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2003-2005 MAX IP VALIDATION TABLE  
STATE:

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		N/A		N/A		N/A			Yes
% Encounter Claims	N/A		N/A		N/A		N/A			Yes
% Supplemental Claims	N/A		N/A		N/A		N/A			Yes
Total FFS Claims	N/A		N/A		N/A		N/A			Yes
% Crossover	5-20		No		No		No			Yes
% Adjusted Claims	N/A		N/A		N/A		N/A			Yes
% Standard Adjustments	> 1%		No		No		No			Yes
Aver. Amt. Pd Adjust. ( include \$0)	N/A		N/A		N/A		N/A			Yes
Total number of claims with missing Medicaid eligibility (excludes S-SCHIP only)	N/A		N/A		N/A		N/A			Yes
<b>FFS Non-Crossover Claims (Type of Claim=1, Crossover Claim Indicator=0)</b>										
Total Number of Claims	N/A		N/A		N/A		N/A			Yes
% Claims with> \$0 Paid	95-100		No		No		No			Yes
% Claims with< \$0 Paid	0		Yes		Yes		Yes			Yes
Aver. Medicaid Amount Paid (claims with >\$0 paid)	\$2000 - \$7000		No		No		No			Yes
Aver. Medicaid Amt Paid per Covered Day (>\$0 paid and >0 days claims)	N/A		N/A		N/A		N/A			Yes
% Claims with TPL	>0 - 10		No		No		No			Yes
Aver. TPL Paid for claims with TPL	N/A		N/A		N/A		N/A			Yes
% Claims with UB-92 Accommodation Codes	95-100		No		No		No			Yes
Average # UB-92 Accom. Codes (at least 1 accom code)	>1		No		No		No			Yes
% Claims with UB-92 Ancillary Codes	95-100		No		No		No			Yes
Average # UB-92 Ancillary Codes (at least 1 Ancillary code)	>3		No		No		No			Yes
Average LOS	2-<8		No		No		No			Yes
Average Covered Days (> 0 day)	2-<8		No		No		No			Yes
% Begin Date = Admit Date	95-100		No		No		No			Yes
% IP Claims (MAX TOS 01)	95-100		No		No		No			Yes
% Family Planning Claims (pgm type=2)	>0-5		No		No		No			Yes
% Claims with PDX	98-100		No		No		No			Yes
Average Number of DX Codes (at least 1 DX)	>=2		No		No		No			Yes
% Claims with PDX, where length=3	5-30		No		No		No			Yes
% Claims with PDX, where length=4	15-75		No		No		No			Yes
% Claims with PDX, where length=5	25-70		No		No		No			Yes
% Claims with a procedure code	35-70		No		No		No			Yes
Average Number of Procedures for claims with at least 1 procedure code	>1		No		No		No			Yes
% Claims with Procedures that have CPT-4 Indicator	N/A		N/A		N/A		N/A			Yes
% Claims with Procedures that have ICD-9 Indicator	N/A		N/A		N/A		N/A			Yes
% Claims with Procedures that have CPT-4 Indicator & CPT-4 format of 5n	N/A		N/A		N/A		N/A			Yes

2003-2005 MAX IP 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 with Procedures that have ICD-9-CM Indicator & ICD-9-CM Format 3n or 4n	N/A		N/A		N/A		N/A			Yes
% Claims with DRG	>=90		No		No		No			Yes
% Claims Maternal Delivery Indicator	N/A		N/A		N/A		N/A			Yes
% Claims Newborn Delivery Indicator (only for separate infant delivery claims using mother's ID)	N/A		N/A		N/A		N/A			Yes
<b>Patient Status</b>										
% Home	75-90		No		No		No			Yes
% Transferred	1-10		No		No		No			Yes
% Still a Patient	>0 - 2		No		No		No			Yes
% Died	>0 - 3		No		No		No			Yes
<b>FFS Crossover Claims (Type of Claim=1, Crossover Claim Indicator=1)</b>										
Total Number of Claims	N/A		N/A		N/A		N/A			Yes
% Claims with> \$0 Paid	N/A		N/A		N/A		N/A			Yes
% Claims with< \$0 Paid	0		Yes		Yes		Yes			Yes
Aver. Medicaid Amount Paid (claims with >\$0 paid)	N/A		N/A		N/A		N/A			Yes
% Claims with TPL	N/A		N/A		N/A		N/A			Yes
Aver. TPL Paid -claims with TPL	N/A		N/A		N/A		N/A			Yes
% Claims with UB-92 Accommodation Codes	95-100		No		No		No			Yes
Average # UB-92 Accom. Codes (at least 1 accom code)	>1		No		No		No			Yes
% Claims with UB-92 Ancillary Codes	95-100		No		No		No			Yes
Average # UB-92 Ancillary Codes (at least 1 Ancillary code)	>3		No		No		No			Yes
Average LOS	2-<8		No		No		No			Yes
% Begin Date = Admit Date	95-100		No		No		No			Yes
% Claims with IP TOS	95-100		No		No		No			Yes
% Claims with DX	98-100		No		No		No			Yes
Average Number of DX Codes (at least 1 DX)	>=2		No		No		No			Yes
% Claims with PDX, where length=3	5-30		No		No		No			Yes
% Claims with PDX, where length=4	15-75		No		No		No			Yes
% Claims with PDX, where length=5	25-70		No		No		No			Yes
% Claims with a procedure code	35-70		No		No		No			Yes
Average Number of Procedures for claims with at least 1 procedure code	>1		No		No		No			Yes
% Claims with Procedures that have CPT-4 Indicator	N/A		N/A		N/A		N/A			Yes
% Claims with Procedures that have ICD-9 Indicator	N/A		N/A		N/A		N/A			Yes
% Claims with Procedures that have CPT-4 Indicator & CPT-4 format of 5n	N/A		N/A		N/A		N/A			Yes
% Claims with Procedures that have ICD-9-CM Indicator & ICD-9-CM Format 3n or 4n	N/A		N/A		N/A		N/A			Yes
% Claims with DRG	>=90		No		No		No			Yes

2003-2005 MAX LT VALIDATION TABLE  
STATE:

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		N/A		N/A		N/A			Yes
% Encounter Claims	N/A		N/A		N/A		N/A			Yes
% Supplemental Claims	N/A		N/A		N/A		N/A			Yes
Total FFS Claims	N/A		N/A		N/A		N/A			Yes
% Crossover	5-20		No		No		No			Yes
% Adjusted Claims	> 1%		No		No		No			Yes
% Standard Adjustments	N/A		N/A		N/A		N/A			Yes
Aver. Amt. Pd Adjust. ( include \$0)	N/A		N/A		N/A		N/A			Yes
Total number of claims with missing Medicaid eligibility (excludes S-SCHIP only)	N/A		N/A		N/A		N/A			Yes
<b>FFS Non-Crossover Claims (Type of Claim=1 Crossover Claim Indicator=0)</b>										
Total Number of Claims	N/A		N/A		N/A		N/A			Yes
% Claims with> \$0 Paid	N/A		N/A		N/A		N/A			Yes
% Claims with< \$0 Paid	0		Yes		Yes		Yes			Yes
<b>Average Medicaid Amount Paid Per Covered Day (claims with &gt;\$0 paid)</b>										
NF (TOS 07)	\$50-\$100		No		No		No			Yes
ICF/MR (TOS 05)	N/A		N/A		N/A		N/A			Yes
Aged/MH (TOS 02)	N/A		N/A		N/A		N/A			Yes
IP Psych. < 21 (TOS 04)	N/A		N/A		N/A		N/A			Yes
% NF (TOS 07)	75-99		No		No		No			Yes
% NF claims with NF Covered Days	N/A		N/A		N/A		N/A			Yes
Avg days for NF claims with Covered Days	N/A		N/A		N/A		N/A			Yes
% ICF/MR (TOS 05)	>0-20		No		No		No			Yes
% ICF/MR claims with ICF/MR Covered Days	N/A		N/A		N/A		N/A			Yes
Avg days for ICF/MR claims with Covered Days	N/A		N/A		N/A		N/A			Yes
% Aged/MH (TOS 02)	>0-10		No		No		No			Yes
% Aged/MH claims with Aged/MH Covered Days	N/A		N/A		N/A		N/A			Yes
Avg days for Aged/MH claims with Covered Days	N/A		N/A		N/A		N/A			Yes
% IP Psych. < 21 (TOS 04)	>0-5		No		No		No			Yes
% IP Psych. < 21 claims with IP Psych Covered Days	N/A		N/A		N/A		N/A			Yes
Avg days for IP Psych. < 21 claims with Covered Days	N/A		N/A		N/A		N/A			Yes
% Claims with Leave Days	1-20		No		No		No			Yes
% Claims with DX	95-100		No		No		No			Yes
% Claims with DX, where length=3	5-30		No		No		No			Yes
% Claims with DX, where length=4	15-75		No		No		No			Yes
% Claims with DX, where length=5	25-70		No		No		No			Yes
<b>Patient Status</b>										
% Home	1-5		No		No		No			Yes
% Still a Patient	8-98		No		No		No			Yes
% Died	>0-5		No		No		No			Yes
<b>FFS Crossover Claims (Type of Claim=1, Crossover Claim Indicator=1)</b>										
Total Number of Claims	N/A		N/A		N/A		N/A			Yes
% Claims with> \$0 Paid	N/A		N/A		N/A		N/A			Yes
% Claims with< \$0 Paid	0		Yes		Yes		Yes			Yes

2003-2005 MAX LT VALIDATION TABLE  
STATE:

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		N/A		N/A		N/A			Yes
% NF (TOS 07)	75-99		No		No		No			Yes
% ICF/MR (TOS 05)	>0-20		No		No		No			Yes
% Aged/MH (TOS 02)	>0-10		No		No		No			Yes
% IP Psych. < 21 (TOS 04)	>0-5		No		No		No			Yes
% Claims with DX	95-100		No		No		No			Yes
% Claims with DX, where length=3	5-30		No		No		No			Yes
% Claims with DX, where length=4	15-75		No		No		No			Yes
% Claims with DX, where length=5	25-70		No		No		No			Yes
Patient Status										
% Home	1-5		No		No		No			Yes
% Still a Patient	8-98		No		No		No			Yes
% Died	>0-5		No		No		No			Yes

2003-2005 MAX OT VALIDATION TABLE  
STATE:

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		N/A		N/A		N/A			Yes
% Encounter Claims (Claim Type=3)	N/A		N/A		N/A		N/A			Yes
% Supplemental Claims	N/A		N/A		N/A		N/A			Yes
% Cap Claims (Claim Type=2, and MAX TOS 20,21,22)	N/A		N/A		N/A		N/A			Yes
Total FFS Claims Excluding Capitation Payments	N/A		N/A		N/A		N/A			Yes
% Crossover	5-20		No		No		No			Yes
% Adjusted Claims	> 1%		No		No		No			Yes
% Standard Adjustments	N/A		N/A		N/A		N/A			Yes
Aver. Amt. Pd Adjust. ( include \$0)	N/A		N/A		N/A		N/A			Yes
% Claims(TOC 1,2) TOS 20: HMO Cap Payment	N/A		N/A		N/A		N/A			Yes
% Claims(TOC 1,2) TOS 21: PHP Cap Payments	N/A		N/A		N/A		N/A			Yes
% Claims(TOC 1,2) TOS 22: PCCM Cap Pay.	N/A		N/A		N/A		N/A			Yes
Average Paid per HMO Cap Clms (TOS 20)	\$75-\$300		No		No		No			Yes
Average Paid per PHP Cap Clms (TOS 21)	\$20-\$250		No		No		No			Yes
Average Paid per PCCM Cap Clms (TOS 22)	3-5		No		No		No			Yes
Total number of claims with missing Medicaid eligibility (excludes S-SCHIP only)	N/A		N/A		N/A		N/A			Yes
<b>FFS Non-Crossover Claims (Type of Claim=1, Crossover Claim Indicator=0, excluding capitation claims)</b>										
Total Number of Claims	N/A		N/A		N/A		N/A			Yes
% Claims with> \$0 Paid	>95%		No		No		No			Yes
% Claims with< \$0 Paid	0		Yes		Yes		Yes			Yes
% Claims with Span Bill	N/A		N/A		N/A		N/A			Yes
% OPD Claims with Span Bill/ All OPD Claims(TOS 11)	N/A		N/A		N/A		N/A			Yes
% HH Claims with Span Bill/All HH Claims (TOS 13)	N/A		N/A		N/A		N/A			Yes
% Other Claims with Span Bills/All Other Claims	N/A		N/A		N/A		N/A			Yes
% Claims W/ Service Place 11- Office	50-90		No		No		No			Yes
% Claims W/ Service Place 12 - Home	>0-5		No		No		No			Yes
% Claims W/ Service Place 21 - Hospital	>0-5		No		No		No			Yes
% Claims W/ Service Place 32 - NF	>0-5		No		No		No			Yes
% Claims W/ Service Place 23 - ER	1-10		No		No		No			Yes
% Claims w/ Service Place 22 - OPD	>0-10		No		No		No			Yes
% Claims W/ Service Place 99 - Unknown/Other	<5		Yes		Yes		Yes			Yes
% Claims with TPL	>0 - 15		No		No		No			Yes
Aver. TPL Paid -claims with TPL	N/A		N/A		N/A		N/A			Yes
<b>PERCENT CLAIMS/MAX TOS</b>										
% claims MAX TOS 08: Physicians	10-35		No		No		No			Yes
% claims MAX TOS 09: Dental	2-20		No		No		No			Yes
% claims MAX TOS 10: Other Practioner	0.5-8		No		No		No			Yes
% claims MAX TOS 11: OPD	3-25		No		No		No			Yes
% claims MAX TOS 12: Clinic	2-25		No		No		No			Yes
% claims MAX TOS 13: HH	>0-25		No		No		No			Yes
% claims MAX TOS 15: Lab/Xray	4-20		No		No		No			Yes
% claims MAX TOS 16: Drugs	<3		Yes		Yes		Yes			Yes
% claims MAX TOS 19: Other Services	<25		Yes		Yes		Yes			Yes

2003-2005 MAX OT VALIDATION TABLE  
STATE:

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		No		No		No			Yes
% claims MAX TOS 26: Transportation	>1		No		No		No			Yes
% claims MAX TOS 24: Sterilizations	N/A		N/A		N/A		N/A			Yes
% claims MAX TOS 25: Abortions	N/A		N/A		N/A		N/A			Yes
% claims MAX TOS 30: PCS	>0		No		No		No			Yes
% claims MAX TOS 31: TCM	>0		No		No		No			Yes
% claims MAX TOS 33: Rehabilitation	>0		No		No		No			Yes
% claims MAX TOS 34: PT/OT/hear/speech	>1		No		No		No			Yes
% claims MAX TOS 35: Hospice	>0		No		No		No			Yes
% claims MAX TOS 36: Nurse Midwife	N/A		N/A		N/A		N/A			Yes
% claims MAX TOS 37: Nurse Practitioner	N/A		N/A		N/A		N/A			Yes
% claims MAX TOS 38: Private Nursing	N/A		N/A		N/A		N/A			Yes
% claims MAX TOS 39: Religious Non-Med.	N/A		N/A		N/A		N/A			Yes
% claims MAX TOS 52: Residential Care	N/A		N/A		N/A		N/A			Yes
% claims MAX TOS 53: Psych. Services	>1		No		No		No			Yes
% claims MAX TOS 54: Adult Day Care	>0		No		No		No			Yes
% claims MAX TOS 99: Unknown	<1		Yes		Yes		Yes			Yes
Average Medicaid Amount Paid For Selected MAX TOS (excluding claims with <=\$0 paid)										
Total	N/A		N/A		N/A		N/A			Yes
08: Physicians	\$20-90		No		No		No			Yes
09: Dental	\$10-60		No		No		No			Yes
10: Other Practioner	\$10-100		No		No		No			Yes
11: OPD	\$20-100		No		No		No			Yes
12: Clinic	\$20-100		No		No		No			Yes
13: HH	N/A		N/A		N/A		N/A			Yes
15: Lab/Xray	10-60		No		No		No			Yes
16: Drugs	10-60		No		No		No			Yes
19: Other Services	N/A		N/A		N/A		N/A			Yes
51: DME	N/A		N/A		N/A		N/A			Yes
26: Transportation	N/A		N/A		N/A		N/A			Yes
30: PCS	N/A		N/A		N/A		N/A			Yes
31: Targeted Case Management	N/A		N/A		N/A		N/A			Yes
33: Rehabilitation	N/A		N/A		N/A		N/A			Yes
34: PT/OT/speech/hear	N/A		N/A		N/A		N/A			Yes
35: Hospice	N/A		N/A		N/A		N/A			Yes
52: Residential Care	N/A		N/A		N/A		N/A			Yes
53: Psych. Services	N/A		N/A		N/A		N/A			Yes
54: Adult Day Care	N/A		N/A		N/A		N/A			Yes
PERCENT OF CLAIMS BY PROGRAM TYPE (claim type 1)										
% Family Planning (code 2)	N/A		N/A		N/A		N/A			Yes
% RHC (code 3)	N/A		N/A		N/A		N/A			Yes
% FQHC (code 4)	N/A		N/A		N/A		N/A			Yes
% IHS (code 5)	N/A		N/A		N/A		N/A			Yes
% Waiver (code 6,7)	N/A		N/A		N/A		N/A			Yes
AVERAGE EXPENDITURES BY PROGRAM										
Family Planning (code 2)	N/A		N/A		N/A		N/A			Yes

2003-2005 MAX OT VALIDATION TABLE  
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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Change Within Expected Range
RHC (code 3)	N/A		N/A		N/A		N/A			Yes
FQHC (code 4)	N/A		N/A		N/A		N/A			Yes
IHS (code 5)	N/A		N/A		N/A		N/A			Yes
Waiver (code 6, 7)	N/A		N/A		N/A		N/A			Yes
% Claims with DX	> 60		No		No		No			Yes
% Claims with DX (MAX TOS 8, 11, 12)	85-100		No		No		No			Yes
% Claims with 1 DX that have 2 DX	N/A		N/A		N/A		N/A			Yes
% Claims with DX, where length=3	5-25		No		No		No			Yes
% Claims with DX, where length=4	40-70		No		No		No			Yes
% Claims with DX, where length=5	20-55		No		No		No			Yes
% OPD Claims with Service Code or UB-92/OPD Claims (TOS 11)	N/A		N/A		N/A		N/A			Yes
% HH Claims with Service Code or UB-92/HH Claims (TOS13)	N/A		N/A		N/A		N/A			Yes
% Other Claims with Service Codes /All Other Claims (Excluding OPD/HH)	98-100		No		No		No			Yes
% CPT-4 Service Code Indicator (code 01)/Claims with Service Codes	N/A		N/A		N/A		N/A			Yes
% HCPCS (II & III) Service Codes Indicator (code 06)/Claims with Service Codes	N/A		N/A		N/A		N/A			Yes
% Other National Code Indicator (codes 2-5, 7- 9)/Claims with Service Codes	N/A		N/A		N/A		N/A			Yes
% State Specific Serv. Indicator (10-87)/Claims with Service Codes	N/A		N/A		N/A		N/A			Yes
% CPT-4 Format Codes- 5n/Claims with CPT-4	98-100		No		No		No			Yes
% HCPCS Format Codes Cnnnn or Cnnnn /Claims with HCPCS	98-100		No		No		No			Yes
% Claims with TOS 08 with Physician Specialty	N/A		N/A		N/A		N/A			Yes
PERCENT OF CLAIMS BY CLTC CODE										
CLTC 00: not a CLTC claim	N/A		N/A		N/A		N/A			Yes
CLTC Non-Waiver Claims (11-20)	N/A		N/A		N/A		N/A			Yes
CLTC 11: Non-Waiver Personal Care	N/A		N/A		N/A		N/A			Yes
CLTC 12: Non-Waiver PDN	N/A		N/A		N/A		N/A			Yes
CLTC 13: Non-Waiver Adult Day	N/A		N/A		N/A		N/A			Yes
CLTC 14: Non-Waiver HH	N/A		N/A		N/A		N/A			Yes
CLTC 15: Non-Waiver Residential Care	N/A		N/A		N/A		N/A			Yes
CLTC 16: Non-Waiver Rehab	N/A		N/A		N/A		N/A			Yes
CLTC 17: Non-Waiver TCM	N/A		N/A		N/A		N/A			Yes
CLTC 18: Non-Waiver Transportation	N/A		N/A		N/A		N/A			Yes
CLTC 19: Non-Waiver Hospice	N/A		N/A		N/A		N/A			Yes
CLTC 20: Non-Waiver DME	N/A		N/A		N/A		N/A			Yes
CLTC Waiver Claims (30-40)	N/A		N/A		N/A		N/A			Yes
CLTC 30: Other Waiver	N/A		N/A		N/A		N/A			Yes
CLTC 31: Waiver Personal Care	N/A		N/A		N/A		N/A			Yes
CLTC 32: Waiver PDN	N/A		N/A		N/A		N/A			Yes
CLTC 33: Waiver Adult Day	N/A		N/A		N/A		N/A			Yes
CLTC 34: Waiver HH	N/A		N/A		N/A		N/A			Yes



2003-2005 MAX OT VALIDATION TABLE  
STATE:

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			Yes
CLTC 36: Waiver Rehab	N/A		N/A		N/A		N/A			Yes
CLTC 37: Waiver TCM	N/A		N/A		N/A		N/A			Yes
CLTC 38: Waiver Transportation	N/A		N/A		N/A		N/A			Yes
CLTC 39: Waiver Hospice	N/A		N/A		N/A		N/A			Yes
CLTC 40: Waiver DME	N/A		N/A		N/A		N/A			Yes
<b>FFS Crossover Claims (Type of Claim=1), Crossover Claim Indicator=1, excluding capitation claims)</b>										
Total Number of Claims	N/A		N/A		N/A		N/A			Yes
% Claims with> \$0 Paid	>95%		No		No		No			Yes
% Claims with< \$0 Paid	0		Yes		Yes		Yes			Yes
% Claims with Span Bill	N/A		N/A		N/A		N/A			Yes
% OPD Claims with Span Bill/ All OPD Claims(TOS 11)	N/A		N/A		N/A		N/A			Yes
% HH Claims with Span Bill/All HH Claims (TOS 13)	N/A		N/A		N/A		N/A			Yes
% Other Claims with Span Bills/All Other Claims	N/A		N/A		N/A		N/A			Yes
<b>PERCENT CLAIMS/MAX TOS (excluding 20-22)</b>										
% claims MAX TOS 08: Physicians	N/A		N/A		N/A		N/A			Yes
% claims MAX TOS 10: Other Practioner	N/A		N/A		N/A		N/A			Yes
% claims MAX TOS 11: OPD	N/A		N/A		N/A		N/A			Yes
% claims MAX TOS 12: Clinic	N/A		N/A		N/A		N/A			Yes
% claims MAX TOS 13: HH	N/A		N/A		N/A		N/A			Yes
% claims MAX TOS 15: Lab/Xray	N/A		N/A		N/A		N/A			Yes
% claims MAX TOS 19: Other Services	N/A		N/A		N/A		N/A			Yes
% claims MAX TOS 51: DME	N/A		N/A		N/A		N/A			Yes
% claims MAX TOS 26: Transportation	N/A		N/A		N/A		N/A			Yes
% claims MAX TOS 30: PCS	N/A		N/A		N/A		N/A			Yes
% claims MAX TOS 31: TCM	N/A		N/A		N/A		N/A			Yes
% claims MAX TOS 33: Rehabilitation	N/A		N/A		N/A		N/A			Yes
% claims MAX TOS 34: PT/OT/hear/speech	N/A		N/A		N/A		N/A			Yes
% claims MAX TOS 35: Hospice	N/A		N/A		N/A		N/A			Yes
% claims MAX TOS 52: Residential Care	N/A		N/A		N/A		N/A			Yes
% claims MAX TOS 53: Psych. Services	N/A		N/A		N/A		N/A			Yes
% claims MAX TOS 54: Adult Day Care	N/A		N/A		N/A		N/A			Yes
Average Amount Paid	N/A		N/A		N/A		N/A			Yes
% Claims with DX	N/A		N/A		N/A		N/A			Yes
% Claims with DX (MAX TOS 8, 11, 12)	85-100		No		No		No			Yes
% Claims with 1 DX that have 2 DX	N/A		N/A		N/A		N/A			Yes
% Claims with DX, where length=3	5-25		No		No		No			Yes
% Claims with DX, where length=4	40-70		No		No		No			Yes
% Claims with DX, where length=5	20-55		No		No		No			Yes
% OPD Claims with Service Code or UB-92/OPD Claims (TOS 11)	N/A		N/A		N/A		N/A			Yes
% HH Claims with Service Code or UB-92/HH Claims (TOS13)	N/A		N/A		N/A		N/A			Yes
% Other Claims with Service Codes/All Other Claims (Excluding OPD/HH)	98-100		No		No		No			Yes

2003-2005 MAX OT VALIDATION TABLE  
STATE:

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		N/A		N/A		N/A			Yes
% HCPCS (II & III) Service Codes Indicator (code 06)/Claims with Service Codes	N/A		N/A		N/A		N/A			Yes
% Other Codes Indicator /Claims with Service Codes	N/A		N/A		N/A		N/A			Yes

2003-2005 MAX RX VALIDATION TABLE  
STATE: ME

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	5,254,581	N/A	5,686,983	N/A	5,869,490	N/A	8.23	3.21	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	5,254,581	N/A	5,686,983	N/A	5,869,490	N/A	8.23	3.21	Yes
% Adjusted Claims	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% Standard Adjustments	> 1%	Div by 0	Yes	Div by 0	Yes	Div by 0	Yes	Div by 0	Div by 0	N/A
Aver. Amt. Pd Adjust. ( include \$0)	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
Total number of claims with missing Medicaid eligibility (excludes S-SCHIP only)	N/A	N/A	N/A	N/A	N/A	12,273	N/A	N/A	N/A	N/A
<b>FFS Claims (Type of Claim=1)</b>										
Total Number of Claims	N/A	5,254,581	N/A	5,686,983	N/A	5,869,490	N/A	8.23	3.21	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	\$54	Yes	\$54	Yes	\$56	Yes	-0.30	3.78	Yes
% Claims with TPL	>0 - 15	3.32	Yes	3.91	Yes	3.75	Yes	17.96	-4.05	Yes
Aver. TPL Paid for claims with TPL	N/A	\$6,534	N/A	\$6,847	N/A	\$7,369	N/A	4.80	7.63	Yes
% Family Planning Claims (program type=2)	N/A	2.00	N/A	1.98	N/A	2.07	N/A	-0.80	4.71	Yes
% Drug Claims (TOS 16)	95-99	100.00	No	100.00	No	100.00	No	0.00	0.00	Yes
% DME Claims (TOS 51)	>0 - 6	0.00	No	0.00	No	0.00	No	Div by 0	Div by 0	N/A
% Drug Claims with Quantity	>98	99.98	Yes	99.90	Yes	99.83	Yes	-0.09	-0.06	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	99.88	Yes	99.91	Yes	99.90	Yes	0.02	-0.01	Yes
% Claims with Medispan	98-100	99.49	Yes	99.62	Yes	99.69	Yes	0.13	0.07	Yes
% Claims with AHFS	98-100	99.88	Yes	99.91	Yes	99.90	Yes	0.02	-0.01	Yes
% Claims with Generic (GTC)	98-100	99.88	Yes	99.91	Yes	99.90	Yes	0.02	-0.01	Yes
% Claims with GC3	98-100	99.88	Yes	99.91	Yes	99.90	Yes	0.02	-0.01	Yes
<b>NDC Configuration Indicator</b>										
% Prescription (codes 0-3)	N/A	78.84	N/A	77.36	N/A	76.39	N/A	-1.88	-1.26	Yes
% Products (codes 4-6)	N/A	20.86	N/A	22.31	N/A	23.23	N/A	6.91	4.16	Yes
% HRI (code 7)	N/A	0.09	N/A	0.09	N/A	0.12	N/A	2.04	28.20	No
% Claims with Smart Key	98-100	99.88	Yes	99.91	Yes	99.90	Yes	0.02	-0.01	Yes
% OTC-Drug Class	N/A	3.76	N/A	5.06	N/A	5.82	N/A	34.85	14.95	Yes
% Prescription-Drug Class	N/A	96.13	N/A	94.84	N/A	94.08	N/A	-1.34	-0.80	Yes
% Multiple Source (Code Y)	N/A	50.84	N/A	53.91	N/A	56.84	N/A	6.04	5.43	Yes
% Single Source (Code N)	N/A	44.10	N/A	37.15	N/A	36.39	N/A	-15.80	-2.04	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: ME

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	300,579	N/A	315,370	N/A	327,491	N/A	4.92	3.84	10% (+/-)	Yes
Total Medicaid Amount Paid	N/A	\$2,179,723,587	N/A	\$2,150,118,493	N/A	\$328,764,590	N/A	-1.36	-84.70	15% (+/-)	No
% with no services (Code 0)	N/A	8.13	N/A	8.36	N/A	30.62	N/A	2.78	266.40	N/A	N/A
% with FFS only claims (Code 1)	N/A	38.74	N/A	28.85	N/A	69.38	N/A	-25.50	140.50	N/A	N/A
% with only cap claims (Code 2)	N/A	4.75	N/A	7.03	N/A	0.00	N/A	47.97	-100.00	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	48.38	N/A	55.76	N/A	0.00	N/A	15.27	-100.00	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	3,006	N/A	965	N/A	991	N/A	-67.90	2.69	N/A	N/A
% with claims and missing Medicaid eligibility (excludes S-SCHIP only)	<2%	1.00	Yes	0.31	Yes	0.30	Yes	-69.40	-1.11	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	991	N/A	N/A	N/A	N/A	N/A
% with FFS claims and missing Medicaid eligibility (excludes S-SCHIP only)	N/A	N/A	N/A	N/A	N/A	0.30	N/A	N/A	N/A	N/A	N/A
Expenditures for people missing Medicaid eligibility (excludes S-SCHIP only enrollees)	N/A	\$9,820,884	N/A	\$1,873,015	N/A	\$807,273	N/A	-80.90	-56.90	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	\$807,273	N/A	N/A	N/A	N/A	N/A
<b>S-SCHIP ENROLLMENT</b>											
# with ONLY S-SCHIP enrollment	N/A	4,044	N/A	4,290	N/A	4,006	N/A	6.08	-6.62	N/A	N/A
% with ONLY S-SCHIP enrollment	N/A	1.35	N/A	1.36	N/A	1.22	N/A	1.11	-10.10	N/A	N/A
# with ANY S-SCHIP enrollment	N/A	8,981	N/A	7,959	N/A	8,054	N/A	-11.40	1.19	N/A	N/A
% with ANY S-SCHIP enrollment	N/A	2.99	N/A	2.52	N/A	2.46	N/A	-15.50	-2.55	N/A	N/A
Total PYE ANY S-SCHIP enrollment	N/A	4,767	N/A	4,527	N/A	4,185	N/A	-5.03	-7.56	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	293,529	N/A	310,115	N/A	322,494	N/A	5.65	3.99	10% (+/-)	Yes
Total Medicaid PYE (Person Years of Enrollment)	N/A	242,855	N/A	260,853	N/A	271,269	N/A	7.41	3.99	10% (+/-)	Yes
# with any M-SCHIP enrollment (Medicaid enrollees)	N/A	19,134	N/A	19,482	N/A	21,225	N/A	1.82	8.95	N/A	N/A
Total PYE any M-SCHIP	N/A	8,030	N/A	9,386	N/A	9,863	N/A	16.89	5.08	N/A	N/A
<b>Eligibility Demographics</b>											
% Records with Valid SSN Format	>=95%	97.91	Yes	98.25	Yes	99.47	Yes	0.34	1.25	10% (+/-)	Yes
% Records whose MSIS SSN passed High Group Test (Code 1)	>95%	N/A	No	N/A	No	99.38	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	0.02	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	0.08	N/A	N/A	N/A	N/A	N/A
% Records whose MSIS SSN failed High Group Test due to RR with invalid DOB (Code 6)	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A	N/A
#SSNs with duplicate records	0	24	No	24	No	85	No	0.00	254.20	N/A	N/A
% with External SSN from EDB (Code 1)	N/A	N/A	N/A	N/A	N/A	22.57	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%	98.51	Yes	97.91	No	97.82	No	-0.61	-0.10	10% (+/-)	Yes
% with Valid 5 Digit Zip Code Format	>=95%	99.99	Yes	99.99	Yes	99.98	Yes	0.00	0.00	10% (+/-)	Yes
% Enrollees who Died During Year	0.1-3%	0.00	No	0.00	No	0.00	No	Div by 0	Div by 0	10% (+/-)	N/A
% White	N/A	95.48	N/A	89.55	N/A	87.49	N/A	-6.21	-2.31	10% (+/-)	Yes
% Black	N/A	2.06	N/A	2.04	N/A	2.42	N/A	-1.32	18.78	10% (+/-)	No
% Native American/Alaskan Native	N/A	1.21	N/A	1.07	N/A	1.32	N/A	-11.5	23.21	10% (+/-)	No
% Asian	N/A	0.86	N/A	0.79	N/A	0.87	N/A	-7.86	9.87	N/A	N/A
% Native Hawaiian or other Pacific Islander	N/A	0.00	N/A	0.05	N/A	0.10	N/A	Div by 0	121.90	N/A	N/A
% More than one race	N/A	0.00	N/A	0.41	N/A	0.64	N/A	Div by 0	54.96	N/A	N/A
% Unknown race	<5%	0.00	Yes	5.78	No	8.46	No	Div by 0	46.55	N/A	N/A
% Hispanic/Latino (included with race categories prior to 2005)	N/A	0.38	N/A	0.31	N/A	0.27	N/A	-18.8	-13.40	10% (+/-)	No
% of Hispanic/Latino with unknown race	N/A	N/A	N/A	N/A	N/A	41.97	N/A	N/A	N/A	N/A	N/A
% Age 0	2-8%	2.01	Yes	2.07	Yes	2.23	Yes	3.02	7.84	10% (+/-)	Yes
% Age 0-20 Years	49-74%	42.22	No	41.61	No	41.90	No	-1.43	0.71	10% (+/-)	Yes
% Age > 64 Years	5-18%	11.60	Yes	11.00	Yes	11.09	Yes	-5.17	0.80	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	99.90	N/A	99.93	N/A	99.99	N/A	0.04	0.05	N/A	N/A
% Enrollees with 12 months enrollment	40-65%	63.06	No	66.85	No	66.95	No	6.00	0.15	10% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: ME

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	58,257	N/A	59,677	N/A	63,378	N/A	2.44	6.20	10% (+/-)	Yes
Total EDB Dual PYE	N/A	52,687	N/A	54,207	N/A	56,981	N/A	2.88	5.12	15% (+/-)	Yes
% Age > 64 Years who are EDB Duals	>=90%	93.99	Yes	94.30	Yes	94.35	Yes	0.33	0.05	10% (+/-)	Yes
% MAX Aged Groups (11,21,31,41,51) who are EDB Duals	>=90%	93.70	Yes	94.34	Yes	94.49	Yes	0.69	0.15	10% (+/-)	Yes
% MAX Disabled Groups (12,22,32,42,52) who are EDB Duals	30-55%	48.49	Yes	49.49	Yes	49.56	Yes	2.06	0.14	10% (+/-)	Yes
% EDB Only (50)	<5%	3.11	Yes	3.07	Yes	1.13	Yes	-1.25	-63.00	N/A	N/A
% EDB QMB Only (51)	N/A	1.35	N/A	1.28	N/A	2.44	N/A	-4.99	90.79	N/A	N/A
% EDB QMB Plus (52)	N/A	47.91	N/A	58.01	N/A	57.50	N/A	21.07	-0.87	N/A	N/A
% EDB SLMB Only (53)	N/A	8.13	N/A	8.83	N/A	10.09	N/A	8.67	14.28	N/A	N/A
% EDB SLMB Plus (54)	N/A	3.53	N/A	2.96	N/A	2.60	N/A	-16.10	-12.20	N/A	N/A
% EDB QDWI (55)	N/A	0.01	N/A	0.00	N/A	0.00	N/A	-100.00	Div by 0	N/A	N/A
% EDB QI-1 (56)	N/A	4.33	N/A	4.32	N/A	5.06	N/A	-0.13	17.02	N/A	N/A
% EDB QI-2 (57)	N/A	1.13	N/A	0.17	N/A	0.07	N/A	-85.30	-55.30	N/A	N/A
% EDB Other (58)	N/A	30.51	N/A	21.37	N/A	21.10	N/A	-30.00	-1.23	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	2,513	N/A	2,337	N/A	2,423	N/A	-7.00	3.68	10% (+/-)	Yes
% Non-EDB Duals Without Valid SSN	N/A	0.99	N/A	0.77	N/A	0.08	N/A	-22.60	-89.30	10% (+/-)	No
% Non-EDB Duals who are Children/Adults	N/A	15.84	N/A	17.54	N/A	16.38	N/A	10.77	-6.61	10% (+/-)	Yes
% EDB Duals with Spanish Language	N/A	0.05	N/A	0.05	N/A	0.05	N/A	-2.38	4.25	15% (+/-)	Yes
% EDB Duals with EDB Date of Death During Year	6-10%	7.35	Yes	7.16	Yes	6.79	Yes	-2.68	-5.05	15% (+/-)	Yes
% EDB Duals with Medicaid Reported HIC	N/A	86.25	N/A	87.60	N/A	94.16	N/A	1.57	7.48	15% (+/-)	Yes
% EDB Duals with Medicaid reported HIC = Medicare HIC	N/A	96.83	N/A	96.09	N/A	97.42	N/A	-0.76	1.38	15% (+/-)	Yes
TOTAL EDB DUAL ENROLLEES IN JUNE	N/A	54,665	N/A	55,940	N/A	59,741	N/A	2.33	6.80	10% (+/-)	Yes
<b>June Medicare Type</b>											
June % with Part A Medicare	N/A	3.29	N/A	3.53	N/A	4.03	N/A	7.51	14.05	15% (+/-)	Yes
June % with Part B Medicare	N/A	1.61	N/A	1.55	N/A	1.43	N/A	-3.61	-7.44	15% (+/-)	Yes
June % Part A/B Medicare	N/A	95.10	N/A	94.92	N/A	94.53	N/A	-0.20	-0.40	15% (+/-)	Yes
<b>Original Reason for Medicare Entitlement</b>											
% Aged (Code 0)	N/A	43.30	N/A	42.28	N/A	41.46	N/A	-2.38	-1.92	15% (+/-)	Yes
% Disabled (Code 1)	N/A	56.02	N/A	57.07	N/A	57.90	N/A	1.87	1.44	15% (+/-)	Yes
% ESRD (Code 2)	N/A	0.26	N/A	0.28	N/A	0.23	N/A	7.19	-18.70	15% (+/-)	No
% Disabled with ESRD (Code 3)	N/A	0.41	N/A	0.37	N/A	0.41	N/A	-9.76	12.14	15% (+/-)	Yes
<b>Other Eligibility Characteristics (All Enrollees)</b>											
% MAX Aged Groups (11,21,31,41,51) >64 Years	>=99%	99.64	Yes	100.00	Yes	100.00	Yes	0.36	0.00	10% (+/-)	Yes
% MAX Disabled Groups (12,22,32,42,52) >64 Years	N/A	0.00	N/A	0.01	N/A	0.01	N/A	Div by 0	-6.79	10% (+/-)	Yes
% MAX Child Grps (14,16, 24, 34, 44, 48, 54) <21 Years	>=98%	99.94	Yes	99.97	Yes	99.95	Yes	0.03	-0.02	10% (+/-)	Yes
% MAX Adult Groups (15,17,25,35,45,55) >20 Years	>=80%	99.08	Yes	99.02	Yes	98.92	Yes	-0.07	-0.09	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	85.42	N/A	N/A	N/A	N/A	N/A
MAX Aged Total	N/A	33,969	N/A	33,863	N/A	35,471	N/A	-0.31	4.75	10% (+/-)	Yes
11: Aged, Cash	N/A	8,805	N/A	7,832	N/A	7,736	N/A	-11.10	-1.23	10% (+/-)	Yes
21: Aged, MN	N/A	3,238	N/A	2,618	N/A	3,658	N/A	-19.10	39.72	10% (+/-)	No
31: Aged, Poverty	N/A	16,318	N/A	17,392	N/A	18,807	N/A	6.58	8.14	10% (+/-)	Yes
41: Other Aged	N/A	5,608	N/A	6,021	N/A	5,270	N/A	7.36	-12.50	10% (+/-)	No
51: 1115 Aged	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Disabled Total	N/A	47,630	N/A	48,379	N/A	51,902	N/A	1.57	7.28	10% (+/-)	Yes
12: Disabled, Cash	N/A	29,811	N/A	30,416	N/A	31,289	N/A	2.03	2.87	10% (+/-)	Yes
22: Disabled, MN	N/A	826	N/A	548	N/A	878	N/A	-33.70	60.22	10% (+/-)	No
32: Disabled, Poverty	N/A	13,279	N/A	13,955	N/A	16,178	N/A	5.09	15.93	10% (+/-)	No
42: Other Disabled	N/A	3,714	N/A	3,460	N/A	3,557	N/A	-6.84	2.80	10% (+/-)	Yes
52: 1115 Disabled	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Child Total	N/A	116,715	N/A	121,462	N/A	127,231	N/A	4.07	4.75	10% (+/-)	Yes
14: AFDC Child, Cash	N/A	586	N/A	9	N/A	1	N/A	-98.50	-88.90	10% (+/-)	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
16: AFDC-U Child, Cash	N/A	68	N/A	0	N/A	0	N/A	-100.00	Div by 0	10% (+/-)	N/A
24: AFDC Child, MN	N/A	604	N/A	395	N/A	489	N/A	-34.60	23.80	10% (+/-)	No
34: Child Poverty	N/A	98,460	N/A	101,658	N/A	104,326	N/A	3.25	2.62	10% (+/-)	Yes
44: Other Child	N/A	13,056	N/A	15,844	N/A	18,972	N/A	21.35	19.74	10% (+/-)	No
48: Foster Care Child	N/A	3,941	N/A	3,554	N/A	3,442	N/A	-9.82	-3.15	10% (+/-)	Yes
54: 1115 Child	N/A	0	N/A	2	N/A	1	N/A	Div by 0	-50.00	10% (+/-)	No
MAX Adult Total	N/A	95,215	N/A	106,411	N/A	107,890	N/A	11.76	1.39	10% (+/-)	Yes
15: AFDC Adult, Cash	N/A	15,663	N/A	20,550	N/A	25,682	N/A	31.20	24.97	10% (+/-)	No
17: AFDC-U Adult, Cash	N/A	39	N/A	0	N/A	0	N/A	-100.00	Div by 0	10% (+/-)	N/A
25: AFDC Adult, MN	N/A	550	N/A	460	N/A	535	N/A	-16.40	16.30	10% (+/-)	No
35: Adult, Poverty	N/A	2,275	N/A	2,405	N/A	2,621	N/A	5.71	8.98	10% (+/-)	Yes
45: Other Adult	N/A	52,405	N/A	51,337	N/A	55,413	N/A	-2.04	7.94	10% (+/-)	Yes
55: 1115 Adult	N/A	24,283	N/A	31,659	N/A	23,639	N/A	30.38	-25.30	10% (+/-)	No
<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	9,866	N/A	9,276	N/A	0	N/A	-5.98	-100.00	N/A	N/A
% enrollees with any ILTC claims	N/A	3.36	N/A	2.99	N/A	0.00	N/A	-11.00	-100.00	N/A	N/A
% AGED enrollees with any ILTC claims	N/A	22.59	N/A	21.28	N/A	0.00	N/A	-5.79	-100.00	N/A	N/A
% DISABLED enrollees with any ILTC claims	N/A	3.14	N/A	2.89	N/A	0.00	N/A	-8.00	-100.00	N/A	N/A
% CHILD enrollees with any ILTC claims	N/A	0.53	N/A	0.48	N/A	0.00	N/A	-8.29	-100.00	N/A	N/A
% ADULT enrollees with any ILTC claims	N/A	0.09	N/A	0.08	N/A	0.00	N/A	-7.36	-100.00	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	0	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	0.00	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	0.00	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	0.00	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	0.00	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	0.00	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	0	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	4,119	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	1.28	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	2.90	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	5.88	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	0.02	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	0.01	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	844	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	621	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	2,654	N/A	N/A	N/A	15% (+/-)	No
# with Section 1915(c) waiver for People with MI/SED (Code M)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
# with Section 1915(c) waiver for Technologically Dependent/Medically Fragile (Code N)	N/A	N/A	N/A	N/A	N/A	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	100.00	No	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	Div by 0	No	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	27,676	N/A	N/A	N/A	15% (+/-)	No
% AGED enrollees with any 1115 waiver	N/A	N/A	N/A	N/A	N/A	0.43	N/A	N/A	N/A	15% (+/-)	No
% DISABLED enrollees with any 1115 waiver	N/A	N/A	N/A	N/A	N/A	4.23	N/A	N/A	N/A	15% (+/-)	No
% CHILD enrollees with any 1115 waiver	N/A	N/A	N/A	N/A	N/A	0.05	N/A	N/A	N/A	15% (+/-)	No
% ADULT enrollees with any 1115 waiver	N/A	N/A	N/A	N/A	N/A	23.42	N/A	N/A	N/A	15% (+/-)	No
% with any HMO/HIO enrollment	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
# with any 1915(b) waiver (Code 2)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No

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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
% AGED enrollees with any 1915(b) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% DISABLED enrollees with any 1915(b) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% CHILD enrollees with any 1915(b) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% ADULT enrollees with any 1915(b) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% with any HMO/HIO enrollment	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
# with any combined 1915(b)(c) waiver (Code 4)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
% AGED enrollees with any combined 1915(b)(c) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% DISABLED enrollees with any combined 1915(b)(c) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% CHILD enrollees with any combined 1915(b)(c) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% ADULT enrollees with any combined 1915(b)(c) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% with any HMO/HIO enrollment	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
# with 1115 HIFA waiver (Code 5)	N/A	N/A	N/A	N/A	N/A	27,423	N/A	N/A	N/A	15% (+/-)	No
# with 1115 Pharmacy waiver coverage (Code 6)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
% AGED enrollees with Pharmacy waiver coverage	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% DISABLED enrollees with any Pharmacy waiver coverage	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% CHILD enrollees with any Pharmacy waiver coverage	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% ADULT enrollees with any combined 1915(b)(c) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% with any HMO/HIO enrollment	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
# with other type of waiver (Code 7)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
# with unknown type of waiver (Code 9)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
# with 1115 disaster-related waiver (Code A)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
# with 1115 Family Planning Only waiver (Code F)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
<b>Enrollees with Restricted Benefits</b>											
<i>Family Planning enrollees with Restricted Benefits (Code 6)</i>											
# with ONLY Family Planning Only enrollment	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	N/A	N/A
# with ANY Family Planning Only enrollment	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	N/A	N/A
# PYE ANY FP Only	N/A	Div by 0	N/A	Div by 0	N/A	0	N/A	Div by 0	Div by 0	N/A	N/A
<i>Aliens with Restricted Benefits (Code 2)</i>											
# Aliens with ONLY restricted benefits	N/A	181	N/A	213	N/A	139	N/A	17.68	-34.70	N/A	N/A
# Aliens with ANY restricted benefits	N/A	247	N/A	258	N/A	250	N/A	4.45	-3.10	N/A	N/A
# PYE Aliens with ANY restricted benefits	N/A	118	N/A	134	N/A	98	N/A	13.46	-27.10	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	7,827	N/A	7,840	N/A	9,350	N/A	0.17	19.26	N/A	N/A
# EDB Duals with ANY restricted benefits enrollment	N/A	10,027	N/A	10,068	N/A	12,519	N/A	0.41	24.34	N/A	N/A
# PYE EDB Duals with ANY restricted benefits	N/A	7,745	N/A	7,849	N/A	8,999	N/A	1.35	14.65	N/A	N/A
% EDB Duals with ONLY restricted benefits enrollment	N/A	N/A	N/A	N/A	N/A	14.75	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	240,741	N/A	258,047	N/A	269,652	N/A	7.19	4.50	15% (+/-)	Yes
June % Full Scope Benefits (Code 1)	>80%	96.40	Yes	96.63	Yes	96.37	Yes	0.24	-0.28	15% (+/-)	Yes
June % Restricted Benefits Alien (Code 2)	<5%	0.04	Yes	0.05	Yes	0.03	Yes	13.16	-37.90	15% (+/-)	No
June % Restricted Benefits Dual (Code 3)	<5%	3.54	Yes	3.31	Yes	3.59	Yes	-6.65	8.60	15% (+/-)	Yes
June % Restricted Benefits Pregnant (Code 4)	<5%	0.01	Yes	0.01	Yes	0.01	Yes	-6.71	25.92	15% (+/-)	No
June % Restricted Benefits Other (Code 5)	0%	0.00	No	0.00	No	0.00	No	6.62	19.62	15% (+/-)	No
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%	10.82	Yes	10.60	Yes	9.18	Yes	-2.06	-13.40	15% (+/-)	Yes

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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
June Total Enrollees with TANF Flag (Code 2)	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
June # with M-SCHIP (Code 2) - Child (<19 Years)	N/A	7,686	N/A	9,153	N/A	9,643	N/A	19.09	5.35	15% (+/-)	Yes
June # with M-SCHIP (Code 2) - Adult (>18 Years)	N/A	236	N/A	303	N/A	374	N/A	28.39	23.43	15% (+/-)	No
June # with S-SCHIP Flag (Code 3) - Child (<19 Years)	N/A	1,800	N/A	1,398	N/A	1,272	N/A	-22.30	-9.01	15% (+/-)	Yes
June # with S-SCHIP Flag (Code 3) - Adult (>18 Years)	N/A	79	N/A	90	N/A	103	N/A	13.92	14.44	15% (+/-)	Yes
<b>Medicaid Expenditures</b>											
Total Medicaid Amt Paid	N/A	\$2,162,848,772	N/A	\$2,148,245,478	N/A	\$327,957,317	N/A	-0.68	-84.70	15% (+/-)	No
Average Medicaid Amt Paid per Enrollee	N/A	\$7,368	N/A	\$6,927	N/A	\$1,017	N/A	-5.99	-85.30	15% (+/-)	No
25th Percentile	N/A	\$240	N/A	\$212	N/A	\$0	N/A	-11.70	-100.00	15% (+/-)	No
50th Percentile (Median)	N/A	\$1,245	N/A	\$1,154	N/A	\$80	N/A	-7.31	-93.10	15% (+/-)	No
75th Percentile	N/A	\$5,047	N/A	\$4,701	N/A	\$760	N/A	-6.86	-83.80	15% (+/-)	No
95th Percentile	N/A	\$36,508	N/A	\$34,533	N/A	\$5,169	N/A	-5.41	-85.00	15% (+/-)	No
99th Percentile	N/A	\$100,727	N/A	\$94,796	N/A	\$11,563	N/A	-5.89	-87.80	15% (+/-)	No
<b>AVG MEDICAID AMT PD/ENROLLEE BY MAX ELIGIBILITY GROUP</b>											
MAX Aged	N/A	\$11,889	N/A	\$12,043	N/A	\$1,978	N/A	1.29	-83.60	15% (+/-)	No
MAX Disabled	N/A	\$18,939	N/A	\$18,219	N/A	\$2,967	N/A	-3.80	-83.70	10% (+/-)	No
MAX Child	N/A	\$4,077	N/A	\$3,651	N/A	\$262	N/A	-10.50	-92.80	10% (+/-)	No
MAX Adult	N/A	\$4,002	N/A	\$3,906	N/A	\$653	N/A	-2.41	-83.30	10% (+/-)	No
<b>AVG MEDICAID AMT PD/EDB DUAL ENROLLEE</b>											
All EDB Dual Enrollees	N/A	\$13,360	N/A	\$13,212	N/A	\$2,584	N/A	-1.11	-80.40	15% (+/-)	No
MAX Aged	N/A	\$12,223	N/A	\$12,378	N/A	\$2,059	N/A	1.26	-83.40	10% (+/-)	No
MAX Disabled	N/A	\$15,834	N/A	\$15,328	N/A	\$3,203	N/A	-3.20	-79.10	10% (+/-)	No
<b>AVG MEDICAID AMT PD/LONG-TERM CARE ENROLLEE</b>											
Enrollees with ILTC claims	N/A	N/A	N/A	N/A	N/A	Div by 0	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	Div by 0	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	Div by 0	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	\$4,190	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	\$2,856	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	\$5,951	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	\$4,203	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	\$0	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	\$0	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for Aged (Code H)	N/A	N/A	N/A	N/A	N/A	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	\$0	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>											
<i>Expenditures for Family Planning enrollees with Restricted Benefits</i>											
Expenditures for ONLY FP Only enrollees	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A	N/A
Average Medicaid Paid for ONLY FP Only enrollees	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A	N/A
<i>Expenditures for Aliens with Restricted Benefits</i>											
Expend for Aliens with restricted benefits ONLY enrollment	N/A	\$204,763	N/A	\$98,895	N/A	\$2,932	N/A	-51.70	-97.00	N/A	N/A
Avg Medicaid Paid for Alien enrollees with restricted benefits ONLY	N/A	\$1,131	N/A	\$464	N/A	\$21	N/A	-59.00	-95.50	N/A	N/A
<i>Expenditures for EDB Duals with Restricted Benefits (Medicare Cost Sharing Only - Code 3)</i>											



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
Expenditures for EDB Duals with only restricted benefits enrollment	N/A	\$530,549	N/A	\$101,935	N/A	\$25,905	N/A	-80.80	-74.60	N/A	N/A
Avg Medicaid Paid for EDB Duals with only restricted benefit enrollment	N/A	\$68	N/A	\$13	N/A	\$3	N/A	-80.80	-78.70	N/A	N/A
<b>Prescription Drug Enrollees</b>											
Expenditures for Prescription Drug ONLY enrollees (may also have a month or more of Code 3)	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A	N/A
Avg Medicaid Paid for Prescription Drug ONLY enrollees	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A	N/A
<b>Dual Prescription Drug Enrollees</b>											
Expenditures for Prescription Drug ONLY enrollees who are also EDB duals	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A	N/A
<b>MEDICAID ENROLLEES - EXCLUDING SELECT RESTRICTED BENEFIT GROUPS (excludes people with missing eligibility information, S-SCHIP only, FP Only, Aliens with only restricted benefits, duals with restricted benefits only, and prescription drug only enrollees) ---- NOTE: S-SCHIP only, FP Only, duals with restricted benefits, and Aliens with restricted benefits were NOT excluded prior to 2001. Prescription drug only enrollees were NOT excluded prior to 2003.</b>											
Total Medicaid Enrollees	N/A	285,521	N/A	302,062	N/A	313,005	N/A	5.79	3.62	10% (+/-)	Yes
MAX Aged Total	N/A	28,339	N/A	28,217	N/A	28,723	N/A	-0.43	1.79	10% (+/-)	Yes
MAX Disabled Total	N/A	45,433	N/A	46,185	N/A	49,300	N/A	1.66	6.75	10% (+/-)	Yes
MAX Child Total	N/A	116,661	N/A	121,402	N/A	127,202	N/A	4.06	4.78	10% (+/-)	Yes
MAX Adult Total	N/A	95,088	N/A	106,258	N/A	107,780	N/A	11.75	1.43	10% (+/-)	Yes
Total Medicaid PYE (Person Years of Enrollment)	N/A	235,878	N/A	253,794	N/A	263,334	N/A	7.60	3.76	10% (+/-)	Yes
Total EDB Duals	N/A	50,429	N/A	51,837	N/A	54,028	N/A	2.79	4.23	10% (+/-)	Yes
MAX Aged	N/A	26,199	N/A	26,302	N/A	26,767	N/A	0.39	1.77	10% (+/-)	Yes
MAX Disabled	N/A	20,899	N/A	21,748	N/A	23,120	N/A	4.06	6.31	10% (+/-)	Yes
<b>Total Medicaid Amount Paid</b>											
Total Medicaid Amt Paid	N/A	\$2,162,113,460	N/A	\$2,148,044,648	N/A	\$327,928,480	N/A	-0.65	-84.70	15% (+/-)	No
Average Medicaid Amt Paid per Enrollee	N/A	\$7,573	N/A	\$7,111	N/A	\$1,048	N/A	-6.09	-85.30	15% (+/-)	No
<b>AVG MEDICAID AMT PD/ENROLLEE BY MAX ELIGIBILITY GROUP</b>											
MAX Aged	N/A	\$14,240	N/A	\$14,451	N/A	\$2,442	N/A	1.48	-83.10	15% (+/-)	No
MAX Disabled	N/A	\$19,850	N/A	\$19,083	N/A	\$3,124	N/A	-3.86	-83.60	10% (+/-)	No
MAX Child	N/A	\$4,079	N/A	\$3,652	N/A	\$262	N/A	-10.50	-92.80	10% (+/-)	No
MAX Adult	N/A	\$4,006	N/A	\$3,911	N/A	\$653	N/A	-2.37	-83.30	10% (+/-)	No
<b>AVG MEDICAID AMT PD/EDB DUAL ENROLLEE</b>											
All EDB Dual Enrollees	N/A	\$15,423	N/A	\$15,209	N/A	\$3,031	N/A	-1.39	-80.10	15% (+/-)	No
MAX Aged	N/A	\$14,837	N/A	\$15,032	N/A	\$2,578	N/A	1.32	-82.80	10% (+/-)	No
MAX Disabled	N/A	\$17,489	N/A	\$16,872	N/A	\$3,563	N/A	-3.53	-78.90	10% (+/-)	No
<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	59.96	N/A	65.56	N/A	65.78	N/A	9.33	0.35	25% (+)	Yes
Total MC Enrollees	N/A	171,204	N/A	198,024	N/A	205,909	N/A	15.67	3.98	25% (+)	Yes
Aged	N/A	110	N/A	142	N/A	155	N/A	29.09	9.16	25% (+)	Yes
Disabled	N/A	1,934	N/A	2,834	N/A	3,662	N/A	46.54	29.22	25% (+)	No
Child	N/A	96,009	N/A	103,754	N/A	108,572	N/A	8.07	4.64	25% (+)	Yes
Adult	N/A	73,151	N/A	91,294	N/A	93,520	N/A	24.80	2.44	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	2.45	N/A	3.54	N/A	3.91	N/A	44.39	10.47	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	0.85	N/A	N/A	N/A	25% (+)	No
TOTAL ENROLLEES IN JUNE	N/A	233,729	N/A	251,147	N/A	261,822	N/A	7.45	4.25	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

2003-2005 MAX PSF VALIDATION TABLE  
STATE: ME

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	53.23	N/A	60.26	N/A	61.71	N/A	13.20	2.42	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	46.77	N/A	39.74	N/A	38.29	N/A	-15.00	-3.67	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	\$4,121,952	N/A	\$5,422,683	N/A	\$0	N/A	31.56	-100.00	15% (+/-)	No
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	\$4,121,952	N/A	\$5,422,683	N/A	\$0	N/A	31.56	-100.00	15% (+/-)	No
Ratio of Cap Claims to PME (person mo. enroll.) in MC	-9-2	0.92	Yes	1.00	Yes	0.00	No	8.83	-100.00	15% (+/-)	No
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	1.00	Yes	0.00	No	8.83	-100.00	15% (+/-)	No
Average Cap Payment for PME in MC	N/A	\$3	N/A	\$3	N/A	\$0	N/A	8.83	-100.00	15% (+/-)	No
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	\$0	N/A	8.83	-100.00	15% (+/-)	No
<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	\$4,121,952	N/A	\$5,422,683	N/A	\$0	N/A	31.56	-100.00	15% (+/-)	No
Count of Enrollees	N/A	171,204	N/A	198,024	N/A	205,909	N/A	15.67	3.98	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											
IP	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A

2003-2005 MAX PSF VALIDATION TABLE  
STATE: ME

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	235,092	N/A	250,225	N/A	258,977	N/A	6.44	3.50	15% (+/-)	Yes
Total Non-Dual FFS Recipients	N/A	205,688	N/A	215,869	N/A	176,830	N/A	4.95	-18.10	15% (+/-)	No
Total Non-Dual FFS PYE	N/A	190,072	N/A	206,526	N/A	214,221	N/A	8.66	3.73	15% (+/-)	Yes
MAX Aged Total	N/A	2,140	N/A	1,915	N/A	1,956	N/A	-10.50	2.14	10% (+/-)	Yes
11: Aged, Cash	N/A	451	N/A	324	N/A	266	N/A	-28.20	-17.90	10% (+/-)	No
21: Aged, MN	N/A	135	N/A	115	N/A	147	N/A	-14.80	27.83	10% (+/-)	No
31: Aged, Poverty	N/A	1,270	N/A	1,207	N/A	1,312	N/A	-4.96	8.70	10% (+/-)	Yes
41: Other Aged	N/A	284	N/A	269	N/A	231	N/A	-5.28	-14.10	10% (+/-)	No
51: 1115 Aged	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Disabled Total	N/A	24,534	N/A	24,437	N/A	26,180	N/A	-0.40	7.13	10% (+/-)	Yes
12: Disabled, Cash	N/A	18,823	N/A	19,239	N/A	19,821	N/A	2.21	3.03	10% (+/-)	Yes
22: Disabled, MN	N/A	238	N/A	193	N/A	312	N/A	-18.90	61.66	10% (+/-)	No
32: Disabled, Poverty	N/A	3,420	N/A	3,262	N/A	4,292	N/A	-4.62	31.58	10% (+/-)	No
42: Other Disabled	N/A	2,053	N/A	1,743	N/A	1,755	N/A	-15.10	0.69	10% (+/-)	Yes
52: 1115 Disabled	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Child Total	N/A	116,637	N/A	121,375	N/A	127,175	N/A	4.06	4.78	10% (+/-)	Yes
14: AFDC Child, Cash	N/A	586	N/A	9	N/A	1	N/A	-98.50	-88.90	10% (+/-)	No
16: AFDC-U Child, Cash	N/A	68	N/A	0	N/A	0	N/A	-100.00	Div by 0	10% (+/-)	N/A
24: AFDC Child, MN	N/A	604	N/A	395	N/A	489	N/A	-34.60	23.80	10% (+/-)	No
34: Child Poverty	N/A	98,454	N/A	101,651	N/A	104,322	N/A	3.25	2.63	10% (+/-)	Yes
44: Other Child	N/A	12,986	N/A	15,766	N/A	18,921	N/A	21.41	20.01	10% (+/-)	No
48: Foster Care Child	N/A	3,939	N/A	3,552	N/A	3,441	N/A	-9.82	-3.13	10% (+/-)	Yes
54: 1115 Child	N/A	0	N/A	2	N/A	1	N/A	Div by 0	-50.00	10% (+/-)	No
MAX Adult Total	N/A	91,781	N/A	102,498	N/A	103,666	N/A	11.68	1.14	10% (+/-)	Yes
15: AFDC Adult, Cash	N/A	14,777	N/A	19,297	N/A	24,170	N/A	30.59	25.25	10% (+/-)	No
17: AFDC-U Adult, Cash	N/A	37	N/A	0	N/A	0	N/A	-100.00	Div by 0	10% (+/-)	N/A
25: AFDC Adult, MN	N/A	528	N/A	444	N/A	521	N/A	-15.90	17.34	10% (+/-)	No
35: Adult, Poverty	N/A	2,243	N/A	2,362	N/A	2,584	N/A	5.31	9.40	10% (+/-)	Yes
45: Other Adult	N/A	50,451	N/A	49,338	N/A	53,294	N/A	-2.21	8.02	10% (+/-)	Yes
55: 1115 Adult	N/A	23,745	N/A	31,057	N/A	23,097	N/A	30.79	-25.60	10% (+/-)	No
# Non-Dual FFS Enrollees w/ MSIS Dual Code/No EDB Confirmation	N/A	2,513	N/A	2,337	N/A	2,423	N/A	-7.00	3.68	10% (+/-)	Yes
Total FFS Medicaid Amt Paid	N/A	\$1,380,206,032	N/A	\$1,354,289,943	N/A	\$164,168,747	N/A	-1.88	-87.90	15% (+/-)	No
Average FFS Medicaid Amt Paid per Non-Dual FFS Enrollee	N/A	\$5,871	N/A	\$5,412	N/A	\$634	N/A	-7.81	-88.30	15% (+/-)	No
Avg FFS Medicaid Amt Paid per Non-Dual FFS Recipient (User of any service)	N/A	\$6,710	N/A	\$6,274	N/A	\$928	N/A	-6.51	-85.20	15% (+/-)	No
<b>AVG FFS MEDICAID AMT PD/NON-DUAL FFS ENROLLEE BY MAX ELIG GRP</b>											
All Aged	N/A	\$6,921	N/A	\$6,458	N/A	\$582	N/A	-6.70	-91.00	15% (+/-)	No
11: Aged, Cash	N/A	\$13,259	N/A	\$16,407	N/A	\$1,558	N/A	23.74	-90.50	15% (+/-)	No
21: Aged, MN	N/A	\$10,505	N/A	\$7,619	N/A	\$792	N/A	-27.50	-89.60	15% (+/-)	No
31: Aged, Poverty	N/A	\$3,254	N/A	\$2,396	N/A	\$342	N/A	-26.40	-85.70	15% (+/-)	No
41: Other Aged	N/A	\$11,552	N/A	\$12,206	N/A	\$688	N/A	5.66	-94.40	15% (+/-)	No
51: 1115 Aged	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
All Disabled	N/A	\$21,861	N/A	\$21,050	N/A	\$2,736	N/A	-3.71	-87.00	15% (+/-)	No
12: Disabled, Cash	N/A	\$22,658	N/A	\$21,716	N/A	\$2,959	N/A	-4.16	-86.40	15% (+/-)	No
22: Disabled, MN	N/A	\$38,151	N/A	\$34,059	N/A	\$2,301	N/A	-10.70	-93.20	15% (+/-)	No
32: Disabled, Poverty	N/A	\$16,036	N/A	\$17,122	N/A	\$2,061	N/A	6.77	-88.00	15% (+/-)	No
42: Other Disabled	N/A	\$22,367	N/A	\$19,614	N/A	\$1,947	N/A	-12.30	-90.10	15% (+/-)	No
52: 1115 Disabled	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A

2003-2005 MAX PSF VALIDATION TABLE  
STATE: ME

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	\$4,051	N/A	\$3,622	N/A	\$262	N/A	-10.60	-92.80	15% (+/-)	No
14: AFDC Child, Cash	N/A	\$4,402	N/A	\$1,357	N/A	\$0	N/A	-69.20	-100.00	15% (+/-)	No
16: AFDC-U Child, Cash	N/A	\$1,489	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
24: AFDC Child, MN	N/A	\$1,777	N/A	\$1,707	N/A	\$258	N/A	-3.92	-84.90	15% (+/-)	No
34: Child, Poverty	N/A	\$3,239	N/A	\$3,120	N/A	\$232	N/A	-3.67	-92.60	15% (+/-)	No
44: Other Child	N/A	\$2,836	N/A	\$2,641	N/A	\$290	N/A	-6.88	-89.00	15% (+/-)	No
48: Foster Care Child	N/A	\$28,698	N/A	\$22,566	N/A	\$1,015	N/A	-21.40	-95.50	15% (+/-)	No
54: 1115 Child	N/A	Div by 0	N/A	\$4,227	N/A	\$10,320	N/A	Div by 0	144.20	15% (+/-)	No
All Adult	N/A	\$3,885	N/A	\$3,784	N/A	\$560	N/A	-2.59	-85.20	15% (+/-)	No
15: AFDC Adult, Cash	N/A	\$2,501	N/A	\$2,578	N/A	\$447	N/A	3.11	-82.70	15% (+/-)	No
17: AFDC-U Adult, Cash	N/A	\$1,907	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
25: AFDC Adult, MN	N/A	\$2,202	N/A	\$1,875	N/A	\$408	N/A	-14.90	-78.20	15% (+/-)	No
35: Adult, Poverty	N/A	\$4,952	N/A	\$4,071	N/A	\$230	N/A	-17.80	-94.40	15% (+/-)	No
45: Other Adult	N/A	\$3,488	N/A	\$3,474	N/A	\$526	N/A	-0.41	-84.90	15% (+/-)	No
55: 1115 Adult	N/A	\$5,530	N/A	\$5,032	N/A	\$797	N/A	-8.99	-84.20	15% (+/-)	No
<b>FFS EXPENDITURES AND USERS BY MAX TOS</b>											
IP: Total Medicaid Paid (TOS 01)	N/A	\$315,857,921	N/A	\$291,329,530	N/A	\$0	N/A	-7.77	-100.00	15% (+/-)	No
IP: Number of Users	N/A	21,690	N/A	20,759	N/A	0	N/A	-4.29	-100.00	15% (+/-)	No
IP: Average Medicaid Pd per User	N/A	\$14,562	N/A	\$14,034	N/A	Div by 0	N/A	-3.63	Div by 0	15% (+/-)	N/A
IP: Average Medicaid Covered Days Per User	N/A	7	N/A	6	N/A	Div by 0	N/A	-6.67	Div by 0	15% (+/-)	N/A
MH Aged: Total Medicaid Paid (TOS 02)	N/A	\$6,540	N/A	\$22,658	N/A	\$0	N/A	246.50	-100.00	15% (+/-)	No
MH Aged: Number of Users	N/A	1	N/A	2	N/A	0	N/A	100.00	-100.00	15% (+/-)	No
MH Aged: Avg Medicaid Pd per User	N/A	\$6,540	N/A	\$11,329	N/A	Div by 0	N/A	73.23	Div by 0	15% (+/-)	N/A
IP Psych < 21: Total Medicaid Paid (TOS 04)	N/A	\$36,149,140	N/A	\$33,898,784	N/A	\$0	N/A	-6.23	-100.00	15% (+/-)	No
IP Psych < 21: Number of Users	N/A	886	N/A	856	N/A	0	N/A	-3.39	-100.00	15% (+/-)	No
IP Psych<21 :Avg Medicaid Pd per User	N/A	\$40,800	N/A	\$39,601	N/A	Div by 0	N/A	-2.94	Div by 0	15% (+/-)	N/A
ICF/MR: Total Medicaid Paid (TOS 05)	N/A	\$11,805,624	N/A	\$12,065,469	N/A	\$0	N/A	2.20	-100.00	15% (+/-)	No
ICF/MR: Number of Users	N/A	83	N/A	80	N/A	0	N/A	-3.61	-100.00	15% (+/-)	No
ICF/MR: Avg Medicaid Pd per User	N/A	\$142,236	N/A	\$150,818	N/A	Div by 0	N/A	6.03	Div by 0	15% (+/-)	N/A
NF: Total Medicaid Paid (TOS 07)	N/A	\$14,056,734	N/A	\$12,730,484	N/A	\$0	N/A	-9.43	-100.00	15% (+/-)	No
NF Number of Users	N/A	634	N/A	601	N/A	0	N/A	-5.21	-100.00	15% (+/-)	No
NF:Avg Medicaid Pd per User	N/A	\$22,172	N/A	\$21,182	N/A	Div by 0	N/A	-4.46	Div by 0	15% (+/-)	N/A
Physician: Total Medicaid Paid (TOS 08)	N/A	\$42,498,465	N/A	\$37,377,518	N/A	\$0	N/A	-12.00	-100.00	15% (+/-)	No
Physician: Number of Users	N/A	129,915	N/A	120,470	N/A	0	N/A	-7.27	-100.00	15% (+/-)	No
Physician: Avg Medicaid Pd per User	N/A	\$327	N/A	\$310	N/A	Div by 0	N/A	-5.15	Div by 0	15% (+/-)	N/A
Dental: Total Medicaid Paid (TOS 09)	N/A	\$16,192,882	N/A	\$18,497,819	N/A	\$0	N/A	14.23	-100.00	15% (+/-)	No
Dental: Number of Users	N/A	57,035	N/A	60,180	N/A	0	N/A	5.51	-100.00	15% (+/-)	No
Dental: Avg Medicaid Pd per User	N/A	\$284	N/A	\$307	N/A	Div by 0	N/A	8.26	Div by 0	15% (+/-)	N/A
Other Practitioner: Total Medicaid Paid (TOS 10)	N/A	\$5,468,643	N/A	\$5,051,865	N/A	\$0	N/A	-7.62	-100.00	15% (+/-)	No
Other Practitioner: Number of Users	N/A	45,624	N/A	45,398	N/A	0	N/A	-0.50	-100.00	15% (+/-)	No
Other Practitioner: Avg Medicaid Pd per User	N/A	\$120	N/A	\$111	N/A	Div by 0	N/A	-7.16	Div by 0	15% (+/-)	N/A
OPD: Total Medicaid Paid (TOS 11)	N/A	\$187,256,388	N/A	\$173,812,423	N/A	\$0	N/A	-7.18	-100.00	15% (+/-)	No
OPD Number of Users	N/A	122,629	N/A	122,739	N/A	0	N/A	0.09	-100.00	15% (+/-)	No
OPD: Avg Medicaid Pd per User	N/A	\$1,527	N/A	\$1,416	N/A	Div by 0	N/A	-7.26	Div by 0	15% (+/-)	N/A
Clinic: Total Medicaid Paid (TOS 12)	N/A	\$86,948,891	N/A	\$31,675,896	N/A	\$0	N/A	-63.60	-100.00	15% (+/-)	No
Clinic: Number of Users	N/A	76,993	N/A	63,821	N/A	0	N/A	-17.10	-100.00	15% (+/-)	No
Clinic: Avg Medicaid Pd per User	N/A	\$1,129	N/A	\$496	N/A	Div by 0	N/A	-56.10	Div by 0	15% (+/-)	N/A
HH: Total Medicaid Paid (TOS 13)	N/A	\$5,016,571	N/A	\$3,588,314	N/A	\$0	N/A	-28.50	-100.00	15% (+/-)	No
HH: Number of Users	N/A	2,423	N/A	2,055	N/A	0	N/A	-15.20	-100.00	15% (+/-)	No
HH: Avg Medicaid Pd per User	N/A	\$2,070	N/A	\$1,746	N/A	Div by 0	N/A	-15.70	Div by 0	15% (+/-)	N/A
Lab/Xray: Total Medicaid Paid (TOS 15)	N/A	\$40,568,555	N/A	\$56,954,888	N/A	\$0	N/A	40.39	-100.00	15% (+/-)	No
Lab/Xray: Number of Users	N/A	136,536	N/A	132,301	N/A	0	N/A	-3.10	-100.00	15% (+/-)	No
Lab/Xray:Avg Medicaid Pd per User	N/A	\$297	N/A	\$430	N/A	Div by 0	N/A	44.89	Div by 0	15% (+/-)	N/A
Drugs: Total Medicaid Paid (TOS 16)	N/A	\$140,177,351	N/A	\$154,072,809	N/A	\$164,168,747	N/A	9.91	6.55	15% (+/-)	Yes
Drugs: Number of Users	N/A	165,013	N/A	173,114	N/A	176,830	N/A	4.91	2.15	15% (+/-)	Yes
Drugs: Avg Medicaid Pd per User	N/A	\$849	N/A	\$890	N/A	\$928	N/A	4.77	4.31	15% (+/-)	Yes
Other Services: Total Medicaid Paid (TOS 19)	N/A	\$192,599,235	N/A	\$63,374,970	N/A	\$0	N/A	-67.10	-100.00	15% (+/-)	No

2003-2005 MAX PSF VALIDATION TABLE  
STATE: ME

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	32,883	N/A	29,864	N/A	0	N/A	-9.18	-100.00	15% (+/-)	No
Other Services: Avg Medicaid Pd per User	N/A	\$5,857	N/A	\$2,122	N/A	Div by 0	N/A	-63.80	Div by 0	15% (+/-)	N/A
Transportation: Total Medicaid Paid (TOS 26)	N/A	\$14,158,359	N/A	\$13,909,646	N/A	\$0	N/A	-1.76	-100.00	15% (+/-)	No
Transportation: Number of Users	N/A	27,968	N/A	27,679	N/A	0	N/A	-1.03	-100.00	15% (+/-)	No
Transportation: Avg Medicaid Pd per User	N/A	\$506	N/A	\$503	N/A	Div by 0	N/A	-0.73	Div by 0	15% (+/-)	N/A
PCS: Total Medicaid Paid (TOS 30)	N/A	\$2,330,166	N/A	\$2,334,283	N/A	\$0	N/A	0.18	-100.00	15% (+/-)	No
PCS: Number of Users	N/A	615	N/A	568	N/A	0	N/A	-7.64	-100.00	15% (+/-)	No
PCS: Avg Medicaid Pd per User	N/A	\$3,789	N/A	\$4,110	N/A	Div by 0	N/A	8.47	Div by 0	15% (+/-)	N/A
Target Case Management: Total Medicaid Pd (TOS 31)	N/A	\$76,474,081	N/A	\$67,525,119	N/A	\$0	N/A	-11.70	-100.00	15% (+/-)	No
Target Case Management: Number of Users	N/A	28,132	N/A	27,417	N/A	0	N/A	-2.54	-100.00	15% (+/-)	No
Target Case Management: Avg Medicaid Pd per User	N/A	\$2,718	N/A	\$2,463	N/A	Div by 0	N/A	-9.40	Div by 0	15% (+/-)	N/A
Rehab Services: Total Medicaid Pd (TOS 33)	N/A	\$6,110,560	N/A	\$4,562,148	N/A	\$0	N/A	-25.30	-100.00	15% (+/-)	No
Rehab Services: Number of Users	N/A	308	N/A	285	N/A	0	N/A	-7.47	-100.00	15% (+/-)	No
Rehab Services: Avg Medicaid Pd per User	N/A	\$19,839	N/A	\$16,008	N/A	Div by 0	N/A	-19.30	Div by 0	15% (+/-)	N/A
PT/OT/Speech/Hear: Total Medicaid Paid (TOS 34)	N/A	\$7,011,309	N/A	\$6,631,888	N/A	\$0	N/A	-5.41	-100.00	15% (+/-)	No
PT/OT/Speech/Hear: Number of Users	N/A	9,410	N/A	9,131	N/A	0	N/A	-2.96	-100.00	15% (+/-)	No
PT/OT/Speech/Hear: Avg Medicaid Pd per User	N/A	\$745	N/A	\$726	N/A	Div by 0	N/A	-2.52	Div by 0	15% (+/-)	N/A
Hospice: Total Medicaid Paid (TOS 35)	N/A	\$475,500	N/A	\$580,586	N/A	\$0	N/A	22.10	-100.00	15% (+/-)	No
Hospice: Number of Users	N/A	83	N/A	84	N/A	0	N/A	1.21	-100.00	15% (+/-)	No
Hospice: Avg Medicaid Pd per User	N/A	\$5,729	N/A	\$6,912	N/A	Div by 0	N/A	20.65	Div by 0	15% (+/-)	N/A
DME: Total Medicaid Paid (TOS 51)	N/A	\$53,985,542	N/A	\$51,467,340	N/A	\$0	N/A	-4.66	-100.00	15% (+/-)	No
DME: Number of Users	N/A	49,642	N/A	56,433	N/A	0	N/A	13.68	-100.00	15% (+/-)	No
DME: Avg Medicaid Pd per User	N/A	\$1,087	N/A	\$912	N/A	Div by 0	N/A	-16.10	Div by 0	15% (+/-)	N/A
Residential Care: Total Medicaid Paid (TOS 52)	N/A	\$45,391,425	N/A	\$42,511,865	N/A	\$0	N/A	-6.34	-100.00	15% (+/-)	No
Residential Care: Number of Users	N/A	1,676	N/A	1,540	N/A	0	N/A	-8.11	-100.00	15% (+/-)	No
Residential Care: Avg Medicaid Pd per User	N/A	\$27,083	N/A	\$27,605	N/A	Div by 0	N/A	1.93	Div by 0	15% (+/-)	N/A
Psych. Services: Total Medicaid Paid (TOS 53)	N/A	\$38,536,228	N/A	\$229,804,817	N/A	\$0	N/A	496.30	-100.00	15% (+/-)	No
Psych. Services: Number of Users	N/A	22,713	N/A	46,178	N/A	0	N/A	103.30	-100.00	15% (+/-)	No
Psych. Services: Avg Medicaid Pd per User	N/A	\$1,697	N/A	\$4,977	N/A	Div by 0	N/A	193.30	Div by 0	15% (+/-)	N/A
Adult Day Care: Total Medicaid Paid (TOS 54)	N/A	\$36,373,043	N/A	\$36,457,876	N/A	\$0	N/A	0.23	-100.00	15% (+/-)	No
Adult Day Care: Number of Users	N/A	2,694	N/A	2,900	N/A	0	N/A	7.65	-100.00	15% (+/-)	No
Adult Day Care: Avg Medicaid Pd per User	N/A	\$13,502	N/A	\$12,572	N/A	Div by 0	N/A	-6.89	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	\$1,344	N/A	\$1,164	N/A	\$0	N/A	-13.30	-100.00	15% (+/-)	No
Aged	N/A	\$1,945	N/A	\$1,920	N/A	\$0	N/A	-1.28	-100.00	15% (+/-)	No
Disabled	N/A	\$4,775	N/A	\$4,229	N/A	\$0	N/A	-11.40	-100.00	15% (+/-)	No
Child	N/A	\$593	N/A	\$483	N/A	\$0	N/A	-18.50	-100.00	15% (+/-)	No
Adult	N/A	\$1,367	N/A	\$1,226	N/A	\$0	N/A	-10.30	-100.00	15% (+/-)	No
ILTC (TOS=02,04,05,07)	N/A	\$264	N/A	\$235	N/A	\$0	N/A	-11.00	-100.00	15% (+/-)	No
Aged	N/A	\$2,010	N/A	\$2,122	N/A	\$0	N/A	5.58	-100.00	15% (+/-)	No
Disabled	N/A	\$1,377	N/A	\$1,372	N/A	\$0	N/A	-0.36	-100.00	15% (+/-)	No
Child	N/A	\$200	N/A	\$170	N/A	\$0	N/A	-15.10	-100.00	15% (+/-)	No
Adult	N/A	\$7	N/A	\$5	N/A	\$0	N/A	-23.00	-100.00	15% (+/-)	No
Drugs (TOS=16)	N/A	\$596	N/A	\$616	N/A	\$634	N/A	3.27	2.95	15% (+/-)	Yes
Aged	N/A	\$649	N/A	\$694	N/A	\$582	N/A	6.89	-16.10	15% (+/-)	No
Disabled	N/A	\$2,582	N/A	\$2,705	N/A	\$2,736	N/A	4.73	1.16	15% (+/-)	Yes
Child	N/A	\$246	N/A	\$258	N/A	\$262	N/A	4.62	1.66	15% (+/-)	Yes
Adult	N/A	\$509	N/A	\$540	N/A	\$560	N/A	6.18	3.72	15% (+/-)	Yes
All Other Services	N/A	\$3,667	N/A	\$3,398	N/A	\$0	N/A	-7.35	-100.00	15% (+/-)	No
Aged	N/A	\$2,317	N/A	\$1,722	N/A	\$0	N/A	-25.70	-100.00	15% (+/-)	No
Disabled	N/A	\$13,127	N/A	\$12,745	N/A	\$0	N/A	-2.91	-100.00	15% (+/-)	No
Child	N/A	\$3,012	N/A	\$2,711	N/A	\$0	N/A	-9.98	-100.00	15% (+/-)	No
Adult	N/A	\$2,003	N/A	\$2,013	N/A	\$0	N/A	0.50	-100.00	15% (+/-)	No
<b>% OF NON-DUAL FFS ENROLLEES WITH CLAIMS BY SELECTED MAX TOS</b>											
% Non-Dual FFS Enrollees with IP Claims (TOS=01)	N/A	9.23	N/A	8.30	N/A	0.00	N/A	-10.10	-100.00	15% (+/-)	No
Aged	N/A	5.70	N/A	4.80	N/A	0.00	N/A	-15.70	-100.00	15% (+/-)	No
Disabled	N/A	16.01	N/A	14.51	N/A	0.00	N/A	-9.32	-100.00	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
Child	N/A	6.85	N/A	6.05	N/A	0.00	N/A	-11.70	-100.00	15% (+/-)	No
Adult	N/A	10.52	N/A	9.54	N/A	0.00	N/A	-9.31	-100.00	15% (+/-)	No
% Non-Dual FFS Enrollees with ILTC Claims (TOS=02,04,05,07)	N/A	0.68	N/A	0.61	N/A	0.00	N/A	-10.00	-100.00	15% (+/-)	No
Aged	N/A	7.48	N/A	7.89	N/A	0.00	N/A	5.46	-100.00	15% (+/-)	No
Disabled	N/A	3.06	N/A	2.93	N/A	0.00	N/A	-4.02	-100.00	15% (+/-)	No
Child	N/A	0.53	N/A	0.48	N/A	0.00	N/A	-8.45	-100.00	15% (+/-)	No
Adult	N/A	0.09	N/A	0.08	N/A	0.00	N/A	-7.10	-100.00	15% (+/-)	No
% with ratio of ILTC days/enroll days > 1	N/A	3.81	N/A	2.93	N/A	Div by 0	N/A	-23.00	Div by 0	15% (+/-)	N/A
% Non-Dual FFS Enrollees with Drug Claims (TOS=16)	N/A	70.19	N/A	69.18	N/A	68.28	N/A	-1.44	-1.31	15% (+/-)	Yes
Aged	N/A	32.24	N/A	32.48	N/A	28.17	N/A	0.74	-13.30	15% (+/-)	Yes
Disabled	N/A	87.72	N/A	87.96	N/A	86.16	N/A	0.27	-2.05	15% (+/-)	Yes
Child	N/A	65.92	N/A	63.48	N/A	62.82	N/A	-3.70	-1.04	15% (+/-)	Yes
Adult	N/A	71.82	N/A	72.15	N/A	71.22	N/A	0.46	-1.28	15% (+/-)	Yes
% Non-Dual FFS Enrollees with All Other Claims	N/A	85.05	N/A	82.75	N/A	0.00	N/A	-2.69	-100.00	15% (+/-)	No
Aged	N/A	33.93	N/A	31.23	N/A	0.00	N/A	-7.95	-100.00	15% (+/-)	No
Disabled	N/A	93.64	N/A	93.44	N/A	0.00	N/A	-0.21	-100.00	15% (+/-)	No
Child	N/A	88.44	N/A	86.00	N/A	0.00	N/A	-2.75	-100.00	15% (+/-)	No
Adult	N/A	79.63	N/A	77.32	N/A	0.00	N/A	-2.90	-100.00	15% (+/-)	No
Avg # IP Days per Non-Dual FFS User	N/A	7	N/A	6	N/A	Div by 0	N/A	-6.67	Div by 0	15% (+/-)	N/A
Aged	N/A	16	N/A	17	N/A	Div by 0	N/A	6.91	Div by 0	15% (+/-)	N/A
Disabled	N/A	13	N/A	12	N/A	Div by 0	N/A	-5.65	Div by 0	15% (+/-)	N/A
Child	N/A	5	N/A	5	N/A	Div by 0	N/A	-8.11	Div by 0	15% (+/-)	N/A
Adult	N/A	5	N/A	5	N/A	Div by 0	N/A	-3.60	Div by 0	15% (+/-)	N/A
Avg # ILTC Days per Non-Dual FFS User	N/A	103	N/A	97	N/A	Div by 0	N/A	-5.84	Div by 0	15% (+/-)	N/A
Aged	N/A	208	N/A	193	N/A	Div by 0	N/A	-6.96	Div by 0	15% (+/-)	N/A
Disabled	N/A	136	N/A	132	N/A	Div by 0	N/A	-2.86	Div by 0	15% (+/-)	N/A
Child	N/A	46	N/A	41	N/A	Div by 0	N/A	-12.00	Div by 0	15% (+/-)	N/A
Adult	N/A	22	N/A	17	N/A	Div by 0	N/A	-24.00	Div by 0	15% (+/-)	N/A
% 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	\$8,260,511	N/A	\$8,753,216	N/A	\$4,519,446	N/A	5.97	-48.40	15% (+/-)	No
FP: Number of Users	N/A	25,545	N/A	28,412	N/A	20,089	N/A	11.22	-29.30	15% (+/-)	No
FP: Average Medicaid Pd per User	N/A	\$323	N/A	\$308	N/A	\$225	N/A	-4.73	-27.00	15% (+/-)	No
RHC: Total Medicaid Paid (Program Type 3)	N/A	\$7,470,152	N/A	\$7,311,512	N/A	\$0	N/A	-2.12	-100.00	15% (+/-)	No
RHC: Number of Users	N/A	25,183	N/A	25,039	N/A	0	N/A	-0.57	-100.00	15% (+/-)	No
RHC: Avg Medicaid Pd per User	N/A	\$297	N/A	\$292	N/A	Div by 0	N/A	-1.56	Div by 0	15% (+/-)	N/A
FOHC: Total Medicaid Paid (Program Type 4)	N/A	\$13,745,154	N/A	\$16,092,017	N/A	\$0	N/A	17.07	-100.00	15% (+/-)	No
FOHC: Number of Users	N/A	29,404	N/A	32,746	N/A	0	N/A	11.37	-100.00	15% (+/-)	No
FOHC: Avg Medicaid Pd per User	N/A	\$467	N/A	\$491	N/A	Div by 0	N/A	5.13	Div by 0	15% (+/-)	N/A
IHS: Total Medicaid Pd (Program Type 5)	N/A	\$332,395	N/A	\$5,044	N/A	\$414,669	N/A	-98.50	8,121.00	15% (+/-)	No
IHS: Number of Users	N/A	855	N/A	49	N/A	967	N/A	-94.30	1,873.00	15% (+/-)	No
IHS: Avg Medicaid Pd per User	N/A	\$389	N/A	\$103	N/A	\$429	N/A	-73.50	316.60	15% (+/-)	No
Section 1915(c) Waiver: Total Medicaid Paid (Program Types 6 and 7)	N/A	\$76,722,786	N/A	\$72,786,323	N/A	\$0	N/A	-5.13	-100.00	15% (+/-)	No
Section 1915(c) Waiver: Number of Users	N/A	1,105	N/A	1,072	N/A	0	N/A	-2.99	-100.00	15% (+/-)	No
Section 1915(c) Waiver: Avg Medicaid Pd per User	N/A	\$69,432	N/A	\$67,898	N/A	Div by 0	N/A	-2.21	Div by 0	15% (+/-)	N/A
<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	Div by 0	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	Div by 0	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	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	Div by 0	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	0.00	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	0.00	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	0.00	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	Div by 0	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	Div by 0	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	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	Div by 0	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	0.00	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	0.00	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	Div by 0	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	Div by 0	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	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	Div by 0	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	0.00	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	0.00	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	50,429	N/A	51,837	N/A	54,028	N/A	2.79	4.23	15% (+/-)	Yes
Number of EDB Dual FFS Recipients	N/A	48,399	N/A	49,590	N/A	49,275	N/A	2.46	-0.64	15% (+/-)	Yes
Total EDB Dual FFS PYE	N/A	45,807	N/A	47,269	N/A	49,114	N/A	3.19	3.90	15% (+/-)	Yes
% EDB Only Dual (Code 50)	N/A	3.59	N/A	3.53	N/A	1.33	N/A	-1.53	-62.30	15% (+/-)	No
% QMB Only (Code 51)	N/A	0.34	N/A	0.44	N/A	1.43	N/A	30.09	222.90	15% (+/-)	No
% QMB Plus (Code 52)	N/A	55.35	N/A	66.78	N/A	67.45	N/A	20.65	1.01	15% (+/-)	Yes
% SLMB Only (Code 53)	N/A	0.83	N/A	0.88	N/A	1.51	N/A	6.36	71.52	15% (+/-)	No
% SLMB Plus (Code 54)	N/A	4.08	N/A	3.41	N/A	3.05	N/A	-16.40	-10.60	15% (+/-)	Yes
% 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	0.52	N/A	0.35	N/A	0.47	N/A	-31.50	32.64	15% (+/-)	No
% QI 2 (Code 57)	N/A	0.05	N/A	0.00	N/A	0.00	N/A	-96.10	-100.00	15% (+/-)	No
% Other Type Dual (Code 58)	N/A	35.25	N/A	24.60	N/A	24.75	N/A	-30.20	0.64	15% (+/-)	Yes
% 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	26,199	N/A	26,302	N/A	26,767	N/A	0.39	1.77	10% (+/-)	Yes
11: Aged, Cash	N/A	8,354	N/A	7,508	N/A	7,470	N/A	-10.10	-0.51	10% (+/-)	Yes
21: Aged, MN	N/A	3,103	N/A	2,503	N/A	3,511	N/A	-19.30	40.27	10% (+/-)	No
31: Aged, Poverty	N/A	9,418	N/A	10,539	N/A	10,747	N/A	11.90	1.97	10% (+/-)	Yes
41: Other Aged	N/A	5,324	N/A	5,752	N/A	5,039	N/A	8.04	-12.40	10% (+/-)	No
51: 1115 Aged	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Disabled EDB Dual FFS Total	N/A	20,899	N/A	21,748	N/A	23,120	N/A	4.06	6.31	10% (+/-)	Yes
12: Disabled, Cash	N/A	10,988	N/A	11,177	N/A	11,468	N/A	1.72	2.60	10% (+/-)	Yes
22: Disabled, MN	N/A	588	N/A	355	N/A	566	N/A	-39.60	59.44	10% (+/-)	No
32: Disabled, Poverty	N/A	7,662	N/A	8,499	N/A	9,284	N/A	10.92	9.24	10% (+/-)	Yes
42: Other Disabled	N/A	1,661	N/A	1,717	N/A	1,802	N/A	3.37	4.95	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	\$777,765,157	N/A	\$788,332,004	N/A	\$163,759,733	N/A	1.36	-79.20	15% (+/-)	No
Average FFS Medicaid Amt Paid per FFS Dual	N/A	\$15,423	N/A	\$15,208	N/A	\$3,031	N/A	-1.39	-80.10	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
Average FFS Medicaid Amt Paid per FFS Dual Recipient (User of any service)	N/A	\$16,070	N/A	\$15,897	N/A	\$3,323	N/A	-1.08	-79.10	15% (+/-)	No
<b>AVG FFS MEDICAID AMT PD/FFS DUAL BY MAX ELIGIBILITY GROUP</b>											
All Aged	N/A	\$14,837	N/A	\$15,032	N/A	\$2,578	N/A	1.32	-82.80	15% (+/-)	No
11: Aged, Cash	N/A	\$11,627	N/A	\$10,174	N/A	\$2,752	N/A	-12.50	-73.00	15% (+/-)	No
21: Aged, MN	N/A	\$19,614	N/A	\$21,139	N/A	\$2,965	N/A	7.78	-86.00	15% (+/-)	No
31: Aged, Poverty	N/A	\$4,492	N/A	\$5,993	N/A	\$2,181	N/A	33.41	-63.60	15% (+/-)	No
41: Other Aged	N/A	\$35,392	N/A	\$35,280	N/A	\$2,897	N/A	-0.32	-91.80	15% (+/-)	No
51: 1115 Aged	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
All Disabled	N/A	\$17,489	N/A	\$16,872	N/A	\$3,563	N/A	-3.53	-78.90	15% (+/-)	No
12: Disabled, Cash	N/A	\$16,777	N/A	\$16,336	N/A	\$3,477	N/A	-2.63	-78.70	15% (+/-)	No
22: Disabled, MN	N/A	\$32,651	N/A	\$29,201	N/A	\$5,031	N/A	-10.60	-82.80	15% (+/-)	No
32: Disabled, Poverty	N/A	\$10,677	N/A	\$11,061	N/A	\$3,396	N/A	3.60	-69.30	15% (+/-)	No
42: Other Disabled	N/A	\$48,251	N/A	\$46,575	N/A	\$4,510	N/A	-3.47	-90.30	15% (+/-)	No
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	\$19,974,938	N/A	\$17,585,343	N/A	\$0	N/A	-12.00	-100.00	15% (+/-)	No
IP: Number of Users	N/A	1,026	N/A	853	N/A	0	N/A	-16.90	-100.00	15% (+/-)	No
IP: Average Medicaid Pd per User	N/A	\$19,469	N/A	\$20,616	N/A	Div by 0	N/A	5.89	Div by 0	15% (+/-)	N/A
IP: Average Medicaid Covered Days Per User	N/A	11	N/A	10	N/A	Div by 0	N/A	-4.88	Div by 0	15% (+/-)	N/A
MH Aged: Total Medicaid Paid (TOS 02)	N/A	\$299,537	N/A	\$16,483	N/A	\$0	N/A	-94.50	-100.00	15% (+/-)	No
MH Aged: Number of Users	N/A	12	N/A	5	N/A	0	N/A	-58.30	-100.00	15% (+/-)	No
MH Aged: Avg Medicaid Pd per User	N/A	\$24,961	N/A	\$3,297	N/A	Div by 0	N/A	-86.80	Div by 0	15% (+/-)	N/A
IP Psych < 21: Total Medicaid Paid (TOS 04)	N/A	\$22,554	N/A	\$117,465	N/A	\$0	N/A	420.80	-100.00	15% (+/-)	No
IP Psych < 21: Number of Users	N/A	4	N/A	5	N/A	0	N/A	25.00	-100.00	15% (+/-)	No
IP Psych<21 :Avg Medicaid Pd per User	N/A	\$5,639	N/A	\$23,493	N/A	Div by 0	N/A	316.70	Div by 0	15% (+/-)	N/A
ICF/MR: Total Medicaid Pd (TOS 05)	N/A	\$19,042,585	N/A	\$18,418,643	N/A	\$0	N/A	-3.28	-100.00	15% (+/-)	No
ICF/MR: Number of Users	N/A	169	N/A	140	N/A	0	N/A	-17.20	-100.00	15% (+/-)	No
ICF/MR: Avg Medicaid Pd per User	N/A	\$112,678	N/A	\$131,562	N/A	Div by 0	N/A	16.76	Div by 0	15% (+/-)	N/A
NF: Total Medicaid Paid (TOS 07)	N/A	\$217,250,059	N/A	\$214,137,741	N/A	\$0	N/A	-1.43	-100.00	15% (+/-)	No
NF: Number of Users	N/A	8,084	N/A	7,598	N/A	0	N/A	-6.01	-100.00	15% (+/-)	No
NF:Avg Medicaid Pd per User	N/A	\$26,874	N/A	\$28,183	N/A	Div by 0	N/A	4.87	Div by 0	15% (+/-)	N/A
Physician: Total Medicaid Paid (TOS 08)	N/A	\$13,534,624	N/A	\$11,634,144	N/A	\$0	N/A	-14.00	-100.00	15% (+/-)	No
Physician: Number of Users	N/A	39,078	N/A	37,533	N/A	0	N/A	-3.95	-100.00	15% (+/-)	No
Physician: Avg Medicaid Pd per User	N/A	\$346	N/A	\$310	N/A	Div by 0	N/A	-10.50	Div by 0	15% (+/-)	N/A
Dental: Total Medicaid Paid (TOS 09)	N/A	\$1,774,858	N/A	\$1,589,543	N/A	\$0	N/A	-10.40	-100.00	15% (+/-)	No
Dental: Number of Users	N/A	4,795	N/A	4,658	N/A	0	N/A	-2.86	-100.00	15% (+/-)	No
Dental: Avg Medicaid Pd per User	N/A	\$370	N/A	\$341	N/A	Div by 0	N/A	-7.81	Div by 0	15% (+/-)	N/A
Other Practitioner: Total Medicaid Pd (TOS 10)	N/A	\$1,767,487	N/A	\$1,366,203	N/A	\$0	N/A	-22.70	-100.00	15% (+/-)	No
Other Practitioner: Number of Users	N/A	18,065	N/A	16,037	N/A	0	N/A	-11.20	-100.00	15% (+/-)	No
Other Practitioner: Avg Medicaid Pd per User	N/A	\$98	N/A	\$85	N/A	Div by 0	N/A	-12.90	Div by 0	15% (+/-)	N/A
OPD: Total Medicaid Paid (TOS 11)	N/A	\$11,819,374	N/A	\$10,697,255	N/A	\$0	N/A	-9.49	-100.00	15% (+/-)	No
OPD: Number of Users	N/A	7,887	N/A	7,189	N/A	0	N/A	-8.85	-100.00	15% (+/-)	No
OPD: Avg Medicaid Pd per User	N/A	\$1,499	N/A	\$1,488	N/A	Div by 0	N/A	-0.71	Div by 0	15% (+/-)	N/A
Clinic: Total Medicaid Paid (TOS 12)	N/A	\$12,904,753	N/A	\$4,179,683	N/A	\$0	N/A	-67.60	-100.00	15% (+/-)	No
Clinic: Number of Users	N/A	15,709	N/A	12,068	N/A	0	N/A	-23.20	-100.00	15% (+/-)	No
Clinic: Avg Medicaid Pd per User	N/A	\$821	N/A	\$346	N/A	Div by 0	N/A	-57.80	Div by 0	15% (+/-)	N/A
HH: Total Medicaid Paid (TOS 13)	N/A	\$1,647,664	N/A	\$491,617	N/A	\$0	N/A	-70.20	-100.00	15% (+/-)	No
HH: Number of Users	N/A	728	N/A	327	N/A	0	N/A	-55.10	-100.00	15% (+/-)	No
HH: Avg Medicaid Pd per User	N/A	\$2,263	N/A	\$1,503	N/A	Div by 0	N/A	-33.60	Div by 0	15% (+/-)	N/A
Lab/Xray: Total Medicaid Paid (TOS 15)	N/A	\$2,939,985	N/A	\$3,346,902	N/A	\$0	N/A	13.84	-100.00	15% (+/-)	No
Lab/Xray: Number of Users	N/A	7,571	N/A	6,708	N/A	0	N/A	-11.40	-100.00	15% (+/-)	No
Lab/Xray:Avg Medicaid Pd per User	N/A	\$388	N/A	\$499	N/A	Div by 0	N/A	28.49	Div by 0	15% (+/-)	N/A
Drugs: Total Medicaid Paid (TOS 16)	N/A	\$142,659,643	N/A	\$152,303,199	N/A	\$163,759,733	N/A	6.76	7.52	15% (+/-)	Yes
Drugs: Number of Users	N/A	46,397	N/A	47,828	N/A	49,275	N/A	3.08	3.03	15% (+/-)	Yes
Drugs: Avg Medicaid Pd per User	N/A	\$3,075	N/A	\$3,184	N/A	\$3,323	N/A	3.57	4.37	15% (+/-)	Yes
Other Services: Total Medicaid Paid (TOS 19)	N/A	\$56,288,394	N/A	\$44,939,634	N/A	\$0	N/A	-20.20	-100.00	15% (+/-)	No
Other Services: Number of Users	N/A	12,652	N/A	9,224	N/A	0	N/A	-27.10	-100.00	15% (+/-)	No



2003-2005 MAX PSF VALIDATION TABLE  
STATE: ME

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	\$4,449	N/A	\$4,872	N/A	Div by 0	N/A	9.51	Div by 0	15% (+/-)	N/A
Transportation: Total Medicaid Paid (TOS 26)	N/A	\$10,293,287	N/A	\$9,812,127	N/A	\$0	N/A	-4.67	-100.00	15% (+/-)	No
Transportation: Number of Users	N/A	16,423	N/A	15,772	N/A	0	N/A	-3.96	-100.00	15% (+/-)	No
Transportation: Avg Medicaid Pd per User	N/A	\$627	N/A	\$622	N/A	Div by 0	N/A	-0.74	Div by 0	15% (+/-)	N/A
PCS: Total Medicaid Paid (TOS 30)	N/A	\$14,870,325	N/A	\$16,576,030	N/A	\$0	N/A	11.47	-100.00	15% (+/-)	No
PCS: Number of Users	N/A	5,505	N/A	5,482	N/A	0	N/A	-0.42	-100.00	15% (+/-)	No
PCS: Avg Medicaid Pd per User	N/A	\$2,701	N/A	\$3,024	N/A	Div by 0	N/A	11.94	Div by 0	15% (+/-)	N/A
Target Case Management: Total Medicaid Pd (TOS 31)	N/A	\$16,211,825	N/A	\$14,116,195	N/A	\$0	N/A	-12.90	-100.00	15% (+/-)	No
Target Case Management: Number of Users	N/A	6,406	N/A	6,028	N/A	0	N/A	-5.90	-100.00	15% (+/-)	No
Target Case Management: Avg Medicaid Pd per User	N/A	\$2,531	N/A	\$2,342	N/A	Div by 0	N/A	-7.47	Div by 0	15% (+/-)	N/A
Rehab Services: Total Medicaid Pd (TOS 33)	N/A	\$10,723,460	N/A	\$9,183,246	N/A	\$0	N/A	-14.40	-100.00	15% (+/-)	No
Rehab Services: Number of Users	N/A	347	N/A	340	N/A	0	N/A	-2.02	-100.00	15% (+/-)	No
Rehab Services: Avg Medicaid Pd per User	N/A	\$30,903	N/A	\$27,010	N/A	Div by 0	N/A	-12.60	Div by 0	15% (+/-)	N/A
PT/OT/Speech/Hear: Total Medicaid Paid (TOS 34)	N/A	\$388,713	N/A	\$283,126	N/A	\$0	N/A	-27.20	-100.00	15% (+/-)	No
PT/OT/Speech/Hear: Number of Users	N/A	983	N/A	818	N/A	0	N/A	-16.80	-100.00	15% (+/-)	No
PT/OT/Speech/Hear: Avg Medicaid Pd per User	N/A	\$395	N/A	\$346	N/A	Div by 0	N/A	-12.50	Div by 0	15% (+/-)	N/A
Hospice: Total Medicaid Paid (TOS 35)	N/A	\$168,914	N/A	\$152,586	N/A	\$0	N/A	-9.67	-100.00	15% (+/-)	No
Hospice: Number of Users	N/A	17	N/A	16	N/A	0	N/A	-5.88	-100.00	15% (+/-)	No
Hospice: Avg Medicaid Pd per User	N/A	\$9,936	N/A	\$9,537	N/A	Div by 0	N/A	-4.02	Div by 0	15% (+/-)	N/A
DME: Total Medicaid Paid (TOS 51)	N/A	\$59,378,968	N/A	\$60,503,177	N/A	\$0	N/A	1.89	-100.00	15% (+/-)	No
DME: Number of Users	N/A	15,314	N/A	12,995	N/A	0	N/A	-15.10	-100.00	15% (+/-)	No
DME: Avg Medicaid Pd per User	N/A	\$3,877	N/A	\$4,656	N/A	Div by 0	N/A	20.08	Div by 0	15% (+/-)	N/A
Residential Care: Total Medicaid Paid (TOS 52)	N/A	\$111,990,877	N/A	\$124,516,276	N/A	\$0	N/A	11.18	-100.00	15% (+/-)	No
Residential Care: Number of Users	N/A	5,275	N/A	5,327	N/A	0	N/A	0.99	-100.00	15% (+/-)	No
Residential Care: Avg Medicaid Pd per User	N/A	\$21,230	N/A	\$23,375	N/A	Div by 0	N/A	10.10	Div by 0	15% (+/-)	N/A
Psych. Services: Total Medicaid Paid (TOS 53)	N/A	\$27,427,077	N/A	\$48,064,125	N/A	\$0	N/A	75.24	-100.00	15% (+/-)	No
Psych. Services: Number of Users	N/A	5,348	N/A	9,347	N/A	0	N/A	74.78	-100.00	15% (+/-)	No
Psych. Services: Avg Medicaid Pd per User	N/A	\$5,128	N/A	\$5,142	N/A	Div by 0	N/A	0.27	Div by 0	15% (+/-)	N/A
Adult Day Care: Total Medicaid Paid (TOS 54)	N/A	\$22,938,617	N/A	\$22,951,079	N/A	\$0	N/A	0.05	-100.00	15% (+/-)	No
Adult Day Care: Number of Users	N/A	1,759	N/A	1,857	N/A	0	N/A	5.57	-100.00	15% (+/-)	No
Adult Day Care: Avg Medicaid Pd per User	N/A	\$13,041	N/A	\$12,359	N/A	Div by 0	N/A	-5.23	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	\$396	N/A	\$339	N/A	\$0	N/A	-14.40	-100.00	15% (+/-)	No
Aged	N/A	\$237	N/A	\$191	N/A	\$0	N/A	-19.20	-100.00	15% (+/-)	No
Disabled	N/A	\$495	N/A	\$423	N/A	\$0	N/A	-14.60	-100.00	15% (+/-)	No
ILTC (TOS=02,04,05,07)	N/A	\$4,692	N/A	\$4,489	N/A	\$0	N/A	-4.33	-100.00	15% (+/-)	No
Aged	N/A	\$7,793	N/A	\$7,662	N/A	\$0	N/A	-1.68	-100.00	15% (+/-)	No
Disabled	N/A	\$1,551	N/A	\$1,428	N/A	\$0	N/A	-7.93	-100.00	15% (+/-)	No
Drugs (TOS=16)	N/A	\$2,829	N/A	\$2,938	N/A	\$3,031	N/A	3.86	3.16	15% (+/-)	Yes
Aged	N/A	\$2,414	N/A	\$2,537	N/A	\$2,578	N/A	5.10	1.64	15% (+/-)	Yes
Disabled	N/A	\$3,364	N/A	\$3,441	N/A	\$3,563	N/A	2.31	3.53	15% (+/-)	Yes
All Other Services	N/A	\$7,506	N/A	\$7,442	N/A	\$0	N/A	-0.86	-100.00	15% (+/-)	No
Aged	N/A	\$4,394	N/A	\$4,643	N/A	\$0	N/A	5.65	-100.00	15% (+/-)	No
Disabled	N/A	\$12,079	N/A	\$11,579	N/A	\$0	N/A	-4.13	-100.00	15% (+/-)	No
<b>% OF FFS DUALS WITH CLAIMS BY SELECTED TYPE OF SERVICE</b>											
% FFS Duals with IP Claims (TOS=01)	N/A	2.03	N/A	1.65	N/A	0.00	N/A	-19.10	-100.00	15% (+/-)	No
Aged	N/A	1.35	N/A	1.04	N/A	0.00	N/A	-23.00	-100.00	15% (+/-)	No
Disabled	N/A	2.30	N/A	1.85	N/A	0.00	N/A	-19.50	-100.00	15% (+/-)	No
% FFS Duals with ILTC Claims (TOS=02,04,05,07)	N/A	16.37	N/A	14.93	N/A	0.00	N/A	-8.79	-100.00	15% (+/-)	No
Aged	N/A	28.64	N/A	26.81	N/A	0.00	N/A	-6.38	-100.00	15% (+/-)	No
Disabled	N/A	3.56	N/A	3.13	N/A	0.00	N/A	-12.30	-100.00	15% (+/-)	No
% FFS Duals with Drug Claims (TOS=16)	N/A	92.00	N/A	92.27	N/A	91.20	N/A	0.28	-1.15	15% (+/-)	Yes
Aged	N/A	92.86	N/A	92.75	N/A	91.38	N/A	-0.11	-1.48	15% (+/-)	Yes
Disabled	N/A	91.48	N/A	92.07	N/A	91.33	N/A	0.65	-0.80	15% (+/-)	Yes
% FFS Duals with All Other Claims	N/A	90.78	N/A	88.43	N/A	0.00	N/A	-2.59	-100.00	15% (+/-)	No
Aged	N/A	88.76	N/A	85.55	N/A	0.00	N/A	-3.62	-100.00	15% (+/-)	No
Disabled	N/A	93.49	N/A	91.99	N/A	0.00	N/A	-1.60	-100.00	15% (+/-)	No

2003-2005 MAX PSF VALIDATION TABLE  
STATE: ME

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	11	N/A	10	N/A	Div by 0	N/A	-4.88	Div by 0	15% (+/-)	N/A
Aged	N/A	11	N/A	9	N/A	Div by 0	N/A	-18.00	Div by 0	15% (+/-)	N/A
Disabled	N/A	12	N/A	12	N/A	Div by 0	N/A	2.37	Div by 0	15% (+/-)	N/A
Avg # ILTC Days per FFS Dual User (TOS 02, 04, 05, 07)	N/A	214	N/A	211	N/A	Div by 0	N/A	-1.47	Div by 0	15% (+/-)	N/A
Aged	N/A	213	N/A	209	N/A	Div by 0	N/A	-1.78	Div by 0	15% (+/-)	N/A
Disabled	N/A	228	N/A	233	N/A	Div by 0	N/A	1.90	Div by 0	15% (+/-)	N/A
<b>FFS EXPENDITURES AND USERS BY MAX PROGRAM TYPE</b>											
FP: Total Medicaid Paid (Program Type 2)	N/A	\$360,695	N/A	\$420,846	N/A	\$338,271	N/A	16.68	-19.60	15% (+/-)	No
FP: Number of Users	N/A	1,325	N/A	1,386	N/A	1,165	N/A	4.60	-15.90	15% (+/-)	No
FP: Average Medicaid Pd per User	N/A	\$272	N/A	\$304	N/A	\$290	N/A	11.54	-4.37	15% (+/-)	Yes
RHC: Total Medicaid Paid (Program Type 3)	N/A	\$766,979	N/A	\$693,101	N/A	\$0	N/A	-9.63	-100.00	15% (+/-)	No
RHC: Number of Users	N/A	5,106	N/A	4,798	N/A	0	N/A	-6.03	-100.00	15% (+/-)	No
RHC: Avg Medicaid Pd per User	N/A	\$150	N/A	\$144	N/A	Div by 0	N/A	-3.83	Div by 0	15% (+/-)	N/A
FQHC: Total Medicaid Paid (Program Type 4)	N/A	\$1,379,159	N/A	\$1,427,688	N/A	\$0	N/A	3.52	-100.00	15% (+/-)	No
FQHC: Number of Users	N/A	6,353	N/A	6,791	N/A	0	N/A	6.89	-100.00	15% (+/-)	No
FQHC: Avg Medicaid Pd per User	N/A	\$217	N/A	\$210	N/A	Div by 0	N/A	-3.16	Div by 0	15% (+/-)	N/A
IHS: Total Medicaid Pd (Program Type 5)	N/A	\$222,861	N/A	\$1,409	N/A	\$346,442	N/A	-99.40	24,488.00	15% (+/-)	No
IHS: Number of Users	N/A	113	N/A	10	N/A	142	N/A	-91.20	1,320.00	15% (+/-)	No
IHS: Avg Medicaid Pd per User	N/A	\$1,972	N/A	\$141	N/A	\$2,440	N/A	-92.90	1,632.00	15% (+/-)	No
Section 1915(c) Waiver: Total Medicaid Paid (Program Types 6 and 7)	N/A	\$142,027,032	N/A	\$144,516,902	N/A	\$0	N/A	1.75	-100.00	15% (+/-)	No
Section 1915(c) Waiver: Number of Users	N/A	3,122	N/A	2,989	N/A	0	N/A	-4.26	-100.00	15% (+/-)	No
Section 1915(c) Waiver: Avg Medicaid Pd per User	N/A	\$45,492	N/A	\$48,350	N/A	Div by 0	N/A	6.28	Div by 0	15% (+/-)	N/A
<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	Div by 0	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	Div by 0	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	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	Div by 0	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	0.00	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	0.00	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	Div by 0	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	Div by 0	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	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	Div by 0	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	0.00	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	0.00	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	Div by 0	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	Div by 0	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	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	Div by 0	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	0.00	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	0.00	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	285,521	N/A	302,062	N/A	313,005	N/A	5.79	3.62	15% (+/-)	Yes
# FFS Recipients	N/A	254,087	N/A	265,459	N/A	226,105	N/A	4.48	-14.80	15% (+/-)	Yes
% FFS Enrollees who are Recipients	65-90%	88.99	Yes	87.88	Yes	72.24	Yes	-1.25	-17.80	15% (+/-)	No
% Aged who are Recipients	90-100%	91.87	Yes	91.83	Yes	87.07	No	-0.05	-5.18	15% (+/-)	Yes
% Disabled who are Recipients	85-100%	95.20	Yes	95.28	Yes	88.59	Yes	0.08	-7.02	15% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: ME

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%	90.19	Yes	88.61	Yes	62.82	No	-1.75	-29.10	15% (+/-)	No
% Adults who are Recipients	80-100%	83.70	Yes	82.79	Yes	71.92	No	-1.08	-13.10	15% (+/-)	Yes
Total FFS PYE	N/A	235,878	N/A	253,794	N/A	263,334	N/A	7.60	3.76	15% (+/-)	Yes
MAX Aged Total	N/A	28,339	N/A	28,217	N/A	28,723	N/A	-0.43	1.79	10% (+/-)	Yes
11: Aged, Cash	N/A	8,805	N/A	7,832	N/A	7,736	N/A	-11.10	-1.23	10% (+/-)	Yes
21: Aged, MN	N/A	3,238	N/A	2,618	N/A	3,658	N/A	-19.10	39.72	10% (+/-)	No
31: Aged, Poverty	N/A	10,688	N/A	11,746	N/A	12,059	N/A	9.90	2.67	10% (+/-)	Yes
41: Other Aged	N/A	5,608	N/A	6,021	N/A	5,270	N/A	7.36	-12.50	10% (+/-)	No
51: 1115 Aged	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Disabled Total	N/A	45,433	N/A	46,185	N/A	49,300	N/A	1.66	6.75	10% (+/-)	Yes
12: Disabled, Cash	N/A	29,811	N/A	30,416	N/A	31,289	N/A	2.03	2.87	10% (+/-)	Yes
22: Disabled, MN	N/A	826	N/A	548	N/A	878	N/A	-33.70	60.22	10% (+/-)	No
32: Disabled, Poverty	N/A	11,082	N/A	11,761	N/A	13,576	N/A	6.13	15.43	10% (+/-)	No
42: Other Disabled	N/A	3,714	N/A	3,460	N/A	3,557	N/A	-6.84	2.80	10% (+/-)	Yes
52: 1115 Disabled	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Child Total	N/A	116,661	N/A	121,402	N/A	127,202	N/A	4.06	4.78	10% (+/-)	Yes
14: AFDC Child, Cash	N/A	586	N/A	9	N/A	1	N/A	-98.50	-88.90	10% (+/-)	No
16: AFDC-U Child, Cash	N/A	68	N/A	0	N/A	0	N/A	-100.00	Div by 0	10% (+/-)	N/A
24: AFDC Child, MN	N/A	604	N/A	395	N/A	489	N/A	-34.60	23.80	10% (+/-)	No
34: Child Poverty	N/A	98,460	N/A	101,658	N/A	104,326	N/A	3.25	2.62	10% (+/-)	Yes
44: Other Child	N/A	13,002	N/A	15,784	N/A	18,943	N/A	21.40	20.01	10% (+/-)	No
48: Foster Care Child	N/A	3,941	N/A	3,554	N/A	3,442	N/A	-9.82	-3.15	10% (+/-)	Yes
54: 1115 Child	N/A	0	N/A	2	N/A	1	N/A	Div by 0	-50.00	10% (+/-)	No
MAX Adult Total	N/A	95,088	N/A	106,258	N/A	107,780	N/A	11.75	1.43	10% (+/-)	Yes
15: AFDC Adult, Cash	N/A	15,663	N/A	20,550	N/A	25,682	N/A	31.20	24.97	10% (+/-)	No
17: AFDC-U Adult, Cash	N/A	39	N/A	0	N/A	0	N/A	-100.00	Div by 0	10% (+/-)	N/A
25: AFDC Adult, MN	N/A	550	N/A	460	N/A	535	N/A	-16.40	16.30	10% (+/-)	No
35: Adult, Poverty	N/A	2,275	N/A	2,405	N/A	2,621	N/A	5.71	8.98	10% (+/-)	Yes
45: Other Adult	N/A	52,278	N/A	51,184	N/A	55,303	N/A	-2.09	8.05	10% (+/-)	Yes
55: 1115 Adult	N/A	24,283	N/A	31,659	N/A	23,639	N/A	30.38	-25.30	10% (+/-)	No
Total FFS Medicaid Amt Paid	N/A	\$2,157,971,189	N/A	\$2,142,621,947	N/A	\$327,928,480	N/A	-0.71	-84.70	15% (+/-)	No
Average FFS Medicaid Amt Paid per FFS Enrollee	N/A	\$7,558	N/A	\$7,093	N/A	\$1,048	N/A	-6.15	-85.20	15% (+/-)	No
Average FFS Medicaid Amt Paid per FFS Recipient (User of any svc)	N/A	\$8,493	N/A	\$8,071	N/A	\$1,450	N/A	-4.96	-82.00	15% (+/-)	No
<b>AVG FFS MEDICAID AMT PD/FFS ENROLLEE BY MAX ELIGIBILITY GROUP</b>											
All Aged	N/A	\$14,240	N/A	\$14,450	N/A	\$2,442	N/A	1.48	-83.10	15% (+/-)	No
11: Aged, Cash	N/A	\$11,710	N/A	\$10,431	N/A	\$2,711	N/A	-10.90	-74.00	15% (+/-)	No
21: Aged, MN	N/A	\$19,234	N/A	\$20,545	N/A	\$2,878	N/A	6.82	-86.00	15% (+/-)	No
31: Aged, Poverty	N/A	\$4,345	N/A	\$5,623	N/A	\$1,981	N/A	29.42	-64.80	15% (+/-)	No
41: Other Aged	N/A	\$34,185	N/A	\$34,249	N/A	\$2,800	N/A	0.19	-91.80	15% (+/-)	No
51: 1115 Aged	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
All Disabled	N/A	\$19,850	N/A	\$19,083	N/A	\$3,124	N/A	-3.86	-83.60	15% (+/-)	No
12: Disabled, Cash	N/A	\$20,490	N/A	\$19,739	N/A	\$3,149	N/A	-3.67	-84.00	15% (+/-)	No
22: Disabled, MN	N/A	\$34,235	N/A	\$30,912	N/A	\$4,061	N/A	-9.71	-86.90	15% (+/-)	No
32: Disabled, Poverty	N/A	\$12,331	N/A	\$12,742	N/A	\$2,974	N/A	3.33	-76.70	15% (+/-)	No
42: Other Disabled	N/A	\$33,943	N/A	\$32,993	N/A	\$3,245	N/A	-2.80	-90.20	15% (+/-)	No
52: 1115 Disabled	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
All Child	N/A	\$4,057	N/A	\$3,628	N/A	\$262	N/A	-10.60	-92.80	15% (+/-)	No
14: AFDC Child, Cash	N/A	\$4,402	N/A	\$1,357	N/A	\$0	N/A	-69.20	-100.00	15% (+/-)	No
16: AFDC-U Child, Cash	N/A	\$1,489	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
24: AFDC Child, MN	N/A	\$1,777	N/A	\$1,707	N/A	\$258	N/A	-3.92	-84.90	15% (+/-)	No
34: Child, Poverty	N/A	\$3,242	N/A	\$3,121	N/A	\$232	N/A	-3.74	-92.60	15% (+/-)	No
44: Other Child	N/A	\$2,863	N/A	\$2,675	N/A	\$292	N/A	-6.56	-89.10	15% (+/-)	No
48: Foster Care Child	N/A	\$28,688	N/A	\$22,565	N/A	\$1,014	N/A	-21.30	-95.50	15% (+/-)	No
54: 1115 Child	N/A	Div by 0	N/A	\$4,227	N/A	\$10,320	N/A	Div by 0	144.20	15% (+/-)	No
All Adult	N/A	\$3,989	N/A	\$3,888	N/A	\$653	N/A	-2.53	-83.20	15% (+/-)	No
15: AFDC Adult, Cash	N/A	\$2,716	N/A	\$2,767	N/A	\$592	N/A	1.90	-78.60	15% (+/-)	No
17: AFDC-U Adult, Cash	N/A	\$2,453	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A

2003-2005 MAX PSF VALIDATION TABLE  
STATE: ME

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	\$2,281	N/A	\$1,882	N/A	\$458	N/A	-17.50	-75.70	15% (+/-)	No
35: Adult, Poverty	N/A	\$5,074	N/A	\$4,071	N/A	\$239	N/A	-19.80	-94.10	15% (+/-)	No
45: Other Adult	N/A	\$3,581	N/A	\$3,576	N/A	\$606	N/A	-0.16	-83.00	15% (+/-)	No
55: 1115 Adult	N/A	\$5,628	N/A	\$5,136	N/A	\$880	N/A	-8.74	-82.90	15% (+/-)	No
<b>FFS EXPENDITURES AND USERS BY MAX TOS</b>											
IP: Total Medicaid Paid (TOS 01)	N/A	\$335,832,859	N/A	\$308,914,873	N/A	\$0	N/A	-8.02	-100.00	15% (+/-)	No
IP: Number of Users	N/A	22,716	N/A	21,612	N/A	0	N/A	-4.86	-100.00	15% (+/-)	No
IP: Average Medicaid Pd per User	N/A	\$14,784	N/A	\$14,294	N/A	Div by 0	N/A	-3.32	Div by 0	15% (+/-)	N/A
IP: Average Medicaid Covered Days Per User	N/A	7	N/A	6	N/A	Div by 0	N/A	-6.87	Div by 0	15% (+/-)	N/A
MH Aged: Total Medicaid Paid (TOS 02)	N/A	\$306,077	N/A	\$39,141	N/A	\$0	N/A	-87.20	-100.00	15% (+/-)	No
MH Aged: Number of Users	N/A	13	N/A	7	N/A	0	N/A	-46.20	-100.00	15% (+/-)	No
MH Aged: Avg Medicaid Pd per User	N/A	\$23,544	N/A	\$5,592	N/A	Div by 0	N/A	-76.30	Div by 0	15% (+/-)	N/A
IP Psych < 21: Total Medicaid Paid (TOS 04)	N/A	\$36,171,694	N/A	\$34,016,249	N/A	\$0	N/A	-5.96	-100.00	15% (+/-)	No
IP Psych < 21: Number of Users	N/A	890	N/A	861	N/A	0	N/A	-3.26	-100.00	15% (+/-)	No
IP Psych<21 :Avg Medicaid Pd per User	N/A	\$40,642	N/A	\$39,508	N/A	Div by 0	N/A	-2.79	Div by 0	15% (+/-)	N/A
ICF/MR: Total Medicaid Pd (TOS 05)	N/A	\$30,848,209	N/A	\$30,484,112	N/A	\$0	N/A	-1.18	-100.00	15% (+/-)	No
ICF/MR: Number of Users	N/A	252	N/A	220	N/A	0	N/A	-12.70	-100.00	15% (+/-)	No
ICF/MR: Avg Medicaid Pd per User	N/A	\$122,414	N/A	\$138,564	N/A	Div by 0	N/A	13.19	Div by 0	15% (+/-)	N/A
NF: Total Medicaid Paid (TOS 07)	N/A	\$231,306,793	N/A	\$226,868,225	N/A	\$0	N/A	-1.92	-100.00	15% (+/-)	No
NF: Number of Users	N/A	8,718	N/A	8,199	N/A	0	N/A	-5.95	-100.00	15% (+/-)	No
NF: Avg Medicaid Pd per User	N/A	\$26,532	N/A	\$27,670	N/A	Div by 0	N/A	4.29	Div by 0	15% (+/-)	N/A
Physician: Total Medicaid Paid (TOS 08)	N/A	\$56,033,089	N/A	\$49,011,662	N/A	\$0	N/A	-12.50	-100.00	15% (+/-)	No
Physician: Number of Users	N/A	168,993	N/A	158,003	N/A	0	N/A	-6.50	-100.00	15% (+/-)	No
Physician: Avg Medicaid Pd per User	N/A	\$332	N/A	\$310	N/A	Div by 0	N/A	-6.45	Div by 0	15% (+/-)	N/A
Dental: Total Medicaid Paid (TOS 09)	N/A	\$17,967,740	N/A	\$20,087,362	N/A	\$0	N/A	11.80	-100.00	15% (+/-)	No
Dental: Number of Users	N/A	61,830	N/A	64,838	N/A	0	N/A	4.87	-100.00	15% (+/-)	No
Dental: Avg Medicaid Pd per User	N/A	\$291	N/A	\$310	N/A	Div by 0	N/A	6.61	Div by 0	15% (+/-)	N/A
Other Practitioner: Total Medicaid Pd (TOS 10)	N/A	\$7,236,130	N/A	\$6,418,068	N/A	\$0	N/A	-11.30	-100.00	15% (+/-)	No
Other Practitioner: Number of Users	N/A	63,689	N/A	61,435	N/A	0	N/A	-3.54	-100.00	15% (+/-)	No
Other Practitioner: Avg Medicaid Pd per User	N/A	\$114	N/A	\$104	N/A	Div by 0	N/A	-8.05	Div by 0	15% (+/-)	N/A
OPD: Total Medicaid Paid (TOS 11)	N/A	\$199,075,762	N/A	\$184,509,678	N/A	\$0	N/A	-7.32	-100.00	15% (+/-)	No
OPD: Number of Users	N/A	130,516	N/A	129,928	N/A	0	N/A	-0.45	-100.00	15% (+/-)	No
OPD: Avg Medicaid Pd per User	N/A	\$1,525	N/A	\$1,420	N/A	Div by 0	N/A	-6.90	Div by 0	15% (+/-)	N/A
Clinic: Total Medicaid Paid (TOS 12)	N/A	\$99,853,644	N/A	\$35,855,579	N/A	\$0	N/A	-64.10	-100.00	15% (+/-)	No
Clinic: Number of Users	N/A	92,702	N/A	75,889	N/A	0	N/A	-18.10	-100.00	15% (+/-)	No
Clinic: Avg Medicaid Pd per User	N/A	\$1,077	N/A	\$472	N/A	Div by 0	N/A	-56.10	Div by 0	15% (+/-)	N/A
HH: Total Medicaid Paid (TOS 13)	N/A	\$6,664,235	N/A	\$4,079,931	N/A	\$0	N/A	-38.80	-100.00	15% (+/-)	No
HH: Number of Users	N/A	3,151	N/A	2,382	N/A	0	N/A	-24.40	-100.00	15% (+/-)	No
HH: Avg Medicaid Pd per User	N/A	\$2,115	N/A	\$1,713	N/A	Div by 0	N/A	-19.00	Div by 0	15% (+/-)	N/A
Lab/Xray: Total Medicaid Paid (TOS 15)	N/A	\$43,508,540	N/A	\$60,301,790	N/A	\$0	N/A	38.60	-100.00	15% (+/-)	No
Lab/Xray: Number of Users	N/A	144,107	N/A	139,009	N/A	0	N/A	-3.54	-100.00	15% (+/-)	No
Lab/Xray: Avg Medicaid Pd per User	N/A	\$302	N/A	\$434	N/A	Div by 0	N/A	43.68	Div by 0	15% (+/-)	N/A
Drugs: Total Medicaid Paid (TOS 16)	N/A	\$282,836,994	N/A	\$306,376,008	N/A	\$327,928,480	N/A	8.32	7.04	15% (+/-)	Yes
Drugs: Number of Users	N/A	211,410	N/A	220,942	N/A	226,105	N/A	4.51	2.34	15% (+/-)	Yes
Drugs: Avg Medicaid Pd per User	N/A	\$1,338	N/A	\$1,387	N/A	\$1,450	N/A	3.65	4.59	15% (+/-)	Yes
Other Services: Total Medicaid Paid (TOS 19)	N/A	\$248,887,629	N/A	\$108,314,604	N/A	\$0	N/A	-56.50	-100.00	15% (+/-)	No
Other Services: Number of Users	N/A	45,535	N/A	39,088	N/A	0	N/A	-14.20	-100.00	15% (+/-)	No
Other Services: Avg Medicaid Pd per User	N/A	\$5,466	N/A	\$2,771	N/A	Div by 0	N/A	-49.30	Div by 0	15% (+/-)	N/A
Transportation: Total Medicaid Paid (TOS 26)	N/A	\$24,451,646	N/A	\$23,721,773	N/A	\$0	N/A	-2.98	-100.00	15% (+/-)	No
Transportation: Number of Users	N/A	44,391	N/A	43,451	N/A	0	N/A	-2.12	-100.00	15% (+/-)	No
Transportation: Avg Medicaid Pd per User	N/A	\$551	N/A	\$546	N/A	Div by 0	N/A	-0.89	Div by 0	15% (+/-)	N/A
PCS: Total Medicaid Paid (TOS 30)	N/A	\$17,200,491	N/A	\$18,910,313	N/A	\$0	N/A	9.94	-100.00	15% (+/-)	No
PCS: Number of Users	N/A	6,120	N/A	6,050	N/A	0	N/A	-1.14	-100.00	15% (+/-)	No
PCS: Avg Medicaid Pd per User	N/A	\$2,811	N/A	\$3,126	N/A	Div by 0	N/A	11.21	Div by 0	15% (+/-)	N/A
Target Case Management: Total Medicaid Pd (TOS 31)	N/A	\$92,685,906	N/A	\$81,641,314	N/A	\$0	N/A	-11.90	-100.00	15% (+/-)	No
Target Case Management: Number of Users	N/A	34,538	N/A	33,445	N/A	0	N/A	-3.16	-100.00	15% (+/-)	No
Target Case Management: Avg Medicaid Pd per User	N/A	\$2,684	N/A	\$2,441	N/A	Div by 0	N/A	-9.04	Div by 0	15% (+/-)	N/A

2003-2005 MAX PSF VALIDATION TABLE  
STATE: ME

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	\$16,834,020	N/A	\$13,745,394	N/A	\$0	N/A	-18.30	-100.00	15% (+/-)	No
Rehab Services: Number of Users	N/A	655	N/A	625	N/A	0	N/A	-4.58	-100.00	15% (+/-)	No
Rehab Services: Avg Medicaid Pd per User	N/A	\$25,701	N/A	\$21,993	N/A	Div by 0	N/A	-14.40	Div by 0	15% (+/-)	N/A
PT/OT/Speech/Hear: Total Medicaid Paid (TOS 34)	N/A	\$7,400,022	N/A	\$6,915,014	N/A	\$0	N/A	-6.55	-100.00	15% (+/-)	No
PT/OT/Speech/Hear: Number of Users	N/A	10,393	N/A	9,949	N/A	0	N/A	-4.27	-100.00	15% (+/-)	No
PT/OT/Speech/Hear: Avg Medicaid Pd per User	N/A	\$712	N/A	\$695	N/A	Div by 0	N/A	-2.38	Div by 0	15% (+/-)	N/A
Hospice: Total Medicaid Paid (TOS 35)	N/A	\$644,414	N/A	\$733,172	N/A	\$0	N/A	13.77	-100.00	15% (+/-)	No
Hospice: Number of Users	N/A	100	N/A	100	N/A	0	N/A	0.00	-100.00	15% (+/-)	No
Hospice: Avg Medicaid Pd per User	N/A	\$6,444	N/A	\$7,332	N/A	Div by 0	N/A	13.77	Div by 0	15% (+/-)	N/A
DME: Total Medicaid Paid (TOS 51)	N/A	\$113,364,510	N/A	\$111,970,517	N/A	\$0	N/A	-1.23	-100.00	15% (+/-)	No
DME: Number of Users	N/A	64,956	N/A	69,428	N/A	0	N/A	6.89	-100.00	15% (+/-)	No
DME: Avg Medicaid Pd per User	N/A	\$1,745	N/A	\$1,613	N/A	Div by 0	N/A	-7.59	Div by 0	15% (+/-)	N/A
Residential Care: Total Medicaid Paid (TOS 52)	N/A	\$157,382,302	N/A	\$167,028,141	N/A	\$0	N/A	6.13	-100.00	15% (+/-)	No
Residential Care: Number of Users	N/A	6,951	N/A	6,867	N/A	0	N/A	-1.21	-100.00	15% (+/-)	No
Residential Care: Avg Medicaid Pd per User	N/A	\$22,642	N/A	\$24,323	N/A	Div by 0	N/A	7.43	Div by 0	15% (+/-)	N/A
Psych. Services: Total Medicaid Paid (TOS 53)	N/A	\$65,963,305	N/A	\$277,868,942	N/A	\$0	N/A	321.20	-100.00	15% (+/-)	No
Psych. Services: Number of Users	N/A	28,061	N/A	55,525	N/A	0	N/A	97.87	-100.00	15% (+/-)	No
Psych. Services: Avg Medicaid Pd per User	N/A	\$2,351	N/A	\$5,004	N/A	Div by 0	N/A	112.90	Div by 0	15% (+/-)	N/A
Adult Day Care: Total Medicaid Paid (TOS 54)	N/A	\$59,311,660	N/A	\$59,408,955	N/A	\$0	N/A	0.16	-100.00	15% (+/-)	No
Adult Day Care: Number of Users	N/A	4,453	N/A	4,757	N/A	0	N/A	6.83	-100.00	15% (+/-)	No
Adult Day Care: Avg Medicaid Pd per User	N/A	\$13,319	N/A	\$12,489	N/A	Div by 0	N/A	-6.24	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	\$1,176	N/A	\$1,023	N/A	\$0	N/A	-13.10	-100.00	15% (+/-)	No
Aged	N/A	\$366	N/A	\$309	N/A	\$0	N/A	-15.60	-100.00	15% (+/-)	No
Disabled	N/A	\$2,806	N/A	\$2,437	N/A	\$0	N/A	-13.20	-100.00	15% (+/-)	No
Child	N/A	\$594	N/A	\$484	N/A	\$0	N/A	-18.50	-100.00	15% (+/-)	No
Adult	N/A	\$1,353	N/A	\$1,213	N/A	\$0	N/A	-10.30	-100.00	15% (+/-)	No
ILTC (TOS=02,04,05,07)	N/A	\$1,046	N/A	\$965	N/A	\$0	N/A	-7.76	-100.00	15% (+/-)	No
Aged	N/A	\$7,356	N/A	\$7,286	N/A	\$0	N/A	-0.96	-100.00	15% (+/-)	No
Disabled	N/A	\$1,457	N/A	\$1,399	N/A	\$0	N/A	-4.03	-100.00	15% (+/-)	No
Child	N/A	\$200	N/A	\$170	N/A	\$0	N/A	-14.80	-100.00	15% (+/-)	No
Adult	N/A	\$6	N/A	\$5	N/A	\$0	N/A	-21.20	-100.00	15% (+/-)	No
Drugs (TOS=16)	N/A	\$991	N/A	\$1,014	N/A	\$1,048	N/A	2.39	3.29	15% (+/-)	Yes
Aged	N/A	\$2,280	N/A	\$2,411	N/A	\$2,442	N/A	5.75	1.27	15% (+/-)	Yes
Disabled	N/A	\$2,942	N/A	\$3,052	N/A	\$3,124	N/A	3.73	2.37	15% (+/-)	Yes
Child	N/A	\$247	N/A	\$258	N/A	\$262	N/A	4.54	1.56	15% (+/-)	Yes
Adult	N/A	\$586	N/A	\$621	N/A	\$653	N/A	6.03	5.12	15% (+/-)	Yes
All Other Services	N/A	\$4,345	N/A	\$4,092	N/A	\$0	N/A	-5.84	-100.00	15% (+/-)	No
Aged	N/A	\$4,238	N/A	\$4,445	N/A	\$0	N/A	4.89	-100.00	15% (+/-)	No
Disabled	N/A	\$12,645	N/A	\$12,196	N/A	\$0	N/A	-3.55	-100.00	15% (+/-)	No
Child	N/A	\$3,015	N/A	\$2,715	N/A	\$0	N/A	-9.97	-100.00	15% (+/-)	No
Adult	N/A	\$2,043	N/A	\$2,048	N/A	\$0	N/A	0.24	-100.00	15% (+/-)	No
<b>% OF FFS ENROLLEES WITH CLAIMS BY SELECTED MAX TYPE OF SERVICE</b>											
% FFS Enrollees with IP Claims (TOS=01)	N/A	7.96	N/A	7.15	N/A	0.00	N/A	-10.10	-100.00	15% (+/-)	No
Aged	N/A	1.68	N/A	1.29	N/A	0.00	N/A	-22.80	-100.00	15% (+/-)	No
Disabled	N/A	9.70	N/A	8.55	N/A	0.00	N/A	-11.80	-100.00	15% (+/-)	No
Child	N/A	6.85	N/A	6.06	N/A	0.00	N/A	-11.70	-100.00	15% (+/-)	No
Adult	N/A	10.34	N/A	9.36	N/A	0.00	N/A	-9.52	-100.00	15% (+/-)	No
% FFS Enrollees with ILTC Claims (TOS=02,04,05,07)	N/A	3.45	N/A	3.07	N/A	0.00	N/A	-11.10	-100.00	15% (+/-)	No
Aged	N/A	27.04	N/A	25.53	N/A	0.00	N/A	-5.60	-100.00	15% (+/-)	No
Disabled	N/A	3.29	N/A	3.02	N/A	0.00	N/A	-8.08	-100.00	15% (+/-)	No
Child	N/A	0.53	N/A	0.48	N/A	0.00	N/A	-8.29	-100.00	15% (+/-)	No
Adult	N/A	0.09	N/A	0.08	N/A	0.00	N/A	-7.35	-100.00	15% (+/-)	No
% FFS Enrollees with Drug Claims (TOS=16)	N/A	74.04	N/A	73.14	N/A	72.24	N/A	-1.21	-1.24	15% (+/-)	Yes
Aged	N/A	88.28	N/A	88.66	N/A	87.07	N/A	0.43	-1.79	15% (+/-)	Yes
Disabled	N/A	89.45	N/A	89.89	N/A	88.59	N/A	0.50	-1.46	15% (+/-)	Yes
Child	N/A	65.92	N/A	63.48	N/A	62.82	N/A	-3.70	-1.04	15% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: ME

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	72.40	N/A	72.78	N/A	71.92	N/A	0.52	-1.19	15% (+/-)	Yes
% FFS Enrollees with All Other Claims	N/A	86.06	N/A	83.73	N/A	0.00	N/A	-2.71	-100.00	15% (+/-)	No
Aged	N/A	84.62	N/A	81.87	N/A	0.00	N/A	-3.26	-100.00	15% (+/-)	No
Disabled	N/A	93.57	N/A	92.76	N/A	0.00	N/A	-0.87	-100.00	15% (+/-)	No
Child	N/A	88.44	N/A	86.00	N/A	0.00	N/A	-2.75	-100.00	15% (+/-)	No
Adult	N/A	79.98	N/A	77.69	N/A	0.00	N/A	-2.85	-100.00	15% (+/-)	No
Avg # IP Days per FFS User	N/A	7	N/A	6	N/A	Div by 0	N/A	-6.87	Div by 0	15% (+/-)	N/A
Aged	N/A	12	N/A	11	N/A	Div by 0	N/A	-10.10	Div by 0	15% (+/-)	N/A
Disabled	N/A	13	N/A	12	N/A	Div by 0	N/A	-4.84	Div by 0	15% (+/-)	N/A
Child	N/A	5	N/A	5	N/A	Div by 0	N/A	-8.04	Div by 0	15% (+/-)	N/A
Adult	N/A	5	N/A	5	N/A	Div by 0	N/A	-3.60	Div by 0	15% (+/-)	N/A
Avg # ILTC Days per FFS User	N/A	196	N/A	192	N/A	Div by 0	N/A	-2.01	Div by 0	15% (+/-)	N/A
Aged	N/A	213	N/A	209	N/A	Div by 0	N/A	-1.89	Div by 0	15% (+/-)	N/A
Disabled	N/A	182	N/A	181	N/A	Div by 0	N/A	-0.52	Div by 0	15% (+/-)	N/A
Child	N/A	46	N/A	41	N/A	Div by 0	N/A	-11.80	Div by 0	15% (+/-)	N/A
Adult	N/A	21	N/A	16	N/A	Div by 0	N/A	-24.50	Div by 0	15% (+/-)	N/A
<b>FFS EXPENDITURES AND USERS BY MAX PGM TYPE</b>											
FP: Total Medicaid Paid (Program Type 2)	N/A	\$8,621,206	N/A	\$9,174,062	N/A	\$4,857,717	N/A	6.41	-47.00	15% (+/-)	No
FP: Number of Users	N/A	26,870	N/A	29,798	N/A	21,254	N/A	10.90	-28.70	15% (+/-)	No
FP: Average Medicaid Pd per User	N/A	\$321	N/A	\$308	N/A	\$229	N/A	-4.04	-25.80	15% (+/-)	No
RHC: Total Medicaid Paid (Program Type 3)	N/A	\$8,237,131	N/A	\$8,004,613	N/A	\$0	N/A	-2.82	-100.00	15% (+/-)	No
RHC: Number of Users	N/A	30,289	N/A	29,837	N/A	0	N/A	-1.49	-100.00	15% (+/-)	No
RHC: Avg Medicaid Pd per User	N/A	\$272	N/A	\$268	N/A	Div by 0	N/A	-1.35	Div by 0	15% (+/-)	N/A
FOHC: Total Medicaid Paid (Program Type 4)	N/A	\$15,124,313	N/A	\$17,519,705	N/A	\$0	N/A	15.84	-100.00	15% (+/-)	No
FOHC: Number of Users	N/A	35,757	N/A	39,537	N/A	0	N/A	10.57	-100.00	15% (+/-)	No
FOHC: Avg Medicaid Pd per User	N/A	\$423	N/A	\$443	N/A	Div by 0	N/A	4.76	Div by 0	15% (+/-)	N/A
IHS: Total Medicaid Pd (Program Type 5)	N/A	\$555,256	N/A	\$6,453	N/A	\$761,111	N/A	-98.80	11,695.00	15% (+/-)	No
IHS: Number of Users	N/A	968	N/A	59	N/A	1,109	N/A	-93.90	1,780.00	15% (+/-)	No
IHS: Avg Medicaid Pd per User	N/A	\$574	N/A	\$109	N/A	\$686	N/A	-80.90	527.50	15% (+/-)	No
Section 1915(c) Waiver: Total Medicaid Paid (Program Types 6 and 7)	N/A	\$218,749,818	N/A	\$217,303,225	N/A	\$0	N/A	-0.66	-100.00	15% (+/-)	No
Section 1915(c) Waiver: Number of Users	N/A	4,227	N/A	4,061	N/A	0	N/A	-3.93	-100.00	15% (+/-)	No
Section 1915(c) Waiver: Avg Medicaid Pd per User	N/A	\$51,751	N/A	\$53,510	N/A	Div by 0	N/A	3.40	Div by 0	15% (+/-)	N/A
<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	Div by 0	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	Div by 0	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	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	Div by 0	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	0.00	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	0.00	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	Div by 0	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	Div by 0	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	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	Div by 0	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	0.00	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No

2003-2005 MAX PSF VALIDATION TABLE  
STATE: ME

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	Div by 0	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	Div by 0	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	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	Div by 0	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	0.00	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No