yes
Disabled	N/A	87.26	N/A	85.92	N/A	86.17	N/A	-1.54	0.29	15% (+/-)	Yes
Child	N/A	82.78	N/A	82.57	N/A	80.53	N/A	-0.26	-2.46	15% (+/-)	Yes
Adult	N/A	83.69	N/A	84.07	N/A	82.45	N/A	0.45	-1.92	15% (+/-)	Yes
Avg # IP Days per Non-Dual FFS User	N/A	6	N/A	6	N/A	6	N/A	0.81	0.10	15% (+/-)	Yes
Aged	N/A	10	N/A	10	N/A	11	N/A	-0.64	9.61	15% (+/-)	Yes
Disabled	N/A	13	N/A	13	N/A	13	N/A	1.54	-0.64	15% (+/-)	Yes
Child	N/A	4	N/A	5	N/A	4	N/A	8.34	-10.90	15% (+/-)	Yes
Adult	N/A	4	N/A	4	N/A	4	N/A	1.54	0.75	15% (+/-)	Yes
Avg # ILTC Days per Non-Dual FFS User	N/A	147	N/A	139	N/A	136	N/A	-5.55	-2.17	15% (+/-)	Yes
Aged	N/A	266	N/A	267	N/A	255	N/A	0.52	-4.41	15% (+/-)	Yes
Disabled	N/A	180	N/A	177	N/A	170	N/A	-2.04	-3.75	15% (+/-)	Yes
Child	N/A	14	N/A	14	N/A	14	N/A	-2.12	0.20	15% (+/-)	Yes
Adult	N/A	7	N/A	6	N/A	7	N/A	-3.30	10.34	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	\$18,207,435	N/A	\$19,507,809	N/A	\$19,768,675	N/A	7.14	1.34	15% (+/-)	Yes
FP: Number of Users	N/A	83,843	N/A	90,973	N/A	90,278	N/A	8.50	-0.76	15% (+/-)	Yes
FP: Average Medicaid Pd per User	N/A	\$217	N/A	\$214	N/A	\$219	N/A	-1.26	2.12	15% (+/-)	Yes
RHC: Total Medicaid Paid (Program Type 3)	N/A	\$12,324,531	N/A	\$15,976,666	N/A	\$18,758,423	N/A	29.63	17.41	15% (+/-)	No
RHC: Number of Users	N/A	53,461	N/A	62,903	N/A	71,007	N/A	17.66	12.88	15% (+/-)	Yes
RHC: Avg Medicaid Pd per User	N/A	\$231	N/A	\$254	N/A	\$264	N/A	10.17	4.01	15% (+/-)	Yes
FQHC: Total Medicaid Paid (Program Type 4)	N/A	\$7,427,257	N/A	\$9,699,116	N/A	\$10,970,403	N/A	30.59	13.11	15% (+/-)	Yes
FQHC: Number of Users	N/A	45,739	N/A	48,466	N/A	50,279	N/A	5.96	3.74	15% (+/-)	Yes
FQHC: Avg Medicaid Pd per User	N/A	\$162	N/A	\$200	N/A	\$218	N/A	23.24	9.03	15% (+/-)	Yes
IHS: Total Medicaid Pd (Program Type 5)	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
IHS: Number of Users	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
IHS: 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
Section 1915(c) Waiver: Total Medicaid Paid (Program Types 6 and 7)	N/A	\$147,301,709	N/A	\$186,993,202	N/A	\$176,660,124	N/A	26.95	-5.53	15% (+/-)	Yes
Section 1915(c) Waiver: Number of Users	N/A	11,415	N/A	12,741	N/A	12,426	N/A	11.62	-2.47	15% (+/-)	Yes
Section 1915(c) Waiver: Avg Medicaid Pd per User	N/A	\$12,904	N/A	\$14,676	N/A	\$14,217	N/A	13.73	-3.13	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	\$276,987,301	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	69,427	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	\$3,990	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$3,114	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$4,119	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$3,449	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$944	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	7.01	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	40.35	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	44.85	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	0.94	N/A	N/A	N/A	15% (+/-)	No

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	N/A	N/A	N/A	N/A	0.67	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	\$220,316,993	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	22,716	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	\$9,699	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$8,710	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$13,095	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$3,449	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$944	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	8.01	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	11.00	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	0.94	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	0.67	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	\$176,660,124	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	12,426	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	\$14,217	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$13,602	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$19,350	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$4,675	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$1,661	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	1.25	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	2.35	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	6.00	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	0.57	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	0.15	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	113,588	N/A	113,410	N/A	114,316	N/A	-0.16	0.80	15% (+/-)	Yes
Number of EDB Dual FFS Recipients	N/A	107,192	N/A	106,691	N/A	107,305	N/A	-0.47	0.58	15% (+/-)	Yes
Total EDB Dual FFS PYE	N/A	102,810	N/A	102,436	N/A	103,912	N/A	-0.36	1.44	15% (+/-)	Yes
% EDB Only Dual (Code 50)	N/A	4.40	N/A	1.67	N/A	0.99	N/A	-61.90	-40.90	15% (+/-)	No
% QMB Only (Code 51)	N/A	1.26	N/A	1.25	N/A	4.55	N/A	-1.38	264.60	15% (+/-)	No
% QMB Plus (Code 52)	N/A	93.38	N/A	77.10	N/A	70.70	N/A	-17.40	-8.31	15% (+/-)	Yes
% SLMB Only (Code 53)	N/A	0.61	N/A	0.61	N/A	0.60	N/A	0.88	-2.93	15% (+/-)	Yes
% SLMB Plus (Code 54)	N/A	0.10	N/A	3.63	N/A	4.33	N/A	3,452.00	19.42	15% (+/-)	No
% 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	0.23	N/A	0.33	N/A	0.30	N/A	44.88	-11.30	15% (+/-)	Yes
% 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	0.01	N/A	15.40	N/A	18.54	N/A	134,000.00	20.42	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	71,075	N/A	68,947	N/A	67,881	N/A	-2.99	-1.55	10% (+/-)	Yes
11: Aged, Cash	N/A	40,440	N/A	39,353	N/A	36,781	N/A	-2.69	-6.54	10% (+/-)	Yes
21: Aged, MN	N/A	1,488	N/A	1,515	N/A	1,480	N/A	1.82	-2.31	10% (+/-)	Yes
31: Aged, Poverty	N/A	1,266	N/A	1,226	N/A	2,671	N/A	-3.16	117.90	10% (+/-)	No
41: Other Aged	N/A	27,881	N/A	26,853	N/A	26,930	N/A	-3.69	0.29	10% (+/-)	Yes
51: 1115 Aged	N/A	0	N/A	0	N/A	19	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Disabled EDB Dual FFS Total	N/A	41,942	N/A	43,932	N/A	45,841	N/A	4.75	4.35	10% (+/-)	Yes
12: Disabled, Cash	N/A	29,871	N/A	30,277	N/A	29,683	N/A	1.36	-1.96	10% (+/-)	Yes
22: Disabled, MN	N/A	692	N/A	610	N/A	431	N/A	-11.80	-29.30	10% (+/-)	No
32: Disabled, Poverty	N/A	1,840	N/A	1,840	N/A	3,706	N/A	0.00	101.40	10% (+/-)	No
42: Other Disabled	N/A	9,539	N/A	11,205	N/A	12,021	N/A	17.47	7.28	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	\$1,368,440,886	N/A	\$1,446,729,722	N/A	\$1,557,409,111	N/A	5.72	7.65	15% (+/-)	Yes
Average FFS Medicaid Amt Paid per FFS Dual	N/A	\$12,047	N/A	\$12,757	N/A	\$13,624	N/A	5.89	6.80	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	\$12,766	N/A	\$13,560	N/A	\$14,514	N/A	6.22	7.03	15% (+/-)	Yes
<b>AVG FFS MEDICAID AMT PD/FFS DUAL BY MAX ELIGIBILITY GROUP</b>											
All Aged	N/A	\$11,561	N/A	\$12,320	N/A	\$13,364	N/A	6.57	8.47	15% (+/-)	Yes
11: Aged, Cash	N/A	\$5,515	N/A	\$5,611	N/A	\$6,408	N/A	1.75	14.20	15% (+/-)	Yes
21: Aged, MN	N/A	\$10,925	N/A	\$11,846	N/A	\$12,624	N/A	8.43	6.57	15% (+/-)	Yes
31: Aged, Poverty	N/A	\$2,976	N/A	\$2,798	N/A	\$2,837	N/A	-5.98	1.42	15% (+/-)	Yes
41: Other Aged	N/A	\$20,753	N/A	\$22,612	N/A	\$23,957	N/A	8.96	5.95	15% (+/-)	Yes
51: 1115 Aged	N/A	Div by 0	N/A	Div by 0	N/A	\$938	N/A	Div by 0	Div by 0	15% (+/-)	N/A
All Disabled	N/A	\$12,966	N/A	\$13,532	N/A	\$14,128	N/A	4.37	4.41	15% (+/-)	Yes
12: Disabled, Cash	N/A	\$6,371	N/A	\$6,715	N/A	\$7,476	N/A	5.40	11.33	15% (+/-)	Yes
22: Disabled, MN	N/A	\$7,871	N/A	\$9,916	N/A	\$10,439	N/A	25.99	5.27	15% (+/-)	Yes
32: Disabled, Poverty	N/A	\$3,171	N/A	\$3,696	N/A	\$3,866	N/A	16.55	4.59	15% (+/-)	Yes
42: Other Disabled	N/A	\$35,877	N/A	\$33,766	N/A	\$33,852	N/A	-5.88	0.25	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	\$82,189,075	N/A	\$58,134,870	N/A	\$50,740,982	N/A	-29.30	-12.70	15% (+/-)	Yes
IP: Number of Users	N/A	68,496	N/A	59,185	N/A	42,660	N/A	-13.60	-27.90	15% (+/-)	No
IP: Average Medicaid Pd per User	N/A	\$1,200	N/A	\$982	N/A	\$1,189	N/A	-18.10	21.09	15% (+/-)	No
IP: Average Medicaid Covered Days Per User	N/A	10	N/A	8	N/A	8	N/A	-25.10	8.54	15% (+/-)	Yes
MH Aged: Total Medicaid Paid (TOS 02)	N/A	\$4,293,512	N/A	\$2,876,937	N/A	\$3,765,914	N/A	-33.00	30.90	15% (+/-)	No
MH Aged: Number of Users	N/A	2,808	N/A	1,374	N/A	1,751	N/A	-51.10	27.44	15% (+/-)	No
MH Aged: Avg Medicaid Pd per User	N/A	\$1,529	N/A	\$2,094	N/A	\$2,151	N/A	36.94	2.72	15% (+/-)	Yes
IP Psych < 21: Total Medicaid Paid (TOS 04)	N/A	\$138,378	N/A	\$59,546	N/A	\$126,335	N/A	-57.00	112.20	15% (+/-)	No
IP Psych < 21: Number of Users	N/A	39	N/A	21	N/A	32	N/A	-46.20	52.38	15% (+/-)	No
IP Psych<21: Avg Medicaid Pd per User	N/A	\$3,548	N/A	\$2,836	N/A	\$3,948	N/A	-20.10	39.23	15% (+/-)	No
ICF/MR: Total Medicaid Pd (TOS 05)	N/A	\$222,953,008	N/A	\$232,584,230	N/A	\$246,484,308	N/A	4.32	5.98	15% (+/-)	Yes
ICF/MR: Number of Users	N/A	3,229	N/A	3,220	N/A	3,286	N/A	-0.28	2.05	15% (+/-)	Yes
ICF/MR: Avg Medicaid Pd per User	N/A	\$69,047	N/A	\$72,231	N/A	\$75,010	N/A	4.61	3.85	15% (+/-)	Yes
NF: Total Medicaid Paid (TOS 07)	N/A	\$496,484,740	N/A	\$520,766,559	N/A	\$540,123,753	N/A	4.89	3.72	15% (+/-)	Yes
NF Number of Users	N/A	28,321	N/A	27,542	N/A	27,316	N/A	-2.75	-0.82	15% (+/-)	Yes
NF: Avg Medicaid Pd per User	N/A	\$17,531	N/A	\$18,908	N/A	\$19,773	N/A	7.86	4.58	15% (+/-)	Yes
Physician: Total Medicaid Paid (TOS 08)	N/A	\$30,622,526	N/A	\$14,948,688	N/A	\$14,443,007	N/A	-51.20	-3.38	15% (+/-)	Yes
Physician: Number of Users	N/A	92,769	N/A	84,688	N/A	84,183	N/A	-8.71	-0.60	15% (+/-)	Yes
Physician: Avg Medicaid Pd per User	N/A	\$330	N/A	\$177	N/A	\$172	N/A	-46.50	-2.80	15% (+/-)	Yes
Dental: Total Medicaid Paid (TOS 09)	N/A	\$2,742,242	N/A	\$2,756,795	N/A	\$2,422,208	N/A	0.53	-12.10	15% (+/-)	Yes
Dental: Number of Users	N/A	3,874	N/A	3,808	N/A	3,410	N/A	-1.70	-10.50	15% (+/-)	Yes
Dental: Avg Medicaid Pd per User	N/A	\$708	N/A	\$724	N/A	\$710	N/A	2.27	-1.88	15% (+/-)	Yes
Other Practitioner: Total Medicaid Pd (TOS 10)	N/A	\$951,225	N/A	\$459,378	N/A	\$417,819	N/A	-51.70	-9.05	15% (+/-)	Yes
Other Practitioner: Number of Users	N/A	20,848	N/A	12,535	N/A	11,648	N/A	-39.90	-7.08	15% (+/-)	Yes
Other Practitioner: Avg Medicaid Pd per User	N/A	\$46	N/A	\$37	N/A	\$36	N/A	-19.70	-2.12	15% (+/-)	Yes
OPD: Total Medicaid Paid (TOS 11)	N/A	\$4,093,354	N/A	\$4,777,131	N/A	\$8,375,483	N/A	16.70	75.32	15% (+/-)	No
OPD Number of Users	N/A	9,978	N/A	12,410	N/A	29,051	N/A	24.37	134.10	15% (+/-)	No
OPD: Avg Medicaid Pd per User	N/A	\$410	N/A	\$385	N/A	\$288	N/A	-6.17	-25.10	15% (+/-)	No
Clinic: Total Medicaid Paid (TOS 12)	N/A	\$9,441,607	N/A	\$7,939,988	N/A	\$6,848,566	N/A	-15.90	-13.70	15% (+/-)	Yes
Clinic: Number of Users	N/A	13,682	N/A	14,544	N/A	15,914	N/A	6.30	9.42	15% (+/-)	Yes
Clinic: Avg Medicaid Pd per User	N/A	\$690	N/A	\$546	N/A	\$430	N/A	-20.90	-21.20	15% (+/-)	No
HH: Total Medicaid Paid (TOS 13)	N/A	\$1,105,632	N/A	\$894,655	N/A	\$563,456	N/A	-19.10	-37.00	15% (+/-)	No
HH: Number of Users	N/A	1,106	N/A	957	N/A	742	N/A	-13.50	-22.50	15% (+/-)	No
HH: Avg Medicaid Pd per User	N/A	\$1,000	N/A	\$935	N/A	\$759	N/A	-6.48	-18.80	15% (+/-)	No
Lab/Xray: Total Medicaid Paid (TOS 15)	N/A	\$15,577,665	N/A	\$6,401,418	N/A	\$8,435,753	N/A	-58.90	31.78	15% (+/-)	No
Lab/Xray: Number of Users	N/A	71,212	N/A	65,412	N/A	68,603	N/A	-8.14	4.88	15% (+/-)	Yes
Lab/Xray: Avg Medicaid Pd per User	N/A	\$219	N/A	\$98	N/A	\$123	N/A	-55.30	25.65	15% (+/-)	No
Drugs: Total Medicaid Paid (TOS 16)	N/A	\$332,573,906	N/A	\$384,003,560	N/A	\$408,080,736	N/A	15.46	6.27	15% (+/-)	Yes
Drugs: Number of Users	N/A	101,343	N/A	101,019	N/A	101,788	N/A	-0.32	0.76	15% (+/-)	Yes
Drugs: Avg Medicaid Pd per User	N/A	\$3,282	N/A	\$3,801	N/A	\$4,009	N/A	15.83	5.47	15% (+/-)	Yes
Other Services: Total Medicaid Paid (TOS 19)	N/A	\$73,268,273	N/A	\$117,040,921	N/A	\$153,688,353	N/A	59.74	31.31	15% (+/-)	No
Other Services: Number of Users	N/A	4,450	N/A	5,532	N/A	19,256	N/A	24.31	248.10	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
Other Services: Avg Medicaid Pd per User	N/A	\$16,465	N/A	\$21,157	N/A	\$7,981	N/A	28.50	-62.30	15% (+/-)	No
Transportation: Total Medicaid Paid (TOS 26)	N/A	\$14,243,290	N/A	\$11,196,323	N/A	\$10,357,295	N/A	-21.40	-7.49	15% (+/-)	Yes
Transportation: Number of Users	N/A	33,864	N/A	32,744	N/A	31,524	N/A	-3.31	-3.73	15% (+/-)	Yes
Transportation: Avg Medicaid Pd per User	N/A	\$421	N/A	\$342	N/A	\$329	N/A	-18.70	-3.91	15% (+/-)	Yes
PCS: Total Medicaid Paid (TOS 30)	N/A	\$2,792,590	N/A	\$11,988,959	N/A	\$50,350,445	N/A	329.30	320.00	15% (+/-)	No
PCS: Number of Users	N/A	231	N/A	2,289	N/A	4,721	N/A	890.90	106.20	15% (+/-)	No
PCS: Avg Medicaid Pd per User	N/A	\$12,089	N/A	\$5,238	N/A	\$10,665	N/A	-56.70	103.60	15% (+/-)	No
Target Case Management: Total Medicaid Pd (TOS 31)	N/A	\$3,419,993	N/A	\$3,706,889	N/A	\$4,059,637	N/A	8.39	9.52	15% (+/-)	Yes
Target Case Management: Number of Users	N/A	1,946	N/A	2,033	N/A	2,216	N/A	4.47	9.00	15% (+/-)	Yes
Target Case Management: Avg Medicaid Pd per User	N/A	\$1,757	N/A	\$1,823	N/A	\$1,832	N/A	3.75	0.47	15% (+/-)	Yes
Rehab Services: Total Medicaid Pd (TOS 33)	N/A	\$132,687	N/A	\$16,530	N/A	\$112,136	N/A	-87.50	578.40	15% (+/-)	No
Rehab Services: Number of Users	N/A	690	N/A	68	N/A	219	N/A	-90.10	222.10	15% (+/-)	No
Rehab Services: Avg Medicaid Pd per User	N/A	\$192	N/A	\$243	N/A	\$512	N/A	26.41	110.60	15% (+/-)	No
PT/OT/Speech/Hear: Total Medicaid Paid (TOS 34)	N/A	\$82,072	N/A	\$43,045	N/A	\$50,168	N/A	-47.60	16.55	15% (+/-)	No
PT/OT/Speech/Hear: Number of Users	N/A	1,948	N/A	1,933	N/A	2,045	N/A	-0.77	5.79	15% (+/-)	Yes
PT/OT/Speech/Hear: Avg Medicaid Pd per User	N/A	\$42	N/A	\$22	N/A	\$25	N/A	-47.10	10.16	15% (+/-)	Yes
Hospice: Total Medicaid Paid (TOS 35)	N/A	\$11,440,306	N/A	\$15,458,495	N/A	\$19,136,367	N/A	35.12	23.79	15% (+/-)	No
Hospice: Number of Users	N/A	2,156	N/A	2,463	N/A	2,767	N/A	14.24	12.34	15% (+/-)	Yes
Hospice: Avg Medicaid Pd per User	N/A	\$5,306	N/A	\$6,276	N/A	\$6,916	N/A	18.28	10.19	15% (+/-)	Yes
DME: Total Medicaid Paid (TOS 51)	N/A	\$32,176,406	N/A	\$26,381,326	N/A	\$23,537,630	N/A	-18.00	-10.80	15% (+/-)	Yes
DME: Number of Users	N/A	36,942	N/A	32,391	N/A	35,765	N/A	-12.30	10.42	15% (+/-)	Yes
DME: Avg Medicaid Pd per User	N/A	\$871	N/A	\$814	N/A	\$658	N/A	-6.49	-19.20	15% (+/-)	No
Residential Care: Total Medicaid Paid (TOS 52)	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Residential Care: Number of Users	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Residential Care: 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
Psych. Services: Total Medicaid Paid (TOS 53)	N/A	\$6,223,087	N/A	\$5,892,964	N/A	\$4,852,580	N/A	-5.30	-17.70	15% (+/-)	No
Psych. Services: Number of Users	N/A	17,274	N/A	10,068	N/A	10,120	N/A	-41.70	0.52	15% (+/-)	Yes
Psych. Services: Avg Medicaid Pd per User	N/A	\$360	N/A	\$585	N/A	\$480	N/A	62.47	-18.10	15% (+/-)	No
Adult Day Care: Total Medicaid Paid (TOS 54)	N/A	\$17,648,570	N/A	\$18,345,328	N/A	\$0	N/A	3.95	-100.00	15% (+/-)	No
Adult Day Care: Number of Users	N/A	1,654	N/A	1,720	N/A	0	N/A	3.99	-100.00	15% (+/-)	No
Adult Day Care: Avg Medicaid Pd per User	N/A	\$10,670	N/A	\$10,666	N/A	Div by 0	N/A	-0.04	Div by 0	15% (+/-)	N/A
<b>AVG FFS MEDICAID AMT PD/FFS DUAL BY SELECTED TYPE OF SERVICE</b>											
Inpatient Hospital (TOS=01)	N/A	\$724	N/A	\$513	N/A	\$444	N/A	-29.20	-13.40	15% (+/-)	Yes
Aged	N/A	\$649	N/A	\$416	N/A	\$381	N/A	-35.80	-8.45	15% (+/-)	Yes
Disabled	N/A	\$831	N/A	\$645	N/A	\$529	N/A	-22.40	-17.90	15% (+/-)	No
ILTC (TOS=02,04,05,07)	N/A	\$6,373	N/A	\$6,669	N/A	\$6,915	N/A	4.64	3.70	15% (+/-)	Yes
Aged	N/A	\$6,573	N/A	\$7,057	N/A	\$7,418	N/A	7.36	5.13	15% (+/-)	Yes
Disabled	N/A	\$6,119	N/A	\$6,140	N/A	\$6,259	N/A	0.33	1.94	15% (+/-)	Yes
Drugs (TOS=16)	N/A	\$2,928	N/A	\$3,386	N/A	\$3,570	N/A	15.65	5.43	15% (+/-)	Yes
Aged	N/A	\$2,994	N/A	\$3,461	N/A	\$3,638	N/A	15.60	5.12	15% (+/-)	Yes
Disabled	N/A	\$2,838	N/A	\$3,291	N/A	\$3,490	N/A	15.97	6.06	15% (+/-)	Yes
All Other Services	N/A	\$2,023	N/A	\$2,189	N/A	\$2,695	N/A	8.22	23.09	15% (+/-)	No
Aged	N/A	\$1,345	N/A	\$1,386	N/A	\$1,926	N/A	3.04	38.97	15% (+/-)	No
Disabled	N/A	\$3,177	N/A	\$3,457	N/A	\$3,850	N/A	8.79	11.37	15% (+/-)	Yes
<b>% OF FFS DUALS WITH CLAIMS BY SELECTED TYPE OF SERVICE</b>											
% FFS Duals with IP Claims (TOS=01)	N/A	60.30	N/A	52.19	N/A	37.32	N/A	-13.50	-28.50	15% (+/-)	No
Aged	N/A	60.74	N/A	52.19	N/A	38.31	N/A	-14.10	-26.60	15% (+/-)	No
Disabled	N/A	59.87	N/A	52.41	N/A	35.94	N/A	-12.50	-31.40	15% (+/-)	No
% FFS Duals with ILTC Claims (TOS=02,04,05,07)	N/A	29.23	N/A	28.05	N/A	27.82	N/A	-4.04	-0.80	15% (+/-)	Yes
Aged	N/A	36.71	N/A	36.44	N/A	36.72	N/A	-0.72	0.76	15% (+/-)	Yes
Disabled	N/A	16.91	N/A	15.18	N/A	14.98	N/A	-10.30	-1.33	15% (+/-)	Yes
% FFS Duals with Drug Claims (TOS=16)	N/A	89.22	N/A	89.07	N/A	89.04	N/A	-0.16	-0.04	15% (+/-)	Yes
Aged	N/A	92.00	N/A	92.11	N/A	91.71	N/A	0.12	-0.43	15% (+/-)	Yes
Disabled	N/A	84.70	N/A	84.51	N/A	85.22	N/A	-0.23	0.84	15% (+/-)	Yes
% FFS Duals with All Other Claims	N/A	88.45	N/A	86.14	N/A	86.24	N/A	-2.61	0.12	15% (+/-)	Yes
Aged	N/A	88.96	N/A	86.44	N/A	86.07	N/A	-2.83	-0.44	15% (+/-)	Yes
Disabled	N/A	87.68	N/A	85.78	N/A	86.61	N/A	-2.16	0.97	15% (+/-)	Yes

**2003-2005 MAX PSF VALIDATION TABLE**  
STATE: LA

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	10	N/A	8	N/A	8	N/A	-25.10	8.54	15% (+/-)	Yes
Aged	N/A	10	N/A	8	N/A	9	N/A	-23.40	12.42	15% (+/-)	Yes
Disabled	N/A	11	N/A	8	N/A	8	N/A	-27.90	2.67	15% (+/-)	Yes
Avg # ILTC Days per FFS Dual User (TOS 02, 04, 05, 07)	N/A	254	N/A	258	N/A	246	N/A	1.47	-4.51	15% (+/-)	Yes
Aged	N/A	255	N/A	255	N/A	243	N/A	0.05	-4.89	15% (+/-)	Yes
Disabled	N/A	250	N/A	267	N/A	259	N/A	6.83	-3.31	15% (+/-)	Yes
<b>FFS EXPENDITURES AND USERS BY MAX PROGRAM TYPE</b>											
FP: Total Medicaid Paid (Program Type 2)	N/A	\$453,362	N/A	\$487,276	N/A	\$513,923	N/A	7.48	5.47	15% (+/-)	Yes
FP: Number of Users	N/A	2,147	N/A	2,292	N/A	2,383	N/A	6.75	3.97	15% (+/-)	Yes
FP: Average Medicaid Pd per User	N/A	\$211	N/A	\$213	N/A	\$216	N/A	0.68	1.44	15% (+/-)	Yes
RHC: Total Medicaid Paid (Program Type 3)	N/A	\$820,243	N/A	\$926,498	N/A	\$1,074,907	N/A	12.95	16.02	15% (+/-)	No
RHC: Number of Users	N/A	6,084	N/A	6,668	N/A	7,803	N/A	9.60	17.02	15% (+/-)	No
RHC: Avg Medicaid Pd per User	N/A	\$135	N/A	\$139	N/A	\$138	N/A	3.06	-0.86	15% (+/-)	Yes
FQHC: Total Medicaid Paid (Program Type 4)	N/A	\$192,936	N/A	\$213,171	N/A	\$428,810	N/A	10.49	101.20	15% (+/-)	No
FQHC: Number of Users	N/A	1,882	N/A	1,659	N/A	2,144	N/A	-11.80	29.23	15% (+/-)	No
FQHC: Avg Medicaid Pd per User	N/A	\$103	N/A	\$128	N/A	\$200	N/A	25.34	55.65	15% (+/-)	No
IHS: Total Medicaid Pd (Program Type 5)	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
IHS: Number of Users	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
IHS: 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
Section 1915(c) Waiver: Total Medicaid Paid (Program Types 6 and 7)	N/A	\$98,284,365	N/A	\$140,259,526	N/A	\$153,867,662	N/A	42.71	9.70	15% (+/-)	Yes
Section 1915(c) Waiver: Number of Users	N/A	4,847	N/A	5,622	N/A	5,976	N/A	15.99	6.30	15% (+/-)	Yes
Section 1915(c) Waiver: Avg Medicaid Pd per User	N/A	\$20,277	N/A	\$24,948	N/A	\$25,748	N/A	23.04	3.20	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	\$259,906,334	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	53,435	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	\$4,864	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$3,200	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$7,802	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	46.74	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	50.23	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	42.16	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	\$204,781,563	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	8,611	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	\$23,781	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$15,314	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$34,695	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	7.53	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	7.11	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	8.23	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	\$153,867,662	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	5,976	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	\$25,748	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$12,312	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$38,356	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	5.23	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	4.25	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	6.73	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	1,008,959	N/A	1,113,725	N/A	1,104,995	N/A	10.38	-0.78	15% (+/-)	Yes
# FFS Recipients	N/A	868,726	N/A	953,500	N/A	932,618	N/A	9.76	-2.19	15% (+/-)	Yes
% FFS Enrollees who are Recipients	65-90%	86.10	Yes	85.61	Yes	84.40	Yes	-0.57	-1.42	15% (+/-)	Yes
% Aged who are Recipients	90-100%	94.78	Yes	94.81	Yes	94.80	Yes	0.03	-0.01	15% (+/-)	Yes
% Disabled who are Recipients	85-100%	89.93	Yes	88.77	Yes	89.09	Yes	-1.29	0.36	15% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: LA

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%	83.98	Yes	83.67	Yes	81.85	Yes	-0.38	-2.18	15% (+/-)	Yes
% Adults who are Recipients	80-100%	86.70	Yes	87.15	Yes	85.98	Yes	0.52	-1.34	15% (+/-)	Yes
Total FFS PYE	N/A	864,355	N/A	914,192	N/A	955,264	N/A	5.77	4.49	15% (+/-)	Yes
MAX Aged Total	N/A	75,839	N/A	72,575	N/A	71,539	N/A	-4.30	-1.43	10% (+/-)	Yes
11: Aged, Cash	N/A	42,371	N/A	41,310	N/A	38,621	N/A	-2.50	-6.51	10% (+/-)	Yes
21: Aged, MN	N/A	1,574	N/A	1,609	N/A	1,586	N/A	2.22	-1.43	10% (+/-)	Yes
31: Aged, Poverty	N/A	2,439	N/A	2,037	N/A	3,518	N/A	-16.50	72.70	10% (+/-)	No
41: Other Aged	N/A	29,455	N/A	27,619	N/A	27,751	N/A	-6.23	0.48	10% (+/-)	Yes
51: 1115 Aged	N/A	0	N/A	0	N/A	63	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Disabled Total	N/A	166,150	N/A	176,568	N/A	180,363	N/A	6.27	2.15	10% (+/-)	Yes
12: Disabled, Cash	N/A	148,454	N/A	155,451	N/A	154,807	N/A	4.71	-0.41	10% (+/-)	Yes
22: Disabled, MN	N/A	2,329	N/A	2,327	N/A	2,564	N/A	-0.09	10.18	10% (+/-)	No
32: Disabled, Poverty	N/A	2,107	N/A	2,813	N/A	4,945	N/A	33.51	75.79	10% (+/-)	No
42: Other Disabled	N/A	13,260	N/A	15,977	N/A	18,045	N/A	20.49	12.94	10% (+/-)	No
52: 1115 Disabled	N/A	0	N/A	0	N/A	2	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Child Total	N/A	645,251	N/A	733,185	N/A	710,617	N/A	13.63	-3.08	10% (+/-)	Yes
14: AFDC Child, Cash	N/A	92,093	N/A	104,701	N/A	100,305	N/A	13.69	-4.20	10% (+/-)	Yes
16: AFDC-U Child, Cash	N/A	3,094	N/A	4,980	N/A	6,393	N/A	60.96	28.37	10% (+/-)	No
24: AFDC Child, MN	N/A	644	N/A	909	N/A	880	N/A	41.15	-3.19	10% (+/-)	Yes
34: Child Poverty	N/A	496,873	N/A	541,040	N/A	535,904	N/A	8.89	-0.95	10% (+/-)	Yes
44: Other Child	N/A	43,124	N/A	71,847	N/A	57,010	N/A	66.61	-20.70	10% (+/-)	No
48: Foster Care Child	N/A	9,423	N/A	9,708	N/A	10,076	N/A	3.03	3.79	10% (+/-)	Yes
54: 1115 Child	N/A	0	N/A	0	N/A	49	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Adult Total	N/A	121,719	N/A	131,397	N/A	142,476	N/A	7.95	8.43	10% (+/-)	Yes
15: AFDC Adult, Cash	N/A	56,970	N/A	59,806	N/A	63,499	N/A	4.98	6.18	10% (+/-)	Yes
17: AFDC-U Adult, Cash	N/A	4,638	N/A	6,361	N/A	9,561	N/A	37.15	50.31	10% (+/-)	No
25: AFDC Adult, MN	N/A	7,897	N/A	8,835	N/A	8,942	N/A	11.88	1.21	10% (+/-)	Yes
35: Adult, Poverty	N/A	45,253	N/A	47,675	N/A	51,279	N/A	5.35	7.56	10% (+/-)	Yes
45: Other Adult	N/A	6,961	N/A	8,720	N/A	9,158	N/A	25.27	5.02	10% (+/-)	Yes
55: 1115 Adult	N/A	0	N/A	0	N/A	37	N/A	Div by 0	Div by 0	10% (+/-)	N/A
Total FFS Medicaid Amt Paid	N/A	\$3,566,850,450	N/A	\$4,034,008,225	N/A	\$4,093,442,177	N/A	13.10	1.47	15% (+/-)	Yes
Average FFS Medicaid Amt Paid per FFS Enrollee	N/A	\$3,535	N/A	\$3,622	N/A	\$3,704	N/A	2.46	2.28	15% (+/-)	Yes
Average FFS Medicaid Amt Paid per FFS Recipient (User of any svc)	N/A	\$4,106	N/A	\$4,231	N/A	\$4,389	N/A	3.04	3.75	15% (+/-)	Yes
<b>AVG FFS MEDICAID AMT PD/FFS ENROLLEE BY MAX ELIGIBILITY GROUP</b>											
All Aged	N/A	\$11,462	N/A	\$12,266	N/A	\$13,286	N/A	7.01	8.32	15% (+/-)	Yes
11: Aged, Cash	N/A	\$5,748	N/A	\$5,881	N/A	\$6,669	N/A	2.31	13.41	15% (+/-)	Yes
21: Aged, MN	N/A	\$10,900	N/A	\$11,784	N/A	\$12,480	N/A	8.11	5.91	15% (+/-)	Yes
31: Aged, Poverty	N/A	\$4,246	N/A	\$1,755	N/A	\$2,225	N/A	-58.70	26.75	15% (+/-)	No
41: Other Aged	N/A	\$20,309	N/A	\$22,620	N/A	\$23,972	N/A	11.38	5.98	15% (+/-)	Yes
51: 1115 Aged	N/A	Div by 0	N/A	Div by 0	N/A	\$916	N/A	Div by 0	Div by 0	15% (+/-)	N/A
All Disabled	N/A	\$10,586	N/A	\$11,230	N/A	\$11,362	N/A	6.08	1.18	15% (+/-)	Yes
12: Disabled, Cash	N/A	\$8,672	N/A	\$9,284	N/A	\$9,375	N/A	7.06	0.98	15% (+/-)	Yes
22: Disabled, MN	N/A	\$11,388	N/A	\$13,690	N/A	\$13,316	N/A	20.22	-2.74	15% (+/-)	Yes
32: Disabled, Poverty	N/A	\$2,819	N/A	\$6,632	N/A	\$6,162	N/A	135.20	-7.09	15% (+/-)	Yes
42: Other Disabled	N/A	\$33,110	N/A	\$30,617	N/A	\$29,557	N/A	-7.53	-3.46	15% (+/-)	Yes
52: 1115 Disabled	N/A	Div by 0	N/A	Div by 0	N/A	\$54,575	N/A	Div by 0	Div by 0	15% (+/-)	N/A
All Child	N/A	\$937	N/A	\$1,057	N/A	\$977	N/A	12.79	-7.61	15% (+/-)	Yes
14: AFDC Child, Cash	N/A	\$914	N/A	\$1,002	N/A	\$885	N/A	9.72	-11.70	15% (+/-)	Yes
16: AFDC-U Child, Cash	N/A	\$970	N/A	\$1,112	N/A	\$913	N/A	14.57	-17.90	15% (+/-)	No
24: AFDC Child, MN	N/A	\$1,122	N/A	\$1,283	N/A	\$997	N/A	14.40	-22.30	15% (+/-)	No
34: Child, Poverty	N/A	\$855	N/A	\$927	N/A	\$934	N/A	8.32	0.80	15% (+/-)	Yes
44: Other Child	N/A	\$1,451	N/A	\$1,776	N/A	\$1,124	N/A	22.40	-36.70	15% (+/-)	No
48: Foster Care Child	N/A	\$3,096	N/A	\$3,537	N/A	\$3,338	N/A	14.25	-5.61	15% (+/-)	Yes
54: 1115 Child	N/A	Div by 0	N/A	Div by 0	N/A	\$4,047	N/A	Div by 0	Div by 0	15% (+/-)	N/A
All Adult	N/A	\$2,745	N/A	\$2,938	N/A	\$2,805	N/A	7.05	-4.53	15% (+/-)	Yes
15: AFDC Adult, Cash	N/A	\$2,584	N/A	\$2,830	N/A	\$2,565	N/A	9.52	-9.35	15% (+/-)	Yes
17: AFDC-U Adult, Cash	N/A	\$2,413	N/A	\$2,734	N/A	\$2,024	N/A	13.30	-26.00	15% (+/-)	No

2003-2005 MAX PSF VALIDATION TABLE  
STATE: LA

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	\$3,132	N/A	\$3,410	N/A	\$3,422	N/A	8.87	0.33	15% (+/-)	Yes
35: Adult, Poverty	N/A	\$3,108	N/A	\$3,243	N/A	\$3,333	N/A	4.32	2.78	15% (+/-)	Yes
45: Other Adult	N/A	\$1,478	N/A	\$1,686	N/A	\$1,714	N/A	14.04	1.71	15% (+/-)	Yes
55: 1115 Adult	N/A	Div by 0	N/A	Div by 0	N/A	\$5,468	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	\$621,990,224	N/A	\$707,735,815	N/A	\$652,999,769	N/A	13.79	-7.73	15% (+/-)	Yes
IP: Number of Users	N/A	154,025	N/A	155,243	N/A	132,782	N/A	0.79	-14.50	15% (+/-)	Yes
IP: Average Medicaid Pd per User	N/A	\$4,038	N/A	\$4,559	N/A	\$4,918	N/A	12.89	7.87	15% (+/-)	Yes
IP: Average Medicaid Covered Days Per User	N/A	8	N/A	7	N/A	7	N/A	-15.10	1.88	15% (+/-)	Yes
MH Aged: Total Medicaid Paid (TOS 02)	N/A	\$25,906,957	N/A	\$33,838,188	N/A	\$37,152,813	N/A	30.61	9.80	15% (+/-)	Yes
MH Aged: Number of Users	N/A	6,968	N/A	5,791	N/A	6,220	N/A	-16.90	7.41	15% (+/-)	Yes
MH Aged: Avg Medicaid Pd per User	N/A	\$3,718	N/A	\$5,843	N/A	\$5,973	N/A	57.16	2.22	15% (+/-)	Yes
IP Psych < 21: Total Medicaid Paid (TOS 04)	N/A	\$12,333,579	N/A	\$16,518,450	N/A	\$16,139,483	N/A	33.93	-2.29	15% (+/-)	Yes
IP Psych < 21: Number of Users	N/A	3,133	N/A	3,530	N/A	3,272	N/A	12.67	-7.31	15% (+/-)	Yes
IP Psych<21 :Avg Medicaid Pd per User	N/A	\$3,937	N/A	\$4,679	N/A	\$4,933	N/A	18.87	5.41	15% (+/-)	Yes
ICF/MR: Total Medicaid Pd (TOS 05)	N/A	\$396,721,439	N/A	\$408,315,521	N/A	\$419,823,098	N/A	2.92	2.82	15% (+/-)	Yes
ICF/MR: Number of Users	N/A	5,812	N/A	5,753	N/A	5,671	N/A	-1.02	-1.43	15% (+/-)	Yes
ICF/MR: Avg Medicaid Pd per User	N/A	\$68,259	N/A	\$70,974	N/A	\$74,030	N/A	3.98	4.31	15% (+/-)	Yes
NF: Total Medicaid Paid (TOS 07)	N/A	\$583,697,303	N/A	\$614,740,027	N/A	\$639,415,089	N/A	5.32	4.01	15% (+/-)	Yes
NF Number of Users	N/A	32,365	N/A	31,616	N/A	31,469	N/A	-2.31	-0.47	15% (+/-)	Yes
NF:Avg Medicaid Pd per User	N/A	\$18,035	N/A	\$19,444	N/A	\$20,319	N/A	7.81	4.50	15% (+/-)	Yes
Physician: Total Medicaid Paid (TOS 08)	N/A	\$263,214,843	N/A	\$283,013,379	N/A	\$260,087,208	N/A	7.52	-8.10	15% (+/-)	Yes
Physician: Number of Users	N/A	723,840	N/A	775,853	N/A	746,841	N/A	7.19	-3.74	15% (+/-)	Yes
Physician: Avg Medicaid Pd per User	N/A	\$364	N/A	\$365	N/A	\$348	N/A	0.31	-4.53	15% (+/-)	Yes
Dental: Total Medicaid Paid (TOS 09)	N/A	\$43,837,874	N/A	\$53,362,673	N/A	\$54,237,983	N/A	21.73	1.64	15% (+/-)	Yes
Dental: Number of Users	N/A	208,019	N/A	239,268	N/A	232,856	N/A	15.02	-2.68	15% (+/-)	Yes
Dental: Avg Medicaid Pd per User	N/A	\$211	N/A	\$223	N/A	\$233	N/A	5.83	4.44	15% (+/-)	Yes
Other Practitioner: Total Medicaid Pd (TOS 10)	N/A	\$14,502,488	N/A	\$17,159,023	N/A	\$17,808,493	N/A	18.32	3.79	15% (+/-)	Yes
Other Practitioner: Number of Users	N/A	168,755	N/A	171,783	N/A	165,219	N/A	1.79	-3.82	15% (+/-)	Yes
Other Practitioner: Avg Medicaid Pd per User	N/A	\$86	N/A	\$100	N/A	\$108	N/A	16.23	7.91	15% (+/-)	Yes
OPD: Total Medicaid Paid (TOS 11)	N/A	\$141,501,604	N/A	\$156,356,492	N/A	\$152,516,498	N/A	10.50	-2.46	15% (+/-)	Yes
OPD Number of Users	N/A	391,982	N/A	414,013	N/A	427,043	N/A	5.62	3.15	15% (+/-)	Yes
OPD: Avg Medicaid Pd per User	N/A	\$361	N/A	\$378	N/A	\$357	N/A	4.62	-5.43	15% (+/-)	Yes
Clinic: Total Medicaid Paid (TOS 12)	N/A	\$41,970,915	N/A	\$48,927,903	N/A	\$50,229,236	N/A	16.58	2.66	15% (+/-)	Yes
Clinic: Number of Users	N/A	99,336	N/A	127,283	N/A	136,807	N/A	28.13	7.48	15% (+/-)	Yes
Clinic: Avg Medicaid Pd per User	N/A	\$423	N/A	\$384	N/A	\$367	N/A	-9.02	-4.49	15% (+/-)	Yes
HH: Total Medicaid Paid (TOS 13)	N/A	\$27,129,623	N/A	\$28,263,487	N/A	\$25,436,267	N/A	4.18	-10.00	15% (+/-)	Yes
HH: Number of Users	N/A	10,073	N/A	11,263	N/A	10,198	N/A	11.81	-9.46	15% (+/-)	Yes
HH: Avg Medicaid Pd per User	N/A	\$2,693	N/A	\$2,509	N/A	\$2,494	N/A	-6.83	-0.61	15% (+/-)	Yes
Lab/Xray: Total Medicaid Paid (TOS 15)	N/A	\$151,274,103	N/A	\$160,672,908	N/A	\$166,361,222	N/A	6.21	3.54	15% (+/-)	Yes
Lab/Xray: Number of Users	N/A	550,171	N/A	608,118	N/A	590,692	N/A	10.53	-2.87	15% (+/-)	Yes
Lab/Xray:Avg Medicaid Pd per User	N/A	\$275	N/A	\$264	N/A	\$282	N/A	-3.91	6.60	15% (+/-)	Yes
Drugs: Total Medicaid Paid (TOS 16)	N/A	\$780,531,319	N/A	\$932,170,182	N/A	\$975,679,694	N/A	19.43	4.67	15% (+/-)	Yes
Drugs: Number of Users	N/A	715,556	N/A	777,223	N/A	767,972	N/A	8.62	-1.19	15% (+/-)	Yes
Drugs: Avg Medicaid Pd per User	N/A	\$1,091	N/A	\$1,199	N/A	\$1,270	N/A	9.95	5.93	15% (+/-)	Yes
Other Services: Total Medicaid Paid (TOS 19)	N/A	\$178,559,833	N/A	\$261,064,555	N/A	\$323,546,460	N/A	46.21	23.93	15% (+/-)	No
Other Services: Number of Users	N/A	323,228	N/A	440,986	N/A	422,708	N/A	36.43	-4.14	15% (+/-)	Yes
Other Services: Avg Medicaid Pd per User	N/A	\$552	N/A	\$592	N/A	\$765	N/A	7.16	29.29	15% (+/-)	No
Transportation: Total Medicaid Paid (TOS 26)	N/A	\$42,537,228	N/A	\$42,877,163	N/A	\$43,802,909	N/A	0.80	2.16	15% (+/-)	Yes
Transportation: Number of Users	N/A	92,955	N/A	99,880	N/A	98,976	N/A	7.45	-0.91	15% (+/-)	Yes
Transportation: Avg Medicaid Pd per User	N/A	\$458	N/A	\$429	N/A	\$443	N/A	-6.19	3.09	15% (+/-)	Yes
PCS: Total Medicaid Paid (TOS 30)	N/A	\$5,908,253	N/A	\$23,779,890	N/A	\$69,134,503	N/A	302.50	190.70	15% (+/-)	No
PCS: Number of Users	N/A	1,479	N/A	4,295	N/A	7,291	N/A	190.40	69.76	15% (+/-)	No
PCS: Avg Medicaid Pd per User	N/A	\$3,995	N/A	\$5,537	N/A	\$9,482	N/A	38.60	71.26	15% (+/-)	No
Target Case Management: Total Medicaid Pd (TOS 31)	N/A	\$13,963,803	N/A	\$18,347,671	N/A	\$16,611,756	N/A	31.39	-9.46	15% (+/-)	Yes
Target Case Management: Number of Users	N/A	10,542	N/A	12,447	N/A	11,579	N/A	18.07	-6.97	15% (+/-)	Yes
Target Case Management: Avg Medicaid Pd per User	N/A	\$1,325	N/A	\$1,474	N/A	\$1,435	N/A	11.28	-2.67	15% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: LA

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	\$1,143,941	N/A	\$1,054,214	N/A	\$1,633,474	N/A	-7.84	54.95	15% (+/-)	No
Rehab Services: Number of Users	N/A	3,018	N/A	2,640	N/A	4,980	N/A	-12.50	88.64	15% (+/-)	No
Rehab Services: Avg Medicaid Pd per User	N/A	\$379	N/A	\$399	N/A	\$328	N/A	5.35	-17.90	15% (+/-)	No
PT/OT/Speech/Hear: Total Medicaid Paid (TOS 34)	N/A	\$12,153,937	N/A	\$18,225,972	N/A	\$16,460,298	N/A	49.96	-9.69	15% (+/-)	Yes
PT/OT/Speech/Hear: Number of Users	N/A	70,286	N/A	79,187	N/A	70,152	N/A	12.66	-11.40	15% (+/-)	Yes
PT/OT/Speech/Hear: Avg Medicaid Pd per User	N/A	\$173	N/A	\$230	N/A	\$235	N/A	33.10	1.94	15% (+/-)	Yes
Hospice: Total Medicaid Paid (TOS 35)	N/A	\$15,108,945	N/A	\$21,175,609	N/A	\$26,045,653	N/A	40.15	23.00	15% (+/-)	No
Hospice: Number of Users	N/A	2,768	N/A	3,325	N/A	3,755	N/A	20.12	12.93	15% (+/-)	Yes
Hospice: Avg Medicaid Pd per User	N/A	\$5,458	N/A	\$6,369	N/A	\$6,936	N/A	16.67	8.91	15% (+/-)	Yes
DME: Total Medicaid Paid (TOS 51)	N/A	\$71,869,873	N/A	\$63,372,239	N/A	\$60,473,470	N/A	-11.80	-4.57	15% (+/-)	Yes
DME: Number of Users	N/A	257,758	N/A	270,146	N/A	275,831	N/A	4.81	2.10	15% (+/-)	Yes
DME: Avg Medicaid Pd per User	N/A	\$279	N/A	\$235	N/A	\$219	N/A	-15.90	-6.54	15% (+/-)	Yes
Residential Care: Total Medicaid Paid (TOS 52)	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Residential Care: Number of Users	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Residential Care: 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
Psych. Services: Total Medicaid Paid (TOS 53)	N/A	\$57,419,358	N/A	\$71,451,366	N/A	\$56,871,275	N/A	24.44	-20.40	15% (+/-)	No
Psych. Services: Number of Users	N/A	68,320	N/A	68,050	N/A	67,724	N/A	-0.40	-0.48	15% (+/-)	Yes
Psych. Services: Avg Medicaid Pd per User	N/A	\$840	N/A	\$1,050	N/A	\$840	N/A	24.93	-20.00	15% (+/-)	No
Adult Day Care: Total Medicaid Paid (TOS 54)	N/A	\$42,062,726	N/A	\$42,646,451	N/A	\$0	N/A	1.39	-100.00	15% (+/-)	No
Adult Day Care: Number of Users	N/A	4,171	N/A	4,207	N/A	0	N/A	0.86	-100.00	15% (+/-)	No
Adult Day Care: Avg Medicaid Pd per User	N/A	\$10,085	N/A	\$10,137	N/A	Div by 0	N/A	0.52	Div by 0	15% (+/-)	N/A
<b>AVG FFS MEDICAID AMT PD/FFS ENROLLEE BY SELECTED MAX TOS</b>											
Inpatient Hospital (TOS=01)	N/A	\$616	N/A	\$635	N/A	\$591	N/A	3.08	-7.01	15% (+/-)	Yes
Aged	N/A	\$712	N/A	\$484	N/A	\$441	N/A	-32.10	-8.79	15% (+/-)	Yes
Disabled	N/A	\$1,926	N/A	\$2,010	N/A	\$1,956	N/A	4.39	-2.70	15% (+/-)	Yes
Child	N/A	\$176	N/A	\$220	N/A	\$163	N/A	25.07	-25.80	15% (+/-)	No
Adult	N/A	\$1,107	N/A	\$1,192	N/A	\$1,073	N/A	7.73	-9.97	15% (+/-)	Yes
ILTC (TOS=02,04,05,07)	N/A	\$1,010	N/A	\$964	N/A	\$1,007	N/A	-4.54	4.46	15% (+/-)	Yes
Aged	N/A	\$6,402	N/A	\$6,966	N/A	\$7,335	N/A	8.83	5.29	15% (+/-)	Yes
Disabled	N/A	\$3,140	N/A	\$3,127	N/A	\$3,172	N/A	-0.42	1.45	15% (+/-)	Yes
Child	N/A	\$14	N/A	\$16	N/A	\$16	N/A	15.30	-3.73	15% (+/-)	Yes
Adult	N/A	\$18	N/A	\$28	N/A	\$31	N/A	51.95	10.42	15% (+/-)	Yes
Drugs (TOS=16)	N/A	\$774	N/A	\$837	N/A	\$883	N/A	8.19	5.49	15% (+/-)	Yes
Aged	N/A	\$2,930	N/A	\$3,400	N/A	\$3,572	N/A	16.05	5.08	15% (+/-)	Yes
Disabled	N/A	\$2,195	N/A	\$2,479	N/A	\$2,556	N/A	12.90	3.10	15% (+/-)	Yes
Child	N/A	\$238	N/A	\$270	N/A	\$283	N/A	13.33	4.86	15% (+/-)	Yes
Adult	N/A	\$328	N/A	\$380	N/A	\$408	N/A	15.78	7.34	15% (+/-)	Yes
All Other Services	N/A	\$1,135	N/A	\$1,186	N/A	\$1,224	N/A	4.43	3.20	15% (+/-)	Yes
Aged	N/A	\$1,419	N/A	\$1,416	N/A	\$1,938	N/A	-0.19	36.87	15% (+/-)	No
Disabled	N/A	\$3,324	N/A	\$3,614	N/A	\$3,678	N/A	8.71	1.78	15% (+/-)	Yes
Child	N/A	\$509	N/A	\$551	N/A	\$515	N/A	8.23	-6.55	15% (+/-)	Yes
Adult	N/A	\$1,292	N/A	\$1,338	N/A	\$1,293	N/A	3.60	-3.37	15% (+/-)	Yes
<b>% OF FFS ENROLLEES WITH CLAIMS BY SELECTED MAX TYPE OF SERVICE</b>											
% FFS Enrollees with IP Claims (TOS=01)	N/A	15.27	N/A	13.94	N/A	12.02	N/A	-8.69	-13.80	15% (+/-)	Yes
Aged	N/A	58.63	N/A	50.85	N/A	37.68	N/A	-13.30	-25.90	15% (+/-)	No
Disabled	N/A	28.03	N/A	25.94	N/A	22.00	N/A	-7.47	-15.20	15% (+/-)	No
Child	N/A	3.86	N/A	4.31	N/A	3.57	N/A	11.80	-17.20	15% (+/-)	No
Adult	N/A	31.28	N/A	31.13	N/A	28.62	N/A	-0.50	-8.05	15% (+/-)	Yes
% FFS Enrollees with ILTC Claims (TOS=02,04,05,07)	N/A	4.62	N/A	4.12	N/A	4.13	N/A	-10.80	0.19	15% (+/-)	Yes
Aged	N/A	35.61	N/A	35.84	N/A	36.16	N/A	0.64	0.89	15% (+/-)	Yes
Disabled	N/A	9.93	N/A	9.18	N/A	9.04	N/A	-7.58	-1.57	15% (+/-)	Yes
Child	N/A	0.33	N/A	0.32	N/A	0.30	N/A	-1.43	-6.39	15% (+/-)	Yes
Adult	N/A	0.83	N/A	1.02	N/A	0.94	N/A	23.30	-7.91	15% (+/-)	Yes
% FFS Enrollees with Drug Claims (TOS=16)	N/A	70.92	N/A	69.79	N/A	69.50	N/A	-1.60	-0.41	15% (+/-)	Yes
Aged	N/A	90.42	N/A	90.72	N/A	90.39	N/A	0.33	-0.36	15% (+/-)	Yes
Disabled	N/A	81.07	N/A	79.75	N/A	80.09	N/A	-1.63	0.43	15% (+/-)	Yes
Child	N/A	65.55	N/A	64.45	N/A	63.68	N/A	-1.67	-1.20	15% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: LA

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	73.38	N/A	74.59	N/A	74.62	N/A	1.64	0.05	15% (+/-)	Yes
% FFS Enrollees with All Other Claims	N/A	84.03	N/A	83.46	N/A	82.03	N/A	-0.68	-1.71	15% (+/-)	Yes
Aged	N/A	87.93	N/A	85.53	N/A	85.36	N/A	-2.72	-0.20	15% (+/-)	Yes
Disabled	N/A	87.37	N/A	85.89	N/A	86.28	N/A	-1.70	0.46	15% (+/-)	Yes
Child	N/A	82.78	N/A	82.57	N/A	80.53	N/A	-0.26	-2.46	15% (+/-)	Yes
Adult	N/A	83.68	N/A	84.04	N/A	82.43	N/A	0.43	-1.91	15% (+/-)	Yes
Avg # IP Days per FFS User	N/A	8	N/A	7	N/A	7	N/A	-15.10	1.88	15% (+/-)	Yes
Aged	N/A	10	N/A	8	N/A	9	N/A	-22.90	12.65	15% (+/-)	Yes
Disabled	N/A	12	N/A	10	N/A	11	N/A	-11.80	4.53	15% (+/-)	Yes
Child	N/A	4	N/A	5	N/A	4	N/A	8.35	-11.00	15% (+/-)	Yes
Adult	N/A	4	N/A	4	N/A	4	N/A	1.00	0.88	15% (+/-)	Yes
Avg # ILTC Days per FFS User	N/A	223	N/A	221	N/A	213	N/A	-0.89	-3.85	15% (+/-)	Yes
Aged	N/A	255	N/A	255	N/A	243	N/A	0.07	-4.86	15% (+/-)	Yes
Disabled	N/A	210	N/A	214	N/A	207	N/A	1.70	-3.12	15% (+/-)	Yes
Child	N/A	14	N/A	14	N/A	14	N/A	-2.07	0.16	15% (+/-)	Yes
Adult	N/A	7	N/A	6	N/A	7	N/A	-3.84	10.91	15% (+/-)	Yes
<b>FFS EXPENDITURES AND USERS BY MAX PGM TYPE</b>											
FP: Total Medicaid Paid (Program Type 2)	N/A	\$18,660,797	N/A	\$19,995,085	N/A	\$20,282,598	N/A	7.15	1.44	15% (+/-)	Yes
FP: Number of Users	N/A	85,990	N/A	93,265	N/A	92,661	N/A	8.46	-0.65	15% (+/-)	Yes
FP: Average Medicaid Pd per User	N/A	\$217	N/A	\$214	N/A	\$219	N/A	-1.21	2.10	15% (+/-)	Yes
RHC: Total Medicaid Paid (Program Type 3)	N/A	\$13,144,774	N/A	\$16,903,164	N/A	\$19,833,330	N/A	28.59	17.34	15% (+/-)	No
RHC: Number of Users	N/A	59,545	N/A	69,571	N/A	78,810	N/A	16.84	13.28	15% (+/-)	Yes
RHC: Avg Medicaid Pd per User	N/A	\$221	N/A	\$243	N/A	\$252	N/A	10.06	3.58	15% (+/-)	Yes
FQHC: Total Medicaid Paid (Program Type 4)	N/A	\$7,620,193	N/A	\$9,912,287	N/A	\$11,399,213	N/A	30.08	15.00	15% (+/-)	Yes
FQHC: Number of Users	N/A	47,621	N/A	50,125	N/A	52,423	N/A	5.26	4.59	15% (+/-)	Yes
FQHC: Avg Medicaid Pd per User	N/A	\$160	N/A	\$198	N/A	\$217	N/A	23.58	9.96	15% (+/-)	Yes
IHS: Total Medicaid Pd (Program Type 5)	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
IHS: Number of Users	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
IHS: 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
Section 1915(c) Waiver: Total Medicaid Paid (Program Types 6 and 7)	N/A	\$245,586,074	N/A	\$327,252,728	N/A	\$330,527,786	N/A	33.25	1.00	15% (+/-)	Yes
Section 1915(c) Waiver: Number of Users	N/A	16,262	N/A	18,363	N/A	18,402	N/A	12.92	0.21	15% (+/-)	Yes
Section 1915(c) Waiver: Avg Medicaid Pd per User	N/A	\$15,102	N/A	\$17,821	N/A	\$17,962	N/A	18.01	0.79	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	\$536,893,635	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	122,862	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	\$4,370	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$3,196	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$5,012	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$3,450	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$949	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	11.12	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	49.72	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	44.17	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	0.94	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	0.67	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	\$425,098,556	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	31,327	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	\$13,570	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$14,936	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$17,480	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$3,450	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$949	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	2.84	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	7.16	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	10.30	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	0.94	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	0.67	N/A	N/A	N/A	15% (+/-)	No

2003-2005 MAX PSF VALIDATION TABLE  
STATE: LA

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	\$330,527,786	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	18,402	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	\$17,962	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$12,350	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$24,606	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$4,675	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$1,652	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	1.67	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	4.15	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	6.19	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	0.57	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	0.15	N/A	N/A	N/A	15% (+/-)	No