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2003-2005 MAX IP VALIDATION TABLE  
STATE: MT

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	20,797	N/A	20,857	N/A	21,851	N/A	0.29	4.77	Yes
% Encounter Claims	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% Supplemental Claims	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	N/A
Total FFS Claims	N/A	20,797	N/A	20,857	N/A	21,851	N/A	0.29	4.77	Yes
% Crossover	5-20	20.52	No	20.23	No	21.24	No	-1.43	5.02	Yes
% Adjusted Claims	N/A	19.59	N/A	5.29	N/A	4.23	N/A	-73.00	-20.10	No
% Standard Adjustments	> 1%	87.14	Yes	88.50	Yes	87.12	Yes	1.56	-1.55	Yes
Aver. Amt. Pd Adjust. ( include \$0)	N/A	\$2,958	N/A	\$3,742	N/A	\$4,577	N/A	26.52	22.29	No
Total number of claims with missing Medicaid eligibility (excludes S-SCHIP only)	N/A	N/A	N/A	N/A	N/A	183	N/A	N/A	N/A	N/A
<b>FFS Non-Crossover Claims (Type of Claim=1, Crossover Claim Indicator=0)</b>										
Total Number of Claims	N/A	16,529	N/A	16,638	N/A	17,209	N/A	0.66	3.43	Yes
% Claims with> \$0 Paid	95-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with< \$0 Paid	0	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	N/A
Aver. Medicaid Amount Paid (claims with >\$0 paid)	\$2000 - \$7000	\$3,604	Yes	\$3,834	Yes	\$4,551	Yes	6.39	18.72	No
Aver. Medicaid Amt Paid per Covered Day (>\$0 paid and >0 days claims)	N/A	\$850	N/A	\$908	N/A	\$1,032	N/A	6.86	13.55	Yes
% Claims with TPL	>0 - 10	1.66	Yes	1.53	Yes	1.36	Yes	-7.91	-10.90	Yes
Aver. TPL Paid for claims with TPL	N/A	\$2,292	N/A	\$2,440	N/A	\$2,132	N/A	6.43	-12.60	Yes
% Claims with UB-92 Accommodation Codes	95-100	99.84	Yes	99.85	Yes	99.60	Yes	0.01	-0.25	Yes
Average # UB-92 Accom. Codes (at least 1 accom code)	>1	1.12	Yes	1.12	Yes	1.12	Yes	-0.34	-0.04	Yes
% Claims with UB-92 Ancillary Codes	95-100	99.68	Yes	99.77	Yes	99.51	Yes	0.09	-0.26	Yes
Average # UB-92 Ancillary Codes (at least 1 Ancillary code)	>3	8.99	Yes	8.91	Yes	9.04	Yes	-0.94	1.54	Yes
Average LOS	2-<8	3.45	Yes	3.43	Yes	3.62	Yes	-0.69	5.56	Yes
Average Covered Days (> 0 day)	2-<8	4.24	Yes	4.22	Yes	4.41	Yes	-0.44	4.55	Yes
% Begin Date = Admit Date	95-100	99.23	Yes	99.17	Yes	99.21	Yes	-0.06	0.04	Yes
% IP Claims (MAX TOS 01)	95-100	99.85	Yes	99.90	Yes	99.71	Yes	0.05	-0.19	Yes
% Family Planning Claims (pgm type=2)	>0-5	0.01	Yes	0.13	Yes	0.89	Yes	943.10	604.40	No
% Claims with PDX	98-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
Average Number of DX Codes (at least 1 DX)	>=2	4.22	Yes	4.30	Yes	4.46	Yes	2.05	3.71	Yes
% Claims with PDX, where length=3	5-30	5.48	Yes	4.96	No	5.00	Yes	-9.44	0.90	Yes
% Claims with PDX, where length=4	15-75	20.96	Yes	19.46	Yes	19.17	Yes	-7.17	-1.47	Yes
% Claims with PDX, where length=5	25-70	73.57	No	75.59	No	75.83	No	2.74	0.32	Yes
% Claims with a procedure code	35-70	59.22	Yes	59.89	Yes	58.16	Yes	1.14	-2.90	Yes
Average Number of Procedures for claims with at least 1 procedure code	>1	2.19	Yes	2.22	Yes	2.24	Yes	1.12	1.17	Yes
% Claims with Procedures that have CPT-4 Indicator	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% Claims with Procedures that have ICD-9 Indicator	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
% Claims with Procedures that have CPT-4 Indicator & CPT-4 format of 5n	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A

2003-2005 MAX IP VALIDATION TABLE  
STATE: MT

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Change Within Expected Range
% Claims with Procedures that have ICD-9-CM Indicator & ICD-9-CM Format 3n or 4n	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
% Claims with DRG	>=90	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims Maternal Delivery Indicator	N/A	22.66	N/A	23.63	N/A	23.24	N/A	4.31	-1.65	Yes
% Claims Newborn Delivery Indicator (only for separate infant delivery claims using mother's ID)	N/A	23.53	N/A	24.92	N/A	23.98	N/A	5.88	-3.76	Yes
<b>Patient Status</b>										
% Home	75-90	92.23	No	91.84	No	91.45	No	-0.42	-0.43	Yes
% Transferred	1-10	6.71	Yes	6.61	Yes	6.86	Yes	-1.46	3.80	Yes
% Still a Patient	>0 - 2	0.18	Yes	0.21	Yes	0.20	Yes	19.90	-6.08	Yes
% Died	>0 - 3	0.87	Yes	0.85	Yes	0.82	Yes	-2.04	-3.32	Yes
<b>FFS Crossover Claims (Type of Claim=1, Crossover Claim Indicator=1)</b>										
Total Number of Claims	N/A	4,268	N/A	4,219	N/A	4,642	N/A	-1.15	10.03	Yes
% Claims with> \$0 Paid	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
% Claims with< \$0 Paid	0	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	N/A
Aver. Medicaid Amount Paid (claims with >\$0 paid)	N/A	\$888	N/A	\$889	N/A	\$947	N/A	0.12	6.48	Yes
% Claims with TPL	N/A	1.66	N/A	1.11	N/A	0.65	N/A	-33.00	-42.00	No
Aver. TPL Paid -claims with TPL	N/A	\$865	N/A	\$331	N/A	\$353	N/A	-61.70	6.51	Yes
% Claims with UB-92 Accommodation Codes	95-100	99.98	Yes	99.95	Yes	99.89	Yes	-0.02	-0.06	Yes
Average # UB-92 Accom. Codes (at least 1 accom code)	>1	1.19	Yes	1.19	Yes	1.17	Yes	-0.31	-1.21	Yes
% Claims with UB-92 Ancillary Codes	95-100	100.00	Yes	100.00	Yes	99.89	Yes	0.00	-0.11	Yes
Average # UB-92 Ancillary Codes (at least 1 Ancillary code)	>3	12.38	Yes	12.36	Yes	12.40	Yes	-0.14	0.32	Yes
Average LOS	2-<8	4.08	Yes	3.65	Yes	3.85	Yes	-10.60	5.61	Yes
% Begin Date = Admit Date	95-100	99.67	Yes	99.76	Yes	97.65	Yes	0.09	-2.12	Yes
% Claims with IP TOS	95-100	100.00	Yes	100.00	Yes	99.89	Yes	0.00	-0.11	Yes
% Claims with DX	98-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
Average Number of DX Codes (at least 1 DX)	>=2	6.87	Yes	6.95	Yes	7.23	Yes	1.19	3.99	Yes
% Claims with PDX, where length=3	5-30	8.51	Yes	8.34	Yes	8.70	Yes	-1.90	4.31	Yes
% Claims with PDX, where length=4	15-75	42.03	Yes	39.73	Yes	37.96	Yes	-5.49	-4.45	Yes
% Claims with PDX, where length=5	25-70	49.46	Yes	51.93	Yes	53.34	Yes	5.00	2.71	Yes
% Claims with a procedure code	35-70	51.36	Yes	50.37	Yes	50.82	Yes	-1.93	0.90	Yes
Average Number of Procedures for claims with at least 1 procedure code	>1	2.29	Yes	2.31	Yes	2.35	Yes	1.06	1.77	Yes
% Claims with Procedures that have CPT-4 Indicator	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% Claims with Procedures that have ICD-9 Indicator	N/A	99.95	N/A	100.00	N/A	100.00	N/A	0.05	0.00	Yes
% Claims with Procedures that have CPT-4 Indicator & CPT-4 format of 5n	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A
% Claims with Procedures that have ICD-9-CM Indicator & ICD-9-CM Format 3n or 4n	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
% Claims with DRG	>=90	0.07	No	0.02	No	0.00	No	-66.30	-100.00	No

2003-2005 MAX LT VALIDATION TABLE  
STATE: MT

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	52,673	N/A	51,782	N/A	51,451	N/A	-1.69	-0.64	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	52,673	N/A	51,782	N/A	51,451	N/A	-1.69	-0.64	Yes
% Crossover	5-20	0.00	No	0.00	No	0.00	No	Div by 0	Div by 0	N/A
% Adjusted Claims	> 1%	3.42	Yes	3.20	Yes	3.46	Yes	-6.35	7.98	Yes
% Standard Adjustments	N/A	91.34	N/A	87.40	N/A	86.85	N/A	-4.31	-0.63	Yes
Aver. Amt. Pd Adjust. ( include \$0)	N/A	\$2,210	N/A	\$2,339	N/A	\$2,805	N/A	5.83	19.93	No
Total number of claims with missing Medicaid eligibility (excludes S-SCHIP only)	N/A	N/A	N/A	N/A	N/A	2	N/A	N/A	N/A	N/A
<b>FFS Non-Crossover Claims (Type of Claim=1 Crossover Claim Indicator=0)</b>										
Total Number of Claims	N/A	52,673	N/A	51,782	N/A	51,451	N/A	-1.69	-0.64	Yes
% Claims with> \$0 Paid	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
% Claims with< \$0 Paid	0	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	N/A
<b>Average Medicaid Amount Paid Per Covered Day (claims with &gt;\$0 paid)</b>										
NF (TOS 07)	\$50-\$100	\$88	Yes	\$95	Yes	\$106	No	7.71	11.90	Yes
ICF/MR (TOS 05)	N/A	\$454	N/A	\$485	N/A	\$480	N/A	6.79	-0.92	Yes
Aged/MH (TOS 02)	N/A	\$165	N/A	\$200	N/A	\$249	N/A	21.07	24.34	No
IP Psych. < 21 (TOS 04)	N/A	\$266	N/A	\$273	N/A	\$282	N/A	2.57	3.31	Yes
% NF (TOS 07)	75-99	85.06	Yes	85.17	Yes	87.20	Yes	0.13	2.38	Yes
% NF claims with NF Covered Days	N/A	99.99	N/A	100.00	N/A	99.98	N/A	0.01	-0.02	Yes
Avg days for NF claims with Covered Days	N/A	28	N/A	28	N/A	27	N/A	0.09	-3.94	Yes
% ICF/MR (TOS 05)	>0-20	2.62	Yes	2.29	Yes	1.92	Yes	-12.70	-16.20	No
% 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	27	N/A	27	N/A	26	N/A	-1.80	-1.84	Yes
% Aged/MH (TOS 02)	>0-10	1.04	Yes	0.99	Yes	0.93	Yes	-5.49	-5.66	Yes
% Aged/MH claims with Aged/MH Covered Days	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
Avg days for Aged/MH claims with Covered Days	N/A	30	N/A	30	N/A	29	N/A	-0.35	-1.36	Yes
% IP Psych. < 21 (TOS 04)	>0-5	11.27	No	11.55	No	9.96	No	2.49	-13.80	Yes
% IP Psych. < 21 claims with IP Psych Covered Days	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
Avg days for IP Psych. < 21 claims with Covered Days	N/A	8	N/A	9	N/A	11	N/A	6.16	22.80	No
% Claims with Leave Days	1-20	0.71	No	0.80	No	0.63	No	12.54	-22.10	No
% Claims with DX	95-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with DX, where length=3	5-30	15.11	Yes	12.91	Yes	12.62	Yes	-14.60	-2.28	Yes
% Claims with DX, where length=4	15-75	51.61	Yes	50.15	Yes	49.22	Yes	-2.84	-1.86	Yes
% Claims with DX, where length=5	25-70	33.28	Yes	36.94	Yes	38.17	Yes	11.02	3.32	Yes
<b>Patient Status</b>										
% Home	1-5	0.41	No	0.53	No	0.52	No	30.72	-1.19	Yes
% Still a Patient	8-98	10.79	Yes	10.97	Yes	9.67	Yes	1.63	-11.80	Yes
% Died	>0-5	0.00	No	0.00	Yes	0.02	Yes	Div by 0	1,108.00	No
<b>FFS Crossover Claims (Type of Claim=1, Crossover Claim Indicator=1)</b>										
Total Number of Claims	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	N/A
% Claims with> \$0 Paid	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A
% Claims with< \$0 Paid	0	Div by 0	No	Div by 0	No	Div by 0	No	Div by 0	Div by 0	N/A

2003-2005 MAX LT VALIDATION TABLE  
STATE: MT

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

2003-2005 MAX OT VALIDATION TABLE  
STATE: MT

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Change Within Expected Range
<b>All OT Claims</b>										
Total Number of Claims	N/A	3,340,430	N/A	4,072,665	N/A	4,529,956	N/A	21.92	11.23	Yes
% Encounter Claims (Claim Type=3)	N/A	0.14	N/A	0.31	N/A	0.32	N/A	116.50	4.10	Yes
% Supplemental Claims	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% Cap Claims (Claim Type=2, and MAX TOS 20,21,22)	N/A	18.31	N/A	15.67	N/A	13.86	N/A	-14.40	-11.60	Yes
Total FFS Claims Excluding Capitation Payments	N/A	2,724,027	N/A	3,421,838	N/A	3,887,606	N/A	25.62	13.61	Yes
% Crossover	5-20	10.12	Yes	5.59	Yes	6.04	Yes	-44.80	8.05	Yes
% Adjusted Claims	> 1%	11.74	Yes	3.56	Yes	4.10	Yes	-69.70	15.18	No
% Standard Adjustments	N/A	89.95	N/A	95.73	N/A	93.53	N/A	6.43	-2.30	Yes
Aver. Amt. Pd Adjust. ( include \$0)	N/A	\$136	N/A	\$189	N/A	\$197	N/A	38.80	4.18	Yes
% Claims(TOC 1,2) TOS 20: HMO Cap Payment	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% Claims(TOC 1,2) TOS 21: PHP Cap Payments	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% Claims(TOC 1,2) TOS 22: PCCM Cap Pay.	N/A	18.34	N/A	15.72	N/A	13.90	N/A	-14.30	-11.60	Yes
Average Paid per HMO Cap Clms (TOS 20)	\$75-\$300	Div by 0	No	Div by 0	No	Div by 0	No	Div by 0	Div by 0	N/A
Average Paid per PHP Cap Clms (TOS 21)	\$20-\$250	Div by 0	No	Div by 0	No	Div by 0	No	Div by 0	Div by 0	N/A
Average Paid per PCCM Cap Clms (TOS 22)	3-5	\$3	Yes	\$3	Yes	\$3	Yes	0.00	0.00	Yes
Total number of claims with missing Medicaid eligibility (excludes S-SCHIP only)	N/A	N/A	N/A	N/A	N/A	15,105	N/A	N/A	N/A	N/A
<b>FFS Non-Crossover Claims (Type of Claim=1, Crossover Claim Indicator=0, excluding capitation claims)</b>										
Total Number of Claims	N/A	2,448,292	N/A	3,230,697	N/A	3,652,973	N/A	31.96	13.07	Yes
% Claims with> \$0 Paid	>95%	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with< \$0 Paid	0	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	N/A
% Claims with Span Bill	N/A	8.78	N/A	6.15	N/A	5.37	N/A	-30.00	-12.60	Yes
% OPD Claims with Span Bill/ All OPD Claims(TOS 11)	N/A	11.80	N/A	9.91	N/A	8.66	N/A	-16.00	-12.70	Yes
% HH Claims with Span Bill/All HH Claims (TOS 13)	N/A	87.62	N/A	82.36	N/A	81.72	N/A	-6.00	-0.78	Yes
% Other Claims with Span Bills/All Other Claims	N/A	8.63	N/A	6.01	N/A	5.24	N/A	-30.40	-12.90	Yes
% Claims W/ Service Place 11- Office	50-90	44.10	No	32.02	No	28.87	No	-27.40	-9.86	Yes
% Claims W/ Service Place 12 - Home	>0-5	12.21	No	11.77	No	13.86	No	-3.58	17.78	No
% Claims W/ Service Place 21 - Hospital	>0-5	4.08	Yes	3.15	Yes	2.90	Yes	-22.80	-7.87	Yes
% Claims W/ Service Place 32 - NF	>0-5	0.31	Yes	0.24	Yes	0.19	Yes	-21.50	-22.40	No
% Claims W/ Service Place 23 - ER	1-10	4.11	Yes	2.04	Yes	2.00	Yes	-50.30	-2.33	Yes
% Claims w/ Service Place 22 - OPD	>0-10	12.05	No	11.15	No	10.95	No	-7.50	-1.78	Yes
% Claims W/ Service Place 99 - Unknown/Other	<5	2.78	Yes	19.83	No	22.71	No	614.30	14.52	Yes
% Claims with TPL	>0 - 15	0.11	Yes	0.08	Yes	0.07	Yes	-25.10	-8.75	Yes
Aver. TPL Paid -claims with TPL	N/A	\$122	N/A	\$117	N/A	\$117	N/A	-3.97	-0.69	Yes
<b>PERCENT CLAIMS/MAX TOS</b>										
% claims MAX TOS 08: Physicians	10-35	17.17	Yes	12.75	Yes	11.76	Yes	-25.70	-7.77	Yes
% claims MAX TOS 09: Dental	2-20	5.46	Yes	4.38	Yes	4.28	Yes	-19.70	-2.35	Yes
% claims MAX TOS 10: Other Practioner	0.5-8	4.03	Yes	3.25	Yes	2.98	Yes	-19.20	-8.46	Yes
% claims MAX TOS 11: OPD	3-25	3.01	Yes	2.45	No	2.95	No	-18.70	20.35	No
% claims MAX TOS 12: Clinic	2-25	2.25	Yes	2.04	Yes	1.87	No	-9.34	-8.15	Yes
% claims MAX TOS 13: HH	>0-25	0.06	Yes	0.05	Yes	0.04	Yes	-19.10	-18.90	No
% claims MAX TOS 15: Lab/Xray	4-20	11.76	Yes	8.94	Yes	7.30	Yes	-24.00	-18.30	No
% claims MAX TOS 16: Drugs	<3	0.25	Yes	0.11	Yes	0.10	Yes	-57.40	-1.80	Yes
% claims MAX TOS 19: Other Services	<25	22.21	Yes	36.63	No	38.84	No	64.91	6.04	Yes

2003-2005 MAX OT VALIDATION TABLE  
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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Change Within Expected Range
% claims MAX TOS 51: DME	>3	4.24	Yes	4.20	Yes	3.74	Yes	-0.80	-11.00	Yes
% claims MAX TOS 26: Transportation	>1	1.14	Yes	0.77	No	0.68	No	-32.20	-11.30	Yes
% claims MAX TOS 24: Sterilizations	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	-26.30	No
% claims MAX TOS 25: Abortions	N/A	0.10	N/A	0.12	N/A	0.16	N/A	11.71	42.63	No
% claims MAX TOS 30: PCS	>0	4.60	Yes	5.68	Yes	7.42	Yes	23.46	30.66	No
% claims MAX TOS 31: TCM	>0	2.64	Yes	1.90	Yes	1.36	Yes	-28.30	-28.20	No
% claims MAX TOS 33: Rehabilitation	>0	0.00	No	0.19	Yes	0.12	Yes	Div by 0	-32.80	No
% claims MAX TOS 34: PT/OT/hear/speech	>1	0.06	No	0.00	No	0.00	No	-100.00	Div by 0	N/A
% claims MAX TOS 35: Hospice	>0	0.02	Yes	0.01	Yes	0.02	Yes	-30.90	0.87	Yes
% claims MAX TOS 36: Nurse Midwife	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% claims MAX TOS 37: Nurse Practitioner	N/A	2.28	N/A	1.74	N/A	1.73	N/A	-23.50	-0.69	Yes
% claims MAX TOS 38: Private Nursing	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% claims MAX TOS 39: Religious Non-Med.	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% claims MAX TOS 52: Residential Care	N/A	0.28	N/A	0.04	N/A	0.04	N/A	-85.80	-2.41	Yes
% claims MAX TOS 53: Psych. Services	>1	15.51	Yes	14.34	Yes	14.22	Yes	-7.52	-0.83	Yes
% claims MAX TOS 54: Adult Day Care	>0	2.95	Yes	0.42	Yes	0.38	Yes	-85.80	-9.56	Yes
% claims MAX TOS 99: Unknown	<1	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	N/A
Average Medicaid Amount Paid For Selected MAX TOS (excluding claims with <=\$0 paid)										
Total	N/A	\$93	N/A	\$77	N/A	\$76	N/A	-17.60	-1.17	Yes
08: Physicians	\$20-90	\$75	Yes	\$76	Yes	\$78	Yes	1.95	2.51	Yes
09: Dental	\$10-60	\$48	Yes	\$49	Yes	\$53	Yes	1.30	7.50	Yes
10: Other Practioner	\$10-100	\$56	Yes	\$57	Yes	\$56	Yes	2.84	-1.74	Yes
11: OPD	\$20-100	\$234	No	\$178	No	\$169	No	-23.60	-5.45	Yes
12: Clinic	\$20-100	\$119	No	\$113	No	\$119	No	-4.72	5.11	Yes
13: HH	N/A	\$348	N/A	\$326	N/A	\$294	N/A	-6.30	-9.79	Yes
15: Lab/Xray	10-60	\$54	Yes	\$52	Yes	\$51	Yes	-3.96	-1.16	Yes
16: Drugs	10-60	\$44	Yes	\$75	No	\$97	No	72.76	29.39	No
19: Other Services	N/A	\$103	N/A	\$56	N/A	\$50	N/A	-45.40	-10.70	Yes
51: DME	N/A	\$112	N/A	\$108	N/A	\$117	N/A	-3.37	7.68	Yes
26: Transportation	N/A	\$92	N/A	\$119	N/A	\$124	N/A	29.17	4.17	Yes
30: PCS	N/A	\$186	N/A	\$122	N/A	\$93	N/A	-34.10	-24.30	No
31: Targeted Case Management	N/A	\$46	N/A	\$46	N/A	\$55	N/A	0.33	20.05	No
33: Rehabilitation	N/A	Div by 0	N/A	\$49	N/A	\$42	N/A	Div by 0	-13.70	Yes
34: PT/OT/speech/hear	N/A	\$102	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A
35: Hospice	N/A	\$2,005	N/A	\$2,230	N/A	\$15,726	N/A	11.20	605.20	No
52: Residential Care	N/A	\$849	N/A	\$1,873	N/A	\$1,827	N/A	120.70	-2.43	Yes
53: Psych. Services	N/A	\$96	N/A	\$98	N/A	\$96	N/A	1.26	-1.13	Yes
54: Adult Day Care	N/A	\$52	N/A	\$292	N/A	\$320	N/A	463.20	9.68	Yes
PERCENT OF CLAIMS BY PROGRAM TYPE (claim type 1)										
% Family Planning (code 2)	N/A	0.67	N/A	0.46	N/A	0.40	N/A	-32.00	-13.40	Yes
% RHC (code 3)	N/A	1.41	N/A	1.09	N/A	1.00	N/A	-22.30	-8.21	Yes
% FQHC (code 4)	N/A	1.37	N/A	1.30	N/A	1.32	N/A	-4.86	1.36	Yes
% IHS (code 5)	N/A	4.26	N/A	3.33	N/A	3.09	N/A	-21.90	-7.03	Yes
% Waiver (code 6,7)	N/A	6.36	N/A	5.38	N/A	5.07	N/A	-15.40	-5.86	Yes
AVERAGE EXPENDITURES BY PROGRAM										
Family Planning (code 2)	N/A	\$129	N/A	\$134	N/A	\$165	N/A	4.36	23.18	No

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RHC (code 3)	N/A	\$97	N/A	\$101	N/A	\$105	N/A	4.95	3.25	Yes
FQHC (code 4)	N/A	\$89	N/A	\$94	N/A	\$97	N/A	5.02	3.24	Yes
IHS (code 5)	N/A	\$239	N/A	\$247	N/A	\$251	N/A	3.22	1.57	Yes
Waiver (code 6, 7)	N/A	\$148	N/A	\$140	N/A	\$135	N/A	-5.05	-3.75	Yes
% Claims with DX	> 60	94.55	Yes	95.62	Yes	95.72	Yes	1.13	0.11	Yes
% Claims with DX (MAX TOS 8, 11, 12)	85-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with 1 DX that have 2 DX	N/A	38.48	N/A	23.70	N/A	20.75	N/A	-38.40	-12.50	Yes
% Claims with DX, where length=3	5-25	6.86	Yes	5.16	Yes	5.01	Yes	-24.90	-2.78	Yes
% Claims with DX, where length=4	40-70	43.12	Yes	51.80	Yes	52.82	Yes	20.13	1.96	Yes
% Claims with DX, where length=5	20-55	50.02	Yes	43.04	Yes	42.17	Yes	-13.90	-2.03	Yes
% OPD Claims with Service Code or UB-92/OPD Claims (TOS 11)	N/A	99.99	N/A	99.99	N/A	99.99	N/A	0.00	0.00	Yes
% HH Claims with Service Code or UB-92/HH Claims (TOS13)	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
% Other Claims with Service Codes /All Other Claims (Excluding OPD/HH)	98-100	93.06	No	94.32	No	94.57	No	1.35	0.27	Yes
% CPT-4 Service Code Indicator (code 01)/Claims with Service Codes	N/A	46.09	N/A	35.46	N/A	32.96	N/A	-23.10	-7.04	Yes
% HCPCS (II & III) Service Codes Indicator (code 06)/Claims with Service Codes	N/A	53.28	N/A	64.39	N/A	67.00	N/A	20.85	4.06	Yes
% Other National Code Indicator (codes 2-5, 7- 9)/ Claims with Service Codes	N/A	0.63	N/A	0.15	N/A	0.04	N/A	-75.70	-75.90	No
% State Specific Serv. Indicator (10-87)/Claims with Service Codes	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% CPT-4 Format Codes- 5n/Claims with CPT-4	98-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% HCPCS Format Codes Cnnnn or Cnnn /Claims with HCPCS	98-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with TOS 08 with Physician Specialty	N/A	100.00	N/A	100.00	N/A	99.99	N/A	0.00	-0.01	Yes
PERCENT OF CLAIMS BY CLTC CODE										
CLTC 00: not a CLTC claim	N/A	N/A	N/A	N/A	N/A	84.62	N/A	N/A	N/A	N/A
CLTC Non-Waiver Claims (11-20)	N/A	N/A	N/A	N/A	N/A	10.31	N/A	N/A	N/A	N/A
CLTC 11: Non-Waiver Personal Care	N/A	N/A	N/A	N/A	N/A	7.42	N/A	N/A	N/A	N/A
CLTC 12: Non-Waiver PDN	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A
CLTC 13: Non-Waiver Adult Day	N/A	N/A	N/A	N/A	N/A	0.37	N/A	N/A	N/A	N/A
CLTC 14: Non-Waiver HH	N/A	N/A	N/A	N/A	N/A	0.04	N/A	N/A	N/A	N/A
CLTC 15: Non-Waiver Residential Care	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A
CLTC 16: Non-Waiver Rehab	N/A	N/A	N/A	N/A	N/A	0.01	N/A	N/A	N/A	N/A
CLTC 17: Non-Waiver TCM	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A
CLTC 18: Non-Waiver Transportation	N/A	N/A	N/A	N/A	N/A	0.44	N/A	N/A	N/A	N/A
CLTC 19: Non-Waiver Hospice	N/A	N/A	N/A	N/A	N/A	0.01	N/A	N/A	N/A	N/A
CLTC 20: Non-Waiver DME	N/A	N/A	N/A	N/A	N/A	2.02	N/A	N/A	N/A	N/A
CLTC Waiver Claims (30-40)	N/A	N/A	N/A	N/A	N/A	5.07	N/A	N/A	N/A	N/A
CLTC 30: Other Waiver	N/A	N/A	N/A	N/A	N/A	3.47	N/A	N/A	N/A	N/A
CLTC 31: Waiver Personal Care	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A
CLTC 32: Waiver PDN	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A
CLTC 33: Waiver Adult Day	N/A	N/A	N/A	N/A	N/A	0.01	N/A	N/A	N/A	N/A
CLTC 34: Waiver HH	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A



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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Change Within Expected Range
CLTC 35: Waiver Residential Care	N/A	N/A	N/A	N/A	N/A	0.04	N/A	N/A	N/A	N/A
CLTC 36: Waiver Rehab	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A
CLTC 37: Waiver TCM	N/A	N/A	N/A	N/A	N/A	1.36	N/A	N/A	N/A	N/A
CLTC 38: Waiver Transportation	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A
CLTC 39: Waiver Hospice	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A
CLTC 40: Waiver DME	N/A	N/A	N/A	N/A	N/A	0.19	N/A	N/A	N/A	N/A
<b>FFS Crossover Claims (Type of Claim=1), Crossover Claim Indicator=1, excluding capitation claims)</b>										
Total Number of Claims	N/A	275,735	N/A	191,141	N/A	234,633	N/A	-30.70	22.75	No
% Claims with> \$0 Paid	>95%	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with< \$0 Paid	0	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	N/A
% Claims with Span Bill	N/A	11.33	N/A	13.36	N/A	9.71	N/A	17.85	-27.30	No
% OPD Claims with Span Bill/ All OPD Claims(TOS 11)	N/A	9.49	N/A	11.84	N/A	11.85	N/A	24.71	0.08	Yes
% HH Claims with Span Bill/All HH Claims (TOS 13)	N/A	100.00	N/A	52.94	N/A	80.00	N/A	-47.10	51.11	No
% Other Claims with Span Bills/All Other Claims	N/A	11.53	N/A	13.53	N/A	9.47	N/A	17.35	-30.00	No
<b>PERCENT CLAIMS/MAX TOS (excluding 20-22)</b>										
% claims MAX TOS 08: Physicians	N/A	57.76	N/A	39.29	N/A	46.22	N/A	-32.00	17.64	No
% claims MAX TOS 10: Other Practioner	N/A	7.95	N/A	7.10	N/A	6.63	N/A	-10.70	-6.69	Yes
% claims MAX TOS 11: OPD	N/A	9.75	N/A	10.44	N/A	9.93	N/A	7.02	-4.85	Yes
% claims MAX TOS 12: Clinic	N/A	4.43	N/A	7.12	N/A	6.28	N/A	60.69	-11.80	Yes
% claims MAX TOS 13: HH	N/A	0.00	N/A	0.01	N/A	0.01	N/A	206.50	-4.16	Yes
% claims MAX TOS 15: Lab/Xray	N/A	3.17	N/A	8.76	N/A	7.68	N/A	176.70	-12.30	Yes
% claims MAX TOS 19: Other Services	N/A	9.21	N/A	14.98	N/A	12.72	N/A	62.60	-15.10	No
% claims MAX TOS 51: DME	N/A	1.18	N/A	2.02	N/A	2.22	N/A	71.35	9.97	Yes
% claims MAX TOS 26: Transportation	N/A	1.47	N/A	1.86	N/A	1.15	N/A	25.81	-38.00	No
% claims MAX TOS 30: PCS	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% claims MAX TOS 31: TCM	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% claims MAX TOS 33: Rehabilitation	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% claims MAX TOS 34: PT/OT/hear/speech	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	-18.50	No
% claims MAX TOS 35: Hospice	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% claims MAX TOS 52: Residential Care	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% claims MAX TOS 53: Psych. Services	N/A	0.00	N/A	0.36	N/A	0.30	N/A	Div by 0	-18.20	No
% claims MAX TOS 54: Adult Day Care	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
Average Amount Paid	N/A	\$30	N/A	\$44	N/A	\$41	N/A	45.38	-7.06	Yes
% Claims with DX	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
% Claims with DX (MAX TOS 8, 11, 12)	85-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with 1 DX that have 2 DX	N/A	47.47	N/A	51.11	N/A	50.66	N/A	7.65	-0.88	Yes
% Claims with DX, where length=3	5-25	10.14	Yes	11.49	Yes	9.88	Yes	13.28	-14.00	Yes
% Claims with DX, where length=4	40-70	44.15	Yes	40.88	Yes	42.34	Yes	-7.41	3.56	Yes
% Claims with DX, where length=5	20-55	45.70	Yes	47.63	Yes	47.78	Yes	4.21	0.32	Yes
% OPD Claims with Service Code or UB-92/OPD Claims (TOS 11)	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
% HH Claims with Service Code or UB-92/HH Claims (TOS13)	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
% Other Claims with Service Codes/All Other Claims (Excluding OPD/HH)	98-100	91.30	No	81.24	No	82.70	No	-11.00	1.79	Yes

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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Change Within Expected Range
% CPT-4 Service Code Indicator (code 01)/Claims with Service Codes	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% HCPCS (II & III) Service Codes Indicator (code 06)/Claims with Service Codes	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% Other Codes Indicator /Claims with Service Codes	N/A	2.78	N/A	3.55	N/A	1.71	N/A	27.40	-51.90	No

2003-2005 MAX RX VALIDATION TABLE  
STATE: MT

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Change Within Expected Range
<b>All RX Claims</b>										
Total Number of Claims	N/A	1,572,365	N/A	1,619,699	N/A	1,664,150	N/A	3.01	2.74	Yes
% Encounter Claims	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% Supplemental Claims	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
Total FFS Claims	N/A	1,572,365	N/A	1,619,699	N/A	1,664,150	N/A	3.01	2.74	Yes
% Adjusted Claims	N/A	2.06	N/A	2.19	N/A	2.46	N/A	6.02	12.34	Yes
% Standard Adjustments	> 1%	99.73	Yes	99.78	Yes	99.89	Yes	0.05	0.11	Yes
Aver. Amt. Pd Adjust. ( include \$0)	N/A	\$75	N/A	\$86	N/A	\$83	N/A	13.51	-3.06	Yes
Total number of claims with missing Medicaid eligibility (excludes S-SCHIP only)	N/A	N/A	N/A	N/A	N/A	31	N/A	N/A	N/A	N/A
<b>FFS Claims (Type of Claim=1)</b>										
Total Number of Claims	N/A	1,572,365	N/A	1,619,699	N/A	1,664,150	N/A	3.01	2.74	Yes
% Claims with> \$0 Paid	95-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with< \$0 Paid	0	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	N/A
Aver. Medicaid Amount Paid (claims with >\$0 paid)	\$15-\$60	\$57	Yes	\$62	No	\$65	No	7.27	4.90	Yes
% Claims with TPL	>0 - 15	0.12	Yes	1.90	Yes	2.59	Yes	1,463.00	36.35	No
Aver. TPL Paid for claims with TPL	N/A	\$147	N/A	\$74	N/A	\$69	N/A	-49.60	-6.51	Yes
% Family Planning Claims (program type=2)	N/A	0.79	N/A	0.02	N/A	0.02	N/A	-97.90	-0.87	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	99.82	Yes	99.82	Yes	99.66	Yes	0.00	-0.16	Yes
% Drug Claims with Days Supply	>98	99.89	Yes	100.00	Yes	100.00	Yes	0.11	0.00	Yes
% Claims with HICL	98-100	99.62	Yes	99.69	Yes	99.65	Yes	0.07	-0.04	Yes
% Claims with Medispan	98-100	99.29	Yes	99.35	Yes	99.44	Yes	0.07	0.09	Yes
% Claims with AHFS	98-100	99.62	Yes	99.69	Yes	99.65	Yes	0.07	-0.04	Yes
% Claims with Generic (GTC)	98-100	99.62	Yes	99.69	Yes	99.65	Yes	0.07	-0.04	Yes
% Claims with GC3	98-100	99.62	Yes	99.69	Yes	99.65	Yes	0.07	-0.04	Yes
<b>NDC Configuration Indicator</b>										
% Prescription (codes 0-3)	N/A	75.77	N/A	74.14	N/A	73.52	N/A	-2.16	-0.83	Yes
% Products (codes 4-6)	N/A	23.82	N/A	25.54	N/A	26.13	N/A	7.20	2.33	Yes
% HRI (code 7)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	-42.40	-69.30	No
% Claims with Smart Key	98-100	99.62	Yes	99.69	Yes	99.65	Yes	0.07	-0.04	Yes
% OTC-Drug Class	N/A	2.23	N/A	4.38	N/A	5.05	N/A	96.55	15.08	No
% Prescription-Drug Class	N/A	97.39	N/A	95.31	N/A	94.61	N/A	-2.14	-0.73	Yes
% Multiple Source (Code Y)	N/A	54.25	N/A	57.46	N/A	60.63	N/A	5.91	5.52	Yes
% Single Source (Code N)	N/A	40.41	N/A	35.22	N/A	33.59	N/A	-12.80	-4.63	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: MT

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	123,500	N/A	127,468	N/A	129,052	N/A	3.21	1.24	10% (+/-)	Yes
Total Medicaid Amount Paid	N/A	\$536,842,367	N/A	\$577,320,240	N/A	\$640,455,568	N/A	7.54	10.94	15% (+/-)	Yes
% with no services (Code 0)	N/A	13.94	N/A	12.58	N/A	13.12	N/A	-9.76	4.31	N/A	N/A
% with FFS only claims (Code 1)	N/A	24.90	N/A	25.87	N/A	26.55	N/A	3.89	2.62	N/A	N/A
% with only cap claims (Code 2)	N/A	5.88	N/A	1.54	N/A	0.04	N/A	-73.90	-97.50	N/A	N/A
% with only encounter claims (Code 3)	N/A	0.03	N/A	0.03	N/A	0.02	N/A	-16.20	-10.50	N/A	N/A
% with FFS and cap claims (Code 4)	N/A	52.77	N/A	55.05	N/A	54.85	N/A	4.31	-0.36	N/A	N/A
% with cap and encounter claims only (Code 5)	N/A	0.12	N/A	0.03	N/A	0.00	N/A	-76.40	-100.00	N/A	N/A
% with FFS and encounter claims only (Code 6)	N/A	0.17	N/A	0.39	N/A	0.51	N/A	124.40	30.31	N/A	N/A
% with FFS, cap and encounter records (Code 7)	N/A	2.18	N/A	4.52	N/A	4.91	N/A	107.70	8.64	N/A	N/A
# with claims and missing Medicaid eligibility (excludes S-SCHIP only)	N/A	809	N/A	931	N/A	1,048	N/A	15.08	12.57	N/A	N/A
% with claims and missing Medicaid eligibility (excludes S-SCHIP only)	<2%	0.66	Yes	0.73	Yes	0.81	Yes	11.50	11.19	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	1,048	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	0.81	N/A	N/A	N/A	N/A	N/A
Expenditures for people missing Medicaid eligibility (excludes S-SCHIP only enrollees)	N/A	\$587,037	N/A	\$692,636	N/A	\$837,589	N/A	17.99	20.93	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	\$837,589	N/A	N/A	N/A	N/A	N/A
<b>S-SCHIP ENROLLMENT</b>											
# with ONLY S-SCHIP enrollment	N/A	11,234	N/A	11,823	N/A	12,723	N/A	5.24	7.61	N/A	N/A
% with ONLY S-SCHIP enrollment	N/A	9.10	N/A	9.28	N/A	9.86	N/A	1.97	6.29	N/A	N/A
# with ANY S-SCHIP enrollment	N/A	14,143	N/A	15,038	N/A	16,066	N/A	6.33	6.84	N/A	N/A
% with ANY S-SCHIP enrollment	N/A	11.45	N/A	11.80	N/A	12.45	N/A	3.02	5.53	N/A	N/A
Total PYE ANY S-SCHIP enrollment	N/A	9,494	N/A	10,621	N/A	11,010	N/A	11.87	3.66	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	111,457	N/A	114,714	N/A	115,281	N/A	2.92	0.49	10% (+/-)	Yes
Total Medicaid PYE (Person Years of Enrollment)	N/A	82,367	N/A	85,166	N/A	85,933	N/A	3.40	0.90	10% (+/-)	Yes
# with any M-SCHIP enrollment (Medicaid enrollees)	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	N/A	N/A
Total PYE any M-SCHIP	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	N/A	N/A
<b>Eligibility Demographics</b>											
% Records with Valid SSN Format	>=95%	94.80	No	98.57	Yes	99.13	Yes	3.99	0.57	10% (+/-)	Yes
% Records whose MSIS SSN passed High Group Test (Code 1)	>95%	N/A	No	N/A	No	94.98	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	4.10	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	0.05	N/A	N/A	N/A	N/A	N/A
% Records whose MSIS SSN failed High Group Test due to RR with invalid DOB (Code 6)	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A	N/A
#SSNs with duplicate records	0	0	Yes	0	Yes	0	Yes	Div by 0	Div by 0	N/A	N/A
% with External SSN from EDB (Code 1)	N/A	N/A	N/A	N/A	N/A	18.76	N/A	N/A	N/A	10% (+/-)	No
% with External SSN from state-provided cross-reference file Code 2)	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	10% (+/-)	No
% with County Code	>=98%	99.99	Yes	99.99	Yes	100.00	Yes	0.00	0.01	10% (+/-)	Yes
% with Valid 5 Digit Zip Code Format	>=95%	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	10% (+/-)	Yes
% Enrollees who Died During Year	0.1-3%	1.85	Yes	1.70	Yes	1.77	Yes	-8.02	3.84	10% (+/-)	Yes
% White	N/A	72.95	N/A	72.14	N/A	71.74	N/A	-1.11	-0.55	10% (+/-)	Yes
% Black	N/A	0.83	N/A	0.89	N/A	0.91	N/A	6.919	2.15	10% (+/-)	Yes
% Native American/Alaskan Native	N/A	22.79	N/A	23.37	N/A	23.73	N/A	2.550	1.51	10% (+/-)	Yes
% Asian	N/A	0.43	N/A	0.43	N/A	0.45	N/A	1.055	4.15	N/A	N/A
% Native Hawaiian or other Pacific Islander	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A	N/A
% More than one race	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A	N/A
% Unknown race	<5%	0.01	Yes	0.00	Yes	3.18	Yes	-93.1	365,000.00	N/A	N/A
% Hispanic/Latino (included with race categories prior to 2005)	N/A	2.99	N/A	3.17	N/A	3.17	N/A	5.983	0.05	10% (+/-)	Yes
% of Hispanic/Latino with unknown race	N/A	N/A	N/A	N/A	N/A	100.00	N/A	N/A	N/A	N/A	N/A
% Age 0	2-8%	4.45	Yes	4.62	Yes	4.47	Yes	3.78	-3.36	10% (+/-)	Yes
% Age 0-20 Years	49-74%	56.94	Yes	57.47	Yes	57.29	Yes	0.93	-0.31	10% (+/-)	Yes
% Age > 64 Years	5-18%	9.74	Yes	9.42	Yes	9.61	Yes	-3.28	2.01	10% (+/-)	Yes
% with century of birth '18', '19', '20'	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	N/A	N/A
% with Sex Code 'M' or 'F'	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	N/A	N/A
% Enrollees with 12 months enrollment	40-65%	49.17	Yes	49.10	Yes	49.51	Yes	-0.15	0.85	10% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
<b>EDB Dual Eligibles</b>											
Total EDB Duals (Duals confirmed by EDB)	N/A	18,347	N/A	18,595	N/A	19,177	N/A	1.35	3.13	10% (+/-)	Yes
Total EDB Dual PYE	N/A	14,618	N/A	14,842	N/A	15,517	N/A	1.54	4.54	15% (+/-)	Yes
% Age > 64 Years who are EDB Duals	>=90%	97.57	Yes	98.16	Yes	98.60	Yes	0.61	0.45	10% (+/-)	Yes
% MAX Aged Groups (11,21,31,41,51) who are EDB Duals	>=90%	96.28	Yes	98.05	Yes	98.70	Yes	1.84	0.65	10% (+/-)	Yes
% MAX Disabled Groups (12,22,32,42,52) who are EDB Duals	30-55%	41.57	Yes	41.02	Yes	40.77	Yes	-1.32	-0.61	10% (+/-)	Yes
% EDB Only (50)	<5%	1.38	Yes	0.80	Yes	0.95	Yes	-42.10	19.09	N/A	N/A
% EDB QMB Only (51)	N/A	2.55	N/A	2.74	N/A	4.13	N/A	7.54	50.88	N/A	N/A
% EDB QMB Plus (52)	N/A	58.28	N/A	58.92	N/A	56.35	N/A	1.09	-4.35	N/A	N/A
% EDB SLMB Only (53)	N/A	2.67	N/A	2.07	N/A	3.39	N/A	-22.70	64.39	N/A	N/A
% EDB SLMB Plus (54)	N/A	1.16	N/A	6.33	N/A	7.29	N/A	447.80	15.17	N/A	N/A
% EDB ODWI (55)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A	N/A
% EDB QI-1 (56)	N/A	0.00	N/A	0.89	N/A	1.21	N/A	Div by 0	36.10	N/A	N/A
% EDB QI-2 (57)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A	N/A
% EDB Other (58)	N/A	33.96	N/A	28.25	N/A	26.66	N/A	-16.80	-5.64	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	375	N/A	299	N/A	173	N/A	-20.30	-42.10	10% (+/-)	No
% Non-EDB Duals Without Valid SSN	N/A	5.07	N/A	23.41	N/A	1.73	N/A	362.10	-92.60	10% (+/-)	No
% Non-EDB Duals who are Children/Adults	N/A	6.13	N/A	6.69	N/A	7.51	N/A	9.06	12.34	10% (+/-)	No
% EDB Duals with Spanish Language	N/A	0.08	N/A	0.08	N/A	0.08	N/A	5.71	3.43	15% (+/-)	Yes
% EDB Duals with EDB Date of Death During Year	6-10%	10.16	No	9.03	Yes	9.32	Yes	-11.10	3.26	15% (+/-)	Yes
% EDB Duals with Medicaid Reported HIC	N/A	97.50	N/A	98.75	N/A	99.03	N/A	1.29	0.28	15% (+/-)	Yes
% EDB Duals with Medicaid reported HIC = Medicare HIC	N/A	94.71	N/A	96.15	N/A	97.55	N/A	1.53	1.46	15% (+/-)	Yes
TOTAL EDB DUAL ENROLLEES IN JUNE	N/A	17,066	N/A	17,385	N/A	17,959	N/A	1.87	3.30	10% (+/-)	Yes
<b>June Medicare Type</b>											
June % with Part A Medicare	N/A	1.41	N/A	1.30	N/A	1.30	N/A	-7.56	0.23	15% (+/-)	Yes
June % with Part B Medicare	N/A	0.74	N/A	0.56	N/A	0.23	N/A	-24.40	-58.10	15% (+/-)	No
June % Part A/B Medicare	N/A	97.86	N/A	98.14	N/A	98.46	N/A	0.29	0.33	15% (+/-)	Yes
<b>Original Reason for Medicare Entitlement</b>											
% Aged (Code 0)	N/A	46.86	N/A	45.63	N/A	45.54	N/A	-2.63	-0.19	15% (+/-)	Yes
% Disabled (Code 1)	N/A	51.73	N/A	52.98	N/A	52.98	N/A	2.42	0.00	15% (+/-)	Yes
% ESRD (Code 2)	N/A	0.58	N/A	0.59	N/A	0.57	N/A	1.46	-2.15	15% (+/-)	Yes
% Disabled with ESRD (Code 3)	N/A	0.83	N/A	0.80	N/A	0.90	N/A	-3.28	12.58	15% (+/-)	Yes
<b>Other Eligibility Characteristics (All Enrollees)</b>											
% MAX Aged Groups (11,21,31,41,51) >64 Years	>=99%	98.49	No	99.77	Yes	99.83	Yes	1.29	0.07	10% (+/-)	Yes
% MAX Disabled Groups (12,22,32,42,52) >64 Years	N/A	4.85	N/A	4.74	N/A	4.47	N/A	-2.16	-5.80	10% (+/-)	Yes
% MAX Child Grps (14,16, 24, 34, 44, 48, 54) <21 Years	>=98%	99.75	Yes	99.81	Yes	99.77	Yes	0.06	-0.05	10% (+/-)	Yes
% MAX Adult Groups (15,17,25,35,45,55) >20 Years	>=80%	95.72	Yes	95.68	Yes	95.48	Yes	-0.04	-0.20	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	Div by 0	Yes	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	0.00	N/A	N/A	N/A	N/A	N/A
<b>MAX Aged Total</b>											
11: Aged, Cash	N/A	1,906	N/A	1,908	N/A	1,899	N/A	0.10	-0.47	10% (+/-)	Yes
21: Aged, MN	N/A	5,951	N/A	5,904	N/A	5,990	N/A	-0.79	1.46	10% (+/-)	Yes
31: Aged, Poverty	N/A	907	N/A	849	N/A	1,109	N/A	-6.39	30.62	10% (+/-)	No
41: Other Aged	N/A	1,247	N/A	1,159	N/A	1,119	N/A	-7.06	-3.45	10% (+/-)	Yes
51: 1115 Aged	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
<b>MAX Disabled Total</b>											
12: Disabled, Cash	N/A	13,738	N/A	14,186	N/A	14,597	N/A	3.26	2.90	10% (+/-)	Yes
22: Disabled, MN	N/A	2,831	N/A	2,924	N/A	2,906	N/A	3.29	-0.62	10% (+/-)	Yes
32: Disabled, Poverty	N/A	200	N/A	394	N/A	484	N/A	97.00	22.84	10% (+/-)	No
42: Other Disabled	N/A	1,404	N/A	1,387	N/A	1,463	N/A	-1.21	5.48	10% (+/-)	Yes
52: 1115 Disabled	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
<b>MAX Child Total</b>											
14: AFDC Child, Cash	N/A	59,905	N/A	62,233	N/A	62,248	N/A	3.89	0.02	10% (+/-)	Yes
	N/A	20,675	N/A	20,320	N/A	19,253	N/A	-1.72	-5.25	10% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
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16: AFDC-U Child, Cash	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
24: AFDC Child, MN	N/A	60	N/A	51	N/A	44	N/A	-15.00	-13.70	10% (+/-)	No
34: Child Poverty	N/A	24,796	N/A	26,923	N/A	27,872	N/A	8.58	3.53	10% (+/-)	Yes
44: Other Child	N/A	10,471	N/A	10,905	N/A	10,791	N/A	4.15	-1.05	10% (+/-)	Yes
48: Foster Care Child	N/A	3,903	N/A	4,034	N/A	4,288	N/A	3.36	6.30	10% (+/-)	Yes
54: 1115 Child	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Adult Total	N/A	23,368	N/A	23,770	N/A	23,466	N/A	1.72	-1.28	10% (+/-)	Yes
15: AFDC Adult, Cash	N/A	12,716	N/A	12,634	N/A	12,115	N/A	-0.65	-4.11	10% (+/-)	Yes
17: AFDC-U Adult, Cash	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
25: AFDC Adult, MN	N/A	9	N/A	12	N/A	15	N/A	33.33	25.00	10% (+/-)	No
35: Adult, Poverty	N/A	3,744	N/A	4,123	N/A	4,351	N/A	10.12	5.53	10% (+/-)	Yes
45: Other Adult	N/A	6,899	N/A	7,001	N/A	6,985	N/A	1.48	-0.23	10% (+/-)	Yes
55: 1115 Adult	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
<b>Long-Term Care Enrollees</b>											
<b>INSTITUTIONAL STATUS</b>											
# enrollees with any ILTC claims (includes NF, ICF/MR, Aged Mental Hospital, IP Psych. < 21 years)	N/A	5,816	N/A	5,742	N/A	5,783	N/A	-1.27	0.71	N/A	N/A
% enrollees with any ILTC claims	N/A	5.22	N/A	5.01	N/A	5.02	N/A	-4.08	0.22	N/A	N/A
% AGED enrollees with any ILTC claims	N/A	44.10	N/A	43.29	N/A	42.51	N/A	-1.84	-1.79	N/A	N/A
% DISABLED enrollees with any ILTC claims	N/A	5.83	N/A	5.74	N/A	5.57	N/A	-1.44	-2.96	N/A	N/A
% CHILD enrollees with any ILTC claims	N/A	0.46	N/A	0.55	N/A	0.53	N/A	19.80	-2.37	N/A	N/A
% ADULT enrollees with any ILTC claims	N/A	0.29	N/A	0.27	N/A	0.28	N/A	-6.03	1.30	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	8,544	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	7.41	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	16.57	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	14.65	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	2.64	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	10.12	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	637	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	4,085	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	3.54	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	11.28	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	4.37	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	0.64	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	7.23	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	1,906	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	0	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	2,179	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	10.60	Yes	N/A	N/A	15% (+/-)	No
% of Section 1915(c) claim (Program Type 6 or 7) recipients with no waiver enrollment	<10%	N/A	No	N/A	No	42.71	Yes	N/A	N/A	15% (+/-)	No
% of Section 1915(c) waiver enrollees with any HMO/HIO enrollment	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
<b>Other Waiver Enrollment (Enrolled Any Time During the Year)</b>											
# with any 1115 waiver (Codes 1,5,6,A,F)	N/A	N/A	N/A	N/A	N/A	16,626	N/A	N/A	N/A	15% (+/-)	No
% AGED enrollees with any 1115 waiver	N/A	N/A	N/A	N/A	N/A	0.01	N/A	N/A	N/A	15% (+/-)	No
% DISABLED enrollees with any 1115 waiver	N/A	N/A	N/A	N/A	N/A	1.94	N/A	N/A	N/A	15% (+/-)	No
% CHILD enrollees with any 1115 waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% ADULT enrollees with any 1115 waiver	N/A	N/A	N/A	N/A	N/A	69.24	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	82,387	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
% AGED enrollees with any 1915(b) waiver	N/A	N/A	N/A	N/A	N/A	1.32	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	49.89	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	87.20	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	77.84	N/A	N/A	N/A	15% (+/-)	No
% with any HMO/HIO enrollment	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
# with any combined 1915(b)(c) waiver (Code 4)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
% AGED enrollees with any combined 1915(b)(c) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% DISABLED enrollees with any combined 1915(b)(c) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% CHILD enrollees with any combined 1915(b)(c) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% ADULT enrollees with any combined 1915(b)(c) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% with any HMO/HIO enrollment	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
# with 1115 HIFA waiver (Code 5)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
# with 1115 Pharmacy waiver coverage (Code 6)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
% AGED enrollees with Pharmacy waiver coverage	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% DISABLED enrollees with any Pharmacy waiver coverage	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% CHILD enrollees with any Pharmacy waiver coverage	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% ADULT enrollees with any combined 1915(b)(c) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% with any HMO/HIO enrollment	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
# with other type of waiver (Code 7)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
# with unknown type of waiver (Code 9)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
# with 1115 disaster-related waiver (Code A)	N/A	N/A	N/A	N/A	N/A	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	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	N/A	N/A
# Aliens with ANY restricted benefits	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	N/A	N/A
# PYE Aliens with ANY restricted benefits	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>EDB Duals with Restricted Benefits (Medicare Cost Sharing Only - Code 3)</i>											
# EDB Duals with ONLY restricted benefits enrollment	N/A	959	N/A	1,060	N/A	1,397	N/A	10.53	31.79	N/A	N/A
# EDB Duals with ANY restricted benefits enrollment	N/A	959	N/A	1,060	N/A	1,397	N/A	10.53	31.79	N/A	N/A
# PYE EDB Duals with ANY restricted benefits	N/A	558	N/A	519	N/A	1,067	N/A	-7.03	105.70	N/A	N/A
% EDB Duals with ONLY restricted benefits enrollment	N/A	N/A	N/A	N/A	N/A	7.28	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	82,191	N/A	85,415	N/A	86,251	N/A	3.92	0.98	15% (+/-)	Yes
June % Full Scope Benefits (Code 1)	>80%	86.84	Yes	87.16	Yes	86.77	Yes	0.36	-0.44	15% (+/-)	Yes
June % Restricted Benefits Alien (Code 2)	<5%	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	15% (+/-)	N/A
June % Restricted Benefits Dual (Code 3)	<5%	0.44	Yes	0.45	Yes	1.23	Yes	3.19	173.90	15% (+/-)	No
June % Restricted Benefits Pregnant (Code 4)	<5%	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	15% (+/-)	N/A
June % Restricted Benefits Other (Code 5)	0%	12.72	No	12.39	No	11.99	No	-2.59	-3.21	15% (+/-)	Yes
June % Restricted Benefits Family Planning (Code 6)	<5%	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	15% (+/-)	N/A
June % Unknown Benefits (Code 9)	0%	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	15% (+/-)	N/A
June % Restricted Benefits Pharm Plus Non-Dual Enrollee (Code X)	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
June % Restricted Benefits Pharm Plus Dual Receiving Medicare Cost Sharing (Code Y)	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
June % Restricted Benefits Pharm Plus Dual Not Receiving Medicare Cost Sharing (Code Z)	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
June % Private Health Insurance (Codes 2-4)	2-12%	9.45	Yes	9.61	Yes	9.89	Yes	1.64	2.99	15% (+/-)	Yes

**2003-2005 MAX PSF VALIDATION TABLE**  
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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
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	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
June # with M-SCHIP (Code 2) - Adult (>18 Years)	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
June # with S-SCHIP Flag (Code 3) - Child (<19 Years)	N/A	870	N/A	1,369	N/A	1,071	N/A	57.36	-21.80	15% (+/-)	No
June # with S-SCHIP Flag (Code 3) - Adult (>18 Years)	N/A	7	N/A	22	N/A	12	N/A	214.30	-45.50	15% (+/-)	No
<b>Medicaid Expenditures</b>											
Total Medicaid Amt Paid	N/A	\$536,255,330	N/A	\$576,627,604	N/A	\$639,617,979	N/A	7.53	10.92	15% (+/-)	Yes
Average Medicaid Amt Paid per Enrollee	N/A	\$4,811	N/A	\$5,027	N/A	\$5,548	N/A	4.48	10.38	15% (+/-)	Yes
25th Percentile	N/A	\$220	N/A	\$259	N/A	\$259	N/A	5.46	11.64	15% (+/-)	Yes
50th Percentile (Median)	N/A	\$949	N/A	\$946	N/A	\$1,053	N/A	-0.32	11.31	15% (+/-)	Yes
75th Percentile	N/A	\$3,605	N/A	\$3,641	N/A	\$4,021	N/A	1.00	10.44	15% (+/-)	Yes
95th Percentile	N/A	\$26,627	N/A	\$27,971	N/A	\$29,983	N/A	5.05	7.19	15% (+/-)	Yes
99th Percentile	N/A	\$50,518	N/A	\$52,959	N/A	\$57,497	N/A	4.83	8.57	15% (+/-)	Yes
<b>AVG MEDICAID AMT PD/ENROLLEE BY MAX ELIGIBILITY GROUP</b>											
MAX Aged	N/A	\$14,466	N/A	\$15,531	N/A	\$16,354	N/A	7.36	5.30	15% (+/-)	Yes
MAX Disabled	N/A	\$11,184	N/A	\$11,769	N/A	\$12,991	N/A	5.23	10.39	10% (+/-)	No
MAX Child	N/A	\$1,994	N/A	\$2,073	N/A	\$2,311	N/A	3.97	11.50	10% (+/-)	No
MAX Adult	N/A	\$2,942	N/A	\$3,063	N/A	\$3,308	N/A	4.09	8.02	10% (+/-)	Yes
<b>AVG MEDICAID AMT PD/EDB DUAL ENROLLEE</b>											
All EDB Dual Enrollees	N/A	\$12,469	N/A	\$13,221	N/A	\$13,814	N/A	6.03	4.49	15% (+/-)	Yes
MAX Aged	N/A	\$14,642	N/A	\$15,619	N/A	\$16,437	N/A	6.67	5.24	10% (+/-)	Yes
MAX Disabled	N/A	\$10,260	N/A	\$11,038	N/A	\$11,496	N/A	7.59	4.15	10% (+/-)	Yes
<b>AVG MEDICAID AMT PD/LONG-TERM CARE ENROLLEE</b>											
Enrollees with ILTC claims	N/A	N/A	N/A	N/A	N/A	\$36,133	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	\$16,379	N/A	N/A	N/A	15% (+/-)	No
Enrollees with ILTC and CLTC claims (excluding CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	\$34,338	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	\$18,850	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	\$27,954	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	Div by 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	\$10,886	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	\$5,891	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	\$11,568	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	Div by 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	\$925	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	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 Alien enrollees with restricted benefits ONLY	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 EDB Duals with Restricted Benefits (Medicare Cost Sharing Only - Code 3)</i>											



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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
Expenditures for EDB Duals with only restricted benefits enrollment	N/A	\$170,689	N/A	\$129,505	N/A	\$181,073	N/A	-24.10	39.82	N/A	N/A
Avg Medicaid Paid for EDB Duals with only restricted benefit enrollment	N/A	\$178	N/A	\$122	N/A	\$130	N/A	-31.40	6.09	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	110,498	N/A	113,654	N/A	113,884	N/A	2.86	0.20	10% (+/-)	Yes
MAX Aged Total	N/A	9,248	N/A	8,977	N/A	9,013	N/A	-2.93	0.40	10% (+/-)	Yes
MAX Disabled Total	N/A	17,977	N/A	18,674	N/A	19,157	N/A	3.88	2.59	10% (+/-)	Yes
MAX Child Total	N/A	59,905	N/A	62,233	N/A	62,248	N/A	3.89	0.02	10% (+/-)	Yes
MAX Adult Total	N/A	23,368	N/A	23,770	N/A	23,466	N/A	1.72	-1.28	10% (+/-)	Yes
Total Medicaid PYE (Person Years of Enrollment)	N/A	81,808	N/A	84,648	N/A	84,866	N/A	3.47	0.26	10% (+/-)	Yes
Total EDB Duals	N/A	17,388	N/A	17,535	N/A	17,780	N/A	0.85	1.40	10% (+/-)	Yes
MAX Aged	N/A	8,876	N/A	8,786	N/A	8,881	N/A	-1.01	1.08	10% (+/-)	Yes
MAX Disabled	N/A	7,358	N/A	7,532	N/A	7,637	N/A	2.37	1.39	10% (+/-)	Yes
<b>Total Medicaid Amount Paid</b>											
Total Medicaid Amt Paid	N/A	\$536,084,641	N/A	\$576,498,099	N/A	\$639,436,906	N/A	7.54	10.92	15% (+/-)	Yes
Average Medicaid Amt Paid per Enrollee	N/A	\$4,852	N/A	\$5,072	N/A	\$5,615	N/A	4.55	10.69	15% (+/-)	Yes
<b>AVG MEDICAID AMT PD/ENROLLEE BY MAX ELIGIBILITY GROUP</b>											
MAX Aged	N/A	\$15,646	N/A	\$16,979	N/A	\$18,342	N/A	8.53	8.03	15% (+/-)	Yes
MAX Disabled	N/A	\$11,304	N/A	\$11,904	N/A	\$13,188	N/A	5.30	10.79	10% (+/-)	No
MAX Child	N/A	\$1,994	N/A	\$2,073	N/A	\$2,311	N/A	3.97	11.50	10% (+/-)	No
MAX Adult	N/A	\$2,942	N/A	\$3,063	N/A	\$3,308	N/A	4.09	8.02	10% (+/-)	Yes
<b>AVG MEDICAID AMT PD/EDB DUAL ENROLLEE</b>											
All EDB Dual Enrollees	N/A	\$13,147	N/A	\$14,012	N/A	\$14,889	N/A	6.58	6.26	15% (+/-)	Yes
MAX Aged	N/A	\$15,886	N/A	\$17,107	N/A	\$18,465	N/A	7.68	7.94	10% (+/-)	Yes
MAX Disabled	N/A	\$10,528	N/A	\$11,352	N/A	\$11,932	N/A	7.82	5.11	10% (+/-)	Yes
<b>MANAGED CARE PLAN INFORMATION (Enrollees in Capitated Plans - PCCM, HMO, HIO, &amp; PHPs, excludes people with missing eligibility information, S-SCHIP only, FP Only, Aliens with only restricted benefits, duals with restricted benefits only, and prescription drug only enrollees) ---- NOTE: FP Only, duals with restricted benefits, and Aliens with restricted benefits were NOT excluded prior to 2003. Prescription drug only enrollees were NOT excluded prior to 2003.</b>											
% Total Enrollees in MC Anytime During Year	N/A	72.58	N/A	73.06	N/A	72.34	N/A	0.65	-0.98	25% (+)	Yes
Total MC Enrollees	N/A	80,203	N/A	83,030	N/A	82,387	N/A	3.53	-0.77	25% (+)	Yes
Aged	N/A	170	N/A	132	N/A	134	N/A	-22.40	1.52	25% (+)	Yes
Disabled	N/A	9,087	N/A	9,430	N/A	9,704	N/A	3.78	2.91	25% (+)	Yes
Child	N/A	52,345	N/A	54,678	N/A	54,283	N/A	4.46	-0.72	25% (+)	Yes
Adult	N/A	18,601	N/A	18,790	N/A	18,266	N/A	1.02	-2.79	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	4.58	N/A	4.61	N/A	5.22	N/A	0.65	13.13	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	6.14	N/A	N/A	N/A	25% (+)	No
TOTAL ENROLLEES IN JUNE	N/A	81,683	N/A	84,857	N/A	85,020	N/A	3.89	0.19	25% (+)	Yes
June % HMO/HIO only (Code 1)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A

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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
June % Dental Plan only (Code 2)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % BHO only (Code 3)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % PCCM only (Code 4)	N/A	67.77	N/A	68.12	N/A	67.14	N/A	0.52	-1.45	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	32.23	N/A	31.88	N/A	32.86	N/A	-1.09	3.09	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	\$1,834,734	N/A	\$1,914,372	N/A	\$1,882,830	N/A	4.34	-1.65	15% (+/-)	Yes
HMO/HIO	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
PHP	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
PCCM	N/A	\$1,834,734	N/A	\$1,914,372	N/A	\$1,882,830	N/A	4.34	-1.65	15% (+/-)	Yes
Ratio of Cap Claims to PME (person mo. enroll.) in MC	-9-2	0.92	Yes	0.93	Yes	0.92	Yes	0.27	-0.36	15% (+/-)	Yes
HMO/HIO	-9-2	Div by 0	No	Div by 0	No	Div by 0	No	Div by 0	Div by 0	15% (+/-)	N/A
PHP	-9-2	Div by 0	No	Div by 0	No	Div by 0	No	Div by 0	Div by 0	15% (+/-)	N/A
PCCM	-9-2	0.92	Yes	0.93	Yes	0.92	Yes	0.27	-0.36	15% (+/-)	Yes
Average Cap Payment for PME in MC	N/A	\$3	N/A	\$3	N/A	\$3	N/A	0.27	-0.36	15% (+/-)	Yes
HMO/HIO	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
PHP	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
PCCM	N/A	\$3	N/A	\$3	N/A	\$3	N/A	0.27	-0.36	15% (+/-)	Yes
<b>Persons enrolled in PHP only or PHP/PCCM only</b>											
Total Cap Payments	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Total Medicaid Amt Paid	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Count of Enrollees	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
<b>Persons enrolled in PCCM only</b>											
Total Cap Payments	N/A	\$1,834,734	N/A	\$1,914,372	N/A	\$1,882,830	N/A	4.34	-1.65	15% (+/-)	Yes
Count of Enrollees	N/A	80,203	N/A	83,030	N/A	82,387	N/A	3.53	-0.77	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

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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
ILTC	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Drug	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
All Other (excluding cap payments)	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Average FFS Payments by Type of Service											
IP	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
ILTC	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Drug	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
All Other (excluding cap payments)	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
<b>FFS INFORMATION FOR NON-DUAL MEDICAID ENROLLEES (excludes EDB Duals, people ever enrolled in HMO/HIOS, with missing eligibility information, S-SCHIP only, FP Only, Aliens with restricted benefits only, and prescription drug only enrollees) ---- NOTE: S-SCHIP only, FP Only, and Aliens with restricted benefits were NOT excluded prior to 2001. Prescription drug only enrollees were NOT excluded prior to 2003.</b>											
Total Non-Dual FFS Enrollees	N/A	93,110	N/A	96,119	N/A	96,104	N/A	3.23	-0.02	15% (+/-)	Yes
Total Non-Dual FFS Recipients	N/A	81,060	N/A	91,296	N/A	93,578	N/A	12.63	2.50	15% (+/-)	Yes
Total Non-Dual FFS PYE	N/A	67,749	N/A	70,324	N/A	70,416	N/A	3.80	0.13	15% (+/-)	Yes
MAX Aged Total	N/A	372	N/A	191	N/A	132	N/A	-48.70	-30.90	10% (+/-)	No
11: Aged, Cash	N/A	40	N/A	37	N/A	29	N/A	-7.50	-21.60	10% (+/-)	No
21: Aged, MN	N/A	157	N/A	119	N/A	79	N/A	-24.20	-33.60	10% (+/-)	No
31: Aged, Poverty	N/A	138	N/A	6	N/A	5	N/A	-95.70	-16.70	10% (+/-)	No
41: Other Aged	N/A	37	N/A	29	N/A	19	N/A	-21.60	-34.50	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	10,619	N/A	11,142	N/A	11,520	N/A	4.93	3.39	10% (+/-)	Yes
12: Disabled, Cash	N/A	9,557	N/A	9,931	N/A	10,220	N/A	3.91	2.91	10% (+/-)	Yes
22: Disabled, MN	N/A	476	N/A	490	N/A	529	N/A	2.94	7.96	10% (+/-)	Yes
32: Disabled, Poverty	N/A	4	N/A	171	N/A	185	N/A	4,175.00	8.19	10% (+/-)	Yes
42: Other Disabled	N/A	582	N/A	550	N/A	586	N/A	-5.50	6.55	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	59,895	N/A	62,227	N/A	62,239	N/A	3.89	0.02	10% (+/-)	Yes
14: AFDC Child, Cash	N/A	20,674	N/A	20,320	N/A	19,253	N/A	-1.71	-5.25	10% (+/-)	Yes
16: AFDC-U Child, Cash	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
24: AFDC Child, MN	N/A	60	N/A	51	N/A	44	N/A	-15.00	-13.70	10% (+/-)	No
34: Child Poverty	N/A	24,794	N/A	26,923	N/A	27,872	N/A	8.59	3.53	10% (+/-)	Yes
44: Other Child	N/A	10,464	N/A	10,900	N/A	10,784	N/A	4.17	-1.06	10% (+/-)	Yes
48: Foster Care Child	N/A	3,903	N/A	4,033	N/A	4,286	N/A	3.33	6.27	10% (+/-)	Yes
54: 1115 Child	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Adult Total	N/A	22,224	N/A	22,559	N/A	22,213	N/A	1.51	-1.53	10% (+/-)	Yes
15: AFDC Adult, Cash	N/A	12,658	N/A	12,588	N/A	12,046	N/A	-0.55	-4.31	10% (+/-)	Yes
17: AFDC-U Adult, Cash	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
25: AFDC Adult, MN	N/A	9	N/A	12	N/A	15	N/A	33.33	25.00	10% (+/-)	No
35: Adult, Poverty	N/A	3,730	N/A	4,106	N/A	4,337	N/A	10.08	5.63	10% (+/-)	Yes
45: Other Adult	N/A	5,827	N/A	5,853	N/A	5,815	N/A	0.45	-0.65	10% (+/-)	Yes
55: 1115 Adult	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
# Non-Dual FFS Enrollees w/ MSIS Dual Code/No EDB Confirmation	N/A	375	N/A	299	N/A	173	N/A	-20.30	-42.10	10% (+/-)	No
Total FFS Medicaid Amt Paid	N/A	\$305,663,446	N/A	\$328,889,847	N/A	\$372,833,925	N/A	7.60	13.36	15% (+/-)	Yes
Average FFS Medicaid Amt Paid per Non-Dual FFS Enrollee	N/A	\$3,283	N/A	\$3,422	N/A	\$3,879	N/A	4.23	13.38	15% (+/-)	Yes
Avg FFS Medicaid Amt Paid per Non-Dual FFS Recipient (User of any service)	N/A	\$3,771	N/A	\$3,602	N/A	\$3,984	N/A	-4.47	10.60	15% (+/-)	Yes
<b>AVG FFS MEDICAID AMT PD/NON-DUAL FFS ENROLLEE BY MAX ELIG GRP</b>											
All Aged	N/A	\$9,908	N/A	\$11,133	N/A	\$10,099	N/A	12.36	-9.29	15% (+/-)	Yes
11: Aged, Cash	N/A	\$4,928	N/A	\$7,063	N/A	\$8,917	N/A	43.32	26.24	15% (+/-)	No
21: Aged, MN	N/A	\$11,446	N/A	\$12,330	N/A	\$9,583	N/A	7.73	-22.30	15% (+/-)	No
31: Aged, Poverty	N/A	\$9,096	N/A	\$0	N/A	\$579	N/A	-100.00	Div by 0	15% (+/-)	N/A
41: Other Aged	N/A	\$11,797	N/A	\$13,712	N/A	\$16,549	N/A	16.24	20.69	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	\$11,819	N/A	\$12,255	N/A	\$13,998	N/A	3.68	14.23	15% (+/-)	Yes
12: Disabled, Cash	N/A	\$10,783	N/A	\$11,221	N/A	\$12,884	N/A	4.06	14.82	15% (+/-)	Yes
22: Disabled, MN	N/A	\$17,084	N/A	\$16,031	N/A	\$20,086	N/A	-6.16	25.30	15% (+/-)	No
32: Disabled, Poverty	N/A	\$37	N/A	\$10,583	N/A	\$12,096	N/A	28,503.00	14.30	15% (+/-)	Yes
42: Other Disabled	N/A	\$24,614	N/A	\$28,075	N/A	\$28,530	N/A	14.06	1.62	15% (+/-)	Yes
52: 1115 Disabled	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A

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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
All Child	N/A	\$1,973	N/A	\$2,050	N/A	\$2,290	N/A	3.91	11.73	15% (+/-)	Yes
14: AFDC Child, Cash	N/A	\$1,597	N/A	\$1,792	N/A	\$1,994	N/A	12.18	11.28	15% (+/-)	Yes
16: AFDC-U Child, Cash	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
24: AFDC Child, MN	N/A	\$5,105	N/A	\$4,682	N/A	\$2,587	N/A	-8.28	-44.80	15% (+/-)	No
34: Child, Poverty	N/A	\$1,224	N/A	\$1,256	N/A	\$1,539	N/A	2.60	22.49	15% (+/-)	No
44: Other Child	N/A	\$2,559	N/A	\$2,640	N/A	\$2,890	N/A	3.19	9.46	15% (+/-)	Yes
48: Foster Care Child	N/A	\$7,096	N/A	\$7,016	N/A	\$6,994	N/A	-1.11	-0.32	15% (+/-)	Yes
54: 1115 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
All Adult	N/A	\$2,624	N/A	\$2,778	N/A	\$3,048	N/A	5.88	9.71	15% (+/-)	Yes
15: AFDC Adult, Cash	N/A	\$2,435	N/A	\$2,588	N/A	\$2,795	N/A	6.31	7.99	15% (+/-)	Yes
17: AFDC-U Adult, Cash	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
25: AFDC Adult, MN	N/A	\$1,915	N/A	\$1,353	N/A	\$1,243	N/A	-29.30	-8.13	15% (+/-)	Yes
35: Adult, Poverty	N/A	\$2,797	N/A	\$2,863	N/A	\$3,234	N/A	2.35	12.96	15% (+/-)	Yes
45: Other Adult	N/A	\$2,926	N/A	\$3,132	N/A	\$3,439	N/A	7.01	9.83	15% (+/-)	Yes
55: 1115 Adult	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
<b>FFS EXPENDITURES AND USERS BY MAX TOS</b>											
IP: Total Medicaid Paid (TOS 01)	N/A	\$57,593,349	N/A	\$62,046,650	N/A	\$76,582,467	N/A	7.73	23.43	15% (+/-)	No
IP: Number of Users	N/A	12,597	N/A	12,901	N/A	13,125	N/A	2.41	1.74	15% (+/-)	Yes
IP: Average Medicaid Pd per User	N/A	\$4,572	N/A	\$4,809	N/A	\$5,835	N/A	5.19	21.32	15% (+/-)	No
IP: Average Medicaid Covered Days Per User	N/A	5	N/A	5	N/A	6	N/A	-2.00	6.80	15% (+/-)	Yes
MH Aged: Total Medicaid Paid (TOS 02)	N/A	\$121,185	N/A	\$204,044	N/A	\$90,225	N/A	68.37	-55.80	15% (+/-)	No
MH Aged: Number of Users	N/A	2	N/A	3	N/A	1	N/A	50.00	-66.70	15% (+/-)	No
MH Aged: Avg Medicaid Pd per User	N/A	\$60,593	N/A	\$68,015	N/A	\$90,225	N/A	12.25	32.66	15% (+/-)	No
IP Psych < 21: Total Medicaid Paid (TOS 04)	N/A	\$13,023,908	N/A	\$14,288,527	N/A	\$15,518,650	N/A	9.71	8.61	15% (+/-)	Yes
IP Psych < 21: Number of Users	N/A	376	N/A	449	N/A	424	N/A	19.41	-5.57	15% (+/-)	Yes
IP Psych<21 :Avg Medicaid Pd per User	N/A	\$34,638	N/A	\$31,823	N/A	\$36,601	N/A	-8.13	15.01	15% (+/-)	No
ICF/MR: Total Medicaid Pd (TOS 05)	N/A	\$4,967,175	N/A	\$5,247,955	N/A	\$4,966,986	N/A	5.65	-5.35	15% (+/-)	Yes
ICF/MR: Number of Users	N/A	38	N/A	37	N/A	37	N/A	-2.63	0.00	15% (+/-)	Yes
ICF/MR: Avg Medicaid Pd per User	N/A	\$130,715	N/A	\$141,837	N/A	\$134,243	N/A	8.51	-5.35	15% (+/-)	Yes
NF: Total Medicaid Paid (TOS 07)	N/A	\$7,995,915	N/A	\$7,947,118	N/A	\$8,129,682	N/A	-0.61	2.30	15% (+/-)	Yes
NF Number of Users	N/A	424	N/A	438	N/A	414	N/A	3.30	-5.48	15% (+/-)	Yes
NF:Avg Medicaid Pd per User	N/A	\$18,858	N/A	\$18,144	N/A	\$19,637	N/A	-3.79	8.23	15% (+/-)	Yes
Physician: Total Medicaid Paid (TOS 08)	N/A	\$30,553,399	N/A	\$30,648,270	N/A	\$32,979,861	N/A	0.31	7.61	15% (+/-)	Yes
Physician: Number of Users	N/A	58,998	N/A	58,223	N/A	58,791	N/A	-1.31	0.98	15% (+/-)	Yes
Physician: Avg Medicaid Pd per User	N/A	\$518	N/A	\$526	N/A	\$561	N/A	1.65	6.57	15% (+/-)	Yes
Dental: Total Medicaid Paid (TOS 09)	N/A	\$5,361,956	N/A	\$5,539,210	N/A	\$6,641,833	N/A	3.31	19.91	15% (+/-)	No
Dental: Number of Users	N/A	17,260	N/A	17,600	N/A	18,095	N/A	1.97	2.81	15% (+/-)	Yes
Dental: Avg Medicaid Pd per User	N/A	\$311	N/A	\$315	N/A	\$367	N/A	1.31	16.63	15% (+/-)	No
Other Practitioner: Total Medicaid Pd (TOS 10)	N/A	\$5,280,435	N/A	\$5,724,237	N/A	\$5,917,178	N/A	8.41	3.37	15% (+/-)	Yes
Other Practitioner: Number of Users	N/A	13,506	N/A	14,640	N/A	14,696	N/A	8.40	0.38	15% (+/-)	Yes
Other Practitioner: Avg Medicaid Pd per User	N/A	\$391	N/A	\$391	N/A	\$403	N/A	0.01	2.98	15% (+/-)	Yes
OPD: Total Medicaid Paid (TOS 11)	N/A	\$16,693,510	N/A	\$13,740,645	N/A	\$17,744,889	N/A	-17.70	29.14	15% (+/-)	No
OPD Number of Users	N/A	29,086	N/A	28,651	N/A	35,190	N/A	-1.50	22.82	15% (+/-)	No
OPD: Avg Medicaid Pd per User	N/A	\$574	N/A	\$480	N/A	\$504	N/A	-16.40	5.15	15% (+/-)	Yes
Clinic: Total Medicaid Paid (TOS 12)	N/A	\$5,702,293	N/A	\$6,312,879	N/A	\$6,963,434	N/A	10.71	10.31	15% (+/-)	Yes
Clinic: Number of Users	N/A	13,870	N/A	14,016	N/A	14,343	N/A	1.05	2.33	15% (+/-)	Yes
Clinic: Avg Medicaid Pd per User	N/A	\$411	N/A	\$450	N/A	\$485	N/A	9.56	7.79	15% (+/-)	Yes
HH: Total Medicaid Paid (TOS 13)	N/A	\$344,400	N/A	\$346,343	N/A	\$288,518	N/A	0.56	-16.70	15% (+/-)	No
HH: Number of Users	N/A	354	N/A	323	N/A	304	N/A	-8.76	-5.88	15% (+/-)	Yes
HH: Avg Medicaid Pd per User	N/A	\$973	N/A	\$1,072	N/A	\$949	N/A	10.22	-11.50	15% (+/-)	Yes
Lab/Xray: Total Medicaid Paid (TOS 15)	N/A	\$15,137,768	N/A	\$14,467,584	N/A	\$13,358,749	N/A	-4.43	-7.66	15% (+/-)	Yes
Lab/Xray: Number of Users	N/A	43,681	N/A	43,697	N/A	43,628	N/A	0.04	-0.16	15% (+/-)	Yes
Lab/Xray:Avg Medicaid Pd per User	N/A	\$347	N/A	\$331	N/A	\$306	N/A	-4.46	-7.52	15% (+/-)	Yes
Drugs: Total Medicaid Paid (TOS 16)	N/A	\$41,871,462	N/A	\$46,129,341	N/A	\$49,358,544	N/A	10.17	7.00	15% (+/-)	Yes
Drugs: Number of Users	N/A	55,511	N/A	54,399	N/A	55,318	N/A	-2.00	1.69	15% (+/-)	Yes
Drugs: Avg Medicaid Pd per User	N/A	\$754	N/A	\$848	N/A	\$892	N/A	12.42	5.22	15% (+/-)	Yes
Other Services: Total Medicaid Paid (TOS 19)	N/A	\$41,395,879	N/A	\$45,766,587	N/A	\$49,410,802	N/A	10.56	7.96	15% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: MT

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	33,198	N/A	86,490	N/A	91,107	N/A	160.50	5.34	15% (+/-)	Yes
Other Services: Avg Medicaid Pd per User	N/A	\$1,247	N/A	\$529	N/A	\$542	N/A	-57.60	2.49	15% (+/-)	Yes
Transportation: Total Medicaid Paid (TOS 26)	N/A	\$2,216,246	N/A	\$2,689,315	N/A	\$2,812,548	N/A	21.35	4.58	15% (+/-)	Yes
Transportation: Number of Users	N/A	3,860	N/A	4,108	N/A	4,147	N/A	6.43	0.95	15% (+/-)	Yes
Transportation: Avg Medicaid Pd per User	N/A	\$574	N/A	\$655	N/A	\$678	N/A	14.02	3.60	15% (+/-)	Yes
PCS: Total Medicaid Paid (TOS 30)	N/A	\$7,259,540	N/A	\$7,628,669	N/A	\$8,619,026	N/A	5.09	12.98	15% (+/-)	Yes
PCS: Number of Users	N/A	911	N/A	1,005	N/A	1,014	N/A	10.32	0.90	15% (+/-)	Yes
PCS: Avg Medicaid Pd per User	N/A	\$7,969	N/A	\$7,591	N/A	\$8,500	N/A	-4.74	11.98	15% (+/-)	Yes
Target Case Management: Total Medicaid Pd (TOS 31)	N/A	\$1,310,201	N/A	\$1,272,512	N/A	\$1,238,671	N/A	-2.88	-2.66	15% (+/-)	Yes
Target Case Management: Number of Users	N/A	2,952	N/A	3,277	N/A	3,093	N/A	11.01	-5.61	15% (+/-)	Yes
Target Case Management: Avg Medicaid Pd per User	N/A	\$444	N/A	\$388	N/A	\$400	N/A	-12.50	3.13	15% (+/-)	Yes
Rehab Services: Total Medicaid Pd (TOS 33)	N/A	\$0	N/A	\$274,563	N/A	\$189,040	N/A	Div by 0	-31.10	15% (+/-)	No
Rehab Services: Number of Users	N/A	0	N/A	372	N/A	319	N/A	Div by 0	-14.20	15% (+/-)	Yes
Rehab Services: Avg Medicaid Pd per User	N/A	Div by 0	N/A	\$738	N/A	\$593	N/A	Div by 0	-19.70	15% (+/-)	No
PT/OT/Speech/Hear: Total Medicaid Paid (TOS 34)	N/A	\$55,567	N/A	\$0	N/A	\$0	N/A	-100.00	Div by 0	15% (+/-)	N/A
PT/OT/Speech/Hear: Number of Users	N/A	141	N/A	0	N/A	0	N/A	-100.00	Div by 0	15% (+/-)	N/A
PT/OT/Speech/Hear: Avg Medicaid Pd per User	N/A	\$394	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Hospice: Total Medicaid Paid (TOS 35)	N/A	\$625,899	N/A	\$503,097	N/A	\$8,026,553	N/A	-19.60	1,495.00	15% (+/-)	No
Hospice: Number of Users	N/A	77	N/A	70	N/A	99	N/A	-9.09	41.43	15% (+/-)	No
Hospice: Avg Medicaid Pd per User	N/A	\$8,129	N/A	\$7,187	N/A	\$81,076	N/A	-11.60	1,028.00	15% (+/-)	No
DME: Total Medicaid Paid (TOS 51)	N/A	\$8,398,940	N/A	\$10,908,495	N/A	\$12,311,433	N/A	29.88	12.86	15% (+/-)	Yes
DME: Number of Users	N/A	13,946	N/A	21,683	N/A	22,360	N/A	55.48	3.12	15% (+/-)	Yes
DME: Avg Medicaid Pd per User	N/A	\$602	N/A	\$503	N/A	\$551	N/A	-16.50	9.44	15% (+/-)	Yes
Residential Care: Total Medicaid Paid (TOS 52)	N/A	\$862,473	N/A	\$648,104	N/A	\$764,836	N/A	-24.90	18.01	15% (+/-)	No
Residential Care: Number of Users	N/A	93	N/A	30	N/A	28	N/A	-67.70	-6.67	15% (+/-)	Yes
Residential Care: Avg Medicaid Pd per User	N/A	\$9,274	N/A	\$21,603	N/A	\$27,316	N/A	132.90	26.44	15% (+/-)	No
Psych. Services: Total Medicaid Paid (TOS 53)	N/A	\$32,790,179	N/A	\$40,722,062	N/A	\$44,718,427	N/A	24.19	9.81	15% (+/-)	Yes
Psych. Services: Number of Users	N/A	14,813	N/A	15,214	N/A	15,730	N/A	2.71	3.39	15% (+/-)	Yes
Psych. Services: Avg Medicaid Pd per User	N/A	\$2,214	N/A	\$2,677	N/A	\$2,843	N/A	20.92	6.21	15% (+/-)	Yes
Adult Day Care: Total Medicaid Paid (TOS 54)	N/A	\$2,354,044	N/A	\$1,753,926	N/A	\$1,586,751	N/A	-25.50	-9.53	15% (+/-)	Yes
Adult Day Care: Number of Users	N/A	816	N/A	119	N/A	113	N/A	-85.40	-5.04	15% (+/-)	Yes
Adult Day Care: Avg Medicaid Pd per User	N/A	\$2,885	N/A	\$14,739	N/A	\$14,042	N/A	410.90	-4.73	15% (+/-)	Yes
AVG FFS MEDICAID AMT PD/NON-DUAL FFS ENROLLEE BY MAX TOS											
Inpatient Hospital (TOS 01)	N/A	\$619	N/A	\$646	N/A	\$797	N/A	4.36	23.45	15% (+/-)	No
Aged	N/A	\$580	N/A	\$340	N/A	\$423	N/A	-41.40	24.48	15% (+/-)	No
Disabled	N/A	\$2,328	N/A	\$2,364	N/A	\$3,143	N/A	1.57	32.93	15% (+/-)	No
Child	N/A	\$327	N/A	\$351	N/A	\$401	N/A	7.07	14.51	15% (+/-)	Yes
Adult	N/A	\$587	N/A	\$613	N/A	\$690	N/A	4.37	12.66	15% (+/-)	Yes
ILTC (TOS=02,04,05,07)	N/A	\$280	N/A	\$288	N/A	\$299	N/A	2.73	3.69	15% (+/-)	Yes
Aged	N/A	\$4,189	N/A	\$7,376	N/A	\$6,106	N/A	76.08	-17.20	15% (+/-)	No
Disabled	N/A	\$1,412	N/A	\$1,385	N/A	\$1,358	N/A	-1.90	-1.92	15% (+/-)	Yes
Child	N/A	\$149	N/A	\$157	N/A	\$185	N/A	5.52	17.67	15% (+/-)	No
Adult	N/A	\$29	N/A	\$48	N/A	\$34	N/A	64.10	-28.90	15% (+/-)	No
Drugs (TOS=16)	N/A	\$450	N/A	\$480	N/A	\$514	N/A	6.72	7.02	15% (+/-)	Yes
Aged	N/A	\$1,060	N/A	\$1,583	N/A	\$1,365	N/A	49.32	-13.80	15% (+/-)	Yes
Disabled	N/A	\$2,245	N/A	\$2,404	N/A	\$2,506	N/A	7.10	4.25	15% (+/-)	Yes
Child	N/A	\$161	N/A	\$166	N/A	\$181	N/A	3.44	8.62	15% (+/-)	Yes
Adult	N/A	\$361	N/A	\$386	N/A	\$408	N/A	6.90	5.91	15% (+/-)	Yes
All Other Services	N/A	\$1,934	N/A	\$2,008	N/A	\$2,270	N/A	3.83	13.05	15% (+/-)	Yes
Aged	N/A	\$4,079	N/A	\$1,834	N/A	\$2,204	N/A	-55.10	20.22	15% (+/-)	No
Disabled	N/A	\$5,834	N/A	\$6,101	N/A	\$6,990	N/A	4.57	14.58	15% (+/-)	Yes
Child	N/A	\$1,336	N/A	\$1,376	N/A	\$1,523	N/A	3.01	10.72	15% (+/-)	Yes
Adult	N/A	\$1,647	N/A	\$1,732	N/A	\$1,916	N/A	5.16	10.58	15% (+/-)	Yes
% OF NON-DUAL FFS ENROLLEES WITH CLAIMS BY SELECTED MAX TOS											
% Non-Dual FFS Enrollees with IP Claims (TOS=01)	N/A	13.53	N/A	13.42	N/A	13.66	N/A	-0.79	1.75	15% (+/-)	Yes
Aged	N/A	16.94	N/A	12.57	N/A	15.15	N/A	-25.80	20.58	15% (+/-)	No
Disabled	N/A	19.90	N/A	18.82	N/A	19.58	N/A	-5.42	4.05	15% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: MT

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	10.33	N/A	10.28	N/A	10.27	N/A	-0.45	-0.16	15% (+/-)	Yes
Adult	N/A	19.05	N/A	19.42	N/A	20.07	N/A	1.94	3.37	15% (+/-)	Yes
% Non-Dual FFS Enrollees with ILTC Claims (TOS=02,04,05,07)	N/A	0.90	N/A	0.96	N/A	0.91	N/A	7.16	-5.59	15% (+/-)	Yes
Aged	N/A	17.74	N/A	29.84	N/A	21.21	N/A	68.21	-28.90	15% (+/-)	No
Disabled	N/A	4.52	N/A	4.56	N/A	4.28	N/A	0.87	-6.14	15% (+/-)	Yes
Child	N/A	0.46	N/A	0.55	N/A	0.54	N/A	19.44	-2.08	15% (+/-)	Yes
Adult	N/A	0.08	N/A	0.10	N/A	0.09	N/A	20.41	-3.06	15% (+/-)	Yes
% with ratio of ILTC days/enroll days > 1	N/A	0.24	N/A	0.32	N/A	0.46	N/A	35.60	41.26	15% (+/-)	No
% Non-Dual FFS Enrollees with Drug Claims (TOS=16)	N/A	59.62	N/A	56.60	N/A	57.56	N/A	-5.07	1.71	15% (+/-)	Yes
Aged	N/A	57.80	N/A	55.50	N/A	43.94	N/A	-3.98	-20.80	15% (+/-)	No
Disabled	N/A	76.87	N/A	74.14	N/A	73.23	N/A	-3.55	-1.23	15% (+/-)	Yes
Child	N/A	55.74	N/A	51.75	N/A	53.22	N/A	-7.16	2.85	15% (+/-)	Yes
Adult	N/A	61.87	N/A	61.31	N/A	61.67	N/A	-0.91	0.59	15% (+/-)	Yes
% Non-Dual FFS Enrollees with All Other Claims	N/A	85.64	N/A	94.53	N/A	97.23	N/A	10.39	2.85	15% (+/-)	Yes
Aged	N/A	69.35	N/A	57.59	N/A	48.48	N/A	-17.00	-15.80	15% (+/-)	No
Disabled	N/A	90.33	N/A	94.20	N/A	94.80	N/A	4.29	0.64	15% (+/-)	Yes
Child	N/A	85.97	N/A	95.19	N/A	97.97	N/A	10.72	2.91	15% (+/-)	Yes
Adult	N/A	82.76	N/A	93.20	N/A	96.72	N/A	12.62	3.78	15% (+/-)	Yes
Avg # IP Days per Non-Dual FFS User	N/A	5	N/A	5	N/A	6	N/A	-2.00	6.80	15% (+/-)	Yes
Aged	N/A	3	N/A	5	N/A	4	N/A	41.82	-20.00	15% (+/-)	No
Disabled	N/A	12	N/A	12	N/A	13	N/A	-3.79	8.86	15% (+/-)	Yes
Child	N/A	4	N/A	4	N/A	4	N/A	1.71	6.19	15% (+/-)	Yes
Adult	N/A	4	N/A	4	N/A	4	N/A	-2.22	-0.82	15% (+/-)	Yes
Avg # ILTC Days per Non-Dual FFS User	N/A	165	N/A	146	N/A	149	N/A	-11.50	2.15	15% (+/-)	Yes
Aged	N/A	258	N/A	235	N/A	246	N/A	-8.93	4.75	15% (+/-)	Yes
Disabled	N/A	178	N/A	163	N/A	163	N/A	-8.34	0.11	15% (+/-)	Yes
Child	N/A	123	N/A	106	N/A	123	N/A	-13.50	16.16	15% (+/-)	No
Adult	N/A	108	N/A	127	N/A	89	N/A	18.29	-30.30	15% (+/-)	No
% 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	\$2,440,071	N/A	\$2,024,764	N/A	\$2,854,331	N/A	-17.00	40.97	15% (+/-)	No
FP: Number of Users	N/A	8,057	N/A	5,339	N/A	5,368	N/A	-33.70	0.54	15% (+/-)	Yes
FP: Average Medicaid Pd per User	N/A	\$303	N/A	\$379	N/A	\$532	N/A	25.22	40.21	15% (+/-)	No
RHC: Total Medicaid Paid (Program Type 3)	N/A	\$3,283,870	N/A	\$3,525,793	N/A	\$3,788,271	N/A	7.37	7.45	15% (+/-)	Yes
RHC: Number of Users	N/A	9,576	N/A	9,899	N/A	9,917	N/A	3.37	0.18	15% (+/-)	Yes
RHC: Avg Medicaid Pd per User	N/A	\$343	N/A	\$356	N/A	\$382	N/A	3.86	7.25	15% (+/-)	Yes
FOHC: Total Medicaid Paid (Program Type 4)	N/A	\$2,698,043	N/A	\$3,503,468	N/A	\$4,150,001	N/A	29.85	18.45	15% (+/-)	No
FOHC: Number of Users	N/A	8,478	N/A	9,483	N/A	10,838	N/A	11.85	14.29	15% (+/-)	Yes
FOHC: Avg Medicaid Pd per User	N/A	\$318	N/A	\$369	N/A	\$383	N/A	16.09	3.65	15% (+/-)	Yes
IHS: Total Medicaid Pd (Program Type 5)	N/A	\$24,538,114	N/A	\$25,865,941	N/A	\$27,814,172	N/A	5.41	7.53	15% (+/-)	Yes
IHS: Number of Users	N/A	14,575	N/A	15,403	N/A	15,718	N/A	5.68	2.05	15% (+/-)	Yes
IHS: Avg Medicaid Pd per User	N/A	\$1,684	N/A	\$1,679	N/A	\$1,770	N/A	-0.26	5.38	15% (+/-)	Yes
Section 1915(c) Waiver: Total Medicaid Paid (Program Types 6 and 7)	N/A	\$5,273,688	N/A	\$5,337,585	N/A	\$5,317,045	N/A	1.21	-0.39	15% (+/-)	Yes
Section 1915(c) Waiver: Number of Users	N/A	3,390	N/A	3,599	N/A	3,397	N/A	6.17	-5.61	15% (+/-)	Yes
Section 1915(c) Waiver: Avg Medicaid Pd per User	N/A	\$1,556	N/A	\$1,483	N/A	\$1,565	N/A	-4.67	5.54	15% (+/-)	Yes
<b>FFS COMMUNITY-BASED LONG-TERM CARE EXPENDITURES AND USERS</b>											
Total FFS CLTC Expenditures (all codes - overestimate)	N/A	N/A	N/A	N/A	N/A	\$30,985,747	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	8,934	N/A	N/A	N/A	15% (+/-)	No
Average FFS CLTC Expenditures per FFS Non-Dual User (all codes - overestimate)	N/A	N/A	N/A	N/A	N/A	\$3,468	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$6,224	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$4,537	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$999	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$1,473	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	9.30	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	26.52	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	52.23	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	2.63	N/A	N/A	N/A	15% (+/-)	No

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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
Adult	N/A	N/A	N/A	N/A	N/A	5.60	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	\$15,764,630	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	4,341	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	\$3,632	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$17,157	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$8,362	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$999	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$1,473	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	4.52	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	8.33	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	12.57	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	2.63	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	5.60	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	\$5,317,045	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	3,397	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	\$1,565	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$13,314	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$6,218	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$255	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$551	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	3.53	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	5.30	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	5.82	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	2.42	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	5.45	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	17,388	N/A	17,535	N/A	17,780	N/A	0.85	1.40	15% (+/-)	Yes
Number of EDB Dual FFS Recipients	N/A	16,677	N/A	16,907	N/A	17,068	N/A	1.38	0.95	15% (+/-)	Yes
Total EDB Dual FFS PYE	N/A	14,058	N/A	14,323	N/A	14,450	N/A	1.89	0.88	15% (+/-)	Yes
% EDB Only Dual (Code 50)	N/A	1.45	N/A	0.84	N/A	0.74	N/A	-41.80	-12.00	15% (+/-)	Yes
% QMB Only (Code 51)	N/A	0.00	N/A	0.00	N/A	1.12	N/A	Div by 0	Div by 0	15% (+/-)	N/A
% QMB Plus (Code 52)	N/A	61.50	N/A	62.48	N/A	60.78	N/A	1.60	-2.72	15% (+/-)	Yes
% SLMB Only (Code 53)	N/A	0.00	N/A	0.00	N/A	0.71	N/A	Div by 0	Div by 0	15% (+/-)	N/A
% SLMB Plus (Code 54)	N/A	1.22	N/A	6.71	N/A	7.86	N/A	450.50	17.14	15% (+/-)	No
% QDWI (Code 55)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	15% (+/-)	N/A
% QI 1 (Code 56)	N/A	0.00	N/A	0.00	N/A	0.02	N/A	Div by 0	Div by 0	15% (+/-)	N/A
% QI 2 (Code 57)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	15% (+/-)	N/A
% Other Type Dual (Code 58)	N/A	35.84	N/A	29.96	N/A	28.76	N/A	-16.40	-4.02	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	8,876	N/A	8,786	N/A	8,881	N/A	-1.01	1.08	10% (+/-)	Yes
11: Aged, Cash	N/A	1,866	N/A	1,871	N/A	1,870	N/A	0.27	-0.05	10% (+/-)	Yes
21: Aged, MN	N/A	5,794	N/A	5,785	N/A	5,911	N/A	-0.16	2.18	10% (+/-)	Yes
31: Aged, Poverty	N/A	6	N/A	0	N/A	0	N/A	-100.00	Div by 0	10% (+/-)	N/A
41: Other Aged	N/A	1,210	N/A	1,130	N/A	1,100	N/A	-6.61	-2.65	10% (+/-)	Yes
51: 1115 Aged	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Disabled EDB Dual FFS Total	N/A	7,358	N/A	7,532	N/A	7,637	N/A	2.37	1.39	10% (+/-)	Yes
12: Disabled, Cash	N/A	4,181	N/A	4,255	N/A	4,377	N/A	1.77	2.87	10% (+/-)	Yes
22: Disabled, MN	N/A	2,355	N/A	2,434	N/A	2,377	N/A	3.36	-2.34	10% (+/-)	Yes
32: Disabled, Poverty	N/A	0	N/A	6	N/A	6	N/A	Div by 0	0.00	10% (+/-)	Yes
42: Other Disabled	N/A	822	N/A	837	N/A	877	N/A	1.83	4.78	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	\$228,586,461	N/A	\$245,693,877	N/A	\$264,720,055	N/A	7.48	7.74	15% (+/-)	Yes
Average FFS Medicaid Amt Paid per FFS Dual	N/A	\$13,146	N/A	\$14,012	N/A	\$14,889	N/A	6.58	6.26	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
Average FFS Medicaid Amt Paid per FFS Dual Recipient (User of any service)	N/A	\$13,707	N/A	\$14,532	N/A	\$15,510	N/A	6.02	6.73	15% (+/-)	Yes
<b>AVG FFS MEDICAID AMT PD/FFS DUAL BY MAX ELIGIBILITY GROUP</b>											
All Aged	N/A	\$15,886	N/A	\$17,106	N/A	\$18,465	N/A	7.68	7.94	15% (+/-)	Yes
11: Aged, Cash	N/A	\$5,779	N/A	\$6,115	N/A	\$6,580	N/A	5.80	7.61	15% (+/-)	Yes
21: Aged, MN	N/A	\$17,897	N/A	\$19,876	N/A	\$21,646	N/A	11.06	8.90	15% (+/-)	Yes
31: Aged, Poverty	N/A	\$3,010	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
41: Other Aged	N/A	\$21,906	N/A	\$21,128	N/A	\$21,574	N/A	-3.55	2.12	15% (+/-)	Yes
51: 1115 Aged	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
All Disabled	N/A	\$10,527	N/A	\$11,350	N/A	\$11,931	N/A	7.82	5.11	15% (+/-)	Yes
12: Disabled, Cash	N/A	\$6,188	N/A	\$6,868	N/A	\$7,575	N/A	10.98	10.29	15% (+/-)	Yes
22: Disabled, MN	N/A	\$14,481	N/A	\$15,868	N/A	\$17,134	N/A	9.58	7.98	15% (+/-)	Yes
32: Disabled, Poverty	N/A	Div by 0	N/A	\$9,552	N/A	\$3,901	N/A	Div by 0	-59.20	15% (+/-)	No
42: Other Disabled	N/A	\$21,267	N/A	\$21,012	N/A	\$19,624	N/A	-1.20	-6.61	15% (+/-)	Yes
52: 1115 Disabled	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
<b>FFS EXPENDITURES AND USERS BY MAX TOS</b>											
IP: Total Medicaid Paid (TOS 01)	N/A	\$5,358,739	N/A	\$5,145,694	N/A	\$5,656,946	N/A	-3.98	9.94	15% (+/-)	Yes
IP: Number of Users	N/A	3,469	N/A	3,429	N/A	3,660	N/A	-1.15	6.74	15% (+/-)	Yes
IP: Average Medicaid Pd per User	N/A	\$1,545	N/A	\$1,501	N/A	\$1,546	N/A	-2.86	3.00	15% (+/-)	Yes
IP: Average Medicaid Covered Days Per User	N/A	5	N/A	5	N/A	5	N/A	-9.09	5.69	15% (+/-)	Yes
MH Aged: Total Medicaid Paid (TOS 02)	N/A	\$2,585,818	N/A	\$2,830,364	N/A	\$3,398,351	N/A	9.46	20.07	15% (+/-)	No
MH Aged: Number of Users	N/A	55	N/A	52	N/A	54	N/A	-5.45	3.85	15% (+/-)	Yes
MH Aged: Avg Medicaid Pd per User	N/A	\$47,015	N/A	\$54,430	N/A	\$62,932	N/A	15.77	15.62	15% (+/-)	No
IP Psych < 21: Total Medicaid Paid (TOS 04)	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
IP Psych < 21: Number of Users	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
IP Psych<21 :Avg Medicaid Pd per User	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
ICF/MR: Total Medicaid Pd (TOS 05)	N/A	\$12,030,035	N/A	\$10,044,850	N/A	\$7,419,027	N/A	-16.50	-26.10	15% (+/-)	No
ICF/MR: Number of Users	N/A	92	N/A	72	N/A	58	N/A	-21.70	-19.40	15% (+/-)	No
ICF/MR: Avg Medicaid Pd per User	N/A	\$130,761	N/A	\$139,512	N/A	\$127,914	N/A	6.69	-8.31	15% (+/-)	Yes
NF: Total Medicaid Paid (TOS 07)	N/A	\$103,872,031	N/A	\$110,773,384	N/A	\$121,675,037	N/A	6.64	9.84	15% (+/-)	Yes
NF: Number of Users	N/A	4,839	N/A	4,705	N/A	4,814	N/A	-2.77	2.32	15% (+/-)	Yes
NF:Avg Medicaid Pd per User	N/A	\$21,466	N/A	\$23,544	N/A	\$25,275	N/A	9.68	7.35	15% (+/-)	Yes
Physician: Total Medicaid Paid (TOS 08)	N/A	\$3,051,447	N/A	\$2,353,479	N/A	\$2,499,411	N/A	-22.90	6.20	15% (+/-)	Yes
Physician: Number of Users	N/A	12,964	N/A	12,178	N/A	12,592	N/A	-6.06	3.40	15% (+/-)	Yes
Physician: Avg Medicaid Pd per User	N/A	\$235	N/A	\$193	N/A	\$198	N/A	-17.90	2.71	15% (+/-)	Yes
Dental: Total Medicaid Paid (TOS 09)	N/A	\$1,090,642	N/A	\$1,391,186	N/A	\$1,581,027	N/A	27.56	13.65	15% (+/-)	Yes
Dental: Number of Users	N/A	3,372	N/A	3,731	N/A	3,894	N/A	10.65	4.37	15% (+/-)	Yes
Dental: Avg Medicaid Pd per User	N/A	\$323	N/A	\$373	N/A	\$406	N/A	15.28	8.89	15% (+/-)	Yes
Other Practitioner: Total Medicaid Pd (TOS 10)	N/A	\$636,839	N/A	\$604,153	N/A	\$541,073	N/A	-5.13	-10.40	15% (+/-)	Yes
Other Practitioner: Number of Users	N/A	6,004	N/A	5,752	N/A	5,935	N/A	-4.20	3.18	15% (+/-)	Yes
Other Practitioner: Avg Medicaid Pd per User	N/A	\$106	N/A	\$105	N/A	\$91	N/A	-0.98	-13.20	15% (+/-)	Yes
OPD: Total Medicaid Paid (TOS 11)	N/A	\$2,447,356	N/A	\$2,078,742	N/A	\$2,425,532	N/A	-15.10	16.68	15% (+/-)	No
OPD: Number of Users	N/A	7,202	N/A	5,922	N/A	6,540	N/A	-17.80	10.44	15% (+/-)	Yes
OPD: Avg Medicaid Pd per User	N/A	\$340	N/A	\$351	N/A	\$371	N/A	3.30	5.66	15% (+/-)	Yes
Clinic: Total Medicaid Paid (TOS 12)	N/A	\$2,005,049	N/A	\$2,512,205	N/A	\$2,524,952	N/A	25.29	0.51	15% (+/-)	Yes
Clinic: Number of Users	N/A	2,516	N/A	2,617	N/A	2,876	N/A	4.01	9.90	15% (+/-)	Yes
Clinic: Avg Medicaid Pd per User	N/A	\$797	N/A	\$960	N/A	\$878	N/A	20.46	-8.54	15% (+/-)	Yes
HH: Total Medicaid Paid (TOS 13)	N/A	\$173,841	N/A	\$173,053	N/A	\$142,121	N/A	-0.45	-17.90	15% (+/-)	No
HH: Number of Users	N/A	110	N/A	136	N/A	112	N/A	23.64	-17.60	15% (+/-)	No
HH: Avg Medicaid Pd per User	N/A	\$1,580	N/A	\$1,272	N/A	\$1,269	N/A	-19.50	-0.28	15% (+/-)	Yes
Lab/Xray: Total Medicaid Paid (TOS 15)	N/A	\$1,136,450	N/A	\$1,624,444	N/A	\$1,489,286	N/A	42.94	-8.32	15% (+/-)	Yes
Lab/Xray: Number of Users	N/A	5,403	N/A	7,416	N/A	7,587	N/A	37.26	2.31	15% (+/-)	Yes
Lab/Xray:Avg Medicaid Pd per User	N/A	\$210	N/A	\$219	N/A	\$196	N/A	4.14	-10.40	15% (+/-)	Yes
Drugs: Total Medicaid Paid (TOS 16)	N/A	\$48,511,355	N/A	\$53,733,482	N/A	\$58,283,130	N/A	10.76	8.47	15% (+/-)	Yes
Drugs: Number of Users	N/A	15,254	N/A	15,313	N/A	15,437	N/A	0.39	0.81	15% (+/-)	Yes
Drugs: Avg Medicaid Pd per User	N/A	\$3,180	N/A	\$3,509	N/A	\$3,776	N/A	10.34	7.60	15% (+/-)	Yes
Other Services: Total Medicaid Paid (TOS 19)	N/A	\$15,334,175	N/A	\$21,774,728	N/A	\$22,773,522	N/A	42.00	4.59	15% (+/-)	Yes
Other Services: Number of Users	N/A	7,468	N/A	8,144	N/A	8,373	N/A	9.05	2.81	15% (+/-)	Yes



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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
Other Services: Avg Medicaid Pd per User	N/A	\$2,053	N/A	\$2,674	N/A	\$2,720	N/A	30.21	1.73	15% (+/-)	Yes
Transportation: Total Medicaid Paid (TOS 26)	N/A	\$540,554	N/A	\$336,808	N/A	\$342,109	N/A	-37.70	1.57	15% (+/-)	Yes
Transportation: Number of Users	N/A	2,701	N/A	2,451	N/A	2,155	N/A	-9.26	-12.10	15% (+/-)	Yes
Transportation: Avg Medicaid Pd per User	N/A	\$200	N/A	\$137	N/A	\$159	N/A	-31.30	15.53	15% (+/-)	No
PCS: Total Medicaid Paid (TOS 30)	N/A	\$13,654,164	N/A	\$14,829,888	N/A	\$16,497,127	N/A	8.61	11.24	15% (+/-)	Yes
PCS: Number of Users	N/A	1,943	N/A	2,067	N/A	2,105	N/A	6.38	1.84	15% (+/-)	Yes
PCS: Avg Medicaid Pd per User	N/A	\$7,027	N/A	\$7,175	N/A	\$7,837	N/A	2.10	9.23	15% (+/-)	Yes
Target Case Management: Total Medicaid Pd (TOS 31)	N/A	\$1,670,668	N/A	\$1,558,409	N/A	\$1,518,719	N/A	-6.72	-2.55	15% (+/-)	Yes
Target Case Management: Number of Users	N/A	1,328	N/A	1,370	N/A	1,414	N/A	3.16	3.21	15% (+/-)	Yes
Target Case Management: Avg Medicaid Pd per User	N/A	\$1,258	N/A	\$1,138	N/A	\$1,074	N/A	-9.58	-5.58	15% (+/-)	Yes
Rehab Services: Total Medicaid Pd (TOS 33)	N/A	\$0	N/A	\$16,519	N/A	\$2,063	N/A	Div by 0	-87.50	15% (+/-)	No
Rehab Services: Number of Users	N/A	0	N/A	33	N/A	20	N/A	Div by 0	-39.40	15% (+/-)	No
Rehab Services: Avg Medicaid Pd per User	N/A	Div by 0	N/A	\$501	N/A	\$103	N/A	Div by 0	-79.40	15% (+/-)	No
PT/OT/Speech/Hear: Total Medicaid Paid (TOS 34)	N/A	\$88,585	N/A	\$765	N/A	\$72	N/A	-99.10	-90.60	15% (+/-)	No
PT/OT/Speech/Hear: Number of Users	N/A	368	N/A	3	N/A	3	N/A	-99.20	0.00	15% (+/-)	Yes
PT/OT/Speech/Hear: Avg Medicaid Pd per User	N/A	\$241	N/A	\$255	N/A	\$24	N/A	5.93	-90.60	15% (+/-)	No
Hospice: Total Medicaid Paid (TOS 35)	N/A	\$438,943	N/A	\$576,171	N/A	\$654,221	N/A	31.26	13.55	15% (+/-)	Yes
Hospice: Number of Users	N/A	75	N/A	84	N/A	119	N/A	12.00	41.67	15% (+/-)	No
Hospice: Avg Medicaid Pd per User	N/A	\$5,853	N/A	\$6,859	N/A	\$5,498	N/A	17.20	-19.80	15% (+/-)	No
DME: Total Medicaid Paid (TOS 51)	N/A	\$3,557,708	N/A	\$4,324,008	N/A	\$4,506,814	N/A	21.54	4.23	15% (+/-)	Yes
DME: Number of Users	N/A	5,194	N/A	7,477	N/A	7,548	N/A	43.95	0.95	15% (+/-)	Yes
DME: Avg Medicaid Pd per User	N/A	\$685	N/A	\$578	N/A	\$597	N/A	-15.60	3.25	15% (+/-)	Yes
Residential Care: Total Medicaid Paid (TOS 52)	N/A	\$4,926,981	N/A	\$1,741,657	N/A	\$1,808,013	N/A	-64.70	3.81	15% (+/-)	Yes
Residential Care: Number of Users	N/A	460	N/A	67	N/A	63	N/A	-85.40	-5.97	15% (+/-)	Yes
Residential Care: Avg Medicaid Pd per User	N/A	\$10,711	N/A	\$25,995	N/A	\$28,699	N/A	142.70	10.40	15% (+/-)	Yes
Psych. Services: Total Medicaid Paid (TOS 53)	N/A	\$3,735,225	N/A	\$4,412,702	N/A	\$5,335,370	N/A	18.14	20.91	15% (+/-)	No
Psych. Services: Number of Users	N/A	1,915	N/A	1,992	N/A	2,094	N/A	4.02	5.12	15% (+/-)	Yes
Psych. Services: Avg Medicaid Pd per User	N/A	\$1,951	N/A	\$2,215	N/A	\$2,548	N/A	13.57	15.02	15% (+/-)	No
Adult Day Care: Total Medicaid Paid (TOS 54)	N/A	\$1,365,295	N/A	\$2,203,198	N/A	\$2,851,817	N/A	61.37	29.44	15% (+/-)	No
Adult Day Care: Number of Users	N/A	587	N/A	146	N/A	168	N/A	-75.10	15.07	15% (+/-)	No
Adult Day Care: Avg Medicaid Pd per User	N/A	\$2,326	N/A	\$15,090	N/A	\$16,975	N/A	548.80	12.49	15% (+/-)	Yes
<b>AVG FFS MEDICAID AMT PD/FFS DUAL BY SELECTED TYPE OF SERVICE</b>											
Inpatient Hospital (TOS=01)	N/A	\$308	N/A	\$293	N/A	\$318	N/A	-4.78	8.42	15% (+/-)	Yes
Aged	N/A	\$261	N/A	\$250	N/A	\$273	N/A	-4.07	9.07	15% (+/-)	Yes
Disabled	N/A	\$378	N/A	\$368	N/A	\$387	N/A	-2.69	5.19	15% (+/-)	Yes
ILTC (TOS=02,04,05,07)	N/A	\$6,814	N/A	\$7,052	N/A	\$7,452	N/A	3.48	5.68	15% (+/-)	Yes
Aged	N/A	\$10,747	N/A	\$11,524	N/A	\$12,533	N/A	7.23	8.75	15% (+/-)	Yes
Disabled	N/A	\$2,709	N/A	\$2,640	N/A	\$2,619	N/A	-2.54	-0.82	15% (+/-)	Yes
Drugs (TOS=16)	N/A	\$2,790	N/A	\$3,064	N/A	\$3,278	N/A	9.84	6.97	15% (+/-)	Yes
Aged	N/A	\$2,355	N/A	\$2,532	N/A	\$2,673	N/A	7.50	5.60	15% (+/-)	Yes
Disabled	N/A	\$3,345	N/A	\$3,735	N/A	\$4,007	N/A	11.66	7.27	15% (+/-)	Yes
All Other Services	N/A	\$3,234	N/A	\$3,602	N/A	\$3,841	N/A	11.40	6.62	15% (+/-)	Yes
Aged	N/A	\$2,523	N/A	\$2,800	N/A	\$2,985	N/A	11.00	6.62	15% (+/-)	Yes
Disabled	N/A	\$4,094	N/A	\$4,607	N/A	\$4,918	N/A	12.51	6.76	15% (+/-)	Yes
<b>% OF FFS DUALS WITH CLAIMS BY SELECTED TYPE OF SERVICE</b>											
% FFS Duals with IP Claims (TOS=01)	N/A	19.95	N/A	19.56	N/A	20.58	N/A	-1.98	5.27	15% (+/-)	Yes
Aged	N/A	19.93	N/A	19.17	N/A	20.53	N/A	-3.83	7.10	15% (+/-)	Yes
Disabled	N/A	21.27	N/A	21.31	N/A	22.12	N/A	0.19	3.79	15% (+/-)	Yes
% FFS Duals with ILTC Claims (TOS=02,04,05,07)	N/A	28.63	N/A	27.46	N/A	27.60	N/A	-4.09	0.53	15% (+/-)	Yes
Aged	N/A	49.00	N/A	47.74	N/A	48.11	N/A	-2.58	0.79	15% (+/-)	Yes
Disabled	N/A	7.87	N/A	7.66	N/A	7.74	N/A	-2.65	1.02	15% (+/-)	Yes
% FFS Duals with Drug Claims (TOS=16)	N/A	87.73	N/A	87.33	N/A	86.82	N/A	-0.46	-0.58	15% (+/-)	Yes
Aged	N/A	89.53	N/A	88.46	N/A	88.33	N/A	-1.20	-0.14	15% (+/-)	Yes
Disabled	N/A	84.97	N/A	85.30	N/A	84.25	N/A	0.39	-1.24	15% (+/-)	Yes
% FFS Duals with All Other Claims	N/A	88.51	N/A	89.56	N/A	89.38	N/A	1.19	-0.20	15% (+/-)	Yes
Aged	N/A	84.31	N/A	84.86	N/A	85.02	N/A	0.66	0.19	15% (+/-)	Yes
Disabled	N/A	92.02	N/A	93.43	N/A	92.85	N/A	1.53	-0.62	15% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: MT

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	5	N/A	5	N/A	5	N/A	-9.09	5.69	15% (+/-)	Yes
Aged	N/A	5	N/A	5	N/A	5	N/A	-8.13	5.24	15% (+/-)	Yes
Disabled	N/A	6	N/A	5	N/A	5	N/A	-9.92	5.51	15% (+/-)	Yes
Avg # ILTC Days per FFS Dual User (TOS 02, 04, 05, 07)	N/A	248	N/A	252	N/A	242	N/A	1.76	-4.17	15% (+/-)	Yes
Aged	N/A	249	N/A	255	N/A	245	N/A	2.13	-3.88	15% (+/-)	Yes
Disabled	N/A	248	N/A	245	N/A	234	N/A	-1.02	-4.71	15% (+/-)	Yes
<b>FFS EXPENDITURES AND USERS BY MAX PROGRAM TYPE</b>											
FP: Total Medicaid Paid (Program Type 2)	N/A	\$191,483	N/A	\$137,381	N/A	\$157,125	N/A	-28.30	14.37	15% (+/-)	Yes
FP: Number of Users	N/A	938	N/A	740	N/A	817	N/A	-21.10	10.41	15% (+/-)	Yes
FP: Average Medicaid Pd per User	N/A	\$204	N/A	\$186	N/A	\$192	N/A	-9.06	3.59	15% (+/-)	Yes
RHC: Total Medicaid Paid (Program Type 3)	N/A	\$224,642	N/A	\$267,842	N/A	\$291,218	N/A	19.23	8.73	15% (+/-)	Yes
RHC: Number of Users	N/A	1,660	N/A	1,808	N/A	1,978	N/A	8.92	9.40	15% (+/-)	Yes
RHC: Avg Medicaid Pd per User	N/A	\$135	N/A	\$148	N/A	\$147	N/A	9.47	-0.62	15% (+/-)	Yes
FOHC: Total Medicaid Paid (Program Type 4)	N/A	\$287,942	N/A	\$426,870	N/A	\$497,247	N/A	48.25	16.49	15% (+/-)	No
FOHC: Number of Users	N/A	1,343	N/A	1,807	N/A	2,114	N/A	34.55	16.99	15% (+/-)	No
FOHC: Avg Medicaid Pd per User	N/A	\$214	N/A	\$236	N/A	\$235	N/A	10.18	-0.43	15% (+/-)	Yes
IHS: Total Medicaid Pd (Program Type 5)	N/A	\$654,524	N/A	\$861,729	N/A	\$777,943	N/A	31.66	-9.72	15% (+/-)	Yes
IHS: Number of Users	N/A	296	N/A	314	N/A	295	N/A	6.08	-6.05	15% (+/-)	Yes
IHS: Avg Medicaid Pd per User	N/A	\$2,211	N/A	\$2,744	N/A	\$2,637	N/A	24.11	-3.91	15% (+/-)	Yes
Section 1915(c) Waiver: Total Medicaid Paid (Program Types 6 and 7)	N/A	\$17,715,154	N/A	\$19,044,034	N/A	\$19,662,424	N/A	7.50	3.25	15% (+/-)	Yes
Section 1915(c) Waiver: Number of Users	N/A	2,739	N/A	2,887	N/A	2,978	N/A	5.40	3.15	15% (+/-)	Yes
Section 1915(c) Waiver: Avg Medicaid Pd per User	N/A	\$6,468	N/A	\$6,596	N/A	\$6,603	N/A	1.99	0.09	15% (+/-)	Yes
<b>FFS COMMUNITY-BASED LONG-TERM CARE EXPENDITURES AND USERS</b>											
Total FFS CLTC Expenditures (all codes - overestimate)	N/A	N/A	N/A	N/A	N/A	\$43,409,388	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	9,827	N/A	N/A	N/A	15% (+/-)	No
Average FFS CLTC Expenditures per FFS Dual User (all codes - overestimate)	N/A	N/A	N/A	N/A	N/A	\$4,417	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$4,588	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$4,831	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	55.27	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	52.34	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	52.94	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	\$39,061,055	N/A	N/A	N/A	15% (+/-)	No
Number of Dual CLTC Users (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	4,203	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	\$9,294	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$11,065	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$12,902	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	23.64	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	18.75	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	18.36	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	\$19,662,424	N/A	N/A	N/A	15% (+/-)	No
Number of Dual CLTC Users (Section 1915(c) claims only - excludes CLTC Codes 11-20)	N/A	N/A	N/A	N/A	N/A	2,978	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	\$6,603	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$9,469	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$10,745	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	16.75	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	12.84	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	9.28	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	110,498	N/A	113,654	N/A	113,884	N/A	2.86	0.20	15% (+/-)	Yes
# FFS Recipients	N/A	97,737	N/A	108,203	N/A	110,646	N/A	10.71	2.26	15% (+/-)	Yes
% FFS Enrollees who are Recipients	65-90%	88.45	Yes	95.20	No	97.16	No	7.63	2.05	15% (+/-)	Yes
% Aged who are Recipients	90-100%	95.96	Yes	96.29	Yes	96.13	Yes	0.35	-0.17	15% (+/-)	Yes
% Disabled who are Recipients	85-100%	92.70	Yes	94.86	Yes	94.82	Yes	2.34	-0.05	15% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: MT

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%	87.13	Yes	95.51	Yes	98.07	Yes	9.62	2.68	15% (+/-)	Yes
% Adults who are Recipients	80-100%	85.60	Yes	94.25	Yes	97.04	Yes	10.11	2.96	15% (+/-)	Yes
Total FFS PYE	N/A	81,808	N/A	84,648	N/A	84,866	N/A	3.47	0.26	15% (+/-)	Yes
MAX Aged Total	N/A	9,248	N/A	8,977	N/A	9,013	N/A	-2.93	0.40	10% (+/-)	Yes
11: Aged, Cash	N/A	1,906	N/A	1,908	N/A	1,899	N/A	0.10	-0.47	10% (+/-)	Yes
21: Aged, MN	N/A	5,951	N/A	5,904	N/A	5,990	N/A	-0.79	1.46	10% (+/-)	Yes
31: Aged, Poverty	N/A	144	N/A	6	N/A	5	N/A	-95.80	-16.70	10% (+/-)	No
41: Other Aged	N/A	1,247	N/A	1,159	N/A	1,119	N/A	-7.06	-3.45	10% (+/-)	Yes
51: 1115 Aged	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Disabled Total	N/A	17,977	N/A	18,674	N/A	19,157	N/A	3.88	2.59	10% (+/-)	Yes
12: Disabled, Cash	N/A	13,738	N/A	14,186	N/A	14,597	N/A	3.26	2.90	10% (+/-)	Yes
22: Disabled, MN	N/A	2,831	N/A	2,924	N/A	2,906	N/A	3.29	-0.62	10% (+/-)	Yes
32: Disabled, Poverty	N/A	4	N/A	177	N/A	191	N/A	4,325.00	7.91	10% (+/-)	Yes
42: Other Disabled	N/A	1,404	N/A	1,387	N/A	1,463	N/A	-1.21	5.48	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	59,905	N/A	62,233	N/A	62,248	N/A	3.89	0.02	10% (+/-)	Yes
14: AFDC Child, Cash	N/A	20,675	N/A	20,320	N/A	19,253	N/A	-1.72	-5.25	10% (+/-)	Yes
16: AFDC-U Child, Cash	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
24: AFDC Child, MN	N/A	60	N/A	51	N/A	44	N/A	-15.00	-13.70	10% (+/-)	No
34: Child Poverty	N/A	24,796	N/A	26,923	N/A	27,872	N/A	8.58	3.53	10% (+/-)	Yes
44: Other Child	N/A	10,471	N/A	10,905	N/A	10,791	N/A	4.15	-1.05	10% (+/-)	Yes
48: Foster Care Child	N/A	3,903	N/A	4,034	N/A	4,288	N/A	3.36	6.30	10% (+/-)	Yes
54: 1115 Child	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Adult Total	N/A	23,368	N/A	23,770	N/A	23,466	N/A	1.72	-1.28	10% (+/-)	Yes
15: AFDC Adult, Cash	N/A	12,716	N/A	12,634	N/A	12,115	N/A	-0.65	-4.11	10% (+/-)	Yes
17: AFDC-U Adult, Cash	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
25: AFDC Adult, MN	N/A	9	N/A	12	N/A	15	N/A	33.33	25.00	10% (+/-)	No
35: Adult, Poverty	N/A	3,744	N/A	4,123	N/A	4,351	N/A	10.12	5.53	10% (+/-)	Yes
45: Other Adult	N/A	6,899	N/A	7,001	N/A	6,985	N/A	1.48	-0.23	10% (+/-)	Yes
55: 1115 Adult	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
Total FFS Medicaid Amt Paid	N/A	\$534,249,907	N/A	\$574,583,724	N/A	\$637,553,980	N/A	7.55	10.96	15% (+/-)	Yes
Average FFS Medicaid Amt Paid per FFS Enrollee	N/A	\$4,835	N/A	\$5,056	N/A	\$5,598	N/A	4.56	10.74	15% (+/-)	Yes
Average FFS Medicaid Amt Paid per FFS Recipient (User of any svc)	N/A	\$5,466	N/A	\$5,310	N/A	\$5,762	N/A	-2.85	8.51	15% (+/-)	Yes
<b>AVG FFS MEDICAID AMT PD/FFS ENROLLEE BY MAX ELIGIBILITY GROUP</b>											
All Aged	N/A	\$15,645	N/A	\$16,979	N/A	\$18,342	N/A	8.53	8.03	15% (+/-)	Yes
11: Aged, Cash	N/A	\$5,762	N/A	\$6,133	N/A	\$6,616	N/A	6.45	7.87	15% (+/-)	Yes
21: Aged, MN	N/A	\$17,726	N/A	\$19,724	N/A	\$21,486	N/A	11.27	8.94	15% (+/-)	Yes
31: Aged, Poverty	N/A	\$8,843	N/A	\$0	N/A	\$579	N/A	-100.00	Div by 0	15% (+/-)	N/A
41: Other Aged	N/A	\$21,606	N/A	\$20,942	N/A	\$21,489	N/A	-3.07	2.61	15% (+/-)	Yes
51: 1115 Aged	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
All Disabled	N/A	\$11,290	N/A	\$11,890	N/A	\$13,174	N/A	5.31	10.80	15% (+/-)	Yes
12: Disabled, Cash	N/A	\$9,385	N/A	\$9,915	N/A	\$11,292	N/A	5.66	13.89	15% (+/-)	Yes
22: Disabled, MN	N/A	\$14,918	N/A	\$15,896	N/A	\$17,671	N/A	6.55	11.17	15% (+/-)	Yes
32: Disabled, Poverty	N/A	\$37	N/A	\$10,548	N/A	\$11,839	N/A	28,408.00	12.24	15% (+/-)	Yes
42: Other Disabled	N/A	\$22,654	N/A	\$23,812	N/A	\$23,191	N/A	5.11	-2.61	15% (+/-)	Yes
52: 1115 Disabled	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
All Child	N/A	\$1,973	N/A	\$2,052	N/A	\$2,290	N/A	3.99	11.63	15% (+/-)	Yes
14: AFDC Child, Cash	N/A	\$1,597	N/A	\$1,792	N/A	\$1,994	N/A	12.18	11.28	15% (+/-)	Yes
16: AFDC-U Child, Cash	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
24: AFDC Child, MN	N/A	\$5,105	N/A	\$4,682	N/A	\$2,587	N/A	-8.28	-44.80	15% (+/-)	No
34: Child, Poverty	N/A	\$1,224	N/A	\$1,256	N/A	\$1,539	N/A	2.61	22.49	15% (+/-)	No
44: Other Child	N/A	\$2,561	N/A	\$2,652	N/A	\$2,892	N/A	3.55	9.03	15% (+/-)	Yes
48: Foster Care Child	N/A	\$7,096	N/A	\$7,015	N/A	\$6,992	N/A	-1.14	-0.32	15% (+/-)	Yes
54: 1115 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
All Adult	N/A	\$2,927	N/A	\$3,048	N/A	\$3,294	N/A	4.12	8.07	15% (+/-)	Yes
15: AFDC Adult, Cash	N/A	\$2,458	N/A	\$2,600	N/A	\$2,819	N/A	5.78	8.42	15% (+/-)	Yes
17: AFDC-U Adult, Cash	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

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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
25: AFDC Adult, MN	N/A	\$1,915	N/A	\$1,353	N/A	\$1,243	N/A	-29.30	-8.13	15% (+/-)	Yes
35: Adult, Poverty	N/A	\$2,800	N/A	\$2,866	N/A	\$3,237	N/A	2.37	12.93	15% (+/-)	Yes
45: Other Adult	N/A	\$3,861	N/A	\$3,964	N/A	\$4,156	N/A	2.67	4.84	15% (+/-)	Yes
55: 1115 Adult	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
<b>FFS EXPENDITURES AND USERS BY MAX TOS</b>											
IP: Total Medicaid Paid (TOS 01)	N/A	\$62,952,088	N/A	\$67,192,344	N/A	\$82,239,413	N/A	6.74	22.39	15% (+/-)	No
IP: Number of Users	N/A	16,066	N/A	16,330	N/A	16,785	N/A	1.64	2.79	15% (+/-)	Yes
IP: Average Medicaid Pd per User	N/A	\$3,918	N/A	\$4,115	N/A	\$4,900	N/A	5.01	19.08	15% (+/-)	No
IP: Average Medicaid Covered Days Per User	N/A	5	N/A	5	N/A	6	N/A	-3.45	6.50	15% (+/-)	Yes
MH Aged: Total Medicaid Paid (TOS 02)	N/A	\$2,707,003	N/A	\$3,034,408	N/A	\$3,488,576	N/A	12.09	14.97	15% (+/-)	Yes
MH Aged: Number of Users	N/A	57	N/A	55	N/A	55	N/A	-3.51	0.00	15% (+/-)	Yes
MH Aged: Avg Medicaid Pd per User	N/A	\$47,491	N/A	\$55,171	N/A	\$63,429	N/A	16.17	14.97	15% (+/-)	Yes
IP Psych < 21: Total Medicaid Paid (TOS 04)	N/A	\$13,023,908	N/A	\$14,288,527	N/A	\$15,518,650	N/A	9.71	8.61	15% (+/-)	Yes
IP Psych < 21: Number of Users	N/A	376	N/A	449	N/A	424	N/A	19.41	-5.57	15% (+/-)	Yes
IP Psych<21 :Avg Medicaid Pd per User	N/A	\$34,638	N/A	\$31,823	N/A	\$36,601	N/A	-8.13	15.01	15% (+/-)	No
ICF/MR: Total Medicaid Pd (TOS 05)	N/A	\$16,997,210	N/A	\$15,292,805	N/A	\$12,386,013	N/A	-10.00	-19.00	15% (+/-)	No
ICF/MR: Number of Users	N/A	130	N/A	109	N/A	95	N/A	-16.20	-12.80	15% (+/-)	Yes
ICF/MR: Avg Medicaid Pd per User	N/A	\$130,748	N/A	\$140,301	N/A	\$130,379	N/A	7.31	-7.07	15% (+/-)	Yes
NF: Total Medicaid Paid (TOS 07)	N/A	\$111,867,946	N/A	\$118,720,502	N/A	\$129,804,719	N/A	6.13	9.34	15% (+/-)	Yes
NF Number of Users	N/A	5,263	N/A	5,143	N/A	5,228	N/A	-2.28	1.65	15% (+/-)	Yes
NF:Avg Medicaid Pd per User	N/A	\$21,256	N/A	\$23,084	N/A	\$24,829	N/A	8.60	7.56	15% (+/-)	Yes
Physician: Total Medicaid Paid (TOS 08)	N/A	\$33,604,846	N/A	\$33,001,749	N/A	\$35,479,272	N/A	-1.79	7.51	15% (+/-)	Yes
Physician: Number of Users	N/A	71,962	N/A	70,401	N/A	71,383	N/A	-2.17	1.40	15% (+/-)	Yes
Physician: Avg Medicaid Pd per User	N/A	\$467	N/A	\$469	N/A	\$497	N/A	0.38	6.03	15% (+/-)	Yes
Dental: Total Medicaid Paid (TOS 09)	N/A	\$6,452,598	N/A	\$6,930,396	N/A	\$8,222,860	N/A	7.41	18.65	15% (+/-)	No
Dental: Number of Users	N/A	20,632	N/A	21,331	N/A	21,989	N/A	3.39	3.09	15% (+/-)	Yes
Dental: Avg Medicaid Pd per User	N/A	\$313	N/A	\$325	N/A	\$374	N/A	3.89	15.10	15% (+/-)	No
Other Practitioner: Total Medicaid Pd (TOS 10)	N/A	\$5,917,274	N/A	\$6,328,390	N/A	\$6,458,251	N/A	6.95	2.05	15% (+/-)	Yes
Other Practitioner: Number of Users	N/A	19,510	N/A	20,392	N/A	20,631	N/A	4.52	1.17	15% (+/-)	Yes
Other Practitioner: Avg Medicaid Pd per User	N/A	\$303	N/A	\$310	N/A	\$313	N/A	2.32	0.87	15% (+/-)	Yes
OPD: Total Medicaid Paid (TOS 11)	N/A	\$19,140,866	N/A	\$15,819,387	N/A	\$20,170,421	N/A	-17.40	27.50	15% (+/-)	No
OPD Number of Users	N/A	36,288	N/A	34,573	N/A	41,730	N/A	-4.73	20.70	15% (+/-)	No
OPD: Avg Medicaid Pd per User	N/A	\$527	N/A	\$458	N/A	\$483	N/A	-13.30	5.64	15% (+/-)	Yes
Clinic: Total Medicaid Paid (TOS 12)	N/A	\$7,707,342	N/A	\$8,825,084	N/A	\$9,488,386	N/A	14.50	7.52	15% (+/-)	Yes
Clinic: Number of Users	N/A	16,386	N/A	16,633	N/A	17,219	N/A	1.51	3.52	15% (+/-)	Yes
Clinic: Avg Medicaid Pd per User	N/A	\$470	N/A	\$531	N/A	\$551	N/A	12.80	3.86	15% (+/-)	Yes
HH: Total Medicaid Paid (TOS 13)	N/A	\$518,241	N/A	\$519,396	N/A	\$430,639	N/A	0.22	-17.10	15% (+/-)	No
HH: Number of Users	N/A	464	N/A	459	N/A	416	N/A	-1.08	-9.37	15% (+/-)	Yes
HH: Avg Medicaid Pd per User	N/A	\$1,117	N/A	\$1,132	N/A	\$1,035	N/A	1.32	-8.52	15% (+/-)	Yes
Lab/Xray: Total Medicaid Paid (TOS 15)	N/A	\$16,274,218	N/A	\$16,092,028	N/A	\$14,848,035	N/A	-1.12	-7.73	15% (+/-)	Yes
Lab/Xray: Number of Users	N/A	49,084	N/A	51,113	N/A	51,215	N/A	4.13	0.20	15% (+/-)	Yes
Lab/Xray:Avg Medicaid Pd per User	N/A	\$332	N/A	\$315	N/A	\$290	N/A	-5.04	-7.91	15% (+/-)	Yes
Drugs: Total Medicaid Paid (TOS 16)	N/A	\$90,382,817	N/A	\$99,862,823	N/A	\$107,641,674	N/A	10.49	7.79	15% (+/-)	Yes
Drugs: Number of Users	N/A	70,765	N/A	69,712	N/A	70,755	N/A	-1.49	1.50	15% (+/-)	Yes
Drugs: Avg Medicaid Pd per User	N/A	\$1,277	N/A	\$1,433	N/A	\$1,521	N/A	12.16	6.20	15% (+/-)	Yes
Other Services: Total Medicaid Paid (TOS 19)	N/A	\$56,730,054	N/A	\$67,541,315	N/A	\$72,184,324	N/A	19.06	6.87	15% (+/-)	Yes
Other Services: Number of Users	N/A	40,666	N/A	94,634	N/A	99,480	N/A	132.70	5.12	15% (+/-)	Yes
Other Services: Avg Medicaid Pd per User	N/A	\$1,395	N/A	\$714	N/A	\$726	N/A	-48.80	1.67	15% (+/-)	Yes
Transportation: Total Medicaid Paid (TOS 26)	N/A	\$2,756,800	N/A	\$3,026,123	N/A	\$3,154,657	N/A	9.77	4.25	15% (+/-)	Yes
Transportation: Number of Users	N/A	6,561	N/A	6,559	N/A	6,302	N/A	-0.03	-3.92	15% (+/-)	Yes
Transportation: Avg Medicaid Pd per User	N/A	\$420	N/A	\$461	N/A	\$501	N/A	9.80	8.50	15% (+/-)	Yes
PCS: Total Medicaid Paid (TOS 30)	N/A	\$20,913,704	N/A	\$22,458,557	N/A	\$25,116,153	N/A	7.39	11.83	15% (+/-)	Yes
PCS: Number of Users	N/A	2,854	N/A	3,072	N/A	3,119	N/A	7.64	1.53	15% (+/-)	Yes
PCS: Avg Medicaid Pd per User	N/A	\$7,328	N/A	\$7,311	N/A	\$8,053	N/A	-0.23	10.15	15% (+/-)	Yes
Target Case Management: Total Medicaid Pd (TOS 31)	N/A	\$2,980,869	N/A	\$2,830,921	N/A	\$2,757,390	N/A	-5.03	-2.60	15% (+/-)	Yes
Target Case Management: Number of Users	N/A	4,280	N/A	4,647	N/A	4,507	N/A	8.58	-3.01	15% (+/-)	Yes
Target Case Management: Avg Medicaid Pd per User	N/A	\$696	N/A	\$609	N/A	\$612	N/A	-12.50	0.43	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
Rehab Services: Total Medicaid Pd (TOS 33)	N/A	\$0	N/A	\$291,082	N/A	\$191,103	N/A	Div by 0	-34.30	15% (+/-)	No
Rehab Services: Number of Users	N/A	0	N/A	405	N/A	339	N/A	Div by 0	-16.30	15% (+/-)	No
Rehab Services: Avg Medicaid Pd per User	N/A	Div by 0	N/A	\$719	N/A	\$564	N/A	Div by 0	-21.60	15% (+/-)	No
PT/OT/Speech/Hear: Total Medicaid Paid (TOS 34)	N/A	\$144,152	N/A	\$765	N/A	\$72	N/A	-99.50	-90.60	15% (+/-)	No
PT/OT/Speech/Hear: Number of Users	N/A	509	N/A	3	N/A	3	N/A	-99.40	0.00	15% (+/-)	Yes
PT/OT/Speech/Hear: Avg Medicaid Pd per User	N/A	\$283	N/A	\$255	N/A	\$24	N/A	-9.96	-90.60	15% (+/-)	No
Hospice: Total Medicaid Paid (TOS 35)	N/A	\$1,064,842	N/A	\$1,079,268	N/A	\$8,680,774	N/A	1.36	704.30	15% (+/-)	No
Hospice: Number of Users	N/A	152	N/A	154	N/A	218	N/A	1.32	41.56	15% (+/-)	No
Hospice: Avg Medicaid Pd per User	N/A	\$7,006	N/A	\$7,008	N/A	\$39,820	N/A	0.04	468.20	15% (+/-)	No
DME: Total Medicaid Paid (TOS 51)	N/A	\$11,956,648	N/A	\$15,232,503	N/A	\$16,818,247	N/A	27.40	10.41	15% (+/-)	Yes
DME: Number of Users	N/A	19,140	N/A	29,160	N/A	29,908	N/A	52.35	2.57	15% (+/-)	Yes
DME: Avg Medicaid Pd per User	N/A	\$625	N/A	\$522	N/A	\$562	N/A	-16.40	7.65	15% (+/-)	Yes
Residential Care: Total Medicaid Paid (TOS 52)	N/A	\$5,789,454	N/A	\$2,389,761	N/A	\$2,572,849	N/A	-58.70	7.66	15% (+/-)	Yes
Residential Care: Number of Users	N/A	553	N/A	97	N/A	91	N/A	-82.50	-6.19	15% (+/-)	Yes
Residential Care: Avg Medicaid Pd per User	N/A	\$10,469	N/A	\$24,637	N/A	\$28,273	N/A	135.30	14.76	15% (+/-)	Yes
Psych. Services: Total Medicaid Paid (TOS 53)	N/A	\$36,525,404	N/A	\$45,134,764	N/A	\$50,053,797	N/A	23.57	10.90	15% (+/-)	Yes
Psych. Services: Number of Users	N/A	16,728	N/A	17,206	N/A	17,824	N/A	2.86	3.59	15% (+/-)	Yes
Psych. Services: Avg Medicaid Pd per User	N/A	\$2,183	N/A	\$2,623	N/A	\$2,808	N/A	20.14	7.05	15% (+/-)	Yes
Adult Day Care: Total Medicaid Paid (TOS 54)	N/A	\$3,719,339	N/A	\$3,957,124	N/A	\$4,438,568	N/A	6.39	12.17	15% (+/-)	Yes
Adult Day Care: Number of Users	N/A	1,403	N/A	265	N/A	281	N/A	-81.10	6.04	15% (+/-)	Yes
Adult Day Care: Avg Medicaid Pd per User	N/A	\$2,651	N/A	\$14,933	N/A	\$15,796	N/A	463.30	5.78	15% (+/-)	Yes
<b>AVG FFS MEDICAID AMT PD/FFS ENROLLEE BY SELECTED MAX TOS</b>											
Inpatient Hospital (TOS=01)	N/A	\$570	N/A	\$591	N/A	\$722	N/A	3.77	22.15	15% (+/-)	No
Aged	N/A	\$274	N/A	\$252	N/A	\$275	N/A	-7.87	9.12	15% (+/-)	Yes
Disabled	N/A	\$1,530	N/A	\$1,559	N/A	\$2,044	N/A	1.92	31.12	15% (+/-)	No
Child	N/A	\$327	N/A	\$351	N/A	\$401	N/A	7.08	14.48	15% (+/-)	Yes
Adult	N/A	\$569	N/A	\$589	N/A	\$665	N/A	3.40	13.00	15% (+/-)	Yes
ILTC (TOS=02,04,05,07)	N/A	\$1,309	N/A	\$1,332	N/A	\$1,415	N/A	1.76	6.30	15% (+/-)	Yes
Aged	N/A	\$10,483	N/A	\$11,436	N/A	\$12,439	N/A	9.09	8.77	15% (+/-)	Yes
Disabled	N/A	\$1,943	N/A	\$1,891	N/A	\$1,861	N/A	-2.65	-1.61	15% (+/-)	Yes
Child	N/A	\$149	N/A	\$157	N/A	\$185	N/A	5.58	17.61	15% (+/-)	No
Adult	N/A	\$163	N/A	\$151	N/A	\$83	N/A	-7.51	-45.00	15% (+/-)	No
Drugs (TOS=16)	N/A	\$818	N/A	\$879	N/A	\$945	N/A	7.42	7.57	15% (+/-)	Yes
Aged	N/A	\$2,303	N/A	\$2,511	N/A	\$2,654	N/A	9.06	5.69	15% (+/-)	Yes
Disabled	N/A	\$2,695	N/A	\$2,941	N/A	\$3,104	N/A	9.12	5.55	15% (+/-)	Yes
Child	N/A	\$161	N/A	\$166	N/A	\$181	N/A	3.53	8.63	15% (+/-)	Yes
Adult	N/A	\$471	N/A	\$507	N/A	\$554	N/A	7.56	9.33	15% (+/-)	Yes
All Other Services	N/A	\$2,139	N/A	\$2,254	N/A	\$2,515	N/A	5.40	11.59	15% (+/-)	Yes
Aged	N/A	\$2,585	N/A	\$2,780	N/A	\$2,974	N/A	7.52	7.00	15% (+/-)	Yes
Disabled	N/A	\$5,122	N/A	\$5,498	N/A	\$6,164	N/A	7.34	12.11	15% (+/-)	Yes
Child	N/A	\$1,336	N/A	\$1,378	N/A	\$1,524	N/A	3.11	10.59	15% (+/-)	Yes
Adult	N/A	\$1,724	N/A	\$1,802	N/A	\$1,992	N/A	4.52	10.55	15% (+/-)	Yes
<b>% OF FFS ENROLLEES WITH CLAIMS BY SELECTED MAX TYPE OF SERVICE</b>											
% FFS Enrollees with IP Claims (TOS=01)	N/A	14.54	N/A	14.37	N/A	14.74	N/A	-1.18	2.58	15% (+/-)	Yes
Aged	N/A	19.81	N/A	19.03	N/A	20.45	N/A	-3.95	7.47	15% (+/-)	Yes
Disabled	N/A	20.46	N/A	19.82	N/A	20.59	N/A	-3.10	3.88	15% (+/-)	Yes
Child	N/A	10.33	N/A	10.28	N/A	10.27	N/A	-0.44	-0.18	15% (+/-)	Yes
Adult	N/A	18.69	N/A	19.02	N/A	19.63	N/A	1.73	3.25	15% (+/-)	Yes
% FFS Enrollees with ILTC Claims (TOS=02,04,05,07)	N/A	5.26	N/A	5.05	N/A	5.08	N/A	-4.01	0.51	15% (+/-)	Yes
Aged	N/A	47.74	N/A	47.35	N/A	47.72	N/A	-0.81	0.77	15% (+/-)	Yes
Disabled	N/A	5.89	N/A	5.81	N/A	5.66	N/A	-1.37	-2.61	15% (+/-)	Yes
Child	N/A	0.46	N/A	0.55	N/A	0.53	N/A	19.80	-2.37	15% (+/-)	Yes
Adult	N/A	0.29	N/A	0.27	N/A	0.28	N/A	-6.03	1.30	15% (+/-)	Yes
% FFS Enrollees with Drug Claims (TOS=16)	N/A	64.04	N/A	61.34	N/A	62.13	N/A	-4.22	1.29	15% (+/-)	Yes
Aged	N/A	88.26	N/A	87.76	N/A	87.68	N/A	-0.57	-0.08	15% (+/-)	Yes
Disabled	N/A	80.19	N/A	78.64	N/A	77.62	N/A	-1.92	-1.30	15% (+/-)	Yes
Child	N/A	55.74	N/A	51.75	N/A	53.23	N/A	-7.16	2.86	15% (+/-)	Yes

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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
Adult	N/A	63.32	N/A	62.87	N/A	63.28	N/A	-0.72	0.66	15% (+/-)	Yes
% FFS Enrollees with All Other Claims	N/A	86.09	N/A	93.77	N/A	96.00	N/A	8.92	2.39	15% (+/-)	Yes
Aged	N/A	83.70	N/A	84.28	N/A	84.49	N/A	0.69	0.25	15% (+/-)	Yes
Disabled	N/A	91.02	N/A	93.89	N/A	94.02	N/A	3.15	0.14	15% (+/-)	Yes
Child	N/A	85.97	N/A	95.19	N/A	97.97	N/A	10.72	2.91	15% (+/-)	Yes
Adult	N/A	83.53	N/A	93.53	N/A	96.84	N/A	11.96	3.55	15% (+/-)	Yes
Avg # IP Days per FFS User	N/A	5	N/A	5	N/A	6	N/A	-3.45	6.50	15% (+/-)	Yes
Aged	N/A	5	N/A	5	N/A	5	N/A	-7.01	4.96	15% (+/-)	Yes
Disabled	N/A	9	N/A	9	N/A	10	N/A	-5.92	8.47	15% (+/-)	Yes
Child	N/A	4	N/A	4	N/A	4	N/A	1.70	6.21	15% (+/-)	Yes
Adult	N/A	4	N/A	4	N/A	4	N/A	-2.61	-0.31	15% (+/-)	Yes
Avg # ILTC Days per FFS User	N/A	236	N/A	235	N/A	228	N/A	-0.36	-3.14	15% (+/-)	Yes
Aged	N/A	250	N/A	254	N/A	245	N/A	1.97	-3.78	15% (+/-)	Yes
Disabled	N/A	216	N/A	207	N/A	202	N/A	-4.32	-2.47	15% (+/-)	Yes
Child	N/A	123	N/A	106	N/A	123	N/A	-13.70	16.47	15% (+/-)	No
Adult	N/A	134	N/A	136	N/A	80	N/A	1.19	-41.10	15% (+/-)	No
<b>FFS EXPENDITURES AND USERS BY MAX PGM TYPE</b>											
FP: Total Medicaid Paid (Program Type 2)	N/A	\$2,631,554	N/A	\$2,162,145	N/A	\$3,011,456	N/A	-17.80	39.28	15% (+/-)	No
FP: Number of Users	N/A	8,995	N/A	6,079	N/A	6,185	N/A	-32.40	1.74	15% (+/-)	Yes
FP: Average Medicaid Pd per User	N/A	\$293	N/A	\$356	N/A	\$487	N/A	21.57	36.89	15% (+/-)	No
RHC: Total Medicaid Paid (Program Type 3)	N/A	\$3,508,512	N/A	\$3,793,635	N/A	\$4,079,489	N/A	8.13	7.54	15% (+/-)	Yes
RHC: Number of Users	N/A	11,236	N/A	11,707	N/A	11,895	N/A	4.19	1.61	15% (+/-)	Yes
RHC: Avg Medicaid Pd per User	N/A	\$312	N/A	\$324	N/A	\$343	N/A	3.78	5.84	15% (+/-)	Yes
FOHC: Total Medicaid Paid (Program Type 4)	N/A	\$2,985,985	N/A	\$3,930,338	N/A	\$4,647,248	N/A	31.63	18.24	15% (+/-)	No
FOHC: Number of Users	N/A	9,821	N/A	11,290	N/A	12,952	N/A	14.96	14.72	15% (+/-)	Yes
FOHC: Avg Medicaid Pd per User	N/A	\$304	N/A	\$348	N/A	\$359	N/A	14.50	3.07	15% (+/-)	Yes
IHS: Total Medicaid Pd (Program Type 5)	N/A	\$25,192,638	N/A	\$26,727,670	N/A	\$28,592,115	N/A	6.09	6.98	15% (+/-)	Yes
IHS: Number of Users	N/A	14,871	N/A	15,717	N/A	16,013	N/A	5.69	1.88	15% (+/-)	Yes
IHS: Avg Medicaid Pd per User	N/A	\$1,694	N/A	\$1,701	N/A	\$1,786	N/A	0.38	5.00	15% (+/-)	Yes
Section 1915(c) Waiver: Total Medicaid Paid (Program Types 6 and 7)	N/A	\$22,988,842	N/A	\$24,381,619	N/A	\$24,979,469	N/A	6.06	2.45	15% (+/-)	Yes
Section 1915(c) Waiver: Number of Users	N/A	6,129	N/A	6,486	N/A	6,375	N/A	5.83	-1.71	15% (+/-)	Yes
Section 1915(c) Waiver: Avg Medicaid Pd per User	N/A	\$3,751	N/A	\$3,759	N/A	\$3,918	N/A	0.22	4.24	15% (+/-)	Yes
<b>FFS COMMUNITY-BASED LONG-TERM CARE EXPENDITURES AND USERS</b>											
Total FFS CLTC Expenditures (all codes - overestimate)	N/A	N/A	N/A	N/A	N/A	\$74,395,135	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	18,761	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	\$3,965	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$4,601	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$4,655	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$1,004	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$1,840	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	16.47	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	51.96	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	52.51	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	2.64	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	10.12	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	\$54,825,685	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	8,544	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	\$6,417	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$11,105	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$10,595	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$1,004	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$1,840	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	7.50	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	18.60	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	14.88	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	2.64	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	10.12	N/A	N/A	N/A	15% (+/-)	No

2003-2005 MAX PSF VALIDATION TABLE  
STATE: MT

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	\$24,979,469	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	6,375	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	\$3,918	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$9,493	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$8,544	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$257	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$818	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	5.60	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	12.73	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	7.20	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	2.43	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	9.95	N/A	N/A	N/A	15% (+/-)	No