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2003-2005 MAX IP VALIDATION TABLE  
STATE: NM

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	61,644	N/A	54,981	N/A	57,650	N/A	-10.80	4.85	Yes
% Encounter Claims	N/A	52.02	N/A	50.37	N/A	54.38	N/A	-3.17	7.96	Yes
% 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	29,574	N/A	27,285	N/A	26,299	N/A	-7.74	-3.61	Yes
% Crossover	5-20	33.58	No	27.00	No	21.18	No	-19.60	-21.50	No
% Adjusted Claims	N/A	16.33	N/A	5.38	N/A	11.74	N/A	-67.00	118.00	No
% Standard Adjustments	> 1%	90.08	Yes	72.36	Yes	91.29	Yes	-19.70	26.15	No
Aver. Amt. Pd Adjust. ( include \$0)	N/A	\$3,464	N/A	\$7,989	N/A	\$7,172	N/A	130.60	-10.20	Yes
Total number of claims with missing Medicaid eligibility (excludes S-SCHIP only)	N/A	N/A	N/A	N/A	N/A	153	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	19,642	N/A	19,918	N/A	20,728	N/A	1.41	4.07	Yes
% Claims with> \$0 Paid	95-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with< \$0 Paid	0	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	N/A
Aver. Medicaid Amount Paid (claims with >\$0 paid)	\$2000 - \$7000	\$4,401	Yes	\$5,054	Yes	\$5,448	Yes	14.84	7.80	Yes
Aver. Medicaid Amt Paid per Covered Day (>\$0 paid and >0 days claims)	N/A	\$1,116	N/A	\$1,250	N/A	\$1,290	N/A	12.02	3.17	Yes
% Claims with TPL	>0 - 10	1.67	Yes	1.39	Yes	1.23	Yes	-17.30	-11.20	Yes
Aver. TPL Paid for claims with TPL	N/A	\$7,544	N/A	\$6,674	N/A	\$8,030	N/A	-11.50	20.32	No
% Claims with UB-92 Accommodation Codes	95-100	99.99	Yes	99.54	Yes	99.97	Yes	-0.46	0.44	Yes
Average # UB-92 Accom. Codes (at least 1 accom code)	>1	1.13	Yes	1.13	Yes	1.14	Yes	-0.18	1.37	Yes
% Claims with UB-92 Ancillary Codes	95-100	76.39	No	77.58	No	78.65	No	1.56	1.37	Yes
Average # UB-92 Ancillary Codes (at least 1 Ancillary code)	>3	7.68	Yes	7.80	Yes	8.14	Yes	1.48	4.34	Yes
Average LOS	2-<8	3.94	Yes	4.04	Yes	4.22	Yes	2.62	4.48	Yes
Average Covered Days (> 0 day)	2-<8	3.94	Yes	4.04	Yes	4.22	Yes	2.59	4.42	Yes
% Begin Date = Admit Date	95-100	99.71	Yes	99.48	Yes	99.60	Yes	-0.24	0.12	Yes
% IP Claims (MAX TOS 01)	95-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Family Planning Claims (pgm type=2)	>0-5	1.04	Yes	1.03	Yes	1.04	Yes	-0.91	0.76	Yes
% Claims with PDX	98-100	99.97	Yes	100.00	Yes	100.00	Yes	0.03	0.00	Yes
Average Number of DX Codes (at least 1 DX)	>=2	3.63	Yes	3.70	Yes	3.94	Yes	1.81	6.46	Yes
% Claims with PDX, where length=3	5-30	6.56	Yes	6.31	Yes	6.53	Yes	-3.94	3.51	Yes
% Claims with PDX, where length=4	15-75	19.56	Yes	17.55	Yes	18.50	Yes	-10.20	5.38	Yes
% Claims with PDX, where length=5	25-70	73.88	No	76.14	No	74.98	No	3.06	-1.53	Yes
% Claims with a procedure code	35-70	58.12	Yes	55.47	Yes	52.96	Yes	-4.56	-4.53	Yes
Average Number of Procedures for claims with at least 1 procedure code	>1	2.17	Yes	2.13	Yes	2.15	Yes	-1.95	1.05	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	99.87	N/A	100.00	N/A	-0.13	0.13	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: NM

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	73.92	No	74.66	No	76.24	No	0.99	2.12	Yes
% Claims Maternal Delivery Indicator	N/A	24.27	N/A	23.96	N/A	25.18	N/A	-1.26	5.09	Yes
% Claims Newborn Delivery Indicator (only for separate infant delivery claims using mother's ID)	N/A	28.95	N/A	30.44	N/A	29.62	N/A	5.15	-2.70	Yes
<b>Patient Status</b>										
% Home	75-90	89.76	Yes	89.98	Yes	90.20	No	0.25	0.25	Yes
% Transferred	1-10	9.00	Yes	8.28	Yes	7.57	Yes	-7.97	-8.63	Yes
% Still a Patient	>0 - 2	0.22	Yes	0.19	Yes	0.31	Yes	-12.90	64.37	No
% Died	>0 - 3	0.90	Yes	0.86	Yes	0.99	Yes	-4.73	15.20	No
<b>FFS Crossover Claims (Type of Claim=1, Crossover Claim Indicator=1)</b>										
Total Number of Claims	N/A	9,932	N/A	7,367	N/A	5,571	N/A	-25.80	-24.40	No
% Claims with > \$0 Paid	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
% Claims with < \$0 Paid	0	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	N/A
Aver. Medicaid Amount Paid (claims with >\$0 paid)	N/A	\$917	N/A	\$871	N/A	\$818	N/A	-4.99	-6.09	Yes
% Claims with TPL	N/A	0.41	N/A	0.04	N/A	0.09	N/A	-90.10	120.40	No
Aver. TPL Paid -claims with TPL	N/A	\$793	N/A	\$437	N/A	\$361	N/A	-44.90	-17.40	No
% Claims with UB-92 Accommodation Codes	95-100	99.90	Yes	100.00	Yes	100.00	Yes	0.10	0.00	Yes
Average # UB-92 Accom. Codes (at least 1 accom code)	>1	1.22	Yes	1.21	Yes	1.17	Yes	-0.70	-3.92	Yes
% Claims with UB-92 Ancillary Codes	95-100	94.86	No	93.24	No	90.45	No	-1.70	-2.99	Yes
Average # UB-92 Ancillary Codes (at least 1 Ancillary code)	>3	12.18	Yes	12.29	Yes	12.34	Yes	0.87	0.42	Yes
Average LOS	2-<8	5.38	Yes	5.32	Yes	5.12	Yes	-1.13	-3.63	Yes
% Begin Date = Admit Date	95-100	99.56	Yes	99.85	Yes	99.82	Yes	0.30	-0.03	Yes
% Claims with IP TOS	95-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with DX	98-100	99.53	Yes	100.00	Yes	100.00	Yes	0.48	0.00	Yes
Average Number of DX Codes (at least 1 DX)	>=2	6.63	Yes	6.68	Yes	6.82	Yes	0.71	2.06	Yes
% Claims with PDX, where length=3	5-30	11.43	Yes	11.27	Yes	13.35	Yes	-1.44	18.54	No
% Claims with PDX, where length=4	15-75	40.49	Yes	37.45	Yes	31.54	Yes	-7.50	-15.80	No
% Claims with PDX, where length=5	25-70	48.08	Yes	51.27	Yes	55.09	Yes	6.63	7.45	Yes
% Claims with a procedure code	35-70	52.52	Yes	50.58	Yes	42.63	Yes	-3.69	-15.70	No
Average Number of Procedures for claims with at least 1 procedure code	>1	2.36	Yes	2.36	Yes	2.29	Yes	-0.08	-2.74	Yes
% Claims with Procedures that have CPT-4 Indicator	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% Claims with Procedures that have ICD-9 Indicator	N/A	100.00	N/A	100.00	N/A	99.96	N/A	0.00	-0.04	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	99.92	N/A	100.00	N/A	99.92	N/A	0.08	-0.08	Yes
% Claims with DRG	>=90	0.04	No	17.67	No	39.76	No	43,783.00	125.00	No

2003-2005 MAX LT VALIDATION TABLE  
STATE: NM

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	141,938	N/A	140,919	N/A	143,683	N/A	-0.72	1.96	Yes
% Encounter Claims	N/A	23.19	N/A	17.83	N/A	22.24	N/A	-23.10	24.74	No
% Supplemental Claims	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
Total FFS Claims	N/A	109,022	N/A	115,800	N/A	111,735	N/A	6.22	-3.51	Yes
% Crossover	5-20	1.77	No	1.97	No	2.75	No	11.43	39.33	No
% Adjusted Claims	> 1%	19.24	Yes	40.02	Yes	37.72	Yes	108.00	-5.76	Yes
% Standard Adjustments	N/A	94.52	N/A	95.87	N/A	94.51	N/A	1.43	-1.42	Yes
Aver. Amt. Pd Adjust. ( include \$0)	N/A	\$1,851	N/A	\$2,172	N/A	\$2,454	N/A	17.34	12.96	Yes
Total number of claims with missing Medicaid eligibility (excludes S-SCHIP only)	N/A	N/A	N/A	N/A	N/A	129	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	107,094	N/A	113,518	N/A	108,667	N/A	6.00	-4.27	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	\$105	No	\$118	No	\$130	No	11.90	10.69	Yes
ICF/MR (TOS 05)	N/A	\$208	N/A	\$216	N/A	\$223	N/A	3.84	2.91	Yes
Aged/MH (TOS 02)	N/A	\$487	N/A	\$810	N/A	\$401	N/A	66.31	-50.50	No
IP Psych. < 21 (TOS 04)	N/A	\$211	N/A	\$217	N/A	\$227	N/A	2.84	4.55	Yes
% NF (TOS 07)	75-99	85.71	Yes	84.11	Yes	86.66	Yes	-1.87	3.03	Yes
% NF claims with NF Covered Days	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
Avg days for NF claims with Covered Days	N/A	17	N/A	16	N/A	16	N/A	-5.83	-1.68	Yes
% ICF/MR (TOS 05)	>0-20	6.87	Yes	8.23	Yes	8.38	Yes	19.82	1.87	Yes
% ICF/MR claims with ICF/MR Covered Days	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
Avg days for ICF/MR claims with Covered Days	N/A	12	N/A	10	N/A	10	N/A	-19.00	0.22	Yes
% Aged/MH (TOS 02)	>0-10	0.00	Yes	0.00	Yes	0.00	Yes	-62.30	56.70	No
% 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	10	N/A	21	N/A	20	N/A	113.50	-2.44	Yes
% IP Psych. < 21 (TOS 04)	>0-5	7.42	No	7.66	No	4.96	Yes	3.25	-35.30	No
% IP Psych. < 21 claims with IP Psych Covered Days	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
Avg days for IP Psych. < 21 claims with Covered Days	N/A	12	N/A	12	N/A	11	N/A	-2.68	-6.59	Yes
% Claims with Leave Days	1-20	3.11	Yes	0.44	No	0.00	No	-86.00	-100.00	No
% Claims with DX	95-100	11.08	No	11.02	No	23.77	No	-0.56	115.80	No
% Claims with DX, where length=3	5-30	12.85	Yes	12.01	Yes	8.76	Yes	-6.56	-27.00	No
% Claims with DX, where length=4	15-75	41.07	Yes	36.21	Yes	67.25	Yes	-11.80	85.74	No
% Claims with DX, where length=5	25-70	46.07	Yes	51.72	Yes	23.98	No	12.28	-53.60	No
<b>Patient Status</b>										
% Home	1-5	0.89	No	0.90	No	0.78	No	1.35	-13.50	Yes
% Still a Patient	8-98	97.53	Yes	97.96	Yes	98.00	Yes	0.44	0.04	Yes
% Died	>0-5	0.79	Yes	0.55	Yes	0.60	Yes	-30.90	9.70	Yes
<b>FFS Crossover Claims (Type of Claim=1, Crossover Claim Indicator=1)</b>										
Total Number of Claims	N/A	1,928	N/A	2,282	N/A	3,068	N/A	18.36	34.44	No
% Claims with> \$0 Paid	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
% Claims with< \$0 Paid	0	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	N/A

2003-2005 MAX LT VALIDATION TABLE  
STATE: NM

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	\$1,558	N/A	\$1,584	N/A	\$1,698	N/A	1.63	7.21	Yes
% NF (TOS 07)	75-99	96.84	Yes	97.59	Yes	98.31	Yes	0.78	0.73	Yes
% ICF/MR (TOS 05)	>0-20	0.00	No	0.00	No	0.00	No	Div by 0	Div by 0	N/A
% Aged/MH (TOS 02)	>0-10	2.85	Yes	2.23	Yes	1.24	Yes	-21.70	-44.60	No
% IP Psych. < 21 (TOS 04)	>0-5	0.31	Yes	0.18	Yes	0.46	Yes	-43.70	160.30	No
% Claims with DX	95-100	99.64	Yes	99.82	Yes	99.90	Yes	0.19	0.08	Yes
% Claims with DX, where length=3	5-30	12.75	Yes	10.14	Yes	11.13	Yes	-20.50	9.72	Yes
% Claims with DX, where length=4	15-75	52.00	Yes	51.80	Yes	45.58	Yes	-0.39	-12.00	Yes
% Claims with DX, where length=5	25-70	35.09	Yes	38.06	Yes	43.30	Yes	8.48	13.76	Yes
Patient Status										
% Home	1-5	11.77	No	11.13	No	10.53	No	-5.46	-5.41	Yes
% Still a Patient	8-98	57.26	Yes	66.48	Yes	67.18	Yes	16.09	1.05	Yes
% Died	>0-5	2.39	Yes	1.88	Yes	2.28	Yes	-21.00	21.08	No

2003-2005 MAX OT VALIDATION TABLE  
STATE: NM

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	12,705,381	N/A	12,936,239	N/A	16,709,172	N/A	1.82	29.17	No
% Encounter Claims (Claim Type=3)	N/A	44.17	N/A	37.19	N/A	33.51	N/A	-15.80	-9.89	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	25.85	N/A	26.49	N/A	34.98	N/A	2.46	32.07	No
Total FFS Claims Excluding Capitation Payments	N/A	3,808,908	N/A	4,698,715	N/A	5,264,168	N/A	23.36	12.03	Yes
% Crossover	5-20	26.45	No	20.35	No	18.76	Yes	-23.00	-7.82	Yes
% Adjusted Claims	> 1%	7.34	Yes	12.11	Yes	4.32	Yes	64.93	-64.30	No
% Standard Adjustments	N/A	88.25	N/A	75.89	N/A	90.74	N/A	-14.00	19.56	No
Aver. Amt. Pd Adjust. ( include \$0)	N/A	\$246	N/A	\$249	N/A	\$173	N/A	1.00	-30.50	No
% Claims(TOC 1,2) TOS 20: HMO Cap Payment	N/A	46.31	N/A	42.17	N/A	52.62	N/A	-8.93	24.77	No
% Claims(TOC 1,2) TOS 21: PHP Cap Payments	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% Claims(TOC 1,2) TOS 22: PCCM Cap Pay.	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
Average Paid per HMO Cap Clms (TOS 20)	\$75-\$300	\$285	Yes	\$305	No	\$194	Yes	7.02	-36.60	No
Average Paid per PHP Cap Clms (TOS 21)	\$20-\$250	Div by 0	No	Div by 0	No	Div by 0	No	Div by 0	Div by 0	N/A
Average Paid per PCCM Cap Clms (TOS 22)	3-5	Div by 0	No	Div by 0	No	Div by 0	No	Div by 0	Div by 0	N/A
Total number of claims with missing Medicaid eligibility (excludes S-SCHIP only)	N/A	N/A	N/A	N/A	N/A	32,245	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	2,801,570	N/A	3,742,421	N/A	4,276,522	N/A	33.58	14.27	Yes
% Claims with> \$0 Paid	>95%	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with< \$0 Paid	0	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	N/A
% Claims with Span Bill	N/A	23.10	N/A	18.05	N/A	14.91	N/A	-21.90	-17.40	No
% OPD Claims with Span Bill/ All OPD Claims(TOS 11)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% HH Claims with Span Bill/All HH Claims (TOS 13)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% Other Claims with Span Bills/All Other Claims	N/A	26.16	N/A	19.76	N/A	16.18	N/A	-24.50	-18.20	No
% Claims W/ Service Place 11- Office	50-90	32.18	No	19.02	No	19.80	No	-40.90	4.11	Yes
% Claims W/ Service Place 12 - Home	>0-5	17.64	No	36.01	No	36.28	No	104.10	0.77	Yes
% Claims W/ Service Place 21 - Hospital	>0-5	3.78	Yes	3.06	Yes	2.72	Yes	-19.10	-10.90	Yes
% Claims W/ Service Place 32 - NF	>0-5	0.55	Yes	0.34	Yes	0.37	Yes	-38.50	10.30	Yes
% Claims W/ Service Place 23 - ER	1-10	5.71	Yes	4.69	Yes	4.87	Yes	-17.90	3.99	Yes
% Claims w/ Service Place 22 - OPD	>0-10	8.82	Yes	6.78	Yes	6.11	Yes	-23.10	-9.94	Yes
% Claims W/ Service Place 99 - Unknown/Other	<5	11.18	No	12.40	No	12.07	No	10.96	-2.71	Yes
% Claims with TPL	>0 - 15	0.43	Yes	0.30	Yes	0.28	Yes	-30.70	-4.98	Yes
Aver. TPL Paid -claims with TPL	N/A	\$96	N/A	\$118	N/A	\$145	N/A	23.09	23.30	No
<b>PERCENT CLAIMS/MAX TOS</b>										
% claims MAX TOS 08: Physicians	10-35	9.14	No	7.02	No	6.79	No	-23.20	-3.25	Yes
% claims MAX TOS 09: Dental	2-20	7.39	Yes	4.93	Yes	5.05	Yes	-33.30	2.41	Yes
% claims MAX TOS 10: Other Practioner	0.5-8	1.66	Yes	0.84	Yes	0.76	Yes	-49.70	-9.61	Yes
% claims MAX TOS 11: OPD	3-25	11.57	Yes	8.58	Yes	7.70	Yes	-25.80	-10.30	Yes
% claims MAX TOS 12: Clinic	2-25	3.43	Yes	1.57	No	1.23	No	-54.10	-21.60	No
% claims MAX TOS 13: HH	>0-25	0.14	Yes	0.10	Yes	0.11	Yes	-33.80	16.85	No
% claims MAX TOS 15: Lab/Xray	4-20	11.81	Yes	9.27	Yes	9.17	Yes	-21.50	-1.15	Yes
% claims MAX TOS 16: Drugs	<3	0.74	Yes	0.50	Yes	0.47	Yes	-32.80	-5.97	Yes
% claims MAX TOS 19: Other Services	<25	11.51	Yes	19.88	Yes	22.25	Yes	72.70	11.91	Yes

2003-2005 MAX OT VALIDATION TABLE  
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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Change Within Expected Range
% claims MAX TOS 51: DME	>3	3.66	Yes	3.67	Yes	3.64	Yes	0.36	-0.81	Yes
% claims MAX TOS 26: Transportation	>1	9.12	Yes	6.04	Yes	5.05	Yes	-33.80	-16.40	No
% claims MAX TOS 24: Sterilizations	N/A	0.00	N/A	0.00	N/A	0.00	N/A	-5.44	54.60	No
% claims MAX TOS 25: Abortions	N/A	0.00	N/A	0.00	N/A	0.00	N/A	49.72	-100.00	No
% claims MAX TOS 30: PCS	>0	13.35	Yes	18.65	Yes	19.04	Yes	39.70	2.10	Yes
% claims MAX TOS 31: TCM	>0	2.64	Yes	2.17	Yes	1.38	Yes	-17.70	-36.30	No
% claims MAX TOS 33: Rehabilitation	>0	0.17	Yes	0.19	Yes	0.15	Yes	11.22	-20.30	No
% claims MAX TOS 34: PT/OT/hear/speech	>1	7.64	Yes	8.27	Yes	8.21	Yes	8.26	-0.76	Yes
% claims MAX TOS 35: Hospice	>0	0.11	Yes	0.13	Yes	0.13	Yes	15.53	-1.17	Yes
% claims MAX TOS 36: Nurse Midwife	N/A	0.34	N/A	0.26	N/A	0.23	N/A	-23.30	-10.80	Yes
% claims MAX TOS 37: Nurse Practitioner	N/A	0.45	N/A	0.38	N/A	0.43	N/A	-16.50	13.94	Yes
% claims MAX TOS 38: Private Nursing	N/A	0.01	N/A	0.01	N/A	0.00	N/A	-50.90	-45.90	No
% claims MAX TOS 39: Religious Non-Med.	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% claims MAX TOS 52: Residential Care	N/A	0.58	N/A	2.74	N/A	3.64	N/A	369.90	32.94	No
% claims MAX TOS 53: Psych. Services	>1	3.74	Yes	4.79	Yes	4.55	Yes	28.06	-4.95	Yes
% claims MAX TOS 54: Adult Day Care	>0	0.79	Yes	0.01	Yes	0.01	Yes	-98.40	0.28	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	\$223	N/A	\$171	N/A	\$153	N/A	-23.40	-10.40	Yes
08: Physicians	\$20-90	\$93	No	\$97	No	\$92	No	4.30	-4.71	Yes
09: Dental	\$10-60	\$57	Yes	\$58	Yes	\$53	Yes	2.10	-9.49	Yes
10: Other Practioner	\$10-100	\$44	Yes	\$54	Yes	\$52	Yes	23.92	-4.39	Yes
11: OPD	\$20-100	\$180	No	\$198	No	\$202	No	10.31	2.14	Yes
12: Clinic	\$20-100	\$86	Yes	\$142	No	\$148	No	65.30	4.31	Yes
13: HH	N/A	\$105	N/A	\$113	N/A	\$113	N/A	6.97	0.77	Yes
15: Lab/Xray	10-60	\$47	Yes	\$53	Yes	\$55	Yes	14.68	2.81	Yes
16: Drugs	10-60	\$12	Yes	\$13	Yes	\$12	Yes	3.15	-3.21	Yes
19: Other Services	N/A	\$477	N/A	\$182	N/A	\$148	N/A	-61.70	-18.90	No
51: DME	N/A	\$162	N/A	\$117	N/A	\$108	N/A	-27.60	-7.38	Yes
26: Transportation	N/A	\$43	N/A	\$45	N/A	\$47	N/A	4.44	4.90	Yes
30: PCS	N/A	\$487	N/A	\$233	N/A	\$192	N/A	-52.20	-17.50	No
31: Targeted Case Management	N/A	\$243	N/A	\$241	N/A	\$162	N/A	-0.77	-33.00	No
33: Rehabilitation	N/A	\$90	N/A	\$95	N/A	\$92	N/A	5.87	-2.99	Yes
34: PT/OT/speech/hear	N/A	\$26	N/A	\$23	N/A	\$23	N/A	-11.70	1.33	Yes
35: Hospice	N/A	\$1,985	N/A	\$1,959	N/A	\$2,074	N/A	-1.32	5.85	Yes
52: Residential Care	N/A	\$4,697	N/A	\$1,277	N/A	\$931	N/A	-72.80	-27.10	No
53: Psych. Services	N/A	\$103	N/A	\$81	N/A	\$78	N/A	-21.30	-3.71	Yes
54: Adult Day Care	N/A	\$911	N/A	\$207	N/A	\$183	N/A	-77.30	-11.50	Yes
PERCENT OF CLAIMS BY PROGRAM TYPE (claim type 1)										
% Family Planning (code 2)	N/A	1.39	N/A	0.91	N/A	0.80	N/A	-34.50	-12.10	Yes
% RHC (code 3)	N/A	0.03	N/A	0.02	N/A	0.02	N/A	-22.40	-27.20	No
% FQHC (code 4)	N/A	3.30	N/A	1.06	N/A	0.95	N/A	-67.80	-11.20	Yes
% IHS (code 5)	N/A	7.34	N/A	5.36	N/A	4.55	N/A	-26.90	-15.20	No
% Waiver (code 6,7)	N/A	10.70	N/A	22.66	N/A	25.61	N/A	111.90	12.99	Yes
AVERAGE EXPENDITURES BY PROGRAM										
Family Planning (code 2)	N/A	\$84	N/A	\$91	N/A	\$106	N/A	8.76	15.60	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 Change Within Expected Range
RHC (code 3)	N/A	\$59	N/A	\$59	N/A	\$62	N/A	-0.09	5.67	Yes
FQHC (code 4)	N/A	\$66	N/A	\$135	N/A	\$131	N/A	105.00	-2.73	Yes
IHS (code 5)	N/A	\$199	N/A	\$211	N/A	\$217	N/A	6.09	2.72	Yes
Waiver (code 6, 7)	N/A	\$830	N/A	\$316	N/A	\$262	N/A	-61.90	-17.00	No
% Claims with DX	> 60	81.85	Yes	54.85	No	54.69	No	-33.00	-0.30	Yes
% Claims with DX (MAX TOS 8, 11, 12)	85-100	99.82	Yes	99.36	Yes	99.54	Yes	-0.47	0.18	Yes
% Claims with 1 DX that have 2 DX	N/A	27.67	N/A	30.70	N/A	31.89	N/A	10.95	3.88	Yes
% Claims with DX, where length=3	5-25	3.74	No	4.03	No	7.38	Yes	7.82	83.01	No
% Claims with DX, where length=4	40-70	60.12	Yes	57.39	Yes	54.50	Yes	-4.55	-5.02	Yes
% Claims with DX, where length=5	20-55	36.14	Yes	38.57	Yes	38.11	Yes	6.74	-1.20	Yes
% OPD Claims with Service Code or UB-92/OPD Claims (TOS 11)	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
% HH Claims with Service Code or UB-92/HH Claims (TOS13)	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
% Other Claims with Service Codes /All Other Claims (Excluding OPD/HH)	98-100	98.16	Yes	98.52	Yes	98.57	Yes	0.36	0.05	Yes
% CPT-4 Service Code Indicator (code 01)/Claims with Service Codes	N/A	28.64	N/A	37.34	N/A	37.03	N/A	30.40	-0.84	Yes
% HCPCS (II & III) Service Codes Indicator (code 06)/Claims with Service Codes	N/A	12.72	N/A	62.43	N/A	62.83	N/A	390.90	0.64	Yes
% Other National Code Indicator (codes 2-5, 7- 9)/Claims with Service Codes	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% State Specific Serv. Indicator (10-87)/Claims with Service Codes	N/A	58.64	N/A	0.22	N/A	0.14	N/A	-99.60	-37.10	No
% CPT-4 Format Codes- 5n/Claims with CPT-4	98-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% HCPCS Format Codes Cnnnn or Cnnn /Claims with HCPCS	98-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with TOS 08 with Physician Specialty	N/A	96.46	N/A	96.59	N/A	99.96	N/A	0.13	3.49	Yes
PERCENT OF CLAIMS BY CLTC CODE										
CLTC 00: not a CLTC claim	N/A	N/A	N/A	N/A	N/A	47.85	N/A	N/A	N/A	N/A
CLTC Non-Waiver Claims (11-20)	N/A	N/A	N/A	N/A	N/A	26.66	N/A	N/A	N/A	N/A
CLTC 11: Non-Waiver Personal Care	N/A	N/A	N/A	N/A	N/A	19.04	N/A	N/A	N/A	N/A
CLTC 12: Non-Waiver PDN	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A
CLTC 13: Non-Waiver Adult Day	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A
CLTC 14: Non-Waiver HH	N/A	N/A	N/A	N/A	N/A	0.11	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	0.07	N/A	N/A	N/A	N/A
CLTC 17: Non-Waiver TCM	N/A	N/A	N/A	N/A	N/A	0.59	N/A	N/A	N/A	N/A
CLTC 18: Non-Waiver Transportation	N/A	N/A	N/A	N/A	N/A	4.68	N/A	N/A	N/A	N/A
CLTC 19: Non-Waiver Hospice	N/A	N/A	N/A	N/A	N/A	0.12	N/A	N/A	N/A	N/A
CLTC 20: Non-Waiver DME	N/A	N/A	N/A	N/A	N/A	2.04	N/A	N/A	N/A	N/A
CLTC Waiver Claims (30-40)	N/A	N/A	N/A	N/A	N/A	25.49	N/A	N/A	N/A	N/A
CLTC 30: Other Waiver	N/A	N/A	N/A	N/A	N/A	21.52	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	3.64	N/A	N/A	N/A	N/A
CLTC 36: Waiver Rehab	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A
CLTC 37: Waiver TCM	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A
CLTC 38: Waiver Transportation	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A
CLTC 39: Waiver Hospice	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A
CLTC 40: Waiver DME	N/A	N/A	N/A	N/A	N/A	0.32	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	1,007,338	N/A	956,294	N/A	987,646	N/A	-5.07	3.28	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	4.14	N/A	4.43	N/A	4.25	N/A	6.97	-4.03	Yes
% OPD Claims with Span Bill/ All OPD Claims(TOS 11)	N/A	0.12	N/A	0.02	N/A	0.00	N/A	-83.60	-83.70	No
% HH Claims with Span Bill/All HH Claims (TOS 13)	N/A	0.00	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A
% Other Claims with Span Bills/All Other Claims	N/A	4.42	N/A	4.58	N/A	4.39	N/A	3.60	-4.06	Yes
<b>PERCENT CLAIMS/MAX TOS (excluding 20-22)</b>										
% claims MAX TOS 08: Physicians	N/A	43.24	N/A	44.08	N/A	44.72	N/A	1.95	1.47	Yes
% claims MAX TOS 10: Other Practioner	N/A	3.51	N/A	3.22	N/A	2.85	N/A	-8.25	-11.30	Yes
% claims MAX TOS 11: OPD	N/A	6.52	N/A	3.31	N/A	3.27	N/A	-49.20	-1.14	Yes
% claims MAX TOS 12: Clinic	N/A	1.43	N/A	2.79	N/A	3.11	N/A	95.32	11.45	Yes
% claims MAX TOS 13: HH	N/A	0.00	N/A	0.00	N/A	0.00	N/A	-100.00	Div by 0	N/A
% claims MAX TOS 15: Lab/Xray	N/A	14.54	N/A	13.96	N/A	14.20	N/A	-4.02	1.77	Yes
% claims MAX TOS 19: Other Services	N/A	1.83	N/A	1.46	N/A	1.65	N/A	-20.60	13.24	Yes
% claims MAX TOS 51: DME	N/A	12.09	N/A	13.64	N/A	13.28	N/A	12.78	-2.63	Yes
% claims MAX TOS 26: Transportation	N/A	2.08	N/A	2.05	N/A	1.69	N/A	-1.58	-17.40	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	0.11	N/A	0.08	N/A	0.09	N/A	-21.30	0.78	Yes
% claims MAX TOS 34: PT/OT/hear/speech	N/A	1.11	N/A	1.01	N/A	0.91	N/A	-8.71	-9.89	Yes
% claims MAX TOS 35: Hospice	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% claims MAX TOS 52: Residential Care	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% claims MAX TOS 53: Psych. Services	N/A	5.09	N/A	5.30	N/A	5.28	N/A	4.14	-0.43	Yes
% claims MAX TOS 54: Adult Day Care	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
Average Amount Paid	N/A	\$32	N/A	\$42	N/A	\$30	N/A	29.86	-29.40	No
% Claims with DX	N/A	99.89	N/A	99.98	N/A	99.97	N/A	0.08	-0.01	Yes
% Claims with DX (MAX TOS 8, 11, 12)	85-100	99.99	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with 1 DX that have 2 DX	N/A	59.06	N/A	59.81	N/A	60.01	N/A	1.27	0.34	Yes
% Claims with DX, where length=3	5-25	12.23	Yes	12.41	Yes	11.39	Yes	1.42	-8.21	Yes
% Claims with DX, where length=4	40-70	42.14	Yes	42.33	Yes	42.29	Yes	0.46	-0.08	Yes
% Claims with DX, where length=5	20-55	45.62	Yes	45.22	Yes	46.29	Yes	-0.87	2.35	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	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A
% Other Claims with Service Codes/All Other Claims (Excluding OPD/HH)	98-100	91.73	No	89.73	No	89.66	No	-2.19	-0.08	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	81.36	N/A	77.85	N/A	76.93	N/A	-4.31	-1.18	Yes
% HCPCS (II & III) Service Codes Indicator (code 06)/Claims with Service Codes	N/A	18.56	N/A	22.05	N/A	22.98	N/A	18.82	4.24	Yes
% Other Codes Indicator /Claims with Service Codes	N/A	0.08	N/A	0.10	N/A	0.08	N/A	17.74	-13.30	Yes

2003-2005 MAX RX VALIDATION TABLE  
STATE: NM

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	4,351,031	N/A	4,142,191	N/A	4,614,633	N/A	-4.80	11.41	Yes
% Encounter Claims	N/A	52.61	N/A	48.90	N/A	77.24	N/A	-7.06	57.97	No
% Supplemental Claims	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
Total FFS Claims	N/A	2,061,864	N/A	2,116,744	N/A	1,050,071	N/A	2.66	-50.40	No
% Adjusted Claims	N/A	1.85	N/A	1.90	N/A	4.25	N/A	2.43	124.30	No
% Standard Adjustments	> 1%	98.81	Yes	99.77	Yes	99.87	Yes	0.97	0.10	Yes
Aver. Amt. Pd Adjust. ( include \$0)	N/A	\$70	N/A	\$75	N/A	\$58	N/A	6.81	-22.70	No
Total number of claims with missing Medicaid eligibility (excludes S-SCHIP only)	N/A	N/A	N/A	N/A	N/A	68,886	N/A	N/A	N/A	N/A
<b>FFS Claims (Type of Claim=1)</b>										
Total Number of Claims	N/A	2,061,864	N/A	2,116,744	N/A	1,050,071	N/A	2.66	-50.40	No
% 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	\$45	Yes	\$49	Yes	\$44	Yes	9.23	-10.80	Yes
% Claims with TPL	>0 - 15	1.50	Yes	1.50	Yes	1.96	Yes	0.01	31.02	No
Aver. TPL Paid for claims with TPL	N/A	\$48	N/A	\$47	N/A	\$44	N/A	-1.32	-7.17	Yes
% Family Planning Claims (program type=2)	N/A	2.22	N/A	2.67	N/A	4.14	N/A	20.10	55.11	No
% 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	99.96	Yes	99.63	Yes	99.62	Yes	-0.33	-0.01	Yes
% Drug Claims with Days Supply	>98	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with HICL	98-100	99.91	Yes	99.97	Yes	100.00	Yes	0.06	0.03	Yes
% Claims with Medispan	98-100	99.30	Yes	99.02	Yes	99.01	Yes	-0.28	-0.01	Yes
% Claims with AHFS	98-100	99.91	Yes	99.97	Yes	100.00	Yes	0.06	0.03	Yes
% Claims with Generic (GTC)	98-100	99.91	Yes	99.97	Yes	100.00	Yes	0.06	0.03	Yes
% Claims with GC3	98-100	99.91	Yes	99.97	Yes	100.00	Yes	0.06	0.03	Yes
<b>NDC Configuration Indicator</b>										
% Prescription (codes 0-3)	N/A	77.58	N/A	75.89	N/A	73.82	N/A	-2.17	-2.73	Yes
% Products (codes 4-6)	N/A	21.96	N/A	23.74	N/A	25.71	N/A	8.11	8.31	Yes
% HRI (code 7)	N/A	0.21	N/A	0.15	N/A	0.30	N/A	-32.20	104.40	No
% Claims with Smart Key	98-100	99.91	Yes	99.97	Yes	100.00	Yes	0.06	0.03	Yes
% OTC-Drug Class	N/A	13.94	N/A	14.22	N/A	17.29	N/A	2.01	21.58	No
% Prescription-Drug Class	N/A	85.97	N/A	85.75	N/A	82.71	N/A	-0.26	-3.54	Yes
% Multiple Source (Code Y)	N/A	55.24	N/A	57.38	N/A	63.37	N/A	3.88	10.43	Yes
% Single Source (Code N)	N/A	36.88	N/A	33.46	N/A	27.53	N/A	-9.27	-17.70	No

2003-2005 MAX PSF VALIDATION TABLE  
STATE: NM

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	502,532	N/A	523,975	N/A	530,733	N/A	4.27	1.29	10% (+/-)	Yes
Total Medicaid Amount Paid	N/A	\$1,989,660,615	N/A	\$2,163,564,897	N/A	\$2,211,473,614	N/A	8.74	2.21	15% (+/-)	Yes
% with no services (Code 0)	N/A	9.37	N/A	9.50	N/A	6.10	N/A	1.35	-35.80	N/A	N/A
% with FFS only claims (Code 1)	N/A	22.88	N/A	18.73	N/A	5.69	N/A	-18.10	-69.60	N/A	N/A
% with only cap claims (Code 2)	N/A	7.98	N/A	10.85	N/A	12.67	N/A	35.95	16.82	N/A	N/A
% with only encounter claims (Code 3)	N/A	0.01	N/A	0.01	N/A	0.06	N/A	-39.10	528.10	N/A	N/A
% with FFS and cap claims (Code 4)	N/A	1.73	N/A	4.39	N/A	12.89	N/A	153.10	193.50	N/A	N/A
% with cap and encounter claims only (Code 5)	N/A	43.07	N/A	40.70	N/A	39.49	N/A	-5.51	-2.97	N/A	N/A
% with FFS and encounter claims only (Code 6)	N/A	0.09	N/A	0.01	N/A	0.01	N/A	-92.70	-9.98	N/A	N/A
% with FFS, cap and encounter records (Code 7)	N/A	14.85	N/A	15.81	N/A	23.09	N/A	6.48	46.01	N/A	N/A
# with claims and missing Medicaid eligibility (excludes S-SCHIP only)	N/A	5,114	N/A	2,657	N/A	3,031	N/A	-48.00	14.08	N/A	N/A
% with claims and missing Medicaid eligibility (excludes S-SCHIP only)	<2%	1.02	Yes	0.51	Yes	0.57	Yes	-50.20	12.62	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	1,710	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	0.32	N/A	N/A	N/A	N/A	N/A
Expenditures for people missing Medicaid eligibility (excludes S-SCHIP only enrollees)	N/A	\$9,961,024	N/A	\$4,948,168	N/A	\$3,934,081	N/A	-50.30	-20.50	N/A	N/A
Expenditures for people with FFS claims and missing Medicaid eligibility (excludes S-SCHIP only)	N/A	N/A	N/A	N/A	N/A	\$2,022,723	N/A	N/A	N/A	N/A	N/A
<b>S-SCHIP ENROLLMENT</b>											
# with ONLY S-SCHIP enrollment	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	N/A	N/A
% with ONLY S-SCHIP enrollment	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A	N/A
# with ANY S-SCHIP enrollment	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	N/A	N/A
% with ANY S-SCHIP enrollment	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A	N/A
Total PYE ANY S-SCHIP enrollment	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	N/A	N/A
<b>Total Medicaid Enrollees (excludes people with missing Medicaid eligibility information or S-SCHIP only)</b>											
Total Medicaid Enrollees	N/A	497,418	N/A	521,318	N/A	527,702	N/A	4.81	1.23	10% (+/-)	Yes
Total Medicaid PYE (Person Years of Enrollment)	N/A	410,136	N/A	426,336	N/A	415,886	N/A	3.95	-2.45	10% (+/-)	Yes
# with any M-SCHIP enrollment (Medicaid enrollees)	N/A	19,995	N/A	22,743	N/A	29,159	N/A	13.74	28.21	N/A	N/A
Total PYE any M-SCHIP	N/A	11,158	N/A	11,789	N/A	12,833	N/A	5.66	8.85	N/A	N/A
<b>Eligibility Demographics</b>											
% Records with Valid SSN Format	>=95%	97.91	Yes	98.71	Yes	98.41	Yes	0.82	-0.30	10% (+/-)	Yes
% Records whose MSIS SSN passed High Group Test (Code 1)	>95%	N/A	No	N/A	No	98.10	No	N/A	N/A	10% (+/-)	No
% Records whose MSIS SSN failed High Group Test due to invalid AAA (Code 2)	N/A	N/A	N/A	N/A	N/A	0.05	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	0.26	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	11.15	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%	99.90	Yes	99.90	Yes	99.89	Yes	0.00	0.00	10% (+/-)	Yes
% with Valid 5 Digit Zip Code Format	>=95%	99.94	Yes	99.95	Yes	99.96	Yes	0.01	0.01	10% (+/-)	Yes
% Enrollees who Died During Year	0.1-3%	0.57	Yes	0.51	Yes	0.56	Yes	-10.30	9.43	10% (+/-)	Yes
% White	N/A	24.95	N/A	24.72	N/A	24.35	N/A	-9.07	-1.49	10% (+/-)	Yes
% Black	N/A	2.15	N/A	2.14	N/A	2.15	N/A	-659	0.84	10% (+/-)	Yes
% Native American/Alaskan Native	N/A	18.86	N/A	18.87	N/A	18.47	N/A	0.279	-2.08	10% (+/-)	Yes
% Asian	N/A	0.56	N/A	0.57	N/A	0.59	N/A	1.503	2.95	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%	2.15	Yes	2.11	Yes	54.43	No	-2.12	2,482.00	N/A	N/A
% Hispanic/Latino (included with race categories prior to 2005)	N/A	51.33	N/A	51.60	N/A	51.86	N/A	.5305	0.50	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%	4.05	Yes	3.95	Yes	3.92	Yes	-2.53	-0.71	10% (+/-)	Yes
% Age 0-20 Years	49-74%	64.67	Yes	63.65	Yes	62.58	Yes	-1.58	-1.67	10% (+/-)	Yes
% Age > 64 Years	5-18%	6.49	Yes	6.33	Yes	6.44	Yes	-2.38	1.64	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%	62.35	No	59.39	Yes	53.27	Yes	-4.74	-10.30	10% (+/-)	No

2003-2005 MAX PSF VALIDATION TABLE  
STATE: NM

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	47,566	N/A	49,360	N/A	51,253	N/A	3.77	3.84	10% (+/-)	Yes
Total EDB Dual PYE	N/A	42,259	N/A	43,837	N/A	45,769	N/A	3.73	4.41	15% (+/-)	Yes
% Age > 64 Years who are EDB Duals	>=90%	95.48	Yes	95.34	Yes	94.86	Yes	-0.15	-0.51	10% (+/-)	Yes
% MAX Aged Groups (11,21,31,41,51) who are EDB Duals	>=90%	96.05	Yes	96.76	Yes	96.54	Yes	0.74	-0.22	10% (+/-)	Yes
% MAX Disabled Groups (12,22,32,42,52) who are EDB Duals	30-55%	41.03	Yes	40.55	Yes	40.99	Yes	-1.16	1.07	10% (+/-)	Yes
% EDB Only (50)	<5%	4.40	Yes	1.87	Yes	1.86	Yes	-57.60	-0.56	N/A	N/A
% EDB QMB Only (51)	N/A	23.97	N/A	25.52	N/A	26.34	N/A	6.49	3.19	N/A	N/A
% EDB QMB Plus (52)	N/A	61.21	N/A	62.25	N/A	61.46	N/A	1.69	-1.26	N/A	N/A
% EDB SLMB Only (53)	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 SLMB Plus (54)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A	N/A
% EDB QDWI (55)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A	N/A
% EDB QI-1 (56)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A	N/A
% EDB QI-2 (57)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A	N/A
% EDB Other (58)	N/A	10.42	N/A	10.36	N/A	10.34	N/A	-0.52	-0.17	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	600	N/A	851	N/A	1,045	N/A	41.83	22.80	10% (+/-)	No
% Non-EDB Duals Without Valid SSN	N/A	0.50	N/A	0.00	N/A	0.10	N/A	-100.00	Div by 0	10% (+/-)	N/A
% Non-EDB Duals who are Children/Adults	N/A	2.83	N/A	6.23	N/A	3.06	N/A	119.80	-50.80	10% (+/-)	No
% EDB Duals with Spanish Language	N/A	11.69	N/A	11.90	N/A	12.13	N/A	1.75	1.93	15% (+/-)	Yes
% EDB Duals with EDB Date of Death During Year	6-10%	6.83	Yes	6.18	Yes	6.39	Yes	-9.45	3.38	15% (+/-)	Yes
% EDB Duals with Medicaid Reported HIC	N/A	94.94	N/A	97.61	N/A	97.37	N/A	2.81	-0.24	15% (+/-)	Yes
% EDB Duals with Medicaid reported HIC = Medicare HIC	N/A	97.87	N/A	98.11	N/A	98.46	N/A	0.24	0.35	15% (+/-)	Yes
TOTAL EDB DUAL ENROLLEES IN JUNE	N/A	44,755	N/A	46,473	N/A	48,249	N/A	3.84	3.82	10% (+/-)	Yes
<b>June Medicare Type</b>											
June % with Part A Medicare	N/A	1.23	N/A	1.35	N/A	1.56	N/A	9.81	16.01	15% (+/-)	No
June % with Part B Medicare	N/A	7.92	N/A	7.73	N/A	7.54	N/A	-2.37	-2.47	15% (+/-)	Yes
June % Part A/B Medicare	N/A	90.85	N/A	90.92	N/A	90.90	N/A	0.07	-0.03	15% (+/-)	Yes
<b>Original Reason for Medicare Entitlement</b>											
% Aged (Code 0)	N/A	54.65	N/A	53.59	N/A	52.45	N/A	-1.93	-2.14	15% (+/-)	Yes
% Disabled (Code 1)	N/A	43.46	N/A	44.58	N/A	45.69	N/A	2.59	2.49	15% (+/-)	Yes
% ESRD (Code 2)	N/A	0.95	N/A	0.97	N/A	0.87	N/A	2.58	-10.30	15% (+/-)	Yes
% Disabled with ESRD (Code 3)	N/A	0.94	N/A	0.85	N/A	0.99	N/A	-9.86	16.03	15% (+/-)	No
<b>Other Eligibility Characteristics (All Enrollees)</b>											
% MAX Aged Groups (11,21,31,41,51) >64 Years	>=99%	99.02	Yes	99.93	Yes	99.96	Yes	0.92	0.03	10% (+/-)	Yes
% MAX Disabled Groups (12,22,32,42,52) >64 Years	N/A	13.69	N/A	13.27	N/A	13.32	N/A	-3.07	0.37	10% (+/-)	Yes
% MAX Child Grps (14,16, 24, 34, 44, 48, 54) <21 Years	>=98%	100.00	Yes	99.99	Yes	100.00	Yes	0.00	0.00	10% (+/-)	Yes
% MAX Adult Groups (15,17,25,35,45,55) >20 Years	>=80%	93.07	Yes	93.47	Yes	93.69	Yes	0.43	0.24	10% (+/-)	Yes
% MAX 1115 expansion enrollees (MASBOE=51,52,54,55) with 1115 waiver enrollment (Waiver Type=1,5,6,A,F)	100%	N/A	N/A	N/A	N/A	100.00	No	N/A	N/A	N/A	N/A
% MAX 1115 waiver enrollees (Waiver Type=1,5,6,A,F) in MAX 1115 expansion group (MASBOE=51,52,54,55)	N/A	N/A	N/A	N/A	N/A	80.03	N/A	N/A	N/A	N/A	N/A
MAX Aged Total	N/A	24,647	N/A	24,932	N/A	25,472	N/A	1.16	2.17	10% (+/-)	Yes
11: Aged, Cash	N/A	9,703	N/A	9,638	N/A	9,542	N/A	-0.67	-1.00	10% (+/-)	Yes
21: Aged, MN	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
31: Aged, Poverty	N/A	7,909	N/A	8,382	N/A	8,822	N/A	5.98	5.25	10% (+/-)	Yes
41: Other Aged	N/A	7,035	N/A	6,912	N/A	7,108	N/A	-1.75	2.84	10% (+/-)	Yes
51: 1115 Aged	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Disabled Total	N/A	56,893	N/A	60,634	N/A	63,308	N/A	6.58	4.41	10% (+/-)	Yes
12: Disabled, Cash	N/A	48,925	N/A	51,390	N/A	53,075	N/A	5.04	3.28	10% (+/-)	Yes
22: Disabled, MN	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
32: Disabled, Poverty	N/A	5,250	N/A	6,423	N/A	7,258	N/A	22.34	13.00	10% (+/-)	No
42: Other Disabled	N/A	2,718	N/A	2,821	N/A	2,975	N/A	3.79	5.46	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	304,719	N/A	314,014	N/A	311,944	N/A	3.05	-0.66	10% (+/-)	Yes
14: AFDC Child, Cash	N/A	94,094	N/A	84,735	N/A	79,999	N/A	-9.95	-5.59	10% (+/-)	Yes

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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	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
34: Child Poverty	N/A	180,203	N/A	180,132	N/A	180,898	N/A	-0.04	0.43	10% (+/-)	Yes
44: Other Child	N/A	11,669	N/A	28,131	N/A	28,424	N/A	141.10	1.04	10% (+/-)	Yes
48: Foster Care Child	N/A	3,869	N/A	4,401	N/A	4,806	N/A	13.75	9.20	10% (+/-)	Yes
54: 1115 Child	N/A	14,884	N/A	16,615	N/A	17,817	N/A	11.63	7.23	10% (+/-)	Yes
MAX Adult Total	N/A	111,159	N/A	121,738	N/A	126,978	N/A	9.52	4.30	10% (+/-)	Yes
15: AFDC Adult, Cash	N/A	57,358	N/A	52,411	N/A	50,347	N/A	-8.62	-3.94	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	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
35: Adult, Poverty	N/A	7,977	N/A	8,251	N/A	8,425	N/A	3.44	2.11	10% (+/-)	Yes
45: Other Adult	N/A	6,195	N/A	18,197	N/A	21,765	N/A	193.70	19.61	10% (+/-)	No
55: 1115 Adult	N/A	39,629	N/A	42,879	N/A	46,441	N/A	8.20	8.31	10% (+/-)	Yes
<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	8,254	N/A	8,286	N/A	7,997	N/A	0.39	-3.49	N/A	N/A
% enrollees with any ILTC claims	N/A	1.66	N/A	1.59	N/A	1.52	N/A	-4.21	-4.66	N/A	N/A
% AGED enrollees with any ILTC claims	N/A	21.72	N/A	20.76	N/A	20.38	N/A	-4.43	-1.82	N/A	N/A
% DISABLED enrollees with any ILTC claims	N/A	3.34	N/A	3.12	N/A	3.03	N/A	-6.61	-2.70	N/A	N/A
% CHILD enrollees with any ILTC claims	N/A	0.33	N/A	0.39	N/A	0.28	N/A	18.37	-26.90	N/A	N/A
% ADULT enrollees with any ILTC claims	N/A	0.01	N/A	0.01	N/A	0.01	N/A	0.44	-39.00	N/A	N/A
<b>COMMUNITY LONG-TERM CARE STATUS</b>											
# enrollees with any CLTC claims (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	17,521	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	3.32	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	18.65	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	19.50	N/A	N/A	N/A	15% (+/-)	No
% CHILD enrollees with any CLTC claims (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	0.10	N/A	N/A	N/A	15% (+/-)	No
% ADULT enrollees with any CLTC claims (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	0.10	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	776	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	6,632	N/A	N/A	N/A	15% (+/-)	No
% enrolled in any Section 1915(c) waiver	N/A	N/A	N/A	N/A	N/A	1.26	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	7.00	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	7.61	N/A	N/A	N/A	15% (+/-)	No
% CHILD enrollees in Section 1915(c) waiver	N/A	N/A	N/A	N/A	N/A	0.01	N/A	N/A	N/A	15% (+/-)	No
% ADULT enrollees in Section 1915(c) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
# with Section 1915(c) waiver for Aged and Disabled (Code G)	N/A	N/A	N/A	N/A	N/A	2,732	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	25	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	3,703	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	172	N/A	N/A	N/A	15% (+/-)	No
# with Section 1915(c) waiver enrollment for unspecified or unknown populations (Code O)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
% of Section 1915(c) waiver enrollees with no waiver claim (Program Type 6 or 7)	<10%	N/A	No	N/A	No	2.11	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	8.03	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	32.61	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	80,294	N/A	N/A	N/A	15% (+/-)	No
% AGED enrollees with any 1115 waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% DISABLED enrollees with any 1115 waiver	N/A	N/A	N/A	N/A	N/A	0.45	N/A	N/A	N/A	15% (+/-)	No
% CHILD enrollees with any 1115 waiver	N/A	N/A	N/A	N/A	N/A	8.37	N/A	N/A	N/A	15% (+/-)	No
% ADULT enrollees with any 1115 waiver	N/A	N/A	N/A	N/A	N/A	42.46	N/A	N/A	N/A	15% (+/-)	No
% with any HMO/HIO enrollment	N/A	N/A	N/A	N/A	N/A	48.16	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	353,406	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	1.26	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	48.62	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	81.34	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	54.00	N/A	N/A	N/A	15% (+/-)	No
% with any HMO/HIO enrollment	N/A	N/A	N/A	N/A	N/A	100.00	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	3,140	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	51,402	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	31,081	N/A	33,838	N/A	32,824	N/A	8.87	-3.00	N/A	N/A
# with ANY Family Planning Only enrollment	N/A	47,056	N/A	50,383	N/A	51,307	N/A	7.07	1.83	N/A	N/A
# PYE ANY FP Only	N/A	32,833	N/A	34,249	N/A	33,114	N/A	4.31	-3.31	N/A	N/A
<i>Aliens with Restricted Benefits (Code 2)</i>											
# Aliens with ONLY restricted benefits	N/A	1,863	N/A	1,514	N/A	2,152	N/A	-18.70	42.14	N/A	N/A
# Aliens with ANY restricted benefits	N/A	1,889	N/A	1,526	N/A	2,181	N/A	-19.20	42.92	N/A	N/A
# PYE Aliens with ANY restricted benefits	N/A	183	N/A	143	N/A	213	N/A	-21.90	48.92	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	10,936	N/A	12,047	N/A	12,891	N/A	10.16	7.01	N/A	N/A
# EDB Duals with ANY restricted benefits enrollment	N/A	11,963	N/A	13,161	N/A	14,172	N/A	10.01	7.68	N/A	N/A
# PYE EDB Duals with ANY restricted benefits	N/A	9,614	N/A	10,688	N/A	11,633	N/A	11.17	8.85	N/A	N/A
% EDB Duals with ONLY restricted benefits enrollment	N/A	N/A	N/A	N/A	N/A	25.15	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	408,806	N/A	427,875	N/A	412,704	N/A	4.67	-3.55	15% (+/-)	Yes
June % Full Scope Benefits (Code 1)	>80%	87.91	Yes	87.80	Yes	87.09	Yes	-0.13	-0.81	15% (+/-)	Yes
June % Restricted Benefits Alien (Code 2)	<5%	0.04	Yes	0.03	Yes	0.05	Yes	-21.70	55.15	15% (+/-)	No
June % Restricted Benefits Dual (Code 3)	<5%	2.37	Yes	2.53	Yes	2.86	Yes	6.81	13.27	15% (+/-)	Yes
June % Restricted Benefits Pregnant (Code 4)	<5%	1.70	Yes	1.61	Yes	1.67	Yes	-5.12	3.36	15% (+/-)	Yes
June % Restricted Benefits Other (Code 5)	0%	0.00	No	0.00	No	0.00	No	-4.46	211.00	15% (+/-)	No
June % Restricted Benefits Family Planning (Code 6)	<5%	7.98	No	8.03	No	8.33	No	0.63	3.72	15% (+/-)	Yes
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%	5.08	Yes	4.33	Yes	4.78	Yes	-14.70	10.32	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	10,530	N/A	10,766	N/A	10,784	N/A	2.24	0.17	15% (+/-)	Yes
June # with M-SCHIP (Code 2) - Adult (>18 Years)	N/A	252	N/A	272	N/A	276	N/A	7.94	1.47	15% (+/-)	Yes
June # with S-SCHIP Flag (Code 3) - Child (<19 Years)	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
June # with S-SCHIP Flag (Code 3) - Adult (>18 Years)	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
<b>Medicaid Expenditures</b>											
Total Medicaid Amt Paid	N/A	\$1,979,699,591	N/A	\$2,158,616,729	N/A	\$2,207,539,533	N/A	9.04	2.27	15% (+/-)	Yes
Average Medicaid Amt Paid per Enrollee	N/A	\$3,980	N/A	\$4,141	N/A	\$4,183	N/A	4.04	1.03	15% (+/-)	Yes
25th Percentile	N/A	\$762	N/A	\$793	N/A	\$738	N/A	4.07	-6.94	15% (+/-)	Yes
50th Percentile (Median)	N/A	\$1,682	N/A	\$1,734	N/A	\$1,896	N/A	3.09	9.34	15% (+/-)	Yes
75th Percentile	N/A	\$3,270	N/A	\$3,378	N/A	\$3,179	N/A	3.30	-5.89	15% (+/-)	Yes
95th Percentile	N/A	\$13,302	N/A	\$13,704	N/A	\$13,918	N/A	3.02	1.56	15% (+/-)	Yes
99th Percentile	N/A	\$45,716	N/A	\$46,611	N/A	\$48,371	N/A	1.96	3.78	15% (+/-)	Yes
<b>AVG MEDICAID AMT PD/ENROLLEE BY MAX ELIGIBILITY GROUP</b>											
MAX Aged	N/A	\$11,621	N/A	\$11,864	N/A	\$12,024	N/A	2.09	1.35	15% (+/-)	Yes
MAX Disabled	N/A	\$14,736	N/A	\$14,836	N/A	\$15,162	N/A	0.68	2.19	10% (+/-)	Yes
MAX Child	N/A	\$1,972	N/A	\$2,127	N/A	\$2,035	N/A	7.89	-4.35	10% (+/-)	Yes
MAX Adult	N/A	\$2,286	N/A	\$2,426	N/A	\$2,416	N/A	6.10	-0.41	10% (+/-)	Yes
<b>AVG MEDICAID AMT PD/EDB DUAL ENROLLEE</b>											
All EDB Dual Enrollees	N/A	\$13,120	N/A	\$13,315	N/A	\$12,937	N/A	1.49	-2.85	15% (+/-)	Yes
MAX Aged	N/A	\$11,657	N/A	\$11,904	N/A	\$12,013	N/A	2.13	0.91	10% (+/-)	Yes
MAX Disabled	N/A	\$14,853	N/A	\$14,980	N/A	\$14,098	N/A	0.85	-5.89	10% (+/-)	Yes
<b>AVG MEDICAID AMT PD/LONG-TERM CARE ENROLLEE</b>											
Enrollees with LTC claims	N/A	N/A	N/A	N/A	N/A	\$36,702	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	\$34,122	N/A	N/A	N/A	15% (+/-)	No
Enrollees with LTC and CLTC claims (excluding CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	\$35,888	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	\$50,687	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	\$22,927	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	\$19,570	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	\$71,756	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	\$42,553	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	\$43,211	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	\$16,107	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	\$13,014	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for MR/DD (Code L)	N/A	N/A	N/A	N/A	N/A	\$64,024	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	\$29,997	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	\$4,259,393	N/A	\$4,367,185	N/A	\$4,126,218	N/A	2.53	-5.52	N/A	N/A
Average Medicaid Paid for ONLY FP Only enrollees	N/A	\$137	N/A	\$129	N/A	\$126	N/A	-5.82	-2.60	N/A	N/A
<i>Expenditures for Aliens with Restricted Benefits</i>											
Expend for Aliens with restricted benefits ONLY enrollment	N/A	\$5,874,462	N/A	\$4,943,518	N/A	\$7,170,501	N/A	-15.80	45.05	N/A	N/A
Avg Medicaid Paid for Alien enrollees with restricted benefits ONLY	N/A	\$3,153	N/A	\$3,265	N/A	\$3,332	N/A	3.55	2.05	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	\$8,866,329	N/A	\$7,625,346	N/A	\$7,218,750	N/A	-14.00	-5.33	N/A	N/A
Avg Medicaid Paid for EDB Duals with only restricted benefit enrollment	N/A	\$811	N/A	\$633	N/A	\$560	N/A	-21.90	-11.50	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	453,538	N/A	473,919	N/A	479,835	N/A	4.49	1.25	10% (+/-)	Yes
MAX Aged Total	N/A	17,325	N/A	16,933	N/A	17,066	N/A	-2.26	0.79	10% (+/-)	Yes
MAX Disabled Total	N/A	53,287	N/A	56,598	N/A	58,829	N/A	6.21	3.94	10% (+/-)	Yes
MAX Child Total	N/A	304,405	N/A	313,770	N/A	311,603	N/A	3.08	-0.69	10% (+/-)	Yes
MAX Adult Total	N/A	78,521	N/A	86,618	N/A	92,337	N/A	10.31	6.60	10% (+/-)	Yes
Total Medicaid PYE (Person Years of Enrollment)	N/A	374,988	N/A	388,966	N/A	379,516	N/A	3.73	-2.43	10% (+/-)	Yes
Total EDB Duals	N/A	36,432	N/A	37,073	N/A	38,115	N/A	1.76	2.81	10% (+/-)	Yes
MAX Aged	N/A	16,351	N/A	16,124	N/A	16,185	N/A	-1.39	0.38	10% (+/-)	Yes
MAX Disabled	N/A	19,736	N/A	20,554	N/A	21,469	N/A	4.15	4.45	10% (+/-)	Yes
<b>Total Medicaid Amount Paid</b>											
Total Medicaid Amt Paid	N/A	\$1,960,699,407	N/A	\$2,141,680,680	N/A	\$2,189,024,064	N/A	9.23	2.21	15% (+/-)	Yes
Average Medicaid Amt Paid per Enrollee	N/A	\$4,323	N/A	\$4,519	N/A	\$4,562	N/A	4.53	0.95	15% (+/-)	Yes
<b>AVG MEDICAID AMT PD/ENROLLEE BY MAX ELIGIBILITY GROUP</b>											
MAX Aged	N/A	\$16,223	N/A	\$17,194	N/A	\$17,692	N/A	5.98	2.89	15% (+/-)	Yes
MAX Disabled	N/A	\$15,667	N/A	\$16,841	N/A	\$16,267	N/A	1.11	2.69	10% (+/-)	Yes
MAX Child	N/A	\$1,970	N/A	\$2,127	N/A	\$2,033	N/A	7.92	-4.38	10% (+/-)	Yes
MAX Adult	N/A	\$3,120	N/A	\$3,310	N/A	\$3,211	N/A	6.10	-3.00	10% (+/-)	Yes
<b>AVG MEDICAID AMT PD/EDB DUAL ENROLLEE</b>											
All EDB Dual Enrollees	N/A	\$16,884	N/A	\$17,521	N/A	\$17,205	N/A	3.78	-1.80	15% (+/-)	Yes
MAX Aged	N/A	\$16,549	N/A	\$17,523	N/A	\$17,984	N/A	5.88	2.63	10% (+/-)	Yes
MAX Disabled	N/A	\$17,389	N/A	\$17,775	N/A	\$16,906	N/A	2.22	-4.89	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	74.79	N/A	74.96	N/A	74.17	N/A	0.22	-1.04	25% (+)	Yes
Total MC Enrollees	N/A	339,196	N/A	355,227	N/A	355,909	N/A	4.73	0.19	25% (+)	Yes
Aged	N/A	1,012	N/A	896	N/A	322	N/A	-11.50	-64.10	25% (+)	No
Disabled	N/A	29,288	N/A	30,342	N/A	30,805	N/A	3.60	1.53	25% (+)	Yes
Child	N/A	248,798	N/A	257,206	N/A	253,736	N/A	3.38	-1.35	25% (+)	Yes
Adult	N/A	60,098	N/A	66,783	N/A	71,046	N/A	11.12	6.38	25% (+)	Yes
% of MC Enrollees in HMO/HIO (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 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	86.44	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	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 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%	9.78	Yes	9.38	Yes	5.06	Yes	-4.10	-46.10	25% (+)	No
% EDB Duals in PHP only or PHP/PCCM only	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
% EDB Duals in PCCM only	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
% Section 1915(c) waiver enrollees ever enrolled in HMO/HIOs	N/A	N/A	N/A	N/A	N/A	32.61	N/A	N/A	N/A	25% (+)	No
% Section 1915(c) waiver enrollees in PHP only or PHP/PCCM only	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	25% (+)	No
% Section 1915(c) waiver enrollees in PCCM only	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	25% (+)	No
TOTAL ENROLLEES IN JUNE	N/A	373,707	N/A	390,062	N/A	374,727	N/A	4.38	-3.93	25% (+)	Yes
June % HMO/HIO only (Code 1)	N/A	70.23	N/A	70.62	N/A	66.49	N/A	0.56	-5.85	25% (+)	Yes

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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
June % Dental Plan only (Code 2)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % BHO only (Code 3)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % PCCM only (Code 4)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % Other MC only (Code 5)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % HMO/HIO & Dental (Code 6)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % HMO/HIO & BHO (Code 7)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % HMO/HIO & Other MC (Code 8)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % HMO/HIO & Dental & BHO (Code 9)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % Dental & PCCM (Code 10)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % BHO & PCCM (Code 11)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % Other MC & PCCM (Code 12)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % Dental & BHO & PCCM (Code 13)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % Dental & BHO (Code 14)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % Other Combinations (Code 15)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % FFS Only (Code 16)	N/A	29.77	N/A	29.38	N/A	33.51	N/A	-1.32	14.07	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	\$924,310,719	N/A	\$1,033,014,798	N/A	\$1,040,536,927	N/A	11.76	0.73	15% (+/-)	Yes
HMO/HIO	N/A	\$924,310,719	N/A	\$1,033,014,798	N/A	\$1,040,536,927	N/A	11.76	0.73	15% (+/-)	Yes
PHP	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
PCCM	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Ratio of Cap Claims to PME (person mo. enroll.) in MC	-9-2	1.04	Yes	1.04	Yes	1.59	Yes	0.08	52.18	15% (+/-)	No
HMO/HIO	-9-2	1.04	Yes	1.04	Yes	1.59	Yes	0.08	52.22	15% (+/-)	No
PHP	-9-2	Div by 0	No	Div by 0	No	0.00	No	Div by 0	Div by 0	15% (+/-)	N/A
PCCM	-9-2	Div by 0	No	Div by 0	No	Div by 0	No	Div by 0	Div by 0	15% (+/-)	N/A
Average Cap Payment for PME in MC	N/A	\$295	N/A	\$317	N/A	\$344	N/A	7.51	8.39	15% (+/-)	Yes
HMO/HIO	N/A	\$295	N/A	\$317	N/A	\$344	N/A	7.51	8.42	15% (+/-)	Yes
PHP	N/A	Div by 0	N/A	Div by 0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
PCCM	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
<b>Persons enrolled in PHP only or PHP/PCCM only</b>											
Total Cap Payments	N/A	\$0	N/A	\$0	N/A	\$9,908	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	\$320,581	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Count of Enrollees	N/A	0	N/A	0	N/A	13	N/A	Div by 0	Div by 0	15% (+/-)	N/A
<b>Persons enrolled in 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
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 ever enrolled in HMO/HIOs during year</b>											
Count of Enrollees	N/A	339,196	N/A	355,227	N/A	355,896	N/A	4.73	0.19	15% (+/-)	Yes
Aged	N/A	1,012	N/A	896	N/A	322	N/A	-11.50	-64.10	25% (+)	No
Disabled	N/A	29,288	N/A	30,342	N/A	30,800	N/A	3.60	1.51	25% (+)	Yes
Child	N/A	248,798	N/A	257,206	N/A	253,730	N/A	3.38	-1.35	25% (+)	Yes
Adult	N/A	60,098	N/A	66,783	N/A	71,044	N/A	11.12	6.38	25% (+)	Yes
Total Ever Enrolled in HMO/HIO PYE	N/A	261,014	N/A	271,365	N/A	252,094	N/A	3.97	-7.10	25% (+)	Yes
Total Cap Payments	N/A	\$924,310,719	N/A	\$1,033,014,798	N/A	\$1,040,527,019	N/A	11.76	0.73	15% (+/-)	Yes
Average Cap Payments	N/A	\$2,725	N/A	\$2,908	N/A	\$2,924	N/A	6.72	0.54	15% (+/-)	Yes
Aged	N/A	\$4,440	N/A	\$6,004	N/A	\$8,932	N/A	35.23	48.75	15% (+/-)	No
Disabled	N/A	\$8,611	N/A	\$9,144	N/A	\$10,175	N/A	6.19	11.28	15% (+/-)	Yes
Child	N/A	\$1,905	N/A	\$2,021	N/A	\$1,944	N/A	6.10	-3.83	15% (+/-)	Yes
Adult	N/A	\$3,222	N/A	\$3,449	N/A	\$3,252	N/A	7.03	-5.71	15% (+/-)	Yes
Total FFS Payments	N/A	\$258,765,453	N/A	\$273,000,799	N/A	\$275,691,332	N/A	5.50	0.99	15% (+/-)	Yes
Average FFS Payments per enrollee	N/A	\$762.88	N/A	\$769	N/A	\$775	N/A	0.74	0.80	15% (+/-)	Yes
Aged	N/A	\$6,684.75	N/A	\$5,220	N/A	\$4,650	N/A	-21.90	-10.90	15% (+/-)	Yes
Disabled	N/A	\$6,141.65	N/A	\$5,991	N/A	\$6,073	N/A	-2.46	1.38	15% (+/-)	Yes
Child	N/A	\$212.45	N/A	\$256	N/A	\$245	N/A	20.61	-4.39	15% (+/-)	Yes
Adult	N/A	\$320.59	N/A	\$309	N/A	\$352	N/A	-3.57	13.70	15% (+/-)	Yes
Total FFS Payments by Type of Service											
IP	N/A	\$26,335,926	N/A	\$32,828,167	N/A	\$42,284,013	N/A	24.65	28.80	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
ILTC	N/A	\$8,733,676	N/A	\$9,781,702	N/A	\$6,833,717	N/A	12.00	-30.10	15% (+/-)	No
Drug	N/A	\$6,420,837	N/A	\$6,317,316	N/A	\$4,802,846	N/A	-1.61	-24.00	15% (+/-)	No
All Other (excluding cap payments)	N/A	\$217,275,014	N/A	\$224,073,614	N/A	\$221,770,756	N/A	3.13	-1.03	15% (+/-)	Yes
Average FFS Payments by Type of Service											
IP	N/A	\$78	N/A	\$92	N/A	\$119	N/A	19.03	28.56	15% (+/-)	No
ILTC	N/A	\$26	N/A	\$28	N/A	\$19	N/A	6.95	-30.30	15% (+/-)	No
Drug	N/A	\$19	N/A	\$18	N/A	\$13	N/A	-6.05	-24.10	15% (+/-)	No
All Other (excluding cap payments)	N/A	\$641	N/A	\$631	N/A	\$623	N/A	-1.53	-1.21	15% (+/-)	Yes
<b>FFS INFORMATION FOR NON-DUAL MEDICAID ENROLLEES</b> (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) ---- <b>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	81,474	N/A	85,097	N/A	87,751	N/A	4.45	3.12	15% (+/-)	Yes
Total Non-Dual FFS Recipients	N/A	60,406	N/A	62,669	N/A	64,323	N/A	3.75	2.64	15% (+/-)	Yes
Total Non-Dual FFS PYE	N/A	55,664	N/A	57,945	N/A	57,812	N/A	4.10	-0.23	15% (+/-)	Yes
MAX Aged Total	N/A	684	N/A	551	N/A	656	N/A	-19.40	19.06	10% (+/-)	No
11: Aged, Cash	N/A	89	N/A	85	N/A	157	N/A	-4.49	84.71	10% (+/-)	No
21: Aged, MN	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
31: Aged, Poverty	N/A	386	N/A	187	N/A	243	N/A	-61.60	29.95	10% (+/-)	No
41: Other Aged	N/A	209	N/A	279	N/A	256	N/A	33.49	-8.24	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	6,899	N/A	8,288	N/A	8,178	N/A	20.13	-1.33	10% (+/-)	Yes
12: Disabled, Cash	N/A	6,298	N/A	7,349	N/A	7,254	N/A	16.69	-1.29	10% (+/-)	Yes
22: Disabled, MN	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
32: Disabled, Poverty	N/A	176	N/A	516	N/A	524	N/A	193.20	1.55	10% (+/-)	Yes
42: Other Disabled	N/A	425	N/A	423	N/A	400	N/A	-0.47	-5.44	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	55,604	N/A	56,562	N/A	57,870	N/A	1.72	2.31	10% (+/-)	Yes
14: AFDC Child, Cash	N/A	16,415	N/A	15,714	N/A	16,057	N/A	-4.27	2.18	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	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
34: Child Poverty	N/A	31,702	N/A	30,764	N/A	30,932	N/A	-2.96	0.55	10% (+/-)	Yes
44: Other Child	N/A	4,453	N/A	6,814	N/A	7,383	N/A	53.02	8.35	10% (+/-)	Yes
48: Foster Care Child	N/A	870	N/A	902	N/A	976	N/A	3.68	8.20	10% (+/-)	Yes
54: 1115 Child	N/A	2,164	N/A	2,368	N/A	2,522	N/A	9.43	6.50	10% (+/-)	Yes
MAX Adult Total	N/A	18,287	N/A	19,696	N/A	21,047	N/A	7.71	6.86	10% (+/-)	Yes
15: AFDC Adult, Cash	N/A	12,340	N/A	11,750	N/A	12,036	N/A	-4.78	2.43	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	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
35: Adult, Poverty	N/A	3,469	N/A	3,534	N/A	3,619	N/A	1.87	2.41	10% (+/-)	Yes
45: Other Adult	N/A	453	N/A	2,371	N/A	2,805	N/A	423.40	18.30	10% (+/-)	No
55: 1115 Adult	N/A	2,025	N/A	2,041	N/A	2,587	N/A	0.79	26.75	10% (+/-)	No
# Non-Dual FFS Enrollees w/ MSIS Dual Code/No EDB Confirmation	N/A	565	N/A	699	N/A	998	N/A	23.72	42.78	10% (+/-)	No
Total FFS Medicaid Amt Paid	N/A	\$207,071,136	N/A	\$229,734,933	N/A	\$232,775,871	N/A	10.94	1.32	15% (+/-)	Yes
Average FFS Medicaid Amt Paid per Non-Dual FFS Enrollee	N/A	\$2,542	N/A	\$2,700	N/A	\$2,653	N/A	6.22	-1.74	15% (+/-)	Yes
Avg FFS Medicaid Amt Paid per Non-Dual FFS Recipient (User of any service)	N/A	\$3,428	N/A	\$3,666	N/A	\$3,619	N/A	6.94	-1.28	15% (+/-)	Yes
<b>AVG FFS MEDICAID AMT PD/NON-DUAL FFS ENROLLEE BY MAX ELIG GRP</b>											
All Aged	N/A	\$9,830	N/A	\$9,396	N/A	\$10,569	N/A	-4.42	12.48	15% (+/-)	Yes
11: Aged, Cash	N/A	\$9,828	N/A	\$9,401	N/A	\$9,072	N/A	-4.35	-3.50	15% (+/-)	Yes
21: Aged, MN	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
31: Aged, Poverty	N/A	\$5,497	N/A	\$243	N/A	\$296	N/A	-95.60	21.70	15% (+/-)	No
41: Other Aged	N/A	\$17,833	N/A	\$15,529	N/A	\$21,237	N/A	-12.90	36.76	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	\$13,885	N/A	\$13,032	N/A	\$13,835	N/A	-6.15	6.17	15% (+/-)	Yes
12: Disabled, Cash	N/A	\$12,564	N/A	\$11,883	N/A	\$12,427	N/A	-5.42	4.58	15% (+/-)	Yes
22: Disabled, MN	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
32: Disabled, Poverty	N/A	\$6,856	N/A	\$9,208	N/A	\$11,941	N/A	34.31	29.69	15% (+/-)	No
42: Other Disabled	N/A	\$36,383	N/A	\$37,661	N/A	\$41,852	N/A	3.51	11.13	15% (+/-)	Yes
52: 1115 Disabled	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A

2003-2005 MAX PSF VALIDATION TABLE  
STATE: NM

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	\$1,309	N/A	\$1,438	N/A	\$1,282	N/A	9.83	-10.80	15% (+/-)	Yes
14: AFDC Child, Cash	N/A	\$1,168	N/A	\$1,128	N/A	\$1,098	N/A	-3.43	-2.69	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	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
34: Child, Poverty	N/A	\$1,440	N/A	\$1,645	N/A	\$1,446	N/A	14.26	-12.10	15% (+/-)	Yes
44: Other Child	N/A	\$803	N/A	\$1,205	N/A	\$1,038	N/A	50.05	-13.80	15% (+/-)	Yes
48: Foster Care Child	N/A	\$2,363	N/A	\$2,203	N/A	\$1,088	N/A	-6.76	-50.60	15% (+/-)	No
54: 1115 Child	N/A	\$1,089	N/A	\$1,187	N/A	\$1,233	N/A	8.96	3.89	15% (+/-)	Yes
All Adult	N/A	\$1,736	N/A	\$1,787	N/A	\$1,829	N/A	2.97	2.31	15% (+/-)	Yes
15: AFDC Adult, Cash	N/A	\$1,593	N/A	\$1,589	N/A	\$1,695	N/A	-0.22	6.68	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	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
35: Adult, Poverty	N/A	\$1,328	N/A	\$1,501	N/A	\$1,611	N/A	13.03	7.39	15% (+/-)	Yes
45: Other Adult	N/A	\$1,998	N/A	\$2,108	N/A	\$1,904	N/A	5.52	-9.66	15% (+/-)	Yes
55: 1115 Adult	N/A	\$3,250	N/A	\$3,053	N/A	\$2,671	N/A	-6.05	-12.50	15% (+/-)	Yes
<b>FFS EXPENDITURES AND USERS BY MAX TOS</b>											
IP: Total Medicaid Paid (TOS 01)	N/A	\$48,265,076	N/A	\$56,787,525	N/A	\$57,166,961	N/A	17.66	0.67	15% (+/-)	Yes
IP: Number of Users	N/A	8,308	N/A	8,707	N/A	8,797	N/A	4.80	1.03	15% (+/-)	Yes
IP: Average Medicaid Pd per User	N/A	\$5,809	N/A	\$6,522	N/A	\$6,498	N/A	12.27	-0.36	15% (+/-)	Yes
IP: Average Medicaid Covered Days Per User	N/A	5	N/A	5	N/A	5	N/A	2.88	-0.60	15% (+/-)	Yes
MH Aged: Total Medicaid Paid (TOS 02)	N/A	\$17,746	N/A	\$0	N/A	\$0	N/A	-100.00	Div by 0	15% (+/-)	N/A
MH Aged: Number of Users	N/A	4	N/A	0	N/A	0	N/A	-100.00	Div by 0	15% (+/-)	N/A
MH Aged: Avg Medicaid Pd per User	N/A	\$4,437	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
IP Psych < 21: Total Medicaid Paid (TOS 04)	N/A	\$14,195,311	N/A	\$15,148,244	N/A	\$9,156,472	N/A	6.71	-39.60	15% (+/-)	No
IP Psych < 21: Number of Users	N/A	530	N/A	593	N/A	458	N/A	11.89	-22.80	15% (+/-)	No
IP Psych<21 :Avg Medicaid Pd per User	N/A	\$26,784	N/A	\$25,545	N/A	\$19,992	N/A	-4.62	-21.70	15% (+/-)	No
ICF/MR: Total Medicaid Paid (TOS 05)	N/A	\$6,694,482	N/A	\$7,116,207	N/A	\$6,426,552	N/A	6.30	-9.69	15% (+/-)	Yes
ICF/MR: Number of Users	N/A	85	N/A	91	N/A	88	N/A	7.06	-3.30	15% (+/-)	Yes
ICF/MR: Avg Medicaid Pd per User	N/A	\$78,759	N/A	\$78,200	N/A	\$73,029	N/A	-0.71	-6.61	15% (+/-)	Yes
NF: Total Medicaid Paid (TOS 07)	N/A	\$18,530,594	N/A	\$19,692,365	N/A	\$22,249,197	N/A	6.27	12.98	15% (+/-)	Yes
NF Number of Users	N/A	594	N/A	550	N/A	566	N/A	-7.41	2.91	15% (+/-)	Yes
NF: Avg Medicaid Pd per User	N/A	\$31,196	N/A	\$35,804	N/A	\$39,310	N/A	14.77	9.79	15% (+/-)	Yes
Physician: Total Medicaid Paid (TOS 08)	N/A	\$12,073,477	N/A	\$13,568,119	N/A	\$14,179,664	N/A	12.38	4.51	15% (+/-)	Yes
Physician: Number of Users	N/A	24,746	N/A	24,481	N/A	27,473	N/A	-1.07	12.22	15% (+/-)	Yes
Physician: Avg Medicaid Pd per User	N/A	\$488	N/A	\$554	N/A	\$516	N/A	13.60	-6.87	15% (+/-)	Yes
Dental: Total Medicaid Paid (TOS 09)	N/A	\$5,846,084	N/A	\$5,774,459	N/A	\$6,043,713	N/A	-1.23	4.66	15% (+/-)	Yes
Dental: Number of Users	N/A	10,774	N/A	11,854	N/A	13,182	N/A	10.02	11.20	15% (+/-)	Yes
Dental: Avg Medicaid Pd per User	N/A	\$543	N/A	\$487	N/A	\$458	N/A	-10.20	-5.88	15% (+/-)	Yes
Other Practitioner: Total Medicaid Paid (TOS 10)	N/A	\$1,237,691	N/A	\$997,807	N/A	\$978,977	N/A	-19.40	-1.89	15% (+/-)	Yes
Other Practitioner: Number of Users	N/A	9,029	N/A	8,849	N/A	8,604	N/A	-1.99	-2.77	15% (+/-)	Yes
Other Practitioner: Avg Medicaid Pd per User	N/A	\$137	N/A	\$113	N/A	\$114	N/A	-17.70	0.91	15% (+/-)	Yes
OPD: Total Medicaid Paid (TOS 11)	N/A	\$45,056,456	N/A	\$48,986,896	N/A	\$50,097,251	N/A	8.72	2.27	15% (+/-)	Yes
OPD Number of Users	N/A	46,180	N/A	46,945	N/A	47,586	N/A	1.66	1.37	15% (+/-)	Yes
OPD: Avg Medicaid Pd per User	N/A	\$976	N/A	\$1,043	N/A	\$1,053	N/A	6.95	0.89	15% (+/-)	Yes
Clinic: Total Medicaid Paid (TOS 12)	N/A	\$3,773,254	N/A	\$4,171,716	N/A	\$4,090,102	N/A	10.56	-1.96	15% (+/-)	Yes
Clinic: Number of Users	N/A	5,925	N/A	6,110	N/A	6,129	N/A	3.12	0.31	15% (+/-)	Yes
Clinic: Avg Medicaid Pd per User	N/A	\$637	N/A	\$683	N/A	\$667	N/A	7.21	-2.26	15% (+/-)	Yes
HH: Total Medicaid Paid (TOS 13)	N/A	\$214,278	N/A	\$231,439	N/A	\$353,199	N/A	8.01	52.61	15% (+/-)	No
HH: Number of Users	N/A	235	N/A	244	N/A	262	N/A	3.83	7.38	15% (+/-)	Yes
HH: Avg Medicaid Pd per User	N/A	\$912	N/A	\$949	N/A	\$1,348	N/A	4.03	42.13	15% (+/-)	No
Lab/Xray: Total Medicaid Paid (TOS 15)	N/A	\$7,271,154	N/A	\$8,983,769	N/A	\$10,465,650	N/A	23.55	16.50	15% (+/-)	No
Lab/Xray: Number of Users	N/A	16,936	N/A	19,124	N/A	19,121	N/A	1.84	10.86	15% (+/-)	Yes
Lab/Xray: Avg Medicaid Pd per User	N/A	\$429	N/A	\$521	N/A	\$547	N/A	21.32	5.08	15% (+/-)	Yes
Drugs: Total Medicaid Paid (TOS 16)	N/A	\$10,988,295	N/A	\$13,923,179	N/A	\$13,288,942	N/A	26.71	-4.56	15% (+/-)	Yes
Drugs: Number of Users	N/A	33,457	N/A	35,808	N/A	35,397	N/A	7.03	-1.15	15% (+/-)	Yes
Drugs: Avg Medicaid Pd per User	N/A	\$328	N/A	\$389	N/A	\$375	N/A	18.39	-3.45	15% (+/-)	Yes
Other Services: Total Medicaid Paid (TOS 19)	N/A	\$6,509,924	N/A	\$5,988,414	N/A	\$6,579,101	N/A	-8.01	9.86	15% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: NM

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	6,447	N/A	6,242	N/A	6,575	N/A	-3.18	5.34	15% (+/-)	Yes
Other Services: Avg Medicaid Pd per User	N/A	\$1,010	N/A	\$959	N/A	\$1,001	N/A	-4.99	4.30	15% (+/-)	Yes
Transportation: Total Medicaid Paid (TOS 26)	N/A	\$3,181,630	N/A	\$3,460,970	N/A	\$3,568,968	N/A	8.78	3.12	15% (+/-)	Yes
Transportation: Number of Users	N/A	3,998	N/A	4,300	N/A	4,611	N/A	7.55	7.23	15% (+/-)	Yes
Transportation: Avg Medicaid Pd per User	N/A	\$796	N/A	\$805	N/A	\$774	N/A	1.14	-3.83	15% (+/-)	Yes
PCS: Total Medicaid Paid (TOS 30)	N/A	\$8,956,182	N/A	\$8,231,584	N/A	\$10,073,055	N/A	-8.09	22.37	15% (+/-)	No
PCS: Number of Users	N/A	592	N/A	487	N/A	698	N/A	-17.70	43.33	15% (+/-)	No
PCS: Avg Medicaid Pd per User	N/A	\$15,129	N/A	\$16,903	N/A	\$14,431	N/A	11.73	-14.60	15% (+/-)	Yes
Target Case Management: Total Medicaid Pd (TOS 31)	N/A	\$2,021,094	N/A	\$1,636,312	N/A	\$788,153	N/A	-19.00	-51.80	15% (+/-)	No
Target Case Management: Number of Users	N/A	1,442	N/A	1,398	N/A	1,200	N/A	-3.05	-14.20	15% (+/-)	Yes
Target Case Management: Avg Medicaid Pd per User	N/A	\$1,402	N/A	\$1,170	N/A	\$657	N/A	-16.50	-43.90	15% (+/-)	No
Rehab Services: Total Medicaid Pd (TOS 33)	N/A	\$12,257	N/A	\$14,146	N/A	\$13,009	N/A	15.41	-8.04	15% (+/-)	Yes
Rehab Services: Number of Users	N/A	35	N/A	44	N/A	37	N/A	25.71	-15.90	15% (+/-)	No
Rehab Services: Avg Medicaid Pd per User	N/A	\$350	N/A	\$322	N/A	\$352	N/A	-8.20	9.36	15% (+/-)	Yes
PT/OT/Speech/Hear: Total Medicaid Paid (TOS 34)	N/A	\$540,054	N/A	\$687,509	N/A	\$862,111	N/A	27.30	25.40	15% (+/-)	No
PT/OT/Speech/Hear: Number of Users	N/A	1,280	N/A	1,540	N/A	1,903	N/A	20.31	23.57	15% (+/-)	No
PT/OT/Speech/Hear: Avg Medicaid Pd per User	N/A	\$422	N/A	\$446	N/A	\$453	N/A	5.81	1.48	15% (+/-)	Yes
Hospice: Total Medicaid Paid (TOS 35)	N/A	\$641,546	N/A	\$683,155	N/A	\$1,005,039	N/A	6.49	47.12	15% (+/-)	No
Hospice: Number of Users	N/A	63	N/A	67	N/A	65	N/A	6.35	-2.99	15% (+/-)	Yes
Hospice: Avg Medicaid Pd per User	N/A	\$10,183	N/A	\$10,196	N/A	\$15,462	N/A	0.13	51.64	15% (+/-)	No
DME: Total Medicaid Paid (TOS 51)	N/A	\$4,017,663	N/A	\$4,298,489	N/A	\$4,331,950	N/A	6.99	0.78	15% (+/-)	Yes
DME: Number of Users	N/A	15,306	N/A	15,275	N/A	15,533	N/A	-0.20	1.69	15% (+/-)	Yes
DME: Avg Medicaid Pd per User	N/A	\$262	N/A	\$281	N/A	\$279	N/A	7.21	-0.90	15% (+/-)	Yes
Residential Care: Total Medicaid Paid (TOS 52)	N/A	\$3,578,925	N/A	\$5,975,406	N/A	\$7,272,654	N/A	66.96	21.71	15% (+/-)	No
Residential Care: Number of Users	N/A	72	N/A	109	N/A	120	N/A	51.39	10.09	15% (+/-)	Yes
Residential Care: Avg Medicaid Pd per User	N/A	\$49,707	N/A	\$54,820	N/A	\$60,605	N/A	10.29	10.55	15% (+/-)	Yes
Psych. Services: Total Medicaid Paid (TOS 53)	N/A	\$1,089,757	N/A	\$1,664,856	N/A	\$1,793,382	N/A	52.77	7.72	15% (+/-)	Yes
Psych. Services: Number of Users	N/A	2,275	N/A	2,806	N/A	2,818	N/A	23.34	0.43	15% (+/-)	Yes
Psych. Services: Avg Medicaid Pd per User	N/A	\$479	N/A	\$593	N/A	\$636	N/A	23.86	7.26	15% (+/-)	Yes
Adult Day Care: Total Medicaid Paid (TOS 54)	N/A	\$750,443	N/A	\$0	N/A	\$0	N/A	-100.00	Div by 0	15% (+/-)	N/A
Adult Day Care: Number of Users	N/A	82	N/A	0	N/A	0	N/A	-100.00	Div by 0	15% (+/-)	N/A
Adult Day Care: Avg Medicaid Pd per User	N/A	\$9,152	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
<b>AVG FFS MEDICAID AMT PD/NON-DUAL FFS ENROLLEE BY MAX TOS</b>											
Inpatient Hospital (TOS 01)	N/A	\$592	N/A	\$667	N/A	\$651	N/A	12.65	-2.38	15% (+/-)	Yes
Aged	N/A	\$628	N/A	\$224	N/A	\$469	N/A	-64.40	109.70	15% (+/-)	No
Disabled	N/A	\$3,115	N/A	\$3,007	N/A	\$3,159	N/A	-3.49	5.08	15% (+/-)	Yes
Child	N/A	\$278	N/A	\$369	N/A	\$329	N/A	32.98	-10.90	15% (+/-)	Yes
Adult	N/A	\$597	N/A	\$552	N/A	\$570	N/A	-7.50	3.32	15% (+/-)	Yes
ILTC (TOS=02,04,05,07)	N/A	\$484	N/A	\$493	N/A	\$431	N/A	1.86	-12.60	15% (+/-)	Yes
Aged	N/A	\$4,325	N/A	\$6,413	N/A	\$6,451	N/A	48.29	0.59	15% (+/-)	Yes
Disabled	N/A	\$3,926	N/A	\$3,293	N/A	\$3,329	N/A	-16.10	1.10	15% (+/-)	Yes
Child	N/A	\$169	N/A	\$197	N/A	\$110	N/A	16.61	-44.20	15% (+/-)	No
Adult	N/A	\$1	N/A	\$1	N/A	\$1	N/A	-43.60	93.25	15% (+/-)	No
Drugs (TOS=16)	N/A	\$135	N/A	\$164	N/A	\$151	N/A	21.31	-7.44	15% (+/-)	Yes
Aged	N/A	\$760	N/A	\$754	N/A	\$588	N/A	-0.84	-22.00	15% (+/-)	No
Disabled	N/A	\$950	N/A	\$1,038	N/A	\$1,052	N/A	9.26	1.39	15% (+/-)	Yes
Child	N/A	\$44	N/A	\$50	N/A	\$40	N/A	14.15	-19.10	15% (+/-)	No
Adult	N/A	\$81	N/A	\$105	N/A	\$93	N/A	30.44	-11.80	15% (+/-)	Yes
All Other Services	N/A	\$1,330	N/A	\$1,376	N/A	\$1,419	N/A	3.42	3.12	15% (+/-)	Yes
Aged	N/A	\$4,116	N/A	\$2,005	N/A	\$3,061	N/A	-51.30	52.67	15% (+/-)	No
Disabled	N/A	\$5,894	N/A	\$5,894	N/A	\$6,294	N/A	-3.38	10.54	15% (+/-)	Yes
Child	N/A	\$819	N/A	\$822	N/A	\$803	N/A	0.37	-2.31	15% (+/-)	Yes
Adult	N/A	\$1,057	N/A	\$1,130	N/A	\$1,165	N/A	6.82	3.09	15% (+/-)	Yes
<b>% OF NON-DUAL FFS ENROLLEES WITH CLAIMS BY SELECTED MAX TOS</b>											
% Non-Dual FFS Enrollees with IP Claims (TOS=01)	N/A	10.20	N/A	10.23	N/A	10.02	N/A	0.34	-2.02	15% (+/-)	Yes
Aged	N/A	14.33	N/A	7.44	N/A	7.77	N/A	-48.10	4.48	15% (+/-)	Yes
Disabled	N/A	17.31	N/A	14.93	N/A	15.52	N/A	-13.80	3.97	15% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: NM

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
Child	N/A	7.61	N/A	8.20	N/A	7.90	N/A	7.76	-3.71	15% (+/-)	Yes
Adult	N/A	15.22	N/A	14.17	N/A	13.81	N/A	-6.95	-2.49	15% (+/-)	Yes
% Non-Dual FFS Enrollees with ILTC Claims (TOS=02,04,05,07)	N/A	1.48	N/A	1.44	N/A	1.25	N/A	-2.75	-13.30	15% (+/-)	Yes
Aged	N/A	17.69	N/A	20.51	N/A	19.51	N/A	15.93	-4.86	15% (+/-)	Yes
Disabled	N/A	9.38	N/A	7.22	N/A	7.10	N/A	-23.10	-1.54	15% (+/-)	Yes
Child	N/A	0.78	N/A	0.90	N/A	0.66	N/A	16.10	-26.60	15% (+/-)	No
Adult	N/A	0.03	N/A	0.02	N/A	0.01	N/A	-44.30	-37.60	15% (+/-)	No
% with ratio of ILTC days/enroll days > 1	N/A	0.25	N/A	0.82	N/A	0.09	N/A	228.20	-88.80	15% (+/-)	No
% Non-Dual FFS Enrollees with Drug Claims (TOS=16)	N/A	41.06	N/A	42.08	N/A	40.34	N/A	2.47	-4.14	15% (+/-)	Yes
Aged	N/A	50.44	N/A	32.12	N/A	30.49	N/A	-36.30	-5.09	15% (+/-)	Yes
Disabled	N/A	57.23	N/A	55.08	N/A	58.29	N/A	-3.75	5.83	15% (+/-)	Yes
Child	N/A	38.61	N/A	38.75	N/A	36.87	N/A	0.37	-4.86	15% (+/-)	Yes
Adult	N/A	42.09	N/A	46.45	N/A	43.21	N/A	10.35	-6.97	15% (+/-)	Yes
% Non-Dual FFS Enrollees with All Other Claims	N/A	72.80	N/A	72.15	N/A	71.85	N/A	-0.90	-0.41	15% (+/-)	Yes
Aged	N/A	68.86	N/A	44.83	N/A	55.18	N/A	-34.90	23.10	15% (+/-)	No
Disabled	N/A	75.68	N/A	69.74	N/A	74.33	N/A	-7.85	6.59	15% (+/-)	Yes
Child	N/A	74.00	N/A	73.81	N/A	73.11	N/A	-0.26	-0.94	15% (+/-)	Yes
Adult	N/A	68.22	N/A	69.15	N/A	67.94	N/A	1.37	-1.75	15% (+/-)	Yes
Avg # IP Days per Non-Dual FFS User	N/A	5	N/A	5	N/A	5	N/A	2.88	-0.60	15% (+/-)	Yes
Aged	N/A	5	N/A	8	N/A	8	N/A	62.07	0.62	15% (+/-)	Yes
Disabled	N/A	15	N/A	16	N/A	15	N/A	5.15	-1.13	15% (+/-)	Yes
Child	N/A	3	N/A	3	N/A	3	N/A	3.69	-1.17	15% (+/-)	Yes
Adult	N/A	3	N/A	3	N/A	3	N/A	-2.12	-1.15	15% (+/-)	Yes
Avg # ILTC Days per Non-Dual FFS User	N/A	198	N/A	195	N/A	192	N/A	-1.47	-1.50	15% (+/-)	Yes
Aged	N/A	236	N/A	267	N/A	248	N/A	13.13	-7.34	15% (+/-)	Yes
Disabled	N/A	251	N/A	259	N/A	254	N/A	3.25	-1.73	15% (+/-)	Yes
Child	N/A	110	N/A	105	N/A	80	N/A	-4.44	-24.10	15% (+/-)	No
Adult	N/A	28	N/A	16	N/A	11	N/A	-42.90	-34.40	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	\$2,038,912	N/A	\$2,040,256	N/A	\$2,116,725	N/A	0.07	3.75	15% (+/-)	Yes
FP: Number of Users	N/A	5,026	N/A	5,383	N/A	5,387	N/A	7.10	0.07	15% (+/-)	Yes
FP: Average Medicaid Pd per User	N/A	\$406	N/A	\$379	N/A	\$393	N/A	-6.57	3.67	15% (+/-)	Yes
RHC: Total Medicaid Paid (Program Type 3)	N/A	\$10,910	N/A	\$8,984	N/A	\$6,188	N/A	-17.70	-31.10	15% (+/-)	No
RHC: Number of Users	N/A	64	N/A	54	N/A	47	N/A	-15.60	-13.00	15% (+/-)	Yes
RHC: Avg Medicaid Pd per User	N/A	\$170	N/A	\$166	N/A	\$132	N/A	-2.40	-20.90	15% (+/-)	No
FQHC: Total Medicaid Paid (Program Type 4)	N/A	\$2,377,396	N/A	\$2,277,363	N/A	\$2,305,731	N/A	-4.21	1.25	15% (+/-)	Yes
FQHC: Number of Users	N/A	5,389	N/A	5,363	N/A	5,436	N/A	-0.48	1.36	15% (+/-)	Yes
FQHC: Avg Medicaid Pd per User	N/A	\$441	N/A	\$425	N/A	\$424	N/A	-3.74	-0.11	15% (+/-)	Yes
IHS: Total Medicaid Pd (Program Type 5)	N/A	\$53,971,731	N/A	\$58,056,015	N/A	\$62,678,574	N/A	7.57	7.96	15% (+/-)	Yes
IHS: Number of Users	N/A	37,612	N/A	38,909	N/A	39,171	N/A	3.45	0.67	15% (+/-)	Yes
IHS: Avg Medicaid Pd per User	N/A	\$1,435	N/A	\$1,492	N/A	\$1,600	N/A	3.98	7.24	15% (+/-)	Yes
Section 1915(c) Waiver: Total Medicaid Paid (Program Types 6 and 7)	N/A	\$9,297,398	N/A	\$11,005,816	N/A	\$12,814,029	N/A	18.38	16.43	15% (+/-)	No
Section 1915(c) Waiver: Number of Users	N/A	289	N/A	288	N/A	328	N/A	-0.35	13.89	15% (+/-)	Yes
Section 1915(c) Waiver: Avg Medicaid Pd per User	N/A	\$32,171	N/A	\$38,215	N/A	\$39,067	N/A	18.79	2.23	15% (+/-)	Yes
<b>FFS COMMUNITY-BASED LONG-TERM CARE EXPENDITURES AND USERS</b>											
Total FFS CLTC Expenditures (all codes - overestimate)	N/A	N/A	N/A	N/A	N/A	\$28,970,528	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	3,803	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	\$7,618	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$7,757	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$7,867	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$1,057	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$3,834	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	4.33	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	33.84	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	41.98	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	0.20	N/A	N/A	N/A	15% (+/-)	No

2003-2005 MAX PSF VALIDATION TABLE  
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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
Adult	N/A	N/A	N/A	N/A	N/A	0.14	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	\$23,306,705	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	1,229	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	\$18,964	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$14,428	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$21,997	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$1,057	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$3,834	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	1.40	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	14.33	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	12.07	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	0.20	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	0.14	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	\$12,814,029	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	328	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	\$39,067	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$11,136	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$42,973	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$6,739	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
% Non-Dual FFS Enrollees with CLTC Claims (Section 1915(c) claims only - excludes CLTC Codes 11-20)	N/A	N/A	N/A	N/A	N/A	0.37	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	4.57	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	3.53	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	0.02	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
<b>FFS INFORMATION FOR DUAL MEDICAID ENROLLEES (excludes non-EDB duals, duals ever enrolled in HMO/HIOS, duals with only restricted benefits, duals with missing eligibility information, and prescription drug only enrollees)—NOTE: non-EDB duals and duals with restricted benefits were not excluded prior to 2001. Prescription drug only enrollees were NOT excluded prior to 2003.</b>											
Total EDB Dual FFS Enrollees	N/A	32,868	N/A	33,595	N/A	36,188	N/A	2.21	7.72	15% (+/-)	Yes
Number of EDB Dual FFS Recipients	N/A	30,797	N/A	31,276	N/A	32,873	N/A	1.56	5.11	15% (+/-)	Yes
Total EDB Dual FFS PYE	N/A	29,706	N/A	30,323	N/A	32,754	N/A	2.08	8.02	15% (+/-)	Yes
% EDB Only Dual (Code 50)	N/A	2.23	N/A	1.32	N/A	1.27	N/A	-40.90	-4.02	15% (+/-)	Yes
% OMB Only (Code 51)	N/A	0.97	N/A	1.14	N/A	1.20	N/A	16.79	5.47	15% (+/-)	Yes
% OMB Plus (Code 52)	N/A	82.55	N/A	83.45	N/A	83.73	N/A	1.09	0.33	15% (+/-)	Yes
% SLMB Only (Code 53)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	15% (+/-)	N/A
% SLMB Plus (Code 54)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	15% (+/-)	N/A
% QDWI (Code 55)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	15% (+/-)	N/A
% QI 1 (Code 56)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	15% (+/-)	N/A
% QI 2 (Code 57)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	15% (+/-)	N/A
% Other Type Dual (Code 58)	N/A	14.24	N/A	14.09	N/A	13.81	N/A	-1.04	-2.03	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	15,629	N/A	15,486	N/A	16,088	N/A	-0.92	3.89	10% (+/-)	Yes
11: Aged, Cash	N/A	8,812	N/A	8,764	N/A	9,110	N/A	-0.55	3.95	10% (+/-)	Yes
21: Aged, MN	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
31: Aged, Poverty	N/A	168	N/A	179	N/A	147	N/A	6.55	-17.90	10% (+/-)	No
41: Other Aged	N/A	6,649	N/A	6,543	N/A	6,831	N/A	-1.59	4.40	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	17,100	N/A	17,968	N/A	19,851	N/A	5.08	10.48	10% (+/-)	No
12: Disabled, Cash	N/A	14,875	N/A	15,477	N/A	16,902	N/A	4.05	9.21	10% (+/-)	Yes
22: Disabled, MN	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
32: Disabled, Poverty	N/A	450	N/A	622	N/A	865	N/A	38.22	39.07	10% (+/-)	No
42: Other Disabled	N/A	1,775	N/A	1,869	N/A	2,084	N/A	5.30	11.50	10% (+/-)	No
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	\$563,595,969	N/A	\$594,038,017	N/A	\$551,500,999	N/A	5.40	-7.16	15% (+/-)	Yes
Average FFS Medicaid Amt Paid per FFS Dual	N/A	\$17,147	N/A	\$17,682	N/A	\$15,240	N/A	3.12	-13.80	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	\$18,300	N/A	\$18,993	N/A	\$16,777	N/A	3.79	-11.70	15% (+/-)	Yes
<b>AVG FFS MEDICAID AMT PD/FFS DUAL BY MAX ELIGIBILITY GROUP</b>											
All Aged	N/A	\$16,462	N/A	\$17,294	N/A	\$15,952	N/A	5.05	-7.76	15% (+/-)	Yes
11: Aged, Cash	N/A	\$9,164	N/A	\$8,729	N/A	\$6,938	N/A	-4.74	-20.50	15% (+/-)	No
21: Aged, MN	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
31: Aged, Poverty	N/A	\$5,527	N/A	\$5,805	N/A	\$6,116	N/A	5.03	5.37	15% (+/-)	Yes
41: Other Aged	N/A	\$26,411	N/A	\$29,080	N/A	\$28,184	N/A	10.10	-3.08	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	\$17,889	N/A	\$18,126	N/A	\$14,829	N/A	1.32	-18.20	15% (+/-)	No
12: Disabled, Cash	N/A	\$14,225	N/A	\$14,354	N/A	\$10,985	N/A	0.90	-23.50	15% (+/-)	No
22: Disabled, MN	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
32: Disabled, Poverty	N/A	\$5,392	N/A	\$4,833	N/A	\$2,699	N/A	-10.40	-44.20	15% (+/-)	No
42: Other Disabled	N/A	\$51,768	N/A	\$53,786	N/A	\$51,036	N/A	3.90	-5.11	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	\$12,969,535	N/A	\$10,459,096	N/A	\$11,456,885	N/A	-19.40	9.54	15% (+/-)	Yes
IP: Number of Users	N/A	6,645	N/A	5,230	N/A	4,365	N/A	-21.30	-16.50	15% (+/-)	No
IP: Average Medicaid Pd per User	N/A	\$1,952	N/A	\$2,000	N/A	\$2,625	N/A	2.46	31.25	15% (+/-)	No
IP: Average Medicaid Covered Days Per User	N/A	7	N/A	7	N/A	7	N/A	-5.74	-0.63	15% (+/-)	Yes
MH Aged: Total Medicaid Paid (TOS 02)	N/A	\$43,426	N/A	\$69,524	N/A	\$54,933	N/A	60.10	-21.00	15% (+/-)	No
MH Aged: Number of Users	N/A	41	N/A	39	N/A	34	N/A	-4.88	-12.80	15% (+/-)	Yes
MH Aged: Avg Medicaid Pd per User	N/A	\$1,059	N/A	\$1,783	N/A	\$1,616	N/A	68.31	-9.37	15% (+/-)	Yes
IP Psych < 21: Total Medicaid Paid (TOS 04)	N/A	\$82,556	N/A	\$1,752	N/A	\$29,103	N/A	-97.90	1,561.00	15% (+/-)	No
IP Psych < 21: Number of Users	N/A	7	N/A	2	N/A	10	N/A	-71.40	400.00	15% (+/-)	No
IP Psych<21 :Avg Medicaid Pd per User	N/A	\$11,794	N/A	\$876	N/A	\$2,910	N/A	-92.60	232.20	15% (+/-)	No
ICF/MR: Total Medicaid Pd (TOS 05)	N/A	\$11,047,200	N/A	\$11,751,761	N/A	\$12,504,380	N/A	6.38	6.40	15% (+/-)	Yes
ICF/MR: Number of Users	N/A	162	N/A	169	N/A	179	N/A	4.32	5.92	15% (+/-)	Yes
ICF/MR: Avg Medicaid Pd per User	N/A	\$68,193	N/A	\$69,537	N/A	\$69,857	N/A	1.97	0.46	15% (+/-)	Yes
NF: Total Medicaid Paid (TOS 07)	N/A	\$147,761,570	N/A	\$163,236,216	N/A	\$175,465,725	N/A	10.47	7.49	15% (+/-)	Yes
NF Number of Users	N/A	6,040	N/A	5,913	N/A	5,964	N/A	-2.10	0.86	15% (+/-)	Yes
NF: Avg Medicaid Pd per User	N/A	\$24,464	N/A	\$27,606	N/A	\$29,421	N/A	12.85	6.57	15% (+/-)	Yes
Physician: Total Medicaid Paid (TOS 08)	N/A	\$7,435,919	N/A	\$6,541,449	N/A	\$5,573,148	N/A	-12.00	-14.80	15% (+/-)	Yes
Physician: Number of Users	N/A	24,287	N/A	24,511	N/A	25,541	N/A	0.92	4.20	15% (+/-)	Yes
Physician: Avg Medicaid Pd per User	N/A	\$306	N/A	\$267	N/A	\$218	N/A	-12.80	-18.20	15% (+/-)	No
Dental: Total Medicaid Paid (TOS 09)	N/A	\$3,967,456	N/A	\$3,029,301	N/A	\$2,966,552	N/A	-23.60	-2.07	15% (+/-)	Yes
Dental: Number of Users	N/A	7,775	N/A	5,198	N/A	5,459	N/A	-33.10	5.02	15% (+/-)	Yes
Dental: Avg Medicaid Pd per User	N/A	\$510	N/A	\$583	N/A	\$543	N/A	14.21	-6.75	15% (+/-)	Yes
Other Practitioner: Total Medicaid Pd (TOS 10)	N/A	\$767,237	N/A	\$616,649	N/A	\$500,141	N/A	-19.60	-18.90	15% (+/-)	No
Other Practitioner: Number of Users	N/A	9,702	N/A	9,408	N/A	9,329	N/A	-3.03	-0.84	15% (+/-)	Yes
Other Practitioner: Avg Medicaid Pd per User	N/A	\$79	N/A	\$66	N/A	\$54	N/A	-17.10	-18.20	15% (+/-)	No
OPD: Total Medicaid Paid (TOS 11)	N/A	\$3,258,972	N/A	\$3,380,348	N/A	\$3,745,797	N/A	3.72	10.81	15% (+/-)	Yes
OPD Number of Users	N/A	10,564	N/A	4,112	N/A	4,429	N/A	-61.10	7.71	15% (+/-)	Yes
OPD: Avg Medicaid Pd per User	N/A	\$308	N/A	\$822	N/A	\$846	N/A	166.50	2.88	15% (+/-)	Yes
Clinic: Total Medicaid Paid (TOS 12)	N/A	\$2,477,159	N/A	\$12,602,041	N/A	\$2,797,757	N/A	408.70	-77.80	15% (+/-)	No
Clinic: Number of Users	N/A	6,947	N/A	6,757	N/A	7,090	N/A	-2.73	4.93	15% (+/-)	Yes
Clinic: Avg Medicaid Pd per User	N/A	\$357	N/A	\$1,865	N/A	\$395	N/A	423.00	-78.80	15% (+/-)	No
HH: Total Medicaid Paid (TOS 13)	N/A	\$108,559	N/A	\$94,288	N/A	\$54,129	N/A	-13.10	-42.60	15% (+/-)	No
HH: Number of Users	N/A	76	N/A	61	N/A	33	N/A	-19.70	-45.90	15% (+/-)	No
HH: Avg Medicaid Pd per User	N/A	\$1,428	N/A	\$1,546	N/A	\$1,640	N/A	8.21	6.12	15% (+/-)	Yes
Lab/Xray: Total Medicaid Paid (TOS 15)	N/A	\$1,865,302	N/A	\$1,511,436	N/A	\$1,363,142	N/A	-19.00	-9.81	15% (+/-)	Yes
Lab/Xray: Number of Users	N/A	18,325	N/A	17,844	N/A	18,864	N/A	-2.62	5.72	15% (+/-)	Yes
Lab/Xray: Avg Medicaid Pd per User	N/A	\$102	N/A	\$85	N/A	\$72	N/A	-16.80	-14.70	15% (+/-)	Yes
Drugs: Total Medicaid Paid (TOS 16)	N/A	\$74,354,953	N/A	\$82,759,312	N/A	\$26,771,223	N/A	11.30	-67.70	15% (+/-)	No
Drugs: Number of Users	N/A	28,226	N/A	28,912	N/A	11,340	N/A	2.43	-60.80	15% (+/-)	No
Drugs: Avg Medicaid Pd per User	N/A	\$2,634	N/A	\$2,862	N/A	\$2,361	N/A	8.66	-17.50	15% (+/-)	No
Other Services: Total Medicaid Paid (TOS 19)	N/A	\$80,257,950	N/A	\$74,872,702	N/A	\$78,081,447	N/A	-6.71	4.29	15% (+/-)	Yes
Other Services: Number of Users	N/A	7,787	N/A	7,036	N/A	7,291	N/A	-9.64	3.62	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	\$10,307	N/A	\$10,641	N/A	\$10,709	N/A	3.25	0.64	15% (+/-)	Yes
Transportation: Total Medicaid Paid (TOS 26)	N/A	\$7,723,373	N/A	\$6,244,617	N/A	\$5,990,576	N/A	-19.10	-4.07	15% (+/-)	Yes
Transportation: Number of Users	N/A	8,194	N/A	7,965	N/A	8,246	N/A	-2.79	3.53	15% (+/-)	Yes
Transportation: Avg Medicaid Pd per User	N/A	\$943	N/A	\$784	N/A	\$726	N/A	-16.80	-7.34	15% (+/-)	Yes
PCS: Total Medicaid Paid (TOS 30)	N/A	\$121,049,034	N/A	\$110,906,006	N/A	\$107,205,162	N/A	-8.38	-3.34	15% (+/-)	Yes
PCS: Number of Users	N/A	6,782	N/A	6,264	N/A	6,826	N/A	-7.64	8.97	15% (+/-)	Yes
PCS: Avg Medicaid Pd per User	N/A	\$17,849	N/A	\$17,705	N/A	\$15,705	N/A	-0.80	-11.30	15% (+/-)	Yes
Target Case Management: Total Medicaid Pd (TOS 31)	N/A	\$1,280,298	N/A	\$1,208,640	N/A	\$940,690	N/A	-5.60	-22.20	15% (+/-)	No
Target Case Management: Number of Users	N/A	944	N/A	930	N/A	926	N/A	-1.48	-0.43	15% (+/-)	Yes
Target Case Management: Avg Medicaid Pd per User	N/A	\$1,356	N/A	\$1,300	N/A	\$1,016	N/A	-4.18	-21.80	15% (+/-)	No
Rehab Services: Total Medicaid Pd (TOS 33)	N/A	\$5,547	N/A	\$5,085	N/A	\$5,144	N/A	-8.33	1.16	15% (+/-)	Yes
Rehab Services: Number of Users	N/A	110	N/A	56	N/A	58	N/A	-49.10	3.57	15% (+/-)	Yes
Rehab Services: Avg Medicaid Pd per User	N/A	\$50	N/A	\$91	N/A	\$89	N/A	80.07	-2.33	15% (+/-)	Yes
PT/OT/Speech/Hear: Total Medicaid Paid (TOS 34)	N/A	\$246,922	N/A	\$48,813	N/A	\$35,111	N/A	-80.20	-28.10	15% (+/-)	No
PT/OT/Speech/Hear: Number of Users	N/A	868	N/A	623	N/A	649	N/A	-28.20	4.17	15% (+/-)	Yes
PT/OT/Speech/Hear: Avg Medicaid Pd per User	N/A	\$284	N/A	\$78	N/A	\$54	N/A	-72.50	-31.00	15% (+/-)	No
Hospice: Total Medicaid Paid (TOS 35)	N/A	\$5,349,685	N/A	\$8,556,803	N/A	\$10,023,182	N/A	59.95	17.14	15% (+/-)	No
Hospice: Number of Users	N/A	603	N/A	743	N/A	858	N/A	23.22	15.48	15% (+/-)	No
Hospice: Avg Medicaid Pd per User	N/A	\$8,872	N/A	\$11,517	N/A	\$11,682	N/A	29.81	1.44	15% (+/-)	Yes
DME: Total Medicaid Paid (TOS 51)	N/A	\$13,202,741	N/A	\$11,182,536	N/A	\$11,102,838	N/A	-15.30	-0.71	15% (+/-)	Yes
DME: Number of Users	N/A	14,062	N/A	16,408	N/A	17,159	N/A	16.68	4.58	15% (+/-)	Yes
DME: Avg Medicaid Pd per User	N/A	\$939	N/A	\$682	N/A	\$647	N/A	-27.40	-5.06	15% (+/-)	Yes
Residential Care: Total Medicaid Paid (TOS 52)	N/A	\$41,228,077	N/A	\$67,374,569	N/A	\$77,758,714	N/A	63.42	15.41	15% (+/-)	No
Residential Care: Number of Users	N/A	777	N/A	1,142	N/A	1,293	N/A	46.98	13.22	15% (+/-)	Yes
Residential Care: Avg Medicaid Pd per User	N/A	\$53,061	N/A	\$58,997	N/A	\$60,138	N/A	11.19	1.93	15% (+/-)	Yes
Psych. Services: Total Medicaid Paid (TOS 53)	N/A	\$6,622,587	N/A	\$7,919,187	N/A	\$8,014,733	N/A	19.58	1.21	15% (+/-)	Yes
Psych. Services: Number of Users	N/A	7,255	N/A	7,526	N/A	7,874	N/A	3.74	4.62	15% (+/-)	Yes
Psych. Services: Avg Medicaid Pd per User	N/A	\$913	N/A	\$1,052	N/A	\$1,018	N/A	15.27	-3.27	15% (+/-)	Yes
Adult Day Care: Total Medicaid Paid (TOS 54)	N/A	\$10,890,289	N/A	\$63,971	N/A	\$75,880	N/A	-99.40	18.62	15% (+/-)	No
Adult Day Care: Number of Users	N/A	1,024	N/A	18	N/A	23	N/A	-98.20	27.78	15% (+/-)	No
Adult Day Care: Avg Medicaid Pd per User	N/A	\$10,635	N/A	\$3,554	N/A	\$3,299	N/A	-66.60	-7.17	15% (+/-)	Yes
<b>AVG FFS MEDICAID AMT PD/FFS DUAL BY SELECTED TYPE OF SERVICE</b>											
Inpatient Hospital (TOS=01)	N/A	\$395	N/A	\$311	N/A	\$317	N/A	-21.10	1.69	15% (+/-)	Yes
Aged	N/A	\$331	N/A	\$247	N/A	\$271	N/A	-25.50	9.90	15% (+/-)	Yes
Disabled	N/A	\$453	N/A	\$366	N/A	\$355	N/A	-19.20	-3.07	15% (+/-)	Yes
ILTC (TOS=02,04,05,07)	N/A	\$4,836	N/A	\$5,211	N/A	\$5,197	N/A	7.76	-0.27	15% (+/-)	Yes
Aged	N/A	\$7,796	N/A	\$8,703	N/A	\$8,876	N/A	11.64	1.99	15% (+/-)	Yes
Disabled	N/A	\$2,169	N/A	\$2,241	N/A	\$2,280	N/A	3.32	1.74	15% (+/-)	Yes
Drugs (TOS=16)	N/A	\$2,262	N/A	\$2,463	N/A	\$740	N/A	8.89	-70.00	15% (+/-)	No
Aged	N/A	\$1,762	N/A	\$1,992	N/A	\$1,010	N/A	13.09	-49.30	15% (+/-)	No
Disabled	N/A	\$2,728	N/A	\$2,878	N/A	\$525	N/A	5.50	-81.70	15% (+/-)	No
All Other Services	N/A	\$9,655	N/A	\$9,697	N/A	\$8,987	N/A	0.43	-7.32	15% (+/-)	Yes
Aged	N/A	\$6,574	N/A	\$6,352	N/A	\$5,794	N/A	-3.38	-8.77	15% (+/-)	Yes
Disabled	N/A	\$12,539	N/A	\$12,640	N/A	\$11,668	N/A	0.81	-7.69	15% (+/-)	Yes
<b>% OF FFS DUALS WITH CLAIMS BY SELECTED TYPE OF SERVICE</b>											
% FFS Duals with IP Claims (TOS=01)	N/A	20.22	N/A	15.57	N/A	12.06	N/A	-23.00	-22.50	15% (+/-)	No
Aged	N/A	21.03	N/A	15.54	N/A	12.46	N/A	-26.10	-19.80	15% (+/-)	No
Disabled	N/A	19.53	N/A	15.56	N/A	11.73	N/A	-20.30	-24.60	15% (+/-)	No
% FFS Duals with ILTC Claims (TOS=02,04,05,07)	N/A	18.95	N/A	18.16	N/A	17.03	N/A	-4.19	-6.22	15% (+/-)	Yes
Aged	N/A	33.09	N/A	32.24	N/A	31.03	N/A	-2.57	-3.76	15% (+/-)	Yes
Disabled	N/A	6.18	N/A	6.15	N/A	5.89	N/A	-0.42	-4.16	15% (+/-)	Yes
% FFS Duals with Drug Claims (TOS=16)	N/A	85.88	N/A	86.06	N/A	31.34	N/A	0.21	-63.60	15% (+/-)	No
Aged	N/A	84.21	N/A	84.15	N/A	41.50	N/A	-0.07	-50.70	15% (+/-)	No
Disabled	N/A	87.59	N/A	87.85	N/A	23.13	N/A	0.29	-73.70	15% (+/-)	No
% FFS Duals with All Other Claims	N/A	91.40	N/A	90.14	N/A	89.02	N/A	-1.39	-1.23	15% (+/-)	Yes
Aged	N/A	89.81	N/A	88.24	N/A	87.02	N/A	-1.75	-1.39	15% (+/-)	Yes
Disabled	N/A	92.99	N/A	91.87	N/A	90.90	N/A	-1.20	-1.06	15% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: NM

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
Avg # IP Days per FFS Dual User (TOS 01)	N/A	7	N/A	7	N/A	7	N/A	-5.74	-0.63	15% (+/-)	Yes
Aged	N/A	7	N/A	6	N/A	6	N/A	-5.82	-3.19	15% (+/-)	Yes
Disabled	N/A	8	N/A	7	N/A	7	N/A	-6.41	1.41	15% (+/-)	Yes
Avg # ILTC Days per FFS Dual User (TOS 02, 04, 05, 07)	N/A	237	N/A	237	N/A	227	N/A	0.23	-4.31	15% (+/-)	Yes
Aged	N/A	234	N/A	237	N/A	226	N/A	1.42	-4.62	15% (+/-)	Yes
Disabled	N/A	251	N/A	238	N/A	231	N/A	-5.17	-3.16	15% (+/-)	Yes
<b>FFS EXPENDITURES AND USERS BY MAX PROGRAM TYPE</b>											
FP: Total Medicaid Paid (Program Type 2)	N/A	\$110,951	N/A	\$118,200	N/A	\$45,155	N/A	6.53	-61.80	15% (+/-)	No
FP: Number of Users	N/A	434	N/A	538	N/A	304	N/A	23.96	-43.50	15% (+/-)	No
FP: Average Medicaid Pd per User	N/A	\$256	N/A	\$220	N/A	\$149	N/A	-14.10	-32.40	15% (+/-)	No
RHC: Total Medicaid Paid (Program Type 3)	N/A	\$53,345	N/A	\$4,275	N/A	\$3,899	N/A	-92.00	-8.80	15% (+/-)	Yes
RHC: Number of Users	N/A	498	N/A	50	N/A	44	N/A	-90.00	-12.00	15% (+/-)	Yes
RHC: Avg Medicaid Pd per User	N/A	\$107	N/A	\$86	N/A	\$89	N/A	-20.20	3.64	15% (+/-)	Yes
FQHC: Total Medicaid Paid (Program Type 4)	N/A	\$1,970,671	N/A	\$11,971,805	N/A	\$2,298,849	N/A	507.50	-80.80	15% (+/-)	No
FQHC: Number of Users	N/A	4,830	N/A	4,873	N/A	5,363	N/A	0.89	10.06	15% (+/-)	Yes
FQHC: Avg Medicaid Pd per User	N/A	\$408	N/A	\$2,457	N/A	\$429	N/A	502.10	-82.60	15% (+/-)	No
IHS: Total Medicaid Pd (Program Type 5)	N/A	\$5,579,546	N/A	\$5,072,216	N/A	\$8,879,626	N/A	-9.09	75.06	15% (+/-)	No
IHS: Number of Users	N/A	3,724	N/A	3,859	N/A	4,072	N/A	3.63	5.52	15% (+/-)	Yes
IHS: Avg Medicaid Pd per User	N/A	\$1,498	N/A	\$1,314	N/A	\$2,181	N/A	-12.30	65.91	15% (+/-)	No
Section 1915(c) Waiver: Total Medicaid Paid (Program Types 6 and 7)	N/A	\$135,064,885	N/A	\$147,461,560	N/A	\$162,472,163	N/A	9.18	10.18	15% (+/-)	Yes
Section 1915(c) Waiver: Number of Users	N/A	3,619	N/A	3,662	N/A	4,274	N/A	1.19	16.71	15% (+/-)	No
Section 1915(c) Waiver: Avg Medicaid Pd per User	N/A	\$37,321	N/A	\$40,268	N/A	\$38,014	N/A	7.90	-5.60	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	\$296,420,569	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	22,229	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	\$13,335	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$8,750	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$16,816	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	61.43	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	59.58	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	63.66	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	\$269,731,454	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	11,020	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	\$24,477	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$15,490	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$30,587	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	30.45	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	27.67	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	33.06	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	\$162,472,163	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	4,276	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	\$37,996	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$14,941	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$54,413	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	11.82	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	11.05	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	12.58	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	114,342	N/A	118,692	N/A	123,939	N/A	3.80	4.42	15% (+/-)	Yes
# FFS Recipients	N/A	91,203	N/A	93,945	N/A	97,196	N/A	3.01	3.46	15% (+/-)	Yes
% FFS Enrollees who are Recipients	65-90%	79.76	Yes	79.15	Yes	78.42	Yes	-0.77	-0.92	15% (+/-)	Yes
% Aged who are Recipients	90-100%	92.16	Yes	91.03	Yes	89.19	No	-1.22	-2.02	15% (+/-)	Yes
% Disabled who are Recipients	85-100%	89.35	Yes	86.53	Yes	86.85	Yes	-3.15	0.37	15% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: NM

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%	75.13	No	75.08	No	74.33	No	-0.07	-1.01	15% (+/-)	Yes
% Adults who are Recipients	80-100%	70.28	No	71.37	No	69.99	No	1.56	-1.93	15% (+/-)	Yes
Total FFS PYE	N/A	85,370	N/A	88,268	N/A	90,566	N/A	3.40	2.60	15% (+/-)	Yes
MAX Aged Total	N/A	16,313	N/A	16,037	N/A	16,744	N/A	-1.69	4.41	10% (+/-)	Yes
11: Aged, Cash	N/A	8,901	N/A	8,849	N/A	9,267	N/A	-0.58	4.72	10% (+/-)	Yes
21: Aged, MN	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
31: Aged, Poverty	N/A	554	N/A	366	N/A	390	N/A	-33.90	6.56	10% (+/-)	Yes
41: Other Aged	N/A	6,858	N/A	6,822	N/A	7,087	N/A	-0.53	3.88	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	23,999	N/A	26,256	N/A	28,029	N/A	9.41	6.75	10% (+/-)	Yes
12: Disabled, Cash	N/A	21,173	N/A	22,826	N/A	24,156	N/A	7.81	5.83	10% (+/-)	Yes
22: Disabled, MN	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
32: Disabled, Poverty	N/A	626	N/A	1,138	N/A	1,389	N/A	81.79	22.06	10% (+/-)	No
42: Other Disabled	N/A	2,200	N/A	2,292	N/A	2,484	N/A	4.18	8.38	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	55,607	N/A	56,564	N/A	57,873	N/A	1.72	2.31	10% (+/-)	Yes
14: AFDC Child, Cash	N/A	16,415	N/A	15,714	N/A	16,058	N/A	-4.27	2.19	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	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
34: Child Poverty	N/A	31,704	N/A	30,766	N/A	30,933	N/A	-2.96	0.54	10% (+/-)	Yes
44: Other Child	N/A	4,453	N/A	6,814	N/A	7,383	N/A	53.02	8.35	10% (+/-)	Yes
48: Foster Care Child	N/A	870	N/A	902	N/A	977	N/A	3.68	8.32	10% (+/-)	Yes
54: 1115 Child	N/A	2,165	N/A	2,368	N/A	2,522	N/A	9.38	6.50	10% (+/-)	Yes
MAX Adult Total	N/A	18,423	N/A	19,835	N/A	21,293	N/A	7.66	7.35	10% (+/-)	Yes
15: AFDC Adult, Cash	N/A	12,425	N/A	11,821	N/A	12,134	N/A	-4.86	2.65	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	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
35: Adult, Poverty	N/A	3,477	N/A	3,550	N/A	3,632	N/A	2.10	2.31	10% (+/-)	Yes
45: Other Adult	N/A	468	N/A	2,401	N/A	2,865	N/A	413.00	19.33	10% (+/-)	No
55: 1115 Adult	N/A	2,053	N/A	2,063	N/A	2,662	N/A	0.49	29.04	10% (+/-)	No
Total FFS Medicaid Amt Paid	N/A	\$770,667,105	N/A	\$823,772,950	N/A	\$784,276,870	N/A	6.89	-4.79	15% (+/-)	Yes
Average FFS Medicaid Amt Paid per FFS Enrollee	N/A	\$6,740	N/A	\$6,940	N/A	\$6,328	N/A	2.97	-8.83	15% (+/-)	Yes
Average FFS Medicaid Amt Paid per FFS Recipient (User of any svc)	N/A	\$8,450	N/A	\$8,769	N/A	\$8,069	N/A	3.77	-7.98	15% (+/-)	Yes
<b>AVG FFS MEDICAID AMT PD/FFS ENROLLEE BY MAX ELIGIBILITY GROUP</b>											
All Aged	N/A	\$16,184	N/A	\$17,022	N/A	\$15,741	N/A	5.18	-7.53	15% (+/-)	Yes
11: Aged, Cash	N/A	\$9,170	N/A	\$8,735	N/A	\$6,974	N/A	-4.74	-20.20	15% (+/-)	No
21: Aged, MN	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
31: Aged, Poverty	N/A	\$5,506	N/A	\$2,963	N/A	\$2,490	N/A	-46.20	-16.00	15% (+/-)	No
41: Other Aged	N/A	\$26,150	N/A	\$28,526	N/A	\$27,933	N/A	9.09	-2.08	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	\$16,738	N/A	\$16,518	N/A	\$14,539	N/A	-1.32	-12.00	15% (+/-)	Yes
12: Disabled, Cash	N/A	\$13,731	N/A	\$13,558	N/A	\$11,418	N/A	-1.26	-15.80	15% (+/-)	No
22: Disabled, MN	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
32: Disabled, Poverty	N/A	\$5,803	N/A	\$6,817	N/A	\$6,186	N/A	17.46	-9.26	15% (+/-)	Yes
42: Other Disabled	N/A	\$48,796	N/A	\$50,810	N/A	\$49,557	N/A	4.13	-2.46	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	\$1,312	N/A	\$1,439	N/A	\$1,283	N/A	9.72	-10.80	15% (+/-)	Yes
14: AFDC Child, Cash	N/A	\$1,168	N/A	\$1,128	N/A	\$1,098	N/A	-3.43	-2.68	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	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
34: Child, Poverty	N/A	\$1,442	N/A	\$1,647	N/A	\$1,448	N/A	14.16	-12.10	15% (+/-)	Yes
44: Other Child	N/A	\$803	N/A	\$1,205	N/A	\$1,038	N/A	50.05	-13.80	15% (+/-)	Yes
48: Foster Care Child	N/A	\$2,363	N/A	\$2,203	N/A	\$1,108	N/A	-6.76	-49.70	15% (+/-)	No
54: 1115 Child	N/A	\$1,105	N/A	\$1,187	N/A	\$1,233	N/A	7.40	3.89	15% (+/-)	Yes
All Adult	N/A	\$1,738	N/A	\$1,800	N/A	\$1,828	N/A	3.57	1.57	15% (+/-)	Yes
15: AFDC Adult, Cash	N/A	\$1,595	N/A	\$1,606	N/A	\$1,697	N/A	0.67	5.71	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

2003-2005 MAX PSF VALIDATION TABLE  
STATE: NM

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
25: AFDC Adult, MN	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
35: Adult, Poverty	N/A	\$1,331	N/A	\$1,500	N/A	\$1,611	N/A	12.64	7.41	15% (+/-)	Yes
45: Other Adult	N/A	\$2,021	N/A	\$2,135	N/A	\$1,931	N/A	5.61	-9.52	15% (+/-)	Yes
55: 1115 Adult	N/A	\$3,229	N/A	\$3,043	N/A	\$2,613	N/A	-5.78	-14.10	15% (+/-)	Yes
<b>FFS EXPENDITURES AND USERS BY MAX TOS</b>											
IP: Total Medicaid Paid (TOS 01)	N/A	\$61,234,611	N/A	\$67,246,621	N/A	\$68,623,846	N/A	9.82	2.05	15% (+/-)	Yes
IP: Number of Users	N/A	14,953	N/A	13,937	N/A	13,162	N/A	-6.79	-5.56	15% (+/-)	Yes
IP: Average Medicaid Pd per User	N/A	\$4,095	N/A	\$4,825	N/A	\$5,214	N/A	17.82	8.06	15% (+/-)	Yes
IP: Average Medicaid Covered Days Per User	N/A	6	N/A	6	N/A	6	N/A	-3.68	-1.87	15% (+/-)	Yes
MH Aged: Total Medicaid Paid (TOS 02)	N/A	\$61,172	N/A	\$69,524	N/A	\$54,933	N/A	13.65	-21.00	15% (+/-)	No
MH Aged: Number of Users	N/A	45	N/A	39	N/A	34	N/A	-13.30	-12.80	15% (+/-)	Yes
MH Aged: Avg Medicaid Pd per User	N/A	\$1,359	N/A	\$1,783	N/A	\$1,616	N/A	31.14	-9.37	15% (+/-)	Yes
IP Psych < 21: Total Medicaid Paid (TOS 04)	N/A	\$14,277,867	N/A	\$15,149,996	N/A	\$9,185,575	N/A	6.11	-39.40	15% (+/-)	No
IP Psych < 21: Number of Users	N/A	537	N/A	595	N/A	468	N/A	10.80	-21.30	15% (+/-)	No
IP Psych<21 :Avg Medicaid Pd per User	N/A	\$26,588	N/A	\$25,462	N/A	\$19,627	N/A	-4.24	-22.90	15% (+/-)	No
ICF/MR: Total Medicaid Pd (TOS 05)	N/A	\$17,741,682	N/A	\$18,867,968	N/A	\$18,930,932	N/A	6.35	0.33	15% (+/-)	Yes
ICF/MR: Number of Users	N/A	247	N/A	260	N/A	267	N/A	5.26	2.69	15% (+/-)	Yes
ICF/MR: Avg Medicaid Pd per User	N/A	\$71,829	N/A	\$72,569	N/A	\$70,902	N/A	1.03	-2.30	15% (+/-)	Yes
NF: Total Medicaid Paid (TOS 07)	N/A	\$166,292,164	N/A	\$182,928,581	N/A	\$197,714,922	N/A	10.00	8.08	15% (+/-)	Yes
NF Number of Users	N/A	6,634	N/A	6,463	N/A	6,530	N/A	-2.58	1.04	15% (+/-)	Yes
NF:Avg Medicaid Pd per User	N/A	\$25,067	N/A	\$28,304	N/A	\$30,278	N/A	12.91	6.97	15% (+/-)	Yes
Physician: Total Medicaid Paid (TOS 08)	N/A	\$19,509,396	N/A	\$20,109,568	N/A	\$19,752,812	N/A	3.08	-1.77	15% (+/-)	Yes
Physician: Number of Users	N/A	49,033	N/A	48,992	N/A	53,014	N/A	-0.08	8.21	15% (+/-)	Yes
Physician: Avg Medicaid Pd per User	N/A	\$398	N/A	\$410	N/A	\$373	N/A	3.16	-9.23	15% (+/-)	Yes
Dental: Total Medicaid Paid (TOS 09)	N/A	\$9,813,540	N/A	\$8,803,760	N/A	\$9,010,265	N/A	-10.30	2.35	15% (+/-)	Yes
Dental: Number of Users	N/A	18,549	N/A	17,052	N/A	18,641	N/A	-8.07	9.32	15% (+/-)	Yes
Dental: Avg Medicaid Pd per User	N/A	\$529	N/A	\$516	N/A	\$483	N/A	-2.41	-6.38	15% (+/-)	Yes
Other Practitioner: Total Medicaid Pd (TOS 10)	N/A	\$2,004,928	N/A	\$1,614,456	N/A	\$1,479,118	N/A	-19.50	-8.38	15% (+/-)	Yes
Other Practitioner: Number of Users	N/A	18,731	N/A	18,257	N/A	17,933	N/A	-2.53	-1.77	15% (+/-)	Yes
Other Practitioner: Avg Medicaid Pd per User	N/A	\$107	N/A	\$88	N/A	\$82	N/A	-17.40	-6.73	15% (+/-)	Yes
OPD: Total Medicaid Paid (TOS 11)	N/A	\$48,315,428	N/A	\$52,367,244	N/A	\$53,843,048	N/A	8.39	2.82	15% (+/-)	Yes
OPD Number of Users	N/A	56,744	N/A	51,057	N/A	52,015	N/A	-10.00	1.88	15% (+/-)	Yes
OPD: Avg Medicaid Pd per User	N/A	\$851	N/A	\$1,026	N/A	\$1,035	N/A	20.46	0.92	15% (+/-)	Yes
Clinic: Total Medicaid Paid (TOS 12)	N/A	\$6,250,413	N/A	\$16,773,757	N/A	\$6,887,859	N/A	168.40	-58.90	15% (+/-)	No
Clinic: Number of Users	N/A	12,872	N/A	12,867	N/A	13,219	N/A	-0.04	2.74	15% (+/-)	Yes
Clinic: Avg Medicaid Pd per User	N/A	\$486	N/A	\$1,304	N/A	\$521	N/A	168.50	-60.00	15% (+/-)	No
HH: Total Medicaid Paid (TOS 13)	N/A	\$322,837	N/A	\$325,727	N/A	\$407,328	N/A	0.90	25.05	15% (+/-)	No
HH: Number of Users	N/A	311	N/A	305	N/A	295	N/A	-1.93	-3.28	15% (+/-)	Yes
HH: Avg Medicaid Pd per User	N/A	\$1,038	N/A	\$1,068	N/A	\$1,381	N/A	2.88	29.29	15% (+/-)	No
Lab/Xray: Total Medicaid Paid (TOS 15)	N/A	\$9,136,456	N/A	\$10,495,205	N/A	\$11,828,792	N/A	14.87	12.71	15% (+/-)	Yes
Lab/Xray: Number of Users	N/A	35,261	N/A	35,092	N/A	37,985	N/A	-0.48	8.24	15% (+/-)	Yes
Lab/Xray:Avg Medicaid Pd per User	N/A	\$259	N/A	\$299	N/A	\$311	N/A	15.42	4.12	15% (+/-)	Yes
Drugs: Total Medicaid Paid (TOS 16)	N/A	\$85,343,248	N/A	\$96,682,491	N/A	\$40,060,165	N/A	13.29	-58.60	15% (+/-)	No
Drugs: Number of Users	N/A	61,683	N/A	64,720	N/A	46,737	N/A	4.92	-27.80	15% (+/-)	No
Drugs: Avg Medicaid Pd per User	N/A	\$1,384	N/A	\$1,494	N/A	\$857	N/A	7.97	-42.60	15% (+/-)	No
Other Services: Total Medicaid Paid (TOS 19)	N/A	\$86,767,874	N/A	\$80,861,116	N/A	\$84,660,548	N/A	-6.81	4.70	15% (+/-)	Yes
Other Services: Number of Users	N/A	14,234	N/A	13,278	N/A	13,866	N/A	-6.72	4.43	15% (+/-)	Yes
Other Services: Avg Medicaid Pd per User	N/A	\$6,096	N/A	\$6,090	N/A	\$6,106	N/A	-0.10	0.26	15% (+/-)	Yes
Transportation: Total Medicaid Paid (TOS 26)	N/A	\$10,905,003	N/A	\$9,705,587	N/A	\$9,559,544	N/A	-11.00	-1.50	15% (+/-)	Yes
Transportation: Number of Users	N/A	12,192	N/A	12,265	N/A	12,857	N/A	0.60	4.83	15% (+/-)	Yes
Transportation: Avg Medicaid Pd per User	N/A	\$894	N/A	\$791	N/A	\$744	N/A	-11.50	-6.04	15% (+/-)	Yes
PCS: Total Medicaid Paid (TOS 30)	N/A	\$130,005,216	N/A	\$119,137,590	N/A	\$117,278,217	N/A	-8.36	-1.56	15% (+/-)	Yes
PCS: Number of Users	N/A	7,374	N/A	6,751	N/A	7,524	N/A	-8.45	11.45	15% (+/-)	Yes
PCS: Avg Medicaid Pd per User	N/A	\$17,630	N/A	\$17,647	N/A	\$15,587	N/A	0.10	-11.70	15% (+/-)	Yes
Target Case Management: Total Medicaid Pd (TOS 31)	N/A	\$3,301,392	N/A	\$2,844,952	N/A	\$1,728,843	N/A	-13.80	-39.20	15% (+/-)	No
Target Case Management: Number of Users	N/A	2,386	N/A	2,328	N/A	2,126	N/A	-2.43	-8.68	15% (+/-)	Yes
Target Case Management: Avg Medicaid Pd per User	N/A	\$1,384	N/A	\$1,222	N/A	\$813	N/A	-11.70	-33.50	15% (+/-)	No

2003-2005 MAX PSF VALIDATION TABLE  
STATE: NM

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	\$17,804	N/A	\$19,231	N/A	\$18,153	N/A	8.02	-5.61	15% (+/-)	Yes
Rehab Services: Number of Users	N/A	145	N/A	100	N/A	95	N/A	-31.00	-5.00	15% (+/-)	Yes
Rehab Services: Avg Medicaid Pd per User	N/A	\$123	N/A	\$192	N/A	\$191	N/A	56.62	-0.64	15% (+/-)	Yes
PT/OT/Speech/Hear: Total Medicaid Paid (TOS 34)	N/A	\$786,976	N/A	\$736,322	N/A	\$897,222	N/A	-6.44	21.85	15% (+/-)	No
PT/OT/Speech/Hear: Number of Users	N/A	2,148	N/A	2,163	N/A	2,552	N/A	0.70	17.98	15% (+/-)	No
PT/OT/Speech/Hear: Avg Medicaid Pd per User	N/A	\$366	N/A	\$340	N/A	\$352	N/A	-7.09	3.28	15% (+/-)	Yes
Hospice: Total Medicaid Paid (TOS 35)	N/A	\$5,991,231	N/A	\$9,239,958	N/A	\$11,028,221	N/A	54.22	19.35	15% (+/-)	No
Hospice: Number of Users	N/A	666	N/A	810	N/A	923	N/A	21.62	13.95	15% (+/-)	Yes
Hospice: Avg Medicaid Pd per User	N/A	\$8,996	N/A	\$11,407	N/A	\$11,948	N/A	26.81	4.74	15% (+/-)	Yes
DME: Total Medicaid Paid (TOS 51)	N/A	\$17,220,404	N/A	\$15,481,025	N/A	\$15,434,788	N/A	-10.10	-0.30	15% (+/-)	Yes
DME: Number of Users	N/A	29,368	N/A	31,683	N/A	32,692	N/A	7.88	3.19	15% (+/-)	Yes
DME: Avg Medicaid Pd per User	N/A	\$586	N/A	\$489	N/A	\$472	N/A	-16.70	-3.38	15% (+/-)	Yes
Residential Care: Total Medicaid Paid (TOS 52)	N/A	\$44,807,002	N/A	\$73,349,975	N/A	\$85,031,368	N/A	63.70	15.93	15% (+/-)	No
Residential Care: Number of Users	N/A	849	N/A	1,251	N/A	1,413	N/A	47.35	12.95	15% (+/-)	Yes
Residential Care: Avg Medicaid Pd per User	N/A	\$52,776	N/A	\$58,633	N/A	\$60,178	N/A	11.10	2.64	15% (+/-)	Yes
Psych. Services: Total Medicaid Paid (TOS 53)	N/A	\$7,712,344	N/A	\$9,584,043	N/A	\$9,808,115	N/A	24.27	2.34	15% (+/-)	Yes
Psych. Services: Number of Users	N/A	9,530	N/A	10,332	N/A	10,692	N/A	8.42	3.48	15% (+/-)	Yes
Psych. Services: Avg Medicaid Pd per User	N/A	\$809	N/A	\$928	N/A	\$917	N/A	14.62	-1.11	15% (+/-)	Yes
Adult Day Care: Total Medicaid Paid (TOS 54)	N/A	\$11,640,732	N/A	\$63,971	N/A	\$75,880	N/A	-99.50	18.62	15% (+/-)	No
Adult Day Care: Number of Users	N/A	1,106	N/A	18	N/A	23	N/A	-98.40	27.78	15% (+/-)	No
Adult Day Care: Avg Medicaid Pd per User	N/A	\$10,525	N/A	\$3,554	N/A	\$3,299	N/A	-66.20	-7.17	15% (+/-)	Yes
<b>AVG FFS MEDICAID AMT PD/FFS ENROLLEE BY SELECTED MAX TOS</b>											
Inpatient Hospital (TOS=01)	N/A	\$536	N/A	\$567	N/A	\$554	N/A	5.79	-2.27	15% (+/-)	Yes
Aged	N/A	\$343	N/A	\$246	N/A	\$279	N/A	-28.40	13.41	15% (+/-)	Yes
Disabled	N/A	\$1,218	N/A	\$1,200	N/A	\$1,173	N/A	-1.54	-2.21	15% (+/-)	Yes
Child	N/A	\$278	N/A	\$369	N/A	\$329	N/A	32.96	-10.90	15% (+/-)	Yes
Adult	N/A	\$595	N/A	\$551	N/A	\$566	N/A	-7.34	2.71	15% (+/-)	Yes
ILTC (TOS=02,04,05,07)	N/A	\$1,735	N/A	\$1,828	N/A	\$1,823	N/A	5.39	-0.32	15% (+/-)	Yes
Aged	N/A	\$7,650	N/A	\$8,624	N/A	\$8,781	N/A	12.73	1.81	15% (+/-)	Yes
Disabled	N/A	\$2,674	N/A	\$2,573	N/A	\$2,586	N/A	-3.78	0.50	15% (+/-)	Yes
Child	N/A	\$169	N/A	\$197	N/A	\$110	N/A	16.62	-44.20	15% (+/-)	No
Adult	N/A	\$1	N/A	\$1	N/A	\$1	N/A	30.58	-22.80	15% (+/-)	No
Drugs (TOS=16)	N/A	\$746	N/A	\$815	N/A	\$323	N/A	9.14	-60.30	15% (+/-)	No
Aged	N/A	\$1,720	N/A	\$1,950	N/A	\$994	N/A	13.38	-49.00	15% (+/-)	No
Disabled	N/A	\$2,217	N/A	\$2,297	N/A	\$679	N/A	3.62	-70.40	15% (+/-)	No
Child	N/A	\$46	N/A	\$51	N/A	\$41	N/A	11.45	-18.70	15% (+/-)	No
Adult	N/A	\$84	N/A	\$112	N/A	\$93	N/A	33.15	-16.70	15% (+/-)	No
All Other Services	N/A	\$3,723	N/A	\$3,731	N/A	\$3,628	N/A	0.21	-2.75	15% (+/-)	Yes
Aged	N/A	\$6,471	N/A	\$6,202	N/A	\$5,687	N/A	-4.15	-8.30	15% (+/-)	Yes
Disabled	N/A	\$10,629	N/A	\$10,448	N/A	\$10,100	N/A	-1.70	-3.32	15% (+/-)	Yes
Child	N/A	\$820	N/A	\$822	N/A	\$804	N/A	0.33	-2.30	15% (+/-)	Yes
Adult	N/A	\$1,058	N/A	\$1,135	N/A	\$1,168	N/A	7.32	2.86	15% (+/-)	Yes
<b>% OF FFS ENROLLEES WITH CLAIMS BY SELECTED MAX TYPE OF SERVICE</b>											
% FFS Enrollees with IP Claims (TOS=01)	N/A	13.08	N/A	11.74	N/A	10.62	N/A	-10.20	-9.56	15% (+/-)	Yes
Aged	N/A	20.74	N/A	15.26	N/A	12.28	N/A	-26.40	-19.60	15% (+/-)	No
Disabled	N/A	18.89	N/A	15.36	N/A	12.84	N/A	-18.70	-16.40	15% (+/-)	No
Child	N/A	7.61	N/A	8.20	N/A	7.90	N/A	-7.74	-3.72	15% (+/-)	Yes
Adult	N/A	15.21	N/A	14.20	N/A	13.79	N/A	-6.65	-2.84	15% (+/-)	Yes
% FFS Enrollees with ILTC Claims (TOS=02,04,05,07)	N/A	6.50	N/A	6.17	N/A	5.85	N/A	-5.09	-5.12	15% (+/-)	Yes
Aged	N/A	32.45	N/A	31.84	N/A	30.58	N/A	-1.87	-3.96	15% (+/-)	Yes
Disabled	N/A	7.10	N/A	6.49	N/A	6.25	N/A	-8.60	-3.69	15% (+/-)	Yes
Child	N/A	0.78	N/A	0.90	N/A	0.66	N/A	16.10	-26.60	15% (+/-)	No
Adult	N/A	0.03	N/A	0.03	N/A	0.01	N/A	-22.60	-62.70	15% (+/-)	No
% FFS Enrollees with Drug Claims (TOS=16)	N/A	53.95	N/A	54.53	N/A	37.71	N/A	1.08	-30.80	15% (+/-)	No
Aged	N/A	82.79	N/A	82.36	N/A	41.07	N/A	-0.52	-50.10	15% (+/-)	No
Disabled	N/A	78.86	N/A	77.50	N/A	33.39	N/A	-1.72	-56.90	15% (+/-)	No
Child	N/A	38.61	N/A	38.75	N/A	36.87	N/A	0.36	-4.85	15% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: NM

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	42.24	N/A	46.60	N/A	43.03	N/A	10.35	-7.66	15% (+/-)	Yes
% FFS Enrollees with All Other Claims	N/A	78.15	N/A	77.24	N/A	76.87	N/A	-1.16	-0.48	15% (+/-)	Yes
Aged	N/A	88.94	N/A	86.75	N/A	85.77	N/A	-2.46	-1.13	15% (+/-)	Yes
Disabled	N/A	88.02	N/A	84.89	N/A	86.07	N/A	-3.55	1.39	15% (+/-)	Yes
Child	N/A	74.00	N/A	73.81	N/A	73.11	N/A	-0.26	-0.94	15% (+/-)	Yes
Adult	N/A	68.26	N/A	69.21	N/A	67.95	N/A	1.39	-1.81	15% (+/-)	Yes
Avg # IP Days per FFS User	N/A	6	N/A	6	N/A	6	N/A	-3.68	-1.87	15% (+/-)	Yes
Aged	N/A	6	N/A	6	N/A	6	N/A	-4.67	-2.87	15% (+/-)	Yes
Disabled	N/A	10	N/A	10	N/A	10	N/A	2.16	4.01	15% (+/-)	Yes
Child	N/A	3	N/A	3	N/A	3	N/A	3.59	-1.10	15% (+/-)	Yes
Adult	N/A	3	N/A	3	N/A	3	N/A	-1.98	-1.26	15% (+/-)	Yes
Avg # ILTC Days per FFS User	N/A	231	N/A	230	N/A	222	N/A	-0.10	-3.66	15% (+/-)	Yes
Aged	N/A	234	N/A	238	N/A	227	N/A	1.68	-4.66	15% (+/-)	Yes
Disabled	N/A	251	N/A	246	N/A	239	N/A	-2.21	-2.82	15% (+/-)	Yes
Child	N/A	110	N/A	105	N/A	80	N/A	-4.44	-24.10	15% (+/-)	No
Adult	N/A	25	N/A	27	N/A	11	N/A	8.16	-61.70	15% (+/-)	No
<b>FFS EXPENDITURES AND USERS BY MAX PGM TYPE</b>											
FP: Total Medicaid Paid (Program Type 2)	N/A	\$2,149,863	N/A	\$2,158,456	N/A	\$2,161,880	N/A	0.40	0.16	15% (+/-)	Yes
FP: Number of Users	N/A	5,460	N/A	5,921	N/A	5,691	N/A	8.44	-3.88	15% (+/-)	Yes
FP: Average Medicaid Pd per User	N/A	\$394	N/A	\$365	N/A	\$380	N/A	-7.42	4.21	15% (+/-)	Yes
RHC: Total Medicaid Paid (Program Type 3)	N/A	\$64,255	N/A	\$13,259	N/A	\$10,087	N/A	-79.40	-23.90	15% (+/-)	No
RHC: Number of Users	N/A	562	N/A	104	N/A	91	N/A	-81.50	-12.50	15% (+/-)	Yes
RHC: Avg Medicaid Pd per User	N/A	\$114	N/A	\$127	N/A	\$111	N/A	11.51	-13.10	15% (+/-)	Yes
FQHC: Total Medicaid Paid (Program Type 4)	N/A	\$4,348,067	N/A	\$14,249,168	N/A	\$4,604,580	N/A	227.70	-67.70	15% (+/-)	No
FQHC: Number of Users	N/A	10,219	N/A	10,236	N/A	10,799	N/A	0.17	5.50	15% (+/-)	Yes
FQHC: Avg Medicaid Pd per User	N/A	\$425	N/A	\$1,392	N/A	\$426	N/A	227.20	-69.40	15% (+/-)	No
IHS: Total Medicaid Pd (Program Type 5)	N/A	\$59,551,277	N/A	\$63,128,231	N/A	\$71,558,200	N/A	6.01	13.35	15% (+/-)	Yes
IHS: Number of Users	N/A	41,336	N/A	42,768	N/A	43,243	N/A	3.46	1.11	15% (+/-)	Yes
IHS: Avg Medicaid Pd per User	N/A	\$1,441	N/A	\$1,476	N/A	\$1,655	N/A	2.46	12.11	15% (+/-)	Yes
Section 1915(c) Waiver: Total Medicaid Paid (Program Types 6 and 7)	N/A	\$144,362,283	N/A	\$158,467,376	N/A	\$175,286,192	N/A	9.77	10.61	15% (+/-)	Yes
Section 1915(c) Waiver: Number of Users	N/A	3,908	N/A	3,950	N/A	4,602	N/A	1.08	16.51	15% (+/-)	No
Section 1915(c) Waiver: Avg Medicaid Pd per User	N/A	\$36,940	N/A	\$40,118	N/A	\$38,089	N/A	8.60	-5.06	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	\$325,391,097	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	26,032	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	\$12,500	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$8,727	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$14,904	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$1,057	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$4,091	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	21.00	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	58.58	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	57.34	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	0.20	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	0.16	N/A	N/A	N/A	15% (+/-)	No
Total FFS CLTC Expenditures (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	\$293,038,159	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	12,249	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	\$23,923	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$15,468	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$29,464	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$1,057	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$4,091	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	9.88	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	27.15	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	26.94	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	0.20	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	0.16	N/A	N/A	N/A	15% (+/-)	No

2003-2005 MAX PSF VALIDATION TABLE  
STATE: NM

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	\$175,286,192	N/A	N/A	N/A	15% (+/-)	No
Number of CLTC Users (Section 1915(c) claims only - excludes CLTC Codes 11-20)	N/A	N/A	N/A	N/A	N/A	4,604	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	\$38,073	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$14,877	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$53,226	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$6,739	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$323	N/A	N/A	N/A	15% (+/-)	No
% FFS Enrollees with CLTC Claims (Section 1915(c) claims only - excludes CLTC Codes 11-20)	N/A	N/A	N/A	N/A	N/A	3.71	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	10.79	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	9.94	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	0.02	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No