

2002-2004 MAX LT Validation Table
State: MA

Measure	Expected Range	2002		2003		2004		% Change 2002 - 2003	% Change 2003 - 2004	Cross Year Change Within Expected Range (+/-15%)
		Value	Within Range	Value	Within Range	Value	Within Range			
All LT Claims										
Total Number of Claims	N/A	684,927	N/A	608,964	N/A	529,466	N/A	-11.10	-13.10	Yes
	N/A	0.00	N/A	0.00	N/A	0.00	N/A	.	.	N/A
% Encounter Claims *	N/A	0.00	N/A	0.00	N/A	0.00	N/A	.	.	N/A
Total FFS Claims	N/A	684,927	N/A	608,964	N/A	529,466	N/A	-11.10	-13.10	Yes
	5-20	7.35	Yes	9.04	Yes	11.14	Yes	22.91	23.30	No
% Crossover	> 1%	50.32	Yes	40.15	Yes	12.98	Yes	-20.20	-67.70	No
% Adjusted Claims	N/A	99.46	N/A	99.36	N/A	94.67	N/A	-0.11	-4.71	Yes
% Standard Adjustments	N/A	\$1,835	N/A	\$2,364	N/A	\$2,189	N/A	28.88	-7.41	Yes
Aver. Amt. Pd Adjust. (include \$0) FFS Non-Crossover Claims (Type of Claim=1 Crossover Claim Indicator=0)										
Total Number of Claims	N/A	634,564	N/A	553,927	N/A	470,463	N/A	-12.70	-15.10	No
% Claims with> \$0 Paid	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
% Claims with< \$0 Paid	0	0.00	Yes	0.00	Yes	0.00	Yes	.	.	N/A
Average Medicaid Amount Paid Per Covered Day (claims with >\$0 paid)										
NF (TOS 07)	\$50-\$100	\$94	Yes	\$115	No	\$142	No	22.75	23.74	No
ICF/MR (TOS 05)	N/A	\$497	N/A	\$471	N/A	\$509	N/A	-5.26	8.04	Yes
Aged/MH (TOS 02)	N/A	\$486	N/A	\$487	N/A	\$491	N/A	0.12	0.83	Yes
IP Psych. < 21 (TOS 04)	N/A	\$500	N/A	\$522	N/A	\$518	N/A	4.34	-0.68	Yes
% NF (TOS 07)	75-99	96.77	Yes	96.23	Yes	95.86	Yes	-0.56	-0.38	Yes
% NF claims with NF Covered Days	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
Avg days for NF claims with Covered Days	N/A	28	N/A	28	N/A	28	N/A	-0.30	-0.35	Yes
% ICF/MR (TOS 05)	>0-20	2.48	Yes	2.86	Yes	3.00	Yes	15.22	5.06	Yes
% ICF/MR claims with ICF/MR Covered Days	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
Avg days for ICF/MR claims with Covered Days	N/A	26	N/A	27	N/A	27	N/A	1.48	0.34	Yes
% Aged/MH (TOS 02)	>0-10	0.03	Yes	0.03	Yes	0.03	Yes	-12.80	-13.50	Yes
% Aged/MH claims with Aged/MH Covered Days	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
Avg days for Aged/MH claims with Covered Days	N/A	28	N/A	28	N/A	27	N/A	-1.69	-3.24	Yes
% IP Psych. < 21 (TOS 04)	>0-5	0.71	Yes	0.88	Yes	1.11	Yes	24.11	24.93	No
% IP Psych. < 21 claims with IP Psych Covered Days	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
Avg days for IP Psych. < 21 claims with Covered Days	N/A	19	N/A	18	N/A	16	N/A	-4.98	-8.34	Yes
% Claims with Leave Days	1-20	0.00	No	0.00	No	0.00	No	.	.	N/A
% Claims with DX	95-100	4.88	No	5.69	No	7.14	No	16.72	25.43	No
% Claims with DX, where length=3	5-30	8.02	Yes	7.16	Yes	6.60	Yes	-10.80	-7.75	Yes
% Claims with DX, where length=4	15-75	43.24	Yes	41.73	Yes	40.90	Yes	-3.51	-1.99	Yes
% Claims with DX, where length=5	25-70	48.73	Yes	51.11	Yes	52.50	Yes	4.89	2.71	Yes
Patient Status										
% Home	1-5	0.73	No	0.74	No	0.67	No	0.45	-9.51	Yes
% Still a Patient	8-98	95.30	Yes	95.66	Yes	95.85	Yes	0.38	0.20	Yes
% Died	>0-5	1.19	Yes	1.12	Yes	1.07	Yes	-6.01	-4.58	Yes
FFS Crossover Claims (Type of Claim=1, Crossover Claim Indicator=1)										
Total Number of Claims	N/A	50,363	N/A	55,037	N/A	59,003	N/A	9.28	7.21	Yes
% Claims with> \$0 Paid	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
% Claims with< \$0 Paid	0	0.00	Yes	0.00	Yes	0.00	Yes	.	.	N/A
Aver. Medicaid Amount Paid (claims with >\$0 paid)	N/A	\$913	N/A	\$932	N/A	\$904	N/A	2.08	-3.04	Yes

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% NF (TOS 07)	75-99	92.47	Yes	93.54	Yes	93.77	Yes	1.16	0.24	Yes
% ICF/MR (TOS 05)	>0-20	0.00	No	0.00	No	0.00	No	.	.	N/A
% Aged/MH (TOS 02)	>0-10	0.00	No	0.00	No	0.00	No	.	.	N/A
% IP Psych. < 21 (TOS 04)	>0-5	7.20	No	6.09	No	5.99	No	-15.40	-1.54	Yes
% Claims with DX	95-100	23.38	No	16.77	No	23.21	No	-28.30	38.36	No
% Claims with DX, where length=3	5-30	12.53	Yes	12.47	Yes	10.02	Yes	-0.51	-19.60	No
% Claims with DX, where length=4	15-75	45.20	Yes	49.02	Yes	49.38	Yes	8.46	0.73	Yes
% Claims with DX, where length=5	25-70	42.27	Yes	38.51	Yes	40.60	Yes	-8.89	5.42	Yes
Patient Status										
% Home	1-5	0.00	No	0.00	No	0.00	No	.	.	N/A
% Still a Patient	8-98	0.00	No	0.00	No	0.00	No	.	.	N/A
% Died	>0-5	0.00	No	0.00	No	0.00	No	.	.	N/A

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