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2003-2005 MAX IP VALIDATION TABLE  
STATE: RI

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	53,541	N/A	52,226	N/A	70,516	N/A	-2.46	35.02	No
% Encounter Claims	N/A	70.08	N/A	69.24	N/A	75.07	N/A	-1.20	8.43	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	16,019	N/A	16,066	N/A	17,577	N/A	0.29	9.41	Yes
% Crossover	5-20	48.72	No	48.62	No	49.61	No	-0.19	2.03	Yes
% Adjusted Claims	N/A	5.21	N/A	5.22	N/A	6.13	N/A	0.19	17.47	No
% Standard Adjustments	> 1%	51.08	Yes	60.02	Yes	61.00	Yes	17.51	1.63	Yes
Aver. Amt. Pd Adjust. ( include \$0)	N/A	\$17,439	N/A	\$18,715	N/A	\$17,534	N/A	7.31	-6.31	Yes
Total number of claims with missing Medicaid eligibility (excludes S-SCHIP only)	N/A	N/A	N/A	N/A	N/A	1,828	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	8,215	N/A	8,254	N/A	8,857	N/A	0.47	7.31	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	\$11,754	No	\$12,414	No	\$13,697	No	5.61	10.34	Yes
Aver. Medicaid Amt Paid per Covered Day (>\$0 paid and >0 days claims)	N/A	\$1,342	N/A	\$1,416	N/A	\$1,468	N/A	5.57	3.63	Yes
% Claims with TPL	>0 - 10	0.52	Yes	0.67	Yes	0.94	Yes	27.30	40.63	No
Aver. TPL Paid for claims with TPL	N/A	\$7,934	N/A	\$6,393	N/A	\$8,582	N/A	-19.40	34.23	No
% Claims with UB-92 Accommodation Codes	95-100	97.82	Yes	97.23	Yes	97.48	Yes	-0.61	0.26	Yes
Average # UB-92 Accom. Codes (at least 1 accom code)	>1	1.01	Yes	1.02	Yes	1.02	Yes	0.67	0.18	Yes
% Claims with UB-92 Ancillary Codes	95-100	20.57	No	18.44	No	17.39	No	-10.40	-5.71	Yes
Average # UB-92 Ancillary Codes (at least 1 Ancillary code)	>3	1.05	No	1.07	No	1.06	No	2.24	-0.50	Yes
Average LOS	2-<8	7.28	Yes	7.32	Yes	7.90	Yes	0.51	7.93	Yes
Average Covered Days (> 0 day)	2-<8	8.76	No	8.77	No	9.33	No	0.09	6.41	Yes
% Begin Date = Admit Date	95-100	97.42	Yes	97.70	Yes	97.10	Yes	0.29	-0.61	Yes
% IP Claims (MAX TOS 01)	95-100	99.91	Yes	99.85	Yes	99.93	Yes	-0.06	0.08	Yes
% Family Planning Claims (pgm type=2)	>0-5	0.22	Yes	0.22	Yes	0.00	No	-0.47	-100.00	No
% Claims with PDX	98-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
Average Number of DX Codes (at least 1 DX)	>=2	1.94	No	1.96	No	1.97	No	1.15	0.26	Yes
% Claims with PDX, where length=3	5-30	5.44	Yes	6.64	Yes	6.83	Yes	22.02	2.89	Yes
% Claims with PDX, where length=4	15-75	32.22	Yes	31.44	Yes	30.32	Yes	-2.43	-3.58	Yes
% Claims with PDX, where length=5	25-70	62.34	Yes	61.92	Yes	62.85	Yes	-0.67	1.51	Yes
% Claims with a procedure code	35-70	0.02	No	0.00	No	0.02	No	-100.00	Div by 0	N/A
Average Number of Procedures for claims with at least 1 procedure code	>1	1.00	No	Div by 0	Yes	1.00	No	Div by 0	Div by 0	N/A
% Claims with Procedures that have CPT-4 Indicator	N/A	50.00	N/A	Div by 0	N/A	100.00	N/A	Div by 0	Div by 0	N/A
% Claims with Procedures that have ICD-9 Indicator	N/A	50.00	N/A	Div by 0	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% Claims with Procedures that have CPT-4 Indicator & CPT-4 format of 5n	N/A	100.00	N/A	Div by 0	N/A	100.00	N/A	Div by 0	Div by 0	N/A

2003-2005 MAX IP VALIDATION TABLE  
STATE: RI

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	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A
% Claims with DRG	>=90	0.00	No	0.00	No	0.00	No	Div by 0	Div by 0	N/A
% Claims Maternal Delivery Indicator	N/A	3.60	N/A	3.66	N/A	3.41	N/A	1.55	-6.81	Yes
% Claims Newborn Delivery Indicator (only for separate infant delivery claims using mother's ID)	N/A	9.99	N/A	9.50	N/A	9.50	N/A	-4.96	-0.03	Yes
<b>Patient Status</b>										
% Home	75-90	69.88	No	69.76	No	69.40	No	-0.18	-0.51	Yes
% Transferred	1-10	25.67	No	25.77	No	25.93	No	0.38	0.64	Yes
% Still a Patient	>0 - 2	2.78	No	2.64	No	2.96	No	-4.84	12.00	Yes
% Died	>0 - 3	1.67	Yes	1.78	Yes	1.35	Yes	6.79	-23.90	No
<b>FFS Crossover Claims (Type of Claim=1, Crossover Claim Indicator=1)</b>										
Total Number of Claims	N/A	7,804	N/A	7,812	N/A	8,720	N/A	0.10	11.62	Yes
% Claims with > \$0 Paid	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
% Claims with < \$0 Paid	0	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	N/A
Aver. Medicaid Amount Paid (claims with >\$0 paid)	N/A	\$1,178	N/A	\$1,240	N/A	\$1,488	N/A	5.27	20.02	No
% Claims with TPL	N/A	0.05	N/A	0.04	N/A	0.07	N/A	-25.10	79.17	No
Aver. TPL Paid -claims with TPL	N/A	\$1,324	N/A	\$239	N/A	\$1,614	N/A	-81.90	575.40	No
% Claims with UB-92 Accommodation Codes	95-100	98.76	Yes	98.91	Yes	99.22	Yes	0.16	0.31	Yes
Average # UB-92 Accom. Codes (at least 1 accom code)	>1	1.00	Yes	1.00	Yes	1.01	Yes	0.01	0.09	Yes
% Claims with UB-92 Ancillary Codes	95-100	8.46	No	8.85	No	9.23	No	4.59	4.37	Yes
Average # UB-92 Ancillary Codes (at least 1 Ancillary code)	>3	1.07	No	1.06	No	1.07	No	-1.25	0.95	Yes
Average LOS	2-<8	6.32	Yes	6.40	Yes	6.80	Yes	1.21	6.26	Yes
% Begin Date = Admit Date	95-100	99.23	Yes	99.08	Yes	98.99	Yes	-0.15	-0.09	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	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
Average Number of DX Codes (at least 1 DX)	>=2	2.00	Yes	2.00	Yes	2.01	Yes	-0.15	0.42	Yes
% Claims with PDX, where length=3	5-30	8.34	Yes	7.73	Yes	8.35	Yes	-7.31	7.98	Yes
% Claims with PDX, where length=4	15-75	41.48	Yes	41.96	Yes	41.33	Yes	1.16	-1.50	Yes
% Claims with PDX, where length=5	25-70	50.18	Yes	50.31	Yes	50.32	Yes	0.25	0.03	Yes
% Claims with a procedure code	35-70	5.97	No	5.17	No	5.52	No	-13.40	6.66	Yes
Average Number of Procedures for claims with at least 1 procedure code	>1	1.06	Yes	1.06	Yes	1.07	Yes	-0.50	1.30	Yes
% Claims with Procedures that have CPT-4 Indicator	N/A	93.78	N/A	91.09	N/A	93.97	N/A	-2.87	3.16	Yes
% Claims with Procedures that have ICD-9 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 CPT-4 Indicator & CPT-4 format of 5n	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
% Claims with Procedures that have ICD-9-CM Indicator & ICD-9-CM Format 3n or 4n	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 DRG	>=90	0.00	No	0.00	No	0.00	No	Div by 0	Div by 0	N/A

2003-2005 MAX LT VALIDATION TABLE  
STATE: RI

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	106,792	N/A	102,611	N/A	99,504	N/A	-3.92	-3.03	Yes
% Encounter Claims	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% Supplemental Claims	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
Total FFS Claims	N/A	106,792	N/A	102,611	N/A	99,504	N/A	-3.92	-3.03	Yes
% Crossover	5-20	0.07	No	0.09	No	0.11	No	30.46	22.82	No
% Adjusted Claims	> 1%	30.37	Yes	28.01	Yes	35.74	Yes	-7.79	27.59	No
% Standard Adjustments	N/A	99.17	N/A	99.23	N/A	99.61	N/A	0.06	0.39	Yes
Aver. Amt. Pd Adjust. ( include \$0)	N/A	\$4,492	N/A	\$6,790	N/A	\$5,881	N/A	51.16	-13.40	Yes
Total number of claims with missing Medicaid eligibility (excludes S-SCHIP only)	N/A	N/A	N/A	N/A	N/A	10	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	106,721	N/A	102,522	N/A	99,398	N/A	-3.93	-3.05	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	\$170	No	\$183	No	\$192	No	7.58	5.06	Yes
ICF/MR (TOS 05)	N/A	\$500	N/A	\$542	N/A	\$549	N/A	8.26	1.42	Yes
Aged/MH (TOS 02)	N/A	\$195	N/A	\$293	N/A	\$233	N/A	50.65	-20.50	No
IP Psych. < 21 (TOS 04)	N/A	\$794	N/A	\$737	N/A	\$719	N/A	-7.25	-2.32	Yes
% NF (TOS 07)	75-99	98.15	Yes	98.45	Yes	98.67	Yes	0.30	0.23	Yes
% NF claims with NF Covered Days	N/A	100.00	N/A	100.00	N/A	100.00	N/A	-0.01	0.01	Yes
Avg days for NF claims with Covered Days	N/A	28	N/A	28	N/A	28	N/A	0.36	-0.85	Yes
% ICF/MR (TOS 05)	>0-20	0.47	Yes	0.49	Yes	0.49	Yes	4.51	0.88	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	28	N/A	27	N/A	27	N/A	-2.27	-0.52	Yes
% Aged/MH (TOS 02)	>0-10	0.30	Yes	0.22	Yes	0.18	Yes	-26.10	-17.90	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	7	N/A	4	N/A	5	N/A	-36.20	23.41	No
% IP Psych. < 21 (TOS 04)	>0-5	1.08	Yes	0.84	Yes	0.65	Yes	-22.20	-22.30	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	16	N/A	16	N/A	18	N/A	-0.87	9.95	Yes
% Claims with Leave Days	1-20	0.00	No	0.00	No	0.00	No	Div by 0	Div by 0	N/A
% Claims with DX	95-100	44.29	No	100.00	Yes	100.00	Yes	125.80	0.00	Yes
% Claims with DX, where length=3	5-30	29.37	Yes	27.83	Yes	27.37	Yes	-5.22	-1.66	Yes
% Claims with DX, where length=4	15-75	42.33	Yes	47.95	Yes	49.06	Yes	13.29	2.32	Yes
% Claims with DX, where length=5	25-70	26.80	Yes	24.21	No	23.57	No	-9.65	-2.67	Yes
<b>Patient Status</b>										
% Home	1-5	1.15	Yes	1.10	Yes	0.91	No	-4.25	-16.60	No
% Still a Patient	8-98	92.53	Yes	92.47	Yes	92.21	Yes	-0.07	-0.28	Yes
% Died	>0-5	1.02	Yes	0.84	Yes	0.71	Yes	-17.30	-15.50	No
<b>FFS Crossover Claims (Type of Claim=1, Crossover Claim Indicator=1)</b>										
Total Number of Claims	N/A	71	N/A	89	N/A	106	N/A	25.35	19.10	No
% Claims with> \$0 Paid	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
% Claims with< \$0 Paid	0	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	N/A

2003-2005 MAX LT VALIDATION TABLE  
STATE: RI

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	\$761	N/A	\$1,093	N/A	\$552	N/A	43.66	-49.50	No
% NF (TOS 07)	75-99	12.68	No	13.48	No	49.06	No	6.37	263.80	No
% 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	76.06	No	80.90	No	50.00	No	6.37	-38.20	No
% IP Psych. < 21 (TOS 04)	>0-5	11.27	No	5.62	No	0.94	Yes	-50.10	-83.20	No
% Claims with DX	95-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with DX, where length=3	5-30	4.23	No	2.25	No	7.55	Yes	-46.80	235.80	No
% Claims with DX, where length=4	15-75	28.17	Yes	34.83	Yes	19.81	Yes	23.65	-43.10	No
% Claims with DX, where length=5	25-70	67.61	Yes	62.92	Yes	72.64	No	-6.93	15.45	No
Patient Status										
% Home	1-5	0.00	No	0.00	No	0.00	No	Div by 0	Div by 0	N/A
% Still a Patient	8-98	0.00	No	0.00	No	0.00	No	Div by 0	Div by 0	N/A
% Died	>0-5	0.00	No	0.00	No	0.00	No	Div by 0	Div by 0	N/A

2003-2005 MAX OT VALIDATION TABLE  
STATE: RI

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	5,457,272	N/A	5,622,024	N/A	5,826,240	N/A	3.02	3.63	Yes
% Encounter Claims (Claim Type=3)	N/A	26.64	N/A	27.85	N/A	28.84	N/A	4.55	3.52	Yes
% Supplemental Claims	N/A	0.09	N/A	0.08	N/A	0.07	N/A	-13.10	-2.27	Yes
% Cap Claims (Claim Type=2, and MAX TOS 20,21,22)	N/A	23.76	N/A	26.19	N/A	23.30	N/A	10.25	-11.00	Yes
Total FFS Claims Excluding Capitation Payments	N/A	2,701,993	N/A	2,579,194	N/A	2,784,311	N/A	-4.54	7.95	Yes
% Crossover	5-20	12.84	Yes	6.14	Yes	6.26	Yes	-52.10	1.93	Yes
% Adjusted Claims	> 1%	3.26	Yes	4.30	Yes	4.48	Yes	32.00	3.98	Yes
% Standard Adjustments	N/A	9.53	N/A	76.01	N/A	77.45	N/A	697.50	1.89	Yes
Aver. Amt. Pd Adjust. ( include \$0)	N/A	\$1,017	N/A	\$949	N/A	\$888	N/A	-6.74	-6.39	Yes
% Claims(TOC 1,2) TOS 20: HMO Cap Payment	N/A	32.42	N/A	36.34	N/A	32.78	N/A	12.09	-9.82	Yes
% 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	\$137	Yes	\$160	Yes	\$201	Yes	16.88	25.96	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	45,753	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	2,355,038	N/A	2,420,717	N/A	2,609,926	N/A	2.79	7.82	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	15.41	N/A	16.08	N/A	17.04	N/A	4.39	5.96	Yes
% OPD Claims with Span Bill/ All OPD Claims(TOS 11)	N/A	13.23	N/A	13.07	N/A	12.70	N/A	-1.22	-2.84	Yes
% HH Claims with Span Bill/All HH Claims (TOS 13)	N/A	53.23	N/A	54.70	N/A	56.92	N/A	2.76	4.06	Yes
% Other Claims with Span Bills/All Other Claims	N/A	13.35	N/A	13.87	N/A	14.96	N/A	3.92	7.87	Yes
% Claims W/ Service Place 11- Office	50-90	58.53	Yes	47.45	No	44.88	No	-18.90	-5.42	Yes
% Claims W/ Service Place 12 - Home	>0-5	8.11	No	13.67	No	13.63	No	68.63	-0.31	Yes
% Claims W/ Service Place 21 - Hospital	>0-5	3.86	Yes	3.83	Yes	3.63	Yes	-0.84	-5.23	Yes
% Claims W/ Service Place 32 - NF	>0-5	0.35	Yes	0.80	Yes	0.79	Yes	130.90	-1.03	Yes
% Claims W/ Service Place 23 - ER	1-10	2.42	Yes	2.20	Yes	2.02	Yes	-9.23	-8.15	Yes
% Claims w/ Service Place 22 - OPD	>0-10	8.19	Yes	7.61	Yes	7.32	Yes	-7.05	-3.86	Yes
% Claims W/ Service Place 99 - Unknown/Other	<5	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	N/A
% Claims with TPL	>0 - 15	0.43	Yes	0.44	Yes	0.44	Yes	2.13	0.58	Yes
Aver. TPL Paid -claims with TPL	N/A	\$110	N/A	\$113	N/A	\$120	N/A	2.98	6.47	Yes
<b>PERCENT CLAIMS/MAX TOS</b>										
% claims MAX TOS 08: Physicians	10-35	10.65	Yes	9.85	No	9.16	No	-7.59	-7.00	Yes
% claims MAX TOS 09: Dental	2-20	14.49	Yes	14.47	Yes	13.69	Yes	-0.19	-5.39	Yes
% claims MAX TOS 10: Other Practioner	0.5-8	1.64	Yes	1.13	Yes	0.98	Yes	-30.80	-13.90	Yes
% claims MAX TOS 11: OPD	3-25	2.73	No	2.72	No	2.67	No	-0.51	-1.86	Yes
% claims MAX TOS 12: Clinic	2-25	1.11	No	1.08	No	1.06	No	-2.96	-1.57	Yes
% claims MAX TOS 13: HH	>0-25	5.18	Yes	5.47	Yes	5.10	Yes	5.78	-6.79	Yes
% claims MAX TOS 15: Lab/Xray	4-20	10.96	Yes	10.32	Yes	9.46	Yes	-5.83	-8.28	Yes
% claims MAX TOS 16: Drugs	<3	0.13	Yes	0.06	Yes	0.11	Yes	-56.50	90.90	No
% claims MAX TOS 19: Other Services	<25	20.13	Yes	21.11	Yes	22.66	Yes	4.90	7.35	Yes

2003-2005 MAX OT VALIDATION TABLE  
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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Change Within Expected Range
% claims MAX TOS 51: DME	>3	4.01	Yes	4.91	Yes	4.77	Yes	22.63	-2.92	Yes
% claims MAX TOS 26: Transportation	>1	1.70	Yes	2.30	Yes	3.11	Yes	34.90	35.44	No
% claims MAX TOS 24: Sterilizations	N/A	0.00	N/A	0.01	N/A	0.00	N/A	68.04	-35.30	No
% claims MAX TOS 25: Abortions	N/A	0.01	N/A	0.01	N/A	0.02	N/A	74.59	15.66	No
% claims MAX TOS 30: PCS	>0	1.70	Yes	1.83	Yes	1.82	Yes	7.65	-0.56	Yes
% claims MAX TOS 31: TCM	>0	1.96	Yes	2.75	Yes	3.21	Yes	39.94	16.63	No
% claims MAX TOS 33: Rehabilitation	>0	10.73	Yes	2.76	Yes	2.41	Yes	-74.30	-12.80	Yes
% claims MAX TOS 34: PT/OT/hear/speech	>1	0.00	No	0.00	No	0.00	No	Div by 0	Div by 0	N/A
% claims MAX TOS 35: Hospice	>0	0.01	Yes	0.01	Yes	0.01	Yes	-7.90	1.90	Yes
% claims MAX TOS 36: Nurse Midwife	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% claims MAX TOS 37: Nurse Practitioner	N/A	0.00	N/A	0.00	N/A	0.00	N/A	191.90	-69.10	No
% claims MAX TOS 38: Private Nursing	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% claims MAX TOS 39: Religious Non-Med.	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% claims MAX TOS 52: Residential Care	N/A	1.18	N/A	1.15	N/A	1.11	N/A	-3.26	-3.12	Yes
% claims MAX TOS 53: Psych. Services	>1	8.12	Yes	15.60	Yes	16.39	Yes	92.10	5.08	Yes
% claims MAX TOS 54: Adult Day Care	>0	3.56	Yes	2.48	Yes	2.27	Yes	-30.40	-8.18	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	\$165	N/A	\$175	N/A	\$197	N/A	6.27	12.47	Yes
08: Physicians	\$20-90	\$43	Yes	\$48	Yes	\$50	Yes	11.41	3.93	Yes
09: Dental	\$10-60	\$40	Yes	\$42	Yes	\$41	Yes	6.43	-2.37	Yes
10: Other Practitioner	\$10-100	\$28	Yes	\$24	Yes	\$24	Yes	-15.50	0.99	Yes
11: OPD	\$20-100	\$265	No	\$331	No	\$327	No	25.12	-1.24	Yes
12: Clinic	\$20-100	\$128	No	\$161	No	\$133	No	26.26	-17.80	No
13: HH	N/A	\$200	N/A	\$203	N/A	\$215	N/A	1.31	6.20	Yes
15: Lab/Xray	10-60	\$53	Yes	\$54	Yes	\$56	Yes	2.31	3.29	Yes
16: Drugs	10-60	\$16	Yes	\$21	Yes	\$19	Yes	31.66	-10.20	Yes
19: Other Services	N/A	\$56	N/A	\$53	N/A	\$167	N/A	-5.68	215.40	No
51: DME	N/A	\$151	N/A	\$121	N/A	\$122	N/A	-19.90	0.74	Yes
26: Transportation	N/A	\$40	N/A	\$40	N/A	\$43	N/A	-0.71	9.28	Yes
30: PCS	N/A	\$134	N/A	\$136	N/A	\$140	N/A	1.56	3.12	Yes
31: Targeted Case Management	N/A	\$128	N/A	\$112	N/A	\$83	N/A	-12.40	-25.40	No
33: Rehabilitation	N/A	\$273	N/A	\$291	N/A	\$249	N/A	6.83	-14.50	Yes
34: PT/OT/speech/hear	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
35: Hospice	N/A	\$2,069	N/A	\$2,059	N/A	\$2,319	N/A	-0.46	12.59	Yes
52: Residential Care	N/A	\$3,493	N/A	\$3,962	N/A	\$3,998	N/A	13.41	0.92	Yes
53: Psych. Services	N/A	\$191	N/A	\$256	N/A	\$253	N/A	34.56	-1.33	Yes
54: Adult Day Care	N/A	\$563	N/A	\$781	N/A	\$784	N/A	38.62	0.39	Yes
PERCENT OF CLAIMS BY PROGRAM TYPE (claim type 1)										
% Family Planning (code 2)	N/A	0.03	N/A	0.03	N/A	0.02	N/A	4.11	-23.00	No
% RHC (code 3)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% FQHC (code 4)	N/A	2.18	N/A	2.08	N/A	2.19	N/A	-4.34	5.20	Yes
% IHS (code 5)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% Waiver (code 6,7)	N/A	6.69	N/A	7.07	N/A	6.76	N/A	5.70	-4.42	Yes
AVERAGE EXPENDITURES BY PROGRAM										
Family Planning (code 2)	N/A	\$118	N/A	\$163	N/A	\$180	N/A	38.39	10.58	Yes

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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Change Within Expected Range
RHC (code 3)	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A
FQHC (code 4)	N/A	\$97	N/A	\$103	N/A	\$111	N/A	6.47	7.30	Yes
IHS (code 5)	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A
Waiver (code 6, 7)	N/A	\$160	N/A	\$163	N/A	\$171	N/A	1.73	4.96	Yes
% Claims with DX	> 60	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with DX (MAX TOS 8, 11, 12)	85-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with 1 DX that have 2 DX	N/A	18.76	N/A	18.93	N/A	18.60	N/A	0.93	-1.76	Yes
% Claims with DX, where length=3	5-25	8.30	Yes	8.62	Yes	9.82	Yes	3.95	13.93	Yes
% Claims with DX, where length=4	40-70	63.87	Yes	63.29	Yes	60.54	Yes	-0.90	-4.36	Yes
% Claims with DX, where length=5	20-55	27.83	Yes	28.08	Yes	29.64	Yes	0.90	5.55	Yes
% OPD Claims with Service Code or UB-92/OPD Claims (TOS 11)	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
% HH Claims with Service Code or UB-92/HH Claims (TOS13)	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
% Other Claims with Service Codes /All Other Claims (Excluding OPD/HH)	98-100	99.79	Yes	99.82	Yes	99.83	Yes	0.03	0.01	Yes
% CPT-4 Service Code Indicator (code 01)/Claims with Service Codes	N/A	24.41	N/A	22.91	N/A	21.41	N/A	-6.18	-6.53	Yes
% HCPCS (II & III) Service Codes Indicator (code 06)/Claims with Service Codes	N/A	75.59	N/A	77.09	N/A	78.59	N/A	2.00	1.94	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	-100.00	No
% State Specific Serv. Indicator (10-87)/Claims with Service Codes	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% CPT-4 Format Codes- 5n/Claims with CPT-4	98-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% HCPCS Format Codes Cnnnn or Cnnn /Claims with HCPCS	98-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with TOS 08 with Physician Specialty	N/A	88.77	N/A	88.97	N/A	96.81	N/A	0.23	8.82	Yes
PERCENT OF CLAIMS BY CLTC CODE										
CLTC 00: not a CLTC claim	N/A	N/A	N/A	N/A	N/A	78.04	N/A	N/A	N/A	N/A
CLTC Non-Waiver Claims (11-20)	N/A	N/A	N/A	N/A	N/A	15.20	N/A	N/A	N/A	N/A
CLTC 11: Non-Waiver Personal Care	N/A	N/A	N/A	N/A	N/A	0.00	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	2.27	N/A	N/A	N/A	N/A
CLTC 14: Non-Waiver HH	N/A	N/A	N/A	N/A	N/A	0.67	N/A	N/A	N/A	N/A
CLTC 15: Non-Waiver Residential Care	N/A	N/A	N/A	N/A	N/A	1.11	N/A	N/A	N/A	N/A
CLTC 16: Non-Waiver Rehab	N/A	N/A	N/A	N/A	N/A	1.93	N/A	N/A	N/A	N/A
CLTC 17: Non-Waiver TCM	N/A	N/A	N/A	N/A	N/A	2.18	N/A	N/A	N/A	N/A
CLTC 18: Non-Waiver Transportation	N/A	N/A	N/A	N/A	N/A	3.07	N/A	N/A	N/A	N/A
CLTC 19: Non-Waiver Hospice	N/A	N/A	N/A	N/A	N/A	0.01	N/A	N/A	N/A	N/A
CLTC 20: Non-Waiver DME	N/A	N/A	N/A	N/A	N/A	3.95	N/A	N/A	N/A	N/A
CLTC Waiver Claims (30-40)	N/A	N/A	N/A	N/A	N/A	6.76	N/A	N/A	N/A	N/A
CLTC 30: Other Waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A
CLTC 31: Waiver Personal Care	N/A	N/A	N/A	N/A	N/A	1.82	N/A	N/A	N/A	N/A
CLTC 32: Waiver PDN	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A
CLTC 33: Waiver Adult Day	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A
CLTC 34: Waiver HH	N/A	N/A	N/A	N/A	N/A	4.43	N/A	N/A	N/A	N/A



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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Change Within Expected Range
CLTC 35: Waiver Residential Care	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A
CLTC 36: Waiver Rehab	N/A	N/A	N/A	N/A	N/A	0.00	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	0.51	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	346,955	N/A	158,477	N/A	174,385	N/A	-54.30	10.04	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	10.29	N/A	14.91	N/A	13.56	N/A	44.85	-9.04	Yes
% OPD Claims with Span Bill/ All OPD Claims(TOS 11)	N/A	10.99	N/A	10.19	N/A	9.82	N/A	-7.28	-3.58	Yes
% HH Claims with Span Bill/All HH Claims (TOS 13)	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
% Other Claims with Span Bills/All Other Claims	N/A	10.15	N/A	18.34	N/A	16.06	N/A	80.73	-12.40	Yes
<b>PERCENT CLAIMS/MAX TOS (excluding 20-22)</b>										
% claims MAX TOS 08: Physicians	N/A	50.09	N/A	17.50	N/A	18.59	N/A	-65.10	6.21	Yes
% claims MAX TOS 10: Other Practioner	N/A	5.75	N/A	6.49	N/A	5.95	N/A	12.97	-8.32	Yes
% claims MAX TOS 11: OPD	N/A	17.13	N/A	42.11	N/A	40.09	N/A	145.80	-4.81	Yes
% claims MAX TOS 12: Clinic	N/A	3.05	N/A	6.90	N/A	6.81	N/A	126.30	-1.40	Yes
% claims MAX TOS 13: HH	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 15: Lab/Xray	N/A	9.01	N/A	0.01	N/A	0.01	N/A	-99.90	-0.04	Yes
% claims MAX TOS 19: Other Services	N/A	8.86	N/A	21.39	N/A	22.88	N/A	141.30	7.00	Yes
% claims MAX TOS 51: DME	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 26: Transportation	N/A	2.92	N/A	0.17	N/A	0.06	N/A	-94.00	-66.50	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	3.18	N/A	5.41	N/A	5.61	N/A	70.24	3.58	Yes
% claims MAX TOS 34: PT/OT/hear/speech	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% claims MAX TOS 35: Hospice	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% claims MAX TOS 52: Residential Care	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% claims MAX TOS 53: Psych. Services	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% 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	\$28	N/A	\$35	N/A	\$35	N/A	26.58	-0.75	Yes
% Claims with DX	N/A	99.99	N/A	100.00	N/A	100.00	N/A	0.01	0.00	Yes
% Claims with DX (MAX TOS 8, 11, 12)	85-100	99.99	Yes	100.00	Yes	100.00	Yes	0.01	0.00	Yes
% Claims with 1 DX that have 2 DX	N/A	52.49	N/A	52.80	N/A	53.00	N/A	0.60	0.38	Yes
% Claims with DX, where length=3	5-25	9.20	Yes	10.77	Yes	10.58	Yes	17.08	-1.75	Yes
% Claims with DX, where length=4	40-70	44.80	Yes	41.97	Yes	40.60	Yes	-6.31	-3.27	Yes
% Claims with DX, where length=5	20-55	46.00	Yes	47.25	Yes	48.82	Yes	2.73	3.31	Yes
% OPD Claims with Service Code or UB-92/OPD Claims (TOS 11)	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
% HH Claims with Service Code or UB-92/HH Claims (TOS13)	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
% Other Claims with Service Codes/All Other Claims (Excluding OPD/HH)	98-100	Div by 0	No	Div by 0	No	Div by 0	No	Div by 0	Div by 0	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
% CPT-4 Service Code Indicator (code 01)/Claims with Service Codes	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
% HCPCS (II & III) Service Codes Indicator (code 06)/Claims with Service Codes	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
% Other Codes Indicator /Claims with Service Codes	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 RX VALIDATION TABLE  
STATE: RI

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	3,222,235	N/A	3,156,150	N/A	3,396,075	N/A	-2.05	7.60	Yes
% Encounter Claims	N/A	31.39	N/A	26.08	N/A	26.56	N/A	-16.90	1.85	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
Total FFS Claims	N/A	2,210,804	N/A	2,333,106	N/A	2,494,112	N/A	5.53	6.90	Yes
% Adjusted Claims	N/A	0.17	N/A	0.25	N/A	0.32	N/A	46.04	28.73	No
% Standard Adjustments	> 1%	98.12	Yes	99.56	Yes	99.76	Yes	1.48	0.20	Yes
Aver. Amt. Pd Adjust. ( include \$0)	N/A	\$87	N/A	\$123	N/A	\$105	N/A	40.72	-14.60	Yes
Total number of claims with missing Medicaid eligibility (excludes S-SCHIP only)	N/A	N/A	N/A	N/A	N/A	18,522	N/A	N/A	N/A	N/A
<b>FFS Claims (Type of Claim=1)</b>										
Total Number of Claims	N/A	2,210,804	N/A	2,333,106	N/A	2,494,112	N/A	5.53	6.90	Yes
% Claims with> \$0 Paid	95-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with< \$0 Paid	0	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	N/A
Aver. Medicaid Amount Paid (claims with >\$0 paid)	\$15-\$60	\$66	No	\$71	No	\$72	No	6.82	1.89	Yes
% Claims with TPL	>0 - 15	3.91	Yes	5.45	Yes	6.23	Yes	39.34	14.17	Yes
Aver. TPL Paid for claims with TPL	N/A	\$60	N/A	\$60	N/A	\$70	N/A	-0.04	17.72	No
% Family Planning Claims (program type=2)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% Drug Claims (TOS 16)	95-99	99.86	No	99.90	No	99.90	No	0.03	0.00	Yes
% DME Claims (TOS 51)	>0 - 6	0.14	Yes	0.10	Yes	0.10	Yes	-22.90	-1.71	Yes
% Drug Claims with Quantity	>98	0.00	No	0.00	No	0.00	No	Div by 0	Div by 0	N/A
% 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	99.71	Yes	99.72	Yes	99.77	Yes	0.01	0.05	Yes
% Claims with Medispan	98-100	99.48	Yes	99.44	Yes	99.62	Yes	-0.04	0.18	Yes
% Claims with AHFS	98-100	99.71	Yes	99.72	Yes	99.77	Yes	0.01	0.05	Yes
% Claims with Generic (GTC)	98-100	99.71	Yes	99.72	Yes	99.77	Yes	0.01	0.05	Yes
% Claims with GC3	98-100	99.71	Yes	99.72	Yes	99.77	Yes	0.01	0.05	Yes
<b>NDC Configuration Indicator</b>										
% Prescription (codes 0-3)	N/A	77.67	N/A	76.51	N/A	76.63	N/A	-1.50	0.16	Yes
% Products (codes 4-6)	N/A	21.98	N/A	23.15	N/A	23.08	N/A	5.34	-0.28	Yes
% HRI (code 7)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	-100.00	No
% Claims with Smart Key	98-100	99.71	Yes	99.72	Yes	99.77	Yes	0.01	0.05	Yes
% OTC-Drug Class	N/A	5.09	N/A	5.41	N/A	6.09	N/A	6.36	12.62	Yes
% Prescription-Drug Class	N/A	94.62	N/A	94.31	N/A	93.68	N/A	-0.33	-0.67	Yes
% Multiple Source (Code Y)	N/A	50.10	N/A	52.41	N/A	55.98	N/A	4.62	6.80	Yes
% Single Source (Code N)	N/A	45.65	N/A	41.01	N/A	39.51	N/A	-10.20	-3.64	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: RI

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	217,797	N/A	222,673	N/A	224,884	N/A	2.24	0.99	10% (+/-)	Yes
Total Medicaid Amount Paid	N/A	\$1,370,142,987	N/A	\$1,498,831,854	N/A	\$1,670,211,859	N/A	9.39	11.43	15% (+/-)	Yes
% with no services (Code 0)	N/A	5.03	N/A	5.19	N/A	5.14	N/A	3.04	-0.92	N/A	N/A
% with FFS only claims (Code 1)	N/A	24.93	N/A	24.43	N/A	24.81	N/A	-2.00	1.53	N/A	N/A
% with only cap claims (Code 2)	N/A	7.43	N/A	7.51	N/A	7.13	N/A	1.16	-5.15	N/A	N/A
% with only encounter claims (Code 3)	N/A	2.30	N/A	2.49	N/A	2.44	N/A	8.55	-2.30	N/A	N/A
% with FFS and cap claims (Code 4)	N/A	3.18	N/A	2.99	N/A	2.93	N/A	-5.98	-2.08	N/A	N/A
% with cap and encounter claims only (Code 5)	N/A	24.41	N/A	25.44	N/A	25.48	N/A	4.20	0.16	N/A	N/A
% with FFS and encounter claims only (Code 6)	N/A	0.37	N/A	0.17	N/A	0.07	N/A	-54.80	-60.40	N/A	N/A
% with FFS, cap and encounter records (Code 7)	N/A	32.35	N/A	31.78	N/A	32.02	N/A	-1.76	0.75	N/A	N/A
# with claims and missing Medicaid eligibility (excludes S-SCHIP only)	N/A	6,183	N/A	6,011	N/A	5,100	N/A	-2.78	-15.20	N/A	N/A
% with claims and missing Medicaid eligibility (excludes S-SCHIP only)	<2%	2.84	No	2.70	No	2.27	No	-4.91	-16.00	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	16	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	0.01	N/A	N/A	N/A	N/A	N/A
Expenditures for people missing Medicaid eligibility (excludes S-SCHIP only enrollees)	N/A	\$994,560	N/A	\$408,660	N/A	\$79,097	N/A	-58.90	-80.60	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	\$48,766	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	211,614	N/A	216,662	N/A	219,784	N/A	2.39	1.44	10% (+/-)	Yes
Total Medicaid PYE (Person Years of Enrollment)	N/A	179,331	N/A	184,385	N/A	186,498	N/A	2.82	1.15	10% (+/-)	Yes
# with any M-SCHIP enrollment (Medicaid enrollees)	N/A	38,938	N/A	40,975	N/A	42,647	N/A	5.23	4.08	N/A	N/A
Total PYE any M-SCHIP	N/A	22,902	N/A	24,557	N/A	25,300	N/A	7.23	3.03	N/A	N/A
<b>Eligibility Demographics</b>											
% Records with Valid SSN Format	>=95%	100.00	Yes	100.00	Yes	99.03	Yes	0.00	-0.97	10% (+/-)	Yes
% Records whose MSIS SSN passed High Group Test (Code 1)	>95%	N/A	No	N/A	No	99.00	No	N/A	N/A	10% (+/-)	No
% Records whose MSIS SSN failed High Group Test due to invalid AAA (Code 2)	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A	N/A
% Records whose MSIS SSN failed High Group Test due to GG = 00 (Code 3)	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A	N/A
% Records whose MSIS SSN failed High Group Test due to SSSS = 0000 (Code 4)	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A	N/A
% Records whose MSIS SSN failed High Group Test due to GG not yet issued (Code 5)	N/A	N/A	N/A	N/A	N/A	0.03	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	5	No	0	Yes	Div by 0	-100.00	N/A	N/A
% with External SSN from EDB (Code 1)	N/A	N/A	N/A	N/A	N/A	19.98	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%	88.54	No	89.23	No	89.87	No	0.78	0.72	10% (+/-)	Yes
% with Valid 5 Digit Zip Code Format	>=95%	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	10% (+/-)	Yes
% Enrollees who Died During Year	0.1-3%	1.63	Yes	1.49	Yes	1.56	Yes	-8.33	4.30	10% (+/-)	Yes
% White	N/A	43.04	N/A	41.11	N/A	39.53	N/A	-4.47	-3.85	10% (+/-)	Yes
% Black	N/A	8.65	N/A	8.47	N/A	8.12	N/A	-2.05	-4.07	10% (+/-)	Yes
% Native American/Alaskan Native	N/A	0.20	N/A	0.21	N/A	0.23	N/A	7.579	11.33	10% (+/-)	No
% Asian	N/A	2.42	N/A	2.33	N/A	2.17	N/A	-3.38	-7.21	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%	27.41	No	29.74	No	49.95	No	8.493	67.97	N/A	N/A
% Hispanic/Latino (included with race categories prior to 2005)	N/A	18.30	N/A	18.14	N/A	17.78	N/A	-8.77	-1.96	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%	3.01	Yes	2.95	Yes	2.91	Yes	-1.87	-1.36	10% (+/-)	Yes
% Age 0-20 Years	49-74%	50.34	Yes	50.28	Yes	50.12	Yes	-0.14	-0.31	10% (+/-)	Yes
% Age > 64 Years	5-18%	11.64	Yes	11.45	Yes	11.41	Yes	-1.62	-0.36	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%	68.12	No	68.77	No	68.37	No	0.96	-0.58	10% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: RI

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	38,016	N/A	38,772	N/A	39,584	N/A	1.99	2.09	10% (+/-)	Yes
Total EDB Dual PYE	N/A	33,762	N/A	34,664	N/A	35,294	N/A	2.67	1.82	15% (+/-)	Yes
% Age > 64 Years who are EDB Duals	>=90%	95.21	Yes	94.93	Yes	94.47	Yes	-0.30	-0.48	10% (+/-)	Yes
% MAX Aged Groups (11,21,31,41,51) who are EDB Duals	>=90%	93.90	Yes	94.78	Yes	94.45	Yes	0.94	-0.35	10% (+/-)	Yes
% MAX Disabled Groups (12,22,32,42,52) who are EDB Duals	30-55%	41.77	Yes	41.73	Yes	41.88	Yes	-0.11	0.38	10% (+/-)	Yes
% EDB Only (50)	<5%	1.63	Yes	1.65	Yes	1.13	Yes	1.22	-31.50	N/A	N/A
% EDB QMB Only (51)	N/A	1.53	N/A	1.49	N/A	1.37	N/A	-2.79	-7.81	N/A	N/A
% EDB QMB Plus (52)	N/A	47.98	N/A	47.79	N/A	47.44	N/A	-0.39	-0.73	N/A	N/A
% EDB SLMB Only (53)	N/A	5.35	N/A	5.58	N/A	5.84	N/A	4.32	4.56	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 ODWI (55)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A	N/A
% EDB QI-1 (56)	N/A	3.57	N/A	3.68	N/A	4.04	N/A	3.03	9.75	N/A	N/A
% EDB QI-2 (57)	N/A	0.11	N/A	0.00	N/A	0.00	N/A	-100.00	Div by 0	N/A	N/A
% EDB Other (58)	N/A	39.62	N/A	39.32	N/A	39.87	N/A	-0.76	1.40	N/A	N/A
% EDB dual type unknown (59)	N/A	0.21	N/A	0.49	N/A	0.31	N/A	134.60	-36.80	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	440	N/A	451	N/A	478	N/A	2.50	5.99	10% (+/-)	Yes
% Non-EDB Duals Without Valid SSN	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	10% (+/-)	N/A
% Non-EDB Duals who are Children/Adults	N/A	11.14	N/A	11.97	N/A	4.18	N/A	7.52	-65.10	10% (+/-)	No
% EDB Duals with Spanish Language	N/A	2.79	N/A	3.18	N/A	3.69	N/A	14.25	15.97	15% (+/-)	No
% EDB Duals with EDB Date of Death During Year	6-10%	8.47	Yes	7.78	Yes	8.06	Yes	-8.19	3.63	15% (+/-)	Yes
% EDB Duals with Medicaid Reported HIC	N/A	98.06	N/A	98.00	N/A	98.26	N/A	-0.06	0.26	15% (+/-)	Yes
% EDB Duals with Medicaid reported HIC = Medicare HIC	N/A	93.00	N/A	93.19	N/A	93.24	N/A	0.21	0.05	15% (+/-)	Yes
TOTAL EDB DUAL ENROLLEES IN JUNE	N/A	35,638	N/A	36,454	N/A	37,133	N/A	2.29	1.86	10% (+/-)	Yes
<b>June Medicare Type</b>											
June % with Part A Medicare	N/A	2.66	N/A	3.00	N/A	3.57	N/A	12.82	19.08	15% (+/-)	No
June % with Part B Medicare	N/A	6.49	N/A	6.52	N/A	6.26	N/A	0.34	-3.98	15% (+/-)	Yes
June % Part A/B Medicare	N/A	90.85	N/A	90.48	N/A	90.17	N/A	-0.40	-0.35	15% (+/-)	Yes
<b>Original Reason for Medicare Entitlement</b>											
% Aged (Code 0)	N/A	51.27	N/A	50.22	N/A	49.19	N/A	-2.04	-2.06	15% (+/-)	Yes
% Disabled (Code 1)	N/A	48.01	N/A	49.15	N/A	50.16	N/A	2.36	2.07	15% (+/-)	Yes
% ESRD (Code 2)	N/A	0.26	N/A	0.24	N/A	0.23	N/A	-7.89	-5.21	15% (+/-)	Yes
% Disabled with ESRD (Code 3)	N/A	0.46	N/A	0.39	N/A	0.42	N/A	-14.30	7.62	15% (+/-)	Yes
<b>Other Eligibility Characteristics (All Enrollees)</b>											
% MAX Aged Groups (11,21,31,41,51) >64 Years	>=99%	98.64	No	99.99	Yes	99.98	Yes	1.37	-0.01	10% (+/-)	Yes
% MAX Disabled Groups (12,22,32,42,52) >64 Years	N/A	9.53	N/A	9.23	N/A	9.03	N/A	-3.12	-2.22	10% (+/-)	Yes
% MAX Child Grps (14,16, 24, 34, 44, 48, 54) <21 Years	>=98%	99.87	Yes	99.90	Yes	99.87	Yes	0.03	-0.03	10% (+/-)	Yes
% MAX Adult Groups (15,17,25,35,45,55) >20 Years	>=80%	94.62	Yes	94.96	Yes	95.04	Yes	0.37	0.08	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	99.99	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	30.67	N/A	N/A	N/A	N/A	N/A
<b>MAX Aged Total</b>											
11: Aged, Cash	N/A	20,909	N/A	20,802	N/A	21,060	N/A	-0.51	1.24	10% (+/-)	Yes
21: Aged, MN	N/A	4,931	N/A	4,805	N/A	4,665	N/A	-2.56	-2.91	10% (+/-)	Yes
31: Aged, Poverty	N/A	3,415	N/A	3,278	N/A	3,397	N/A	-4.01	3.63	10% (+/-)	Yes
41: Other Aged	N/A	3,528	N/A	3,409	N/A	3,558	N/A	-3.37	4.37	10% (+/-)	Yes
51: 1115 Aged	N/A	9,035	N/A	9,310	N/A	9,440	N/A	3.04	1.40	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
<b>MAX Disabled Total</b>											
12: Disabled, Cash	N/A	40,778	N/A	42,049	N/A	43,159	N/A	3.12	2.64	10% (+/-)	Yes
22: Disabled, MN	N/A	31,197	N/A	31,651	N/A	32,188	N/A	1.46	1.70	10% (+/-)	Yes
32: Disabled, Poverty	N/A	964	N/A	982	N/A	1,081	N/A	1.87	10.08	10% (+/-)	No
42: Other Disabled	N/A	917	N/A	1,270	N/A	1,436	N/A	38.50	13.07	10% (+/-)	No
52: 1115 Disabled	N/A	7,700	N/A	8,146	N/A	8,454	N/A	5.79	3.78	10% (+/-)	Yes
52: 1115 Disabled	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
<b>MAX Child Total</b>											
14: AFDC Child, Cash	N/A	96,164	N/A	98,488	N/A	99,441	N/A	2.42	0.97	10% (+/-)	Yes
14: AFDC Child, Cash	N/A	30,607	N/A	28,738	N/A	26,690	N/A	-6.11	-7.13	10% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
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	2	N/A	3	N/A	Div by 0	50.00	10% (+/-)	No
34: Child Poverty	N/A	28,202	N/A	30,118	N/A	31,382	N/A	6.79	4.20	10% (+/-)	Yes
44: Other Child	N/A	8,835	N/A	9,321	N/A	9,801	N/A	5.50	5.15	10% (+/-)	Yes
48: Foster Care Child	N/A	5,498	N/A	5,427	N/A	5,658	N/A	-1.29	4.26	10% (+/-)	Yes
54: 1115 Child	N/A	23,022	N/A	24,882	N/A	25,907	N/A	8.08	4.12	10% (+/-)	Yes
MAX Adult Total	N/A	53,763	N/A	55,323	N/A	56,124	N/A	2.90	1.45	10% (+/-)	Yes
15: AFDC Adult, Cash	N/A	14,248	N/A	12,524	N/A	11,459	N/A	-12.10	-8.50	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	18	N/A	19	N/A	35	N/A	5.56	84.21	10% (+/-)	No
35: Adult, Poverty	N/A	1,359	N/A	1,368	N/A	1,496	N/A	0.66	9.36	10% (+/-)	Yes
45: Other Adult	N/A	19,532	N/A	21,436	N/A	22,504	N/A	9.75	4.98	10% (+/-)	Yes
55: 1115 Adult	N/A	18,606	N/A	19,976	N/A	20,630	N/A	7.36	3.27	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	11,645	N/A	11,189	N/A	11,022	N/A	-3.92	-1.49	N/A	N/A
% enrollees with any ILTC claims	N/A	5.50	N/A	5.16	N/A	5.01	N/A	-6.15	-2.89	N/A	N/A
% AGED enrollees with any ILTC claims	N/A	40.77	N/A	39.28	N/A	38.69	N/A	-3.64	-1.52	N/A	N/A
% DISABLED enrollees with any ILTC claims	N/A	7.35	N/A	6.96	N/A	6.48	N/A	-5.29	-6.97	N/A	N/A
% CHILD enrollees with any ILTC claims	N/A	0.12	N/A	0.09	N/A	0.07	N/A	-28.40	-16.70	N/A	N/A
% ADULT enrollees with any ILTC claims	N/A	0.01	N/A	0.00	N/A	0.01	N/A	-51.40	146.40	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	15,402	N/A	N/A	N/A	15% (+/-)	No
% enrollees with any CLTC claims (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	7.01	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	14.79	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	13.96	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	6.23	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	0.12	N/A	N/A	N/A	15% (+/-)	No
# enrollees with ILTC claims and CLTC claims (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	2,492	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	6,289	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	2.86	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	9.67	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	9.83	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	0.00	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	0.02	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	2,329	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	711	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	104	N/A	N/A	N/A	15% (+/-)	No
# with Section 1915(c) waiver for People with Brain Injuries (Code J)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
# with Section 1915(c) waiver for People with HIV/AIDS (Code K)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
# with Section 1915(c) waiver for MR/DD (Code L)	N/A	N/A	N/A	N/A	N/A	3,145	N/A	N/A	N/A	15% (+/-)	No
# with Section 1915(c) waiver for People with MI/SED (Code M)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
# with Section 1915(c) waiver for Technologically Dependent/Medically Fragile (Code N)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
# with Section 1915(c) waiver enrollment for unspecified or unknown populations (Code O)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
% of Section 1915(c) waiver enrollees with no waiver claim (Program Type 6 or 7)	<10%	N/A	No	N/A	No	55.05	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	16.06	Yes	N/A	N/A	15% (+/-)	No
% of Section 1915(c) waiver enrollees with any HMO/HIO enrollment	N/A	N/A	N/A	N/A	N/A	0.97	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	151,715	N/A	N/A	N/A	15% (+/-)	No
% AGED enrollees with any 1115 waiver	N/A	N/A	N/A	N/A	N/A	0.15	N/A	N/A	N/A	15% (+/-)	No
% DISABLED enrollees with any 1115 waiver	N/A	N/A	N/A	N/A	N/A	2.71	N/A	N/A	N/A	15% (+/-)	No
% CHILD enrollees with any 1115 waiver	N/A	N/A	N/A	N/A	N/A	95.07	N/A	N/A	N/A	15% (+/-)	No
% ADULT enrollees with any 1115 waiver	N/A	N/A	N/A	N/A	N/A	99.73	N/A	N/A	N/A	15% (+/-)	No
% with any HMO/HIO enrollment	N/A	N/A	N/A	N/A	N/A	96.54	N/A	N/A	N/A	15% (+/-)	No
# with any 1915(b) waiver (Code 2)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No

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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
% AGED enrollees with any 1915(b) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% DISABLED enrollees with any 1915(b) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% CHILD enrollees with any 1915(b) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% ADULT enrollees with any 1915(b) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% with any HMO/HIO enrollment	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
# with any combined 1915(b)(c) waiver (Code 4)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
% AGED enrollees with any combined 1915(b)(c) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% DISABLED enrollees with any combined 1915(b)(c) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% CHILD enrollees with any combined 1915(b)(c) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% ADULT enrollees with any combined 1915(b)(c) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% with any HMO/HIO enrollment	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
# with 1115 HIFA waiver (Code 5)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
# with 1115 Pharmacy waiver coverage (Code 6)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
% AGED enrollees with Pharmacy waiver coverage	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% DISABLED enrollees with any Pharmacy waiver coverage	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% CHILD enrollees with any Pharmacy waiver coverage	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% ADULT enrollees with any combined 1915(b)(c) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% with any HMO/HIO enrollment	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
# with other type of waiver (Code 7)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
# with unknown type of waiver (Code 9)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
# with 1115 disaster-related waiver (Code A)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
# with 1115 Family Planning Only waiver (Code F)	N/A	N/A	N/A	N/A	N/A	1,610	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	176	N/A	246	N/A	387	N/A	39.77	57.32	N/A	N/A
# with ANY Family Planning Only enrollment	N/A	860	N/A	1,307	N/A	1,610	N/A	51.98	23.18	N/A	N/A
# PYE ANY FP Only	N/A	296	N/A	485	N/A	635	N/A	63.73	30.90	N/A	N/A
<i>Aliens with Restricted Benefits (Code 2)</i>											
# Aliens with ONLY restricted benefits	N/A	219	N/A	236	N/A	191	N/A	7.76	-19.10	N/A	N/A
# Aliens with ANY restricted benefits	N/A	251	N/A	278	N/A	224	N/A	10.76	-19.40	N/A	N/A
# PYE Aliens with ANY restricted benefits	N/A	66	N/A	72	N/A	63	N/A	10.18	-13.20	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	3,776	N/A	3,974	N/A	4,204	N/A	5.24	5.79	N/A	N/A
# EDB Duals with ANY restricted benefits enrollment	N/A	4,568	N/A	4,783	N/A	5,080	N/A	4.71	6.21	N/A	N/A
# PYE EDB Duals with ANY restricted benefits	N/A	3,359	N/A	3,745	N/A	3,879	N/A	11.47	3.59	N/A	N/A
% EDB Duals with ONLY restricted benefits enrollment	N/A	N/A	N/A	N/A	N/A	10.62	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	179,035	N/A	184,356	N/A	185,935	N/A	2.97	0.86	15% (+/-)	Yes
June % Full Scope Benefits (Code 1)	>80%	93.78	Yes	93.49	Yes	93.32	Yes	-0.31	-0.18	15% (+/-)	Yes
June % Restricted Benefits Alien (Code 2)	<5%	0.03	Yes	0.03	Yes	0.04	Yes	17.27	3.80	15% (+/-)	Yes
June % Restricted Benefits Dual (Code 3)	<5%	1.91	Yes	2.04	Yes	2.09	Yes	7.01	2.13	15% (+/-)	Yes
June % Restricted Benefits Pregnant (Code 4)	<5%	2.12	Yes	2.26	Yes	2.32	Yes	6.42	2.75	15% (+/-)	Yes
June % Restricted Benefits Other (Code 5)	0%	2.01	No	1.91	No	1.92	No	-4.59	0.13	15% (+/-)	Yes
June % Restricted Benefits Family Planning (Code 6)	<5%	0.16	Yes	0.27	Yes	0.32	Yes	69.60	20.85	15% (+/-)	No
June % Unknown Benefits (Code 9)	0%	0.00	Yes	0.00	Yes	0.00	No	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%	11.29	Yes	11.76	Yes	12.30	No	4.16	4.57	15% (+/-)	Yes

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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
June Total Enrollees with TANF Flag (Code 2)	N/A	21,779	N/A	0	N/A	0	N/A	-100.00	Div by 0	15% (+/-)	N/A
June # with M-SCHIP (Code 2) - Child (<19 Years)	N/A	8,817	N/A	9,488	N/A	9,800	N/A	7.61	3.29	15% (+/-)	Yes
June # with M-SCHIP (Code 2) - Adult (>18 Years)	N/A	13,852	N/A	14,799	N/A	15,162	N/A	6.84	2.45	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	\$1,369,148,427	N/A	\$1,498,423,194	N/A	\$1,670,132,762	N/A	9.44	11.46	15% (+/-)	Yes
Average Medicaid Amt Paid per Enrollee	N/A	\$6,470	N/A	\$6,916	N/A	\$7,599	N/A	6.89	9.88	15% (+/-)	Yes
25th Percentile	N/A	\$753	N/A	\$893	N/A	\$1,027	N/A	18.59	15.01	15% (+/-)	No
50th Percentile (Median)	N/A	\$1,382	N/A	\$1,693	N/A	\$1,857	N/A	22.50	9.69	15% (+/-)	Yes
75th Percentile	N/A	\$2,727	N/A	\$3,179	N/A	\$3,764	N/A	16.57	18.40	15% (+/-)	No
95th Percentile	N/A	\$35,191	N/A	\$36,787	N/A	\$40,175	N/A	4.54	9.21	15% (+/-)	Yes
99th Percentile	N/A	\$103,072	N/A	\$105,557	N/A	\$115,572	N/A	2.41	9.49	15% (+/-)	Yes
<b>AVG MEDICAID AMT PD/ENROLLEE BY MAX ELIGIBILITY GROUP</b>											
MAX Aged	N/A	\$16,882	N/A	\$18,136	N/A	\$18,555	N/A	7.43	2.31	15% (+/-)	Yes
MAX Disabled	N/A	\$16,133	N/A	\$16,953	N/A	\$19,191	N/A	5.08	13.20	10% (+/-)	No
MAX Child	N/A	\$2,451	N/A	\$2,703	N/A	\$2,980	N/A	10.29	10.24	10% (+/-)	No
MAX Adult	N/A	\$2,280	N/A	\$2,569	N/A	\$2,757	N/A	12.66	7.36	10% (+/-)	Yes
<b>AVG MEDICAID AMT PD/EDB DUAL ENROLLEE</b>											
All EDB Dual Enrollees	N/A	\$17,360	N/A	\$18,034	N/A	\$19,539	N/A	3.89	8.35	15% (+/-)	Yes
MAX Aged	N/A	\$17,425	N/A	\$18,571	N/A	\$19,043	N/A	6.58	2.54	10% (+/-)	Yes
MAX Disabled	N/A	\$18,439	N/A	\$18,697	N/A	\$21,511	N/A	1.40	15.05	10% (+/-)	No
<b>AVG MEDICAID AMT PD/LONG-TERM CARE ENROLLEE</b>											
Enrollees with ILTC claims	N/A	N/A	N/A	N/A	N/A	\$59,179	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	\$35,372	N/A	N/A	N/A	15% (+/-)	No
Enrollees with ILTC and CLTC claims (excluding CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	\$78,529	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	\$51,912	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	\$26,302	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	\$15,913	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	\$22,573	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for People with Brain Injuries (Code J)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for People with HIV/AIDS (Code K)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for MR/DD (Code L)	N/A	N/A	N/A	N/A	N/A	\$79,985	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for People with MI/SED (Code M)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for Technologically Dependent/Medically Fragile (Code N)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for none of the above (Code O)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
<b>AVG 1915(c) WAIVER AMT PD (PROGRAM TYPES 6/7) PER ENROLLEE IN ANY 1915(c) WAIVER - MOST RECENT</b>											
All Section 1915(c) enrollees	N/A	N/A	N/A	N/A	N/A	\$4,541	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	\$8,696	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	\$6,657	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	\$2,138	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for People with Brain Injuries (Code J)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for People with HIV/AIDS (Code K)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for MR/DD (Code L)	N/A	N/A	N/A	N/A	N/A	\$1,066	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for People with MI/SED (Code M)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for Technologically Dependent/Medically Fragile (Code N)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for none of the above (Code O)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
<b>EXPENDITURES FOR RESTRICTED BENEFIT ENROLLEES</b>											
<i>Expenditures for Family Planning enrollees with Restricted Benefits</i>											
Expenditures for ONLY FP Only enrollees	N/A	\$36,677	N/A	\$51,027	N/A	\$69,743	N/A	39.13	36.68	N/A	N/A
Average Medicaid Paid for ONLY FP Only enrollees	N/A	\$208	N/A	\$207	N/A	\$180	N/A	-0.46	-13.10	N/A	N/A
<i>Expenditures for Aliens with Restricted Benefits</i>											
Expend for Aliens with restricted benefits ONLY enrollment	N/A	\$1,999,813	N/A	\$2,559,104	N/A	\$2,057,309	N/A	27.97	-19.60	N/A	N/A
Avg Medicaid Paid for Alien enrollees with restricted benefits ONLY	N/A	\$9,132	N/A	\$10,844	N/A	\$10,771	N/A	18.75	-0.67	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	\$122,016	N/A	\$148,022	N/A	\$161,426	N/A	21.31	9.06	N/A	N/A
Avg Medicaid Paid for EDB Duals with only restricted benefit enrollment	N/A	\$32	N/A	\$37	N/A	\$38	N/A	15.27	3.09	N/A	N/A
<b>Prescription Drug Enrollees</b>											
Expenditures for Prescription Drug ONLY enrollees (may also have a month or more of Code 3)	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A	N/A
Avg Medicaid Paid for Prescription Drug ONLY enrollees	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A	N/A
<b>Dual Prescription Drug Enrollees</b>											
Expenditures for Prescription Drug ONLY enrollees who are also EDB duals	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A	N/A
<b>MEDICAID ENROLLEES - EXCLUDING SELECT RESTRICTED BENEFIT GROUPS (excludes people with missing eligibility information, S-SCHIP only, FP Only, Aliens with only restricted benefits, duals with restricted benefits only, and prescription drug only enrollees) ---- NOTE: S-SCHIP only, FP Only, duals with restricted benefits, and Aliens with restricted benefits were NOT excluded prior to 2001. Prescription drug only enrollees were NOT excluded prior to 2003.</b>											
Total Medicaid Enrollees	N/A	207,443	N/A	212,206	N/A	215,002	N/A	2.30	1.32	10% (+/-)	Yes
MAX Aged Total	N/A	17,848	N/A	17,588	N/A	17,707	N/A	-1.46	0.68	10% (+/-)	Yes
MAX Disabled Total	N/A	39,997	N/A	41,222	N/A	42,258	N/A	3.06	2.51	10% (+/-)	Yes
MAX Child Total	N/A	96,164	N/A	98,488	N/A	99,440	N/A	2.42	0.97	10% (+/-)	Yes
MAX Adult Total	N/A	53,434	N/A	54,908	N/A	55,597	N/A	2.76	1.26	10% (+/-)	Yes
Total Medicaid PYE (Person Years of Enrollment)	N/A	176,125	N/A	180,738	N/A	182,677	N/A	2.62	1.07	10% (+/-)	Yes
Total EDB Duals	N/A	34,239	N/A	34,795	N/A	35,374	N/A	1.62	1.66	10% (+/-)	Yes
MAX Aged	N/A	16,606	N/A	16,543	N/A	16,571	N/A	-0.38	0.17	10% (+/-)	Yes
MAX Disabled	N/A	16,284	N/A	16,743	N/A	17,190	N/A	2.82	2.67	10% (+/-)	Yes
<b>Total Medicaid Amount Paid</b>											
Total Medicaid Amt Paid	N/A	\$1,366,989,921	N/A	\$1,495,665,041	N/A	\$1,667,844,284	N/A	9.41	11.51	15% (+/-)	Yes
Average Medicaid Amt Paid per Enrollee	N/A	\$6,590	N/A	\$7,048	N/A	\$7,757	N/A	6.96	10.06	15% (+/-)	Yes
<b>AVG MEDICAID AMT PD/ENROLLEE BY MAX ELIGIBILITY GROUP</b>											
MAX Aged	N/A	\$19,735	N/A	\$21,386	N/A	\$22,037	N/A	8.36	3.04	15% (+/-)	Yes
MAX Disabled	N/A	\$16,418	N/A	\$17,272	N/A	\$19,578	N/A	5.20	13.35	10% (+/-)	No
MAX Child	N/A	\$2,451	N/A	\$2,703	N/A	\$2,980	N/A	10.29	10.24	10% (+/-)	No
MAX Adult	N/A	\$2,290	N/A	\$2,573	N/A	\$2,769	N/A	12.36	7.61	10% (+/-)	Yes
<b>AVG MEDICAID AMT PD/EDB DUAL ENROLLEE</b>											
All EDB Dual Enrollees	N/A	\$19,271	N/A	\$20,090	N/A	\$21,858	N/A	4.25	8.80	15% (+/-)	Yes
MAX Aged	N/A	\$20,594	N/A	\$22,123	N/A	\$22,848	N/A	7.43	3.28	10% (+/-)	Yes
MAX Disabled	N/A	\$19,286	N/A	\$19,592	N/A	\$22,617	N/A	1.59	15.44	10% (+/-)	No
<b>MANAGED CARE PLAN INFORMATION (Enrollees in Capitated Plans - PCCM, HMO, HIO, &amp; PHPs, excludes people with missing eligibility information, S-SCHIP only, FP Only, Aliens with only restricted benefits, duals with restricted benefits only, and prescription drug only enrollees) ---- NOTE: FP Only, duals with restricted benefits, and Aliens with restricted benefits were NOT excluded prior to 2003. Prescription drug only enrollees were NOT excluded prior to 2003.</b>											
% Total Enrollees in MC Anytime During Year	N/A	70.91	N/A	71.39	N/A	71.45	N/A	0.68	0.09	25% (+)	Yes
Total MC Enrollees	N/A	147,103	N/A	151,500	N/A	153,628	N/A	2.99	1.41	25% (+)	Yes
Aged	N/A	37	N/A	30	N/A	42	N/A	-18.90	40.00	25% (+)	No
Disabled	N/A	3,742	N/A	5,046	N/A	5,354	N/A	34.85	6.10	25% (+)	Yes
Child	N/A	91,567	N/A	93,683	N/A	94,715	N/A	2.31	1.10	25% (+)	Yes
Adult	N/A	51,757	N/A	52,741	N/A	53,517	N/A	1.90	1.47	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	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
% of MC Enrollees in Prenatal (Dups)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
% of MC Enrollees in LTC (Dups)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
% of MC Enrollees in PACE (Dups)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
% of MC Enrollees in PCCM (Dups)	N/A	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%	4.41	Yes	4.93	Yes	5.38	Yes	11.77	9.15	25% (+)	Yes
% 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	0.97	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	175,870	N/A	180,742	N/A	182,183	N/A	2.77	0.80	25% (+)	Yes
June % HMO/HIO only (Code 1)	N/A	65.50	N/A	67.26	N/A	66.99	N/A	2.68	-0.41	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	34.50	N/A	32.74	N/A	33.01	N/A	-5.09	0.83	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	\$204,745,433	N/A	\$261,094,606	N/A	\$301,026,510	N/A	27.52	15.29	15% (+/-)	No
HMO/HIO	N/A	\$204,745,433	N/A	\$261,094,606	N/A	\$301,026,510	N/A	27.52	15.29	15% (+/-)	No
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	0.94	Yes	1.01	Yes	0.93	Yes	8.09	-8.48	15% (+/-)	Yes
HMO/HIO	-9-2	0.94	Yes	1.01	Yes	0.93	Yes	8.09	-8.48	15% (+/-)	Yes
PHP	-9-2	Div by 0	No	Div by 0	No	Div by 0	No	Div by 0	Div by 0	15% (+/-)	N/A
PCCM	-9-2	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	\$148	N/A	\$179	N/A	\$205	N/A	21.39	14.34	15% (+/-)	Yes
HMO/HIO	N/A	\$148	N/A	\$179	N/A	\$205	N/A	21.39	14.34	15% (+/-)	Yes
PHP	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
PCCM	N/A	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	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Total Medicaid Amt Paid	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Count of Enrollees	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
<b>Persons enrolled in PCCM only</b>											
Total Cap Payments	N/A	\$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	147,103	N/A	151,500	N/A	153,628	N/A	2.99	1.41	15% (+/-)	Yes
Aged	N/A	37	N/A	30	N/A	42	N/A	-18.90	40.00	25% (+)	No
Disabled	N/A	3,742	N/A	5,046	N/A	5,354	N/A	34.85	6.10	25% (+)	Yes
Child	N/A	91,567	N/A	93,683	N/A	94,715	N/A	2.31	1.10	25% (+)	Yes
Adult	N/A	51,757	N/A	52,741	N/A	53,517	N/A	1.90	1.47	25% (+)	Yes
Total Ever Enrolled in HMO/HIO PYE	N/A	115,557	N/A	121,395	N/A	122,407	N/A	5.05	0.83	25% (+)	Yes
Total Cap Payments	N/A	\$204,745,433	N/A	\$261,094,606	N/A	\$301,026,510	N/A	27.52	15.29	15% (+/-)	No
Average Cap Payments	N/A	\$1,392	N/A	\$1,723	N/A	\$1,959	N/A	23.82	13.70	15% (+/-)	Yes
Aged	N/A	\$1,114	N/A	\$1,229	N/A	\$1,383	N/A	10.33	12.52	15% (+/-)	Yes
Disabled	N/A	\$1,237	N/A	\$4,507	N/A	\$5,368	N/A	264.40	19.12	15% (+/-)	No
Child	N/A	\$984	N/A	\$1,176	N/A	\$1,397	N/A	19.53	18.81	15% (+/-)	No
Adult	N/A	\$2,125	N/A	\$2,429	N/A	\$2,613	N/A	14.34	7.59	15% (+/-)	Yes
Total FFS Payments	N/A	\$191,787,131	N/A	\$203,992,325	N/A	\$219,700,315	N/A	6.36	7.70	15% (+/-)	Yes
Average FFS Payments per enrollee	N/A	\$1,303.76	N/A	\$1,346	N/A	\$1,430	N/A	3.28	6.21	15% (+/-)	Yes
Aged	N/A	\$2,491.68	N/A	\$2,283	N/A	\$2,016	N/A	-8.38	-11.70	15% (+/-)	Yes
Disabled	N/A	\$12,634.91	N/A	\$10,020	N/A	\$10,441	N/A	-20.70	4.20	15% (+/-)	Yes
Child	N/A	\$1,449.07	N/A	\$1,504	N/A	\$1,589	N/A	3.82	5.61	15% (+/-)	Yes
Adult	N/A	\$226.60	N/A	\$236	N/A	\$247	N/A	4.00	4.96	15% (+/-)	Yes
Total FFS Payments by Type of Service											
IP	N/A	\$25,608,877	N/A	\$23,252,844	N/A	\$29,636,269	N/A	-9.20	27.45	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	\$7,128,103	N/A	\$4,357,482	N/A	\$4,249,646	N/A	-38.90	-2.47	15% (+/-)	Yes
Drug	N/A	\$4,108,183	N/A	\$2,926,408	N/A	\$2,821,102	N/A	-28.80	-3.60	15% (+/-)	Yes
All Other (excluding cap payments)	N/A	\$154,941,968	N/A	\$173,455,591	N/A	\$182,993,298	N/A	11.95	5.50	15% (+/-)	Yes
Average FFS Payments by Type of Service											
IP	N/A	\$174	N/A	\$153	N/A	\$193	N/A	-11.80	25.69	15% (+/-)	No
ILTC	N/A	\$48	N/A	\$29	N/A	\$28	N/A	-40.60	-3.83	15% (+/-)	Yes
Drug	N/A	\$28	N/A	\$19	N/A	\$18	N/A	-30.80	-4.93	15% (+/-)	Yes
All Other (excluding cap payments)	N/A	\$1,053	N/A	\$1,145	N/A	\$1,191	N/A	8.70	4.04	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	27,610	N/A	27,625	N/A	27,902	N/A	0.05	1.00	15% (+/-)	Yes
Total Non-Dual FFS Recipients	N/A	22,773	N/A	22,737	N/A	23,426	N/A	-0.16	3.03	15% (+/-)	Yes
Total Non-Dual FFS PYE	N/A	23,962	N/A	23,530	N/A	24,173	N/A	-1.80	2.73	15% (+/-)	Yes
MAX Aged Total	N/A	1,226	N/A	1,040	N/A	1,117	N/A	-15.20	7.40	10% (+/-)	Yes
11: Aged, Cash	N/A	143	N/A	144	N/A	167	N/A	0.70	15.97	10% (+/-)	No
21: Aged, MN	N/A	57	N/A	47	N/A	44	N/A	-17.50	-6.38	10% (+/-)	Yes
31: Aged, Poverty	N/A	342	N/A	85	N/A	74	N/A	-75.10	-12.90	10% (+/-)	No
41: Other Aged	N/A	684	N/A	764	N/A	832	N/A	11.70	8.90	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	20,151	N/A	19,653	N/A	20,018	N/A	-2.47	1.86	10% (+/-)	Yes
12: Disabled, Cash	N/A	16,862	N/A	16,100	N/A	16,243	N/A	-4.52	0.89	10% (+/-)	Yes
22: Disabled, MN	N/A	180	N/A	202	N/A	251	N/A	12.22	24.26	10% (+/-)	No
32: Disabled, Poverty	N/A	15	N/A	295	N/A	321	N/A	1,867.00	8.81	10% (+/-)	Yes
42: Other Disabled	N/A	3,094	N/A	3,056	N/A	3,203	N/A	-1.23	4.81	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	4,595	N/A	4,803	N/A	4,725	N/A	4.53	-1.62	10% (+/-)	Yes
14: AFDC Child, Cash	N/A	230	N/A	190	N/A	223	N/A	-17.40	17.37	10% (+/-)	No
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	2	N/A	3	N/A	Div by 0	50.00	10% (+/-)	No
34: Child Poverty	N/A	670	N/A	959	N/A	868	N/A	43.13	-9.49	10% (+/-)	Yes
44: Other Child	N/A	218	N/A	268	N/A	315	N/A	22.94	17.54	10% (+/-)	No
48: Foster Care Child	N/A	2,159	N/A	1,558	N/A	1,574	N/A	-27.80	1.03	10% (+/-)	Yes
54: 1115 Child	N/A	1,318	N/A	1,826	N/A	1,742	N/A	38.54	-4.60	10% (+/-)	Yes
MAX Adult Total	N/A	1,638	N/A	2,129	N/A	2,042	N/A	29.98	-4.09	10% (+/-)	Yes
15: AFDC Adult, Cash	N/A	149	N/A	103	N/A	145	N/A	-30.90	40.78	10% (+/-)	No
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	2	N/A	4	N/A	Div by 0	100.00	10% (+/-)	No
35: Adult, Poverty	N/A	111	N/A	115	N/A	135	N/A	3.60	17.39	10% (+/-)	No
45: Other Adult	N/A	474	N/A	600	N/A	552	N/A	26.58	-8.00	10% (+/-)	Yes
55: 1115 Adult	N/A	904	N/A	1,309	N/A	1,206	N/A	44.80	-7.87	10% (+/-)	Yes
# Non-Dual FFS Enrollees w/ MSIS Dual Code/No EDB Confirmation	N/A	392	N/A	393	N/A	453	N/A	0.26	15.27	10% (+/-)	No
Total FFS Medicaid Amt Paid	N/A	\$315,187,071	N/A	\$338,005,281	N/A	\$381,948,442	N/A	7.24	13.00	15% (+/-)	Yes
Average FFS Medicaid Amt Paid per Non-Dual FFS Enrollee	N/A	\$11,416	N/A	\$12,235	N/A	\$13,689	N/A	7.18	11.88	15% (+/-)	Yes
Avg FFS Medicaid Amt Paid per Non-Dual FFS Recipient (User of any service)	N/A	\$13,840	N/A	\$14,866	N/A	\$16,304	N/A	7.41	9.68	15% (+/-)	Yes
<b>AVG FFS MEDICAID AMT PD/NON-DUAL FFS ENROLLEE BY MAX ELIG GRP</b>											
All Aged	N/A	\$8,328	N/A	\$9,737	N/A	\$10,290	N/A	16.92	5.68	15% (+/-)	Yes
11: Aged, Cash	N/A	\$7,801	N/A	\$7,822	N/A	\$12,149	N/A	0.28	55.31	15% (+/-)	No
21: Aged, MN	N/A	\$22,597	N/A	\$25,624	N/A	\$31,122	N/A	13.39	21.46	15% (+/-)	No
31: Aged, Poverty	N/A	\$3,543	N/A	\$0	N/A	\$47	N/A	-100.00	9,888.00	15% (+/-)	No
41: Other Aged	N/A	\$9,642	N/A	\$10,204	N/A	\$9,726	N/A	5.83	-4.68	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	\$14,471	N/A	\$15,880	N/A	\$17,792	N/A	9.74	12.04	15% (+/-)	Yes
12: Disabled, Cash	N/A	\$14,105	N/A	\$15,574	N/A	\$17,680	N/A	10.42	13.53	15% (+/-)	Yes
22: Disabled, MN	N/A	\$18,399	N/A	\$23,248	N/A	\$32,122	N/A	26.35	38.17	15% (+/-)	No
32: Disabled, Poverty	N/A	\$356	N/A	\$5,718	N/A	\$7,588	N/A	1,508.00	32.71	15% (+/-)	No
42: Other Disabled	N/A	\$16,305	N/A	\$17,989	N/A	\$18,258	N/A	10.33	1.50	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: RI

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	\$2,789	N/A	\$3,134	N/A	\$2,850	N/A	12.38	-9.07	15% (+/-)	Yes
14: AFDC Child, Cash	N/A	\$1,590	N/A	\$875	N/A	\$258	N/A	-44.90	-70.60	15% (+/-)	No
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	\$0	N/A	\$6,043	N/A	Div by 0	Div by 0	15% (+/-)	N/A
34: Child, Poverty	N/A	\$263	N/A	\$627	N/A	\$715	N/A	138.30	13.99	15% (+/-)	Yes
44: Other Child	N/A	\$421	N/A	\$444	N/A	\$442	N/A	5.48	-0.45	15% (+/-)	Yes
48: Foster Care Child	N/A	\$5,345	N/A	\$8,738	N/A	\$7,567	N/A	63.46	-13.40	15% (+/-)	Yes
54: 1115 Child	N/A	\$487	N/A	\$304	N/A	\$415	N/A	-37.50	36.43	15% (+/-)	No
All Adult	N/A	\$342	N/A	\$341	N/A	\$404	N/A	-0.29	18.42	15% (+/-)	No
15: AFDC Adult, Cash	N/A	\$260	N/A	\$340	N/A	\$1,156	N/A	30.94	239.70	15% (+/-)	No
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	\$2,837	N/A	\$682	N/A	Div by 0	-76.00	15% (+/-)	No
35: Adult, Poverty	N/A	\$529	N/A	\$500	N/A	\$440	N/A	-5.37	-12.00	15% (+/-)	Yes
45: Other Adult	N/A	\$466	N/A	\$262	N/A	\$358	N/A	-43.70	36.70	15% (+/-)	No
55: 1115 Adult	N/A	\$267	N/A	\$359	N/A	\$329	N/A	34.35	-8.44	15% (+/-)	Yes
<b>FFS EXPENDITURES AND USERS BY MAX TOS</b>											
IP: Total Medicaid Paid (TOS 01)	N/A	\$63,359,119	N/A	\$72,056,941	N/A	\$85,243,338	N/A	13.73	18.30	15% (+/-)	No
IP: Number of Users	N/A	3,246	N/A	3,229	N/A	3,386	N/A	-0.52	4.86	15% (+/-)	Yes
IP: Average Medicaid Pd per User	N/A	\$19,519	N/A	\$22,316	N/A	\$25,175	N/A	14.33	12.81	15% (+/-)	Yes
IP: Average Medicaid Covered Days Per User	N/A	16	N/A	17	N/A	18	N/A	6.99	8.50	15% (+/-)	Yes
MH Aged: Total Medicaid Paid (TOS 02)	N/A	\$112,507	N/A	\$122,491	N/A	\$77,876	N/A	8.87	-36.40	15% (+/-)	No
MH Aged: Number of Users	N/A	99	N/A	113	N/A	89	N/A	14.14	-21.20	15% (+/-)	No
MH Aged: Avg Medicaid Pd per User	N/A	\$1,136	N/A	\$1,084	N/A	\$875	N/A	-4.61	-19.30	15% (+/-)	No
IP Psych < 21: Total Medicaid Paid (TOS 04)	N/A	\$8,149,354	N/A	\$6,085,875	N/A	\$4,718,444	N/A	-25.30	-22.50	15% (+/-)	No
IP Psych < 21: Number of Users	N/A	125	N/A	89	N/A	76	N/A	-28.80	-14.60	15% (+/-)	Yes
IP Psych<21 :Avg Medicaid Pd per User	N/A	\$65,195	N/A	\$68,381	N/A	\$62,085	N/A	4.89	-9.21	15% (+/-)	Yes
ICF/MR: Total Medicaid Pd (TOS 05)	N/A	\$4,418,509	N/A	\$4,838,182	N/A	\$4,630,395	N/A	9.50	-4.29	15% (+/-)	Yes
ICF/MR: Number of Users	N/A	35	N/A	33	N/A	30	N/A	-5.71	-9.09	15% (+/-)	Yes
ICF/MR: Avg Medicaid Pd per User	N/A	\$126,243	N/A	\$146,612	N/A	\$154,347	N/A	16.13	5.28	15% (+/-)	Yes
NF: Total Medicaid Paid (TOS 07)	N/A	\$57,548,858	N/A	\$59,538,075	N/A	\$60,263,502	N/A	3.46	1.22	15% (+/-)	Yes
NF Number of Users	N/A	840	N/A	822	N/A	791	N/A	-2.14	-3.77	15% (+/-)	Yes
NF:Avg Medicaid Pd per User	N/A	\$68,511	N/A	\$72,431	N/A	\$76,186	N/A	5.72	5.19	15% (+/-)	Yes
Physician: Total Medicaid Paid (TOS 08)	N/A	\$7,086,550	N/A	\$7,834,669	N/A	\$7,994,948	N/A	10.56	2.05	15% (+/-)	Yes
Physician: Number of Users	N/A	15,774	N/A	15,571	N/A	15,980	N/A	-1.29	2.63	15% (+/-)	Yes
Physician: Avg Medicaid Pd per User	N/A	\$449	N/A	\$503	N/A	\$500	N/A	12.00	-0.57	15% (+/-)	Yes
Dental: Total Medicaid Paid (TOS 09)	N/A	\$1,631,360	N/A	\$1,621,914	N/A	\$1,635,299	N/A	-0.58	0.83	15% (+/-)	Yes
Dental: Number of Users	N/A	6,543	N/A	6,363	N/A	6,336	N/A	-2.75	-0.42	15% (+/-)	Yes
Dental: Avg Medicaid Pd per User	N/A	\$249	N/A	\$255	N/A	\$258	N/A	2.23	1.26	15% (+/-)	Yes
Other Practitioner: Total Medicaid Pd (TOS 10)	N/A	\$577,757	N/A	\$419,679	N/A	\$403,442	N/A	-27.40	-3.87	15% (+/-)	Yes
Other Practitioner: Number of Users	N/A	5,303	N/A	5,565	N/A	5,344	N/A	4.94	-3.97	15% (+/-)	Yes
Other Practitioner: Avg Medicaid Pd per User	N/A	\$109	N/A	\$75	N/A	\$75	N/A	-30.80	0.11	15% (+/-)	Yes
OPD: Total Medicaid Paid (TOS 11)	N/A	\$13,432,956	N/A	\$18,492,887	N/A	\$19,333,647	N/A	37.67	4.55	15% (+/-)	Yes
OPD Number of Users	N/A	11,318	N/A	11,410	N/A	12,271	N/A	0.81	7.55	15% (+/-)	Yes
OPD: Avg Medicaid Pd per User	N/A	\$1,187	N/A	\$1,621	N/A	\$1,576	N/A	36.56	-2.79	15% (+/-)	Yes
Clinic: Total Medicaid Paid (TOS 12)	N/A	\$2,295,267	N/A	\$3,314,535	N/A	\$2,761,925	N/A	44.41	-16.70	15% (+/-)	No
Clinic: Number of Users	N/A	3,811	N/A	4,077	N/A	4,308	N/A	6.98	5.67	15% (+/-)	Yes
Clinic: Avg Medicaid Pd per User	N/A	\$602	N/A	\$813	N/A	\$641	N/A	34.99	-21.10	15% (+/-)	No
HH: Total Medicaid Paid (TOS 13)	N/A	\$5,112,908	N/A	\$5,390,695	N/A	\$5,380,256	N/A	5.43	-0.19	15% (+/-)	Yes
HH: Number of Users	N/A	1,166	N/A	1,255	N/A	1,228	N/A	7.63	-2.15	15% (+/-)	Yes
HH: Avg Medicaid Pd per User	N/A	\$4,385	N/A	\$4,295	N/A	\$4,381	N/A	-2.04	2.00	15% (+/-)	Yes
Lab/Xray: Total Medicaid Paid (TOS 15)	N/A	\$10,585,737	N/A	\$10,946,147	N/A	\$11,234,038	N/A	3.41	2.63	15% (+/-)	Yes
Lab/Xray: Number of Users	N/A	14,585	N/A	13,921	N/A	14,005	N/A	-4.55	0.60	15% (+/-)	Yes
Lab/Xray:Avg Medicaid Pd per User	N/A	\$726	N/A	\$786	N/A	\$802	N/A	8.34	2.02	15% (+/-)	Yes
Drugs: Total Medicaid Paid (TOS 16)	N/A	\$46,131,431	N/A	\$51,968,952	N/A	\$56,590,079	N/A	12.65	8.89	15% (+/-)	Yes
Drugs: Number of Users	N/A	19,532	N/A	19,609	N/A	20,272	N/A	0.39	3.38	15% (+/-)	Yes
Drugs: Avg Medicaid Pd per User	N/A	\$2,362	N/A	\$2,650	N/A	\$2,792	N/A	12.21	5.33	15% (+/-)	Yes
Other Services: Total Medicaid Paid (TOS 19)	N/A	\$15,338,419	N/A	\$15,062,931	N/A	\$38,754,765	N/A	-1.80	157.30	15% (+/-)	No

2003-2005 MAX PSF VALIDATION TABLE  
STATE: RI

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	5,277	N/A	4,721	N/A	5,484	N/A	-10.50	16.16	15% (+/-)	No
Other Services: Avg Medicaid Pd per User	N/A	\$2,907	N/A	\$3,191	N/A	\$7,067	N/A	9.77	121.50	15% (+/-)	No
Transportation: Total Medicaid Paid (TOS 26)	N/A	\$886,313	N/A	\$1,121,880	N/A	\$1,672,354	N/A	26.58	49.07	15% (+/-)	No
Transportation: Number of Users	N/A	3,238	N/A	3,180	N/A	3,348	N/A	-1.79	5.28	15% (+/-)	Yes
Transportation: Avg Medicaid Pd per User	N/A	\$274	N/A	\$353	N/A	\$500	N/A	28.89	41.59	15% (+/-)	No
PCS: Total Medicaid Paid (TOS 30)	N/A	\$1,141,129	N/A	\$1,173,839	N/A	\$1,444,187	N/A	2.87	23.03	15% (+/-)	No
PCS: Number of Users	N/A	280	N/A	286	N/A	325	N/A	2.14	13.64	15% (+/-)	Yes
PCS: Avg Medicaid Pd per User	N/A	\$4,075	N/A	\$4,104	N/A	\$4,444	N/A	0.71	8.27	15% (+/-)	Yes
Target Case Management: Total Medicaid Pd (TOS 31)	N/A	\$2,355,122	N/A	\$2,484,137	N/A	\$2,354,451	N/A	5.48	-5.22	15% (+/-)	Yes
Target Case Management: Number of Users	N/A	1,339	N/A	1,216	N/A	1,331	N/A	-9.19	9.46	15% (+/-)	Yes
Target Case Management: Avg Medicaid Pd per User	N/A	\$1,759	N/A	\$2,043	N/A	\$1,769	N/A	16.15	-13.40	15% (+/-)	Yes
Rehab Services: Total Medicaid Pd (TOS 33)	N/A	\$25,236,202	N/A	\$9,518,656	N/A	\$10,636,285	N/A	-62.30	11.74	15% (+/-)	Yes
Rehab Services: Number of Users	N/A	3,719	N/A	1,489	N/A	1,368	N/A	-60.00	-8.13	15% (+/-)	Yes
Rehab Services: Avg Medicaid Pd per User	N/A	\$6,786	N/A	\$6,393	N/A	\$7,775	N/A	-5.79	21.63	15% (+/-)	No
PT/OT/Speech/Hear: Total Medicaid Paid (TOS 34)	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
PT/OT/Speech/Hear: Number of Users	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
PT/OT/Speech/Hear: Avg Medicaid Pd per User	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Hospice: Total Medicaid Paid (TOS 35)	N/A	\$270,631	N/A	\$257,793	N/A	\$263,891	N/A	-4.74	2.37	15% (+/-)	Yes
Hospice: Number of Users	N/A	59	N/A	73	N/A	59	N/A	23.73	-19.20	15% (+/-)	No
Hospice: Avg Medicaid Pd per User	N/A	\$4,587	N/A	\$3,531	N/A	\$4,473	N/A	-23.00	26.66	15% (+/-)	No
DME: Total Medicaid Paid (TOS 51)	N/A	\$10,321,108	N/A	\$10,223,162	N/A	\$10,700,612	N/A	-0.95	4.67	15% (+/-)	Yes
DME: Number of Users	N/A	6,912	N/A	8,767	N/A	8,632	N/A	26.84	-1.54	15% (+/-)	Yes
DME: Avg Medicaid Pd per User	N/A	\$1,493	N/A	\$1,166	N/A	\$1,240	N/A	-21.90	6.31	15% (+/-)	Yes
Residential Care: Total Medicaid Paid (TOS 52)	N/A	\$13,723,840	N/A	\$13,625,943	N/A	\$13,631,955	N/A	-0.71	0.04	15% (+/-)	Yes
Residential Care: Number of Users	N/A	256	N/A	213	N/A	235	N/A	-16.80	10.33	15% (+/-)	Yes
Residential Care: Avg Medicaid Pd per User	N/A	\$53,609	N/A	\$63,972	N/A	\$58,008	N/A	19.33	-9.32	15% (+/-)	Yes
Psych. Services: Total Medicaid Paid (TOS 53)	N/A	\$10,986,788	N/A	\$28,326,078	N/A	\$29,247,296	N/A	157.80	3.25	15% (+/-)	Yes
Psych. Services: Number of Users	N/A	7,704	N/A	7,996	N/A	8,291	N/A	3.79	3.69	15% (+/-)	Yes
Psych. Services: Avg Medicaid Pd per User	N/A	\$1,426	N/A	\$3,543	N/A	\$3,528	N/A	148.40	-0.42	15% (+/-)	Yes
Adult Day Care: Total Medicaid Paid (TOS 54)	N/A	\$14,391,962	N/A	\$13,446,447	N/A	\$12,842,005	N/A	-6.57	-4.50	15% (+/-)	Yes
Adult Day Care: Number of Users	N/A	1,527	N/A	1,220	N/A	1,204	N/A	-20.10	-1.31	15% (+/-)	Yes
Adult Day Care: Avg Medicaid Pd per User	N/A	\$9,425	N/A	\$11,022	N/A	\$10,666	N/A	16.94	-3.23	15% (+/-)	Yes
<b>AVG FFS MEDICAID AMT PD/NON-DUAL FFS ENROLLEE BY MAX TOS</b>											
Inpatient Hospital (TOS 01)	N/A	\$2,295	N/A	\$2,608	N/A	\$3,055	N/A	13.67	17.13	15% (+/-)	No
Aged	N/A	\$1,631	N/A	\$2,202	N/A	\$2,268	N/A	35.05	2.97	15% (+/-)	Yes
Disabled	N/A	\$2,995	N/A	\$3,506	N/A	\$4,114	N/A	17.07	17.34	15% (+/-)	No
Child	N/A	\$184	N/A	\$149	N/A	\$43	N/A	-18.80	-70.90	15% (+/-)	No
Adult	N/A	\$105	N/A	\$71	N/A	\$78	N/A	-32.50	10.03	15% (+/-)	Yes
ILTC (TOS=02,04,05,07)	N/A	\$2,544	N/A	\$2,555	N/A	\$2,498	N/A	0.45	-2.25	15% (+/-)	Yes
Aged	N/A	\$3,580	N/A	\$4,028	N/A	\$4,337	N/A	12.53	7.67	15% (+/-)	Yes
Disabled	N/A	\$3,219	N/A	\$3,310	N/A	\$3,164	N/A	2.81	-4.41	15% (+/-)	Yes
Child	N/A	\$211	N/A	\$281	N/A	\$320	N/A	32.98	13.86	15% (+/-)	Yes
Adult	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Drugs (TOS=16)	N/A	\$1,671	N/A	\$1,881	N/A	\$2,028	N/A	12.59	7.81	15% (+/-)	Yes
Aged	N/A	\$1,088	N/A	\$1,335	N/A	\$1,463	N/A	22.69	9.54	15% (+/-)	Yes
Disabled	N/A	\$2,176	N/A	\$2,526	N/A	\$2,693	N/A	16.11	6.61	15% (+/-)	Yes
Child	N/A	\$176	N/A	\$145	N/A	\$161	N/A	-17.60	10.58	15% (+/-)	Yes
Adult	N/A	\$89	N/A	\$110	N/A	\$139	N/A	23.95	26.25	15% (+/-)	No
All Other Services	N/A	\$4,906	N/A	\$5,191	N/A	\$6,108	N/A	5.79	17.67	15% (+/-)	No
Aged	N/A	\$2,029	N/A	\$2,171	N/A	\$2,223	N/A	6.99	2.36	15% (+/-)	Yes
Disabled	N/A	\$6,081	N/A	\$6,539	N/A	\$7,822	N/A	7.52	19.62	15% (+/-)	No
Child	N/A	\$2,218	N/A	\$2,559	N/A	\$2,326	N/A	15.39	-9.10	15% (+/-)	Yes
Adult	N/A	\$148	N/A	\$160	N/A	\$186	N/A	8.13	16.76	15% (+/-)	No
<b>% OF NON-DUAL FFS ENROLLEES WITH CLAIMS BY SELECTED MAX TOS</b>											
% Non-Dual FFS Enrollees with IP Claims (TOS=01)	N/A	11.76	N/A	11.69	N/A	12.14	N/A	-0.58	3.82	15% (+/-)	Yes
Aged	N/A	11.75	N/A	12.60	N/A	13.16	N/A	7.24	4.48	15% (+/-)	Yes
Disabled	N/A	14.92	N/A	15.30	N/A	15.80	N/A	2.57	3.24	15% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: RI

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	1.50	N/A	1.17	N/A	0.89	N/A	-22.40	-23.80	15% (+/-)	No
Adult	N/A	1.65	N/A	1.64	N/A	1.71	N/A	-0.27	4.26	15% (+/-)	Yes
% Non-Dual FFS Enrollees with ILTC Claims (TOS=02,04,05,07)	N/A	3.92	N/A	3.75	N/A	3.51	N/A	-4.30	-6.44	15% (+/-)	Yes
Aged	N/A	11.42	N/A	11.92	N/A	12.00	N/A	4.41	0.62	15% (+/-)	Yes
Disabled	N/A	4.55	N/A	4.52	N/A	4.14	N/A	-0.49	-8.56	15% (+/-)	Yes
Child	N/A	0.57	N/A	0.48	N/A	0.36	N/A	-15.40	-24.90	15% (+/-)	No
Adult	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	15% (+/-)	N/A
% with ratio of ILTC days/enroll days > 1	N/A	0.28	N/A	1.16	N/A	0.61	N/A	317.80	-47.10	15% (+/-)	No
% Non-Dual FFS Enrollees with Drug Claims (TOS=16)	N/A	70.74	N/A	70.98	N/A	72.65	N/A	0.34	2.36	15% (+/-)	Yes
Aged	N/A	71.53	N/A	72.02	N/A	74.13	N/A	0.68	2.93	15% (+/-)	Yes
Disabled	N/A	78.68	N/A	79.95	N/A	80.25	N/A	1.62	0.38	15% (+/-)	Yes
Child	N/A	45.81	N/A	45.35	N/A	49.21	N/A	-1.01	8.51	15% (+/-)	Yes
Adult	N/A	42.43	N/A	45.51	N/A	51.62	N/A	7.27	13.41	15% (+/-)	Yes
% Non-Dual FFS Enrollees with All Other Claims	N/A	79.21	N/A	78.52	N/A	79.72	N/A	-0.87	1.53	15% (+/-)	Yes
Aged	N/A	75.29	N/A	71.54	N/A	74.31	N/A	-4.98	3.87	15% (+/-)	Yes
Disabled	N/A	86.30	N/A	86.82	N/A	87.19	N/A	0.59	0.43	15% (+/-)	Yes
Child	N/A	61.37	N/A	59.59	N/A	62.07	N/A	-2.91	4.17	15% (+/-)	Yes
Adult	N/A	44.93	N/A	48.05	N/A	50.29	N/A	6.94	4.67	15% (+/-)	Yes
Avg # IP Days per Non-Dual FFS User	N/A	16	N/A	17	N/A	18	N/A	6.99	8.50	15% (+/-)	Yes
Aged	N/A	11	N/A	13	N/A	13	N/A	15.84	2.30	15% (+/-)	Yes
Disabled	N/A	16	N/A	17	N/A	19	N/A	6.87	8.65	15% (+/-)	Yes
Child	N/A	8	N/A	6	N/A	4	N/A	-21.40	-40.40	15% (+/-)	No
Adult	N/A	5	N/A	4	N/A	5	N/A	-4.34	6.45	15% (+/-)	Yes
Avg # ILTC Days per Non-Dual FFS User	N/A	203	N/A	208	N/A	210	N/A	2.31	1.15	15% (+/-)	Yes
Aged	N/A	238	N/A	243	N/A	246	N/A	2.02	1.22	15% (+/-)	Yes
Disabled	N/A	202	N/A	207	N/A	206	N/A	2.40	-0.05	15% (+/-)	Yes
Child	N/A	53	N/A	56	N/A	97	N/A	4.81	72.88	15% (+/-)	No
Adult	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
% 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	\$480,811	N/A	\$306,255	N/A	\$58,031	N/A	-36.30	-81.10	15% (+/-)	No
FP: Number of Users	N/A	196	N/A	199	N/A	199	N/A	1.53	0.00	15% (+/-)	Yes
FP: Average Medicaid Pd per User	N/A	\$2,453	N/A	\$1,539	N/A	\$292	N/A	-37.30	-81.10	15% (+/-)	No
RHC: Total Medicaid Paid (Program Type 3)	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
RHC: Number of Users	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
RHC: Avg Medicaid Pd per User	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
FOHC: Total Medicaid Paid (Program Type 4)	N/A	\$1,776,889	N/A	\$1,906,138	N/A	\$2,250,069	N/A	7.27	18.04	15% (+/-)	No
FOHC: Number of Users	N/A	4,036	N/A	4,402	N/A	4,743	N/A	9.07	7.75	15% (+/-)	Yes
FOHC: Avg Medicaid Pd per User	N/A	\$440	N/A	\$433	N/A	\$474	N/A	-1.65	9.56	15% (+/-)	Yes
IHS: Total Medicaid Pd (Program Type 5)	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
IHS: Number of Users	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
IHS: Avg Medicaid Pd per User	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Section 1915(c) Waiver: Total Medicaid Paid (Program Types 6 and 7)	N/A	\$5,039,204	N/A	\$5,243,371	N/A	\$5,555,691	N/A	4.05	5.96	15% (+/-)	Yes
Section 1915(c) Waiver: Number of Users	N/A	504	N/A	466	N/A	563	N/A	-7.54	20.82	15% (+/-)	No
Section 1915(c) Waiver: Avg Medicaid Pd per User	N/A	\$9,998	N/A	\$11,252	N/A	\$9,868	N/A	12.54	-12.30	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	\$57,357,848	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	10,615	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	\$5,403	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$2,176	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$4,991	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$37,018	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$27,312	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	38.04	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	36.44	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	50.13	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	3.62	N/A	N/A	N/A	15% (+/-)	No

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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
Adult	N/A	N/A	N/A	N/A	N/A	0.10	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	\$33,468,897	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	2,690	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	\$12,442	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$5,472	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$11,007	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$37,018	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$27,312	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	9.64	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	10.03	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	12.01	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	3.62	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	0.10	N/A	N/A	N/A	15% (+/-)	No
Total FFS CLTC Expenditures (Section 1915(c) claims only - excludes CLTC Codes 11-20)	N/A	N/A	N/A	N/A	N/A	\$5,555,691	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	563	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	\$9,868	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$7,795	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$10,018	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$21,258	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	2.02	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	4.30	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	2.56	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	0.04	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	32,730	N/A	33,081	N/A	33,472	N/A	1.07	1.18	15% (+/-)	Yes
Number of EDB Dual FFS Recipients	N/A	31,017	N/A	31,222	N/A	31,806	N/A	0.66	1.87	15% (+/-)	Yes
Total EDB Dual FFS PYE	N/A	29,397	N/A	29,726	N/A	30,068	N/A	1.12	1.15	15% (+/-)	Yes
% EDB Only Dual (Code 50)	N/A	1.49	N/A	1.48	N/A	0.88	N/A	-0.86	-40.30	15% (+/-)	No
% QMB Only (Code 51)	N/A	0.10	N/A	0.07	N/A	0.02	N/A	-33.10	-74.20	15% (+/-)	No
% QMB Plus (Code 52)	N/A	55.20	N/A	55.39	N/A	55.31	N/A	0.34	-0.15	15% (+/-)	Yes
% SLMB Only (Code 53)	N/A	0.63	N/A	0.68	N/A	0.78	N/A	7.06	14.72	15% (+/-)	Yes
% 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	0.19	N/A	0.17	N/A	0.20	N/A	-12.20	20.40	15% (+/-)	No
% 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	42.19	N/A	41.80	N/A	42.54	N/A	-0.93	1.78	15% (+/-)	Yes
% Dual Type Unknown (Code 59)	N/A	0.20	N/A	0.42	N/A	0.27	N/A	116.40	-35.80	15% (+/-)	No
MAX Aged EDB Dual FFS Total	N/A	16,585	N/A	16,518	N/A	16,548	N/A	-0.40	0.18	10% (+/-)	Yes
11: Aged, Cash	N/A	4,777	N/A	4,647	N/A	4,473	N/A	-2.72	-3.74	10% (+/-)	Yes
21: Aged, MN	N/A	3,357	N/A	3,230	N/A	3,353	N/A	-3.78	3.81	10% (+/-)	Yes
31: Aged, Poverty	N/A	150	N/A	150	N/A	163	N/A	0.00	8.67	10% (+/-)	Yes
41: Other Aged	N/A	8,301	N/A	8,491	N/A	8,559	N/A	2.29	0.80	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	16,104	N/A	16,523	N/A	16,886	N/A	2.60	2.20	10% (+/-)	Yes
12: Disabled, Cash	N/A	10,801	N/A	10,827	N/A	10,923	N/A	0.24	0.89	10% (+/-)	Yes
22: Disabled, MN	N/A	774	N/A	775	N/A	818	N/A	0.13	5.55	10% (+/-)	Yes
32: Disabled, Poverty	N/A	146	N/A	161	N/A	204	N/A	10.27	26.71	10% (+/-)	No
42: Other Disabled	N/A	4,383	N/A	4,760	N/A	4,941	N/A	8.60	3.80	10% (+/-)	Yes
52: 1115 Disabled	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
Total FFS Medicaid Amt Paid	N/A	\$655,191,016	N/A	\$692,545,009	N/A	\$765,132,913	N/A	5.70	10.48	15% (+/-)	Yes
Average FFS Medicaid Amt Paid per FFS Dual	N/A	\$20,018	N/A	\$20,935	N/A	\$22,859	N/A	4.58	9.19	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	\$21,124	N/A	\$22,181	N/A	\$24,056	N/A	5.01	8.45	15% (+/-)	Yes
<b>AVG FFS MEDICAID AMT PD/FFS DUAL BY MAX ELIGIBILITY GROUP</b>											
All Aged	N/A	\$20,615	N/A	\$22,152	N/A	\$22,877	N/A	7.46	3.28	15% (+/-)	Yes
11: Aged, Cash	N/A	\$7,164	N/A	\$7,194	N/A	\$7,556	N/A	0.42	5.04	15% (+/-)	Yes
21: Aged, MN	N/A	\$27,791	N/A	\$30,455	N/A	\$31,698	N/A	9.59	4.08	15% (+/-)	Yes
31: Aged, Poverty	N/A	\$2,958	N/A	\$1,612	N/A	\$2,072	N/A	-45.50	28.58	15% (+/-)	No
41: Other Aged	N/A	\$25,772	N/A	\$27,542	N/A	\$27,824	N/A	6.87	1.03	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	\$19,445	N/A	\$19,766	N/A	\$22,890	N/A	1.65	15.81	15% (+/-)	No
12: Disabled, Cash	N/A	\$14,588	N/A	\$14,688	N/A	\$16,936	N/A	0.69	15.30	15% (+/-)	No
22: Disabled, MN	N/A	\$24,307	N/A	\$26,539	N/A	\$27,107	N/A	9.18	2.14	15% (+/-)	Yes
32: Disabled, Poverty	N/A	\$3,898	N/A	\$5,718	N/A	\$4,851	N/A	46.70	-15.20	15% (+/-)	No
42: Other Disabled	N/A	\$31,074	N/A	\$30,688	N/A	\$36,099	N/A	-1.24	17.63	15% (+/-)	No
52: 1115 Disabled	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
<b>FFS EXPENDITURES AND USERS BY MAX TOS</b>											
IP: Total Medicaid Paid (TOS 01)	N/A	\$14,904,989	N/A	\$14,881,639	N/A	\$17,924,454	N/A	-0.16	20.45	15% (+/-)	No
IP: Number of Users	N/A	6,229	N/A	6,335	N/A	6,768	N/A	1.70	6.84	15% (+/-)	Yes
IP: Average Medicaid Pd per User	N/A	\$2,393	N/A	\$2,349	N/A	\$2,648	N/A	-1.83	12.74	15% (+/-)	Yes
IP: Average Medicaid Covered Days Per User	N/A	9	N/A	8	N/A	9	N/A	-1.67	9.19	15% (+/-)	Yes
MH Aged: Total Medicaid Paid (TOS 02)	N/A	\$122,084	N/A	\$199,483	N/A	\$155,006	N/A	63.40	-22.30	15% (+/-)	No
MH Aged: Number of Users	N/A	62	N/A	84	N/A	59	N/A	35.48	-29.80	15% (+/-)	No
MH Aged: Avg Medicaid Pd per User	N/A	\$1,969	N/A	\$2,375	N/A	\$2,627	N/A	20.60	10.63	15% (+/-)	Yes
IP Psych < 21: Total Medicaid Paid (TOS 04)	N/A	\$386,018	N/A	\$149,385	N/A	\$6,953	N/A	-61.30	-95.30	15% (+/-)	No
IP Psych < 21: Number of Users	N/A	5	N/A	4	N/A	1	N/A	-20.00	-75.00	15% (+/-)	No
IP Psych<21 :Avg Medicaid Pd per User	N/A	\$77,204	N/A	\$37,346	N/A	\$6,953	N/A	-51.60	-81.40	15% (+/-)	No
ICF/MR: Total Medicaid Pd (TOS 05)	N/A	\$2,399,607	N/A	\$2,529,687	N/A	\$2,621,413	N/A	5.42	3.63	15% (+/-)	Yes
ICF/MR: Number of Users	N/A	15	N/A	15	N/A	14	N/A	0.00	-6.67	15% (+/-)	Yes
ICF/MR: Avg Medicaid Pd per User	N/A	\$159,974	N/A	\$168,646	N/A	\$187,244	N/A	5.42	11.03	15% (+/-)	Yes
NF: Total Medicaid Paid (TOS 07)	N/A	\$433,903,412	N/A	\$451,803,932	N/A	\$457,015,817	N/A	4.13	1.15	15% (+/-)	Yes
NF Number of Users	N/A	10,316	N/A	9,967	N/A	9,875	N/A	-3.38	-0.92	15% (+/-)	Yes
NF:Avg Medicaid Pd per User	N/A	\$42,061	N/A	\$45,330	N/A	\$46,280	N/A	7.77	2.10	15% (+/-)	Yes
Physician: Total Medicaid Paid (TOS 08)	N/A	\$4,845,024	N/A	\$1,828,244	N/A	\$1,955,200	N/A	-62.30	6.94	15% (+/-)	Yes
Physician: Number of Users	N/A	22,254	N/A	16,557	N/A	17,794	N/A	-25.60	7.47	15% (+/-)	Yes
Physician: Avg Medicaid Pd per User	N/A	\$218	N/A	\$110	N/A	\$110	N/A	-49.30	-0.49	15% (+/-)	Yes
Dental: Total Medicaid Paid (TOS 09)	N/A	\$1,732,752	N/A	\$1,732,459	N/A	\$1,732,363	N/A	-0.02	-0.01	15% (+/-)	Yes
Dental: Number of Users	N/A	8,229	N/A	8,063	N/A	7,768	N/A	-2.02	-3.66	15% (+/-)	Yes
Dental: Avg Medicaid Pd per User	N/A	\$211	N/A	\$215	N/A	\$223	N/A	2.04	3.79	15% (+/-)	Yes
Other Practitioner: Total Medicaid Pd (TOS 10)	N/A	\$677,797	N/A	\$279,192	N/A	\$273,178	N/A	-58.80	-2.15	15% (+/-)	Yes
Other Practitioner: Number of Users	N/A	10,608	N/A	8,852	N/A	8,597	N/A	-16.60	-2.88	15% (+/-)	Yes
Other Practitioner: Avg Medicaid Pd per User	N/A	\$64	N/A	\$32	N/A	\$32	N/A	-50.60	0.75	15% (+/-)	Yes
OPD: Total Medicaid Paid (TOS 11)	N/A	\$3,830,862	N/A	\$3,804,198	N/A	\$3,839,419	N/A	-0.70	0.93	15% (+/-)	Yes
OPD Number of Users	N/A	15,624	N/A	16,175	N/A	16,872	N/A	3.53	4.31	15% (+/-)	Yes
OPD: Avg Medicaid Pd per User	N/A	\$245	N/A	\$235	N/A	\$228	N/A	-4.08	-3.24	15% (+/-)	Yes
Clinic: Total Medicaid Paid (TOS 12)	N/A	\$1,114,652	N/A	\$1,514,311	N/A	\$1,561,667	N/A	35.86	3.13	15% (+/-)	Yes
Clinic: Number of Users	N/A	3,220	N/A	3,360	N/A	3,619	N/A	4.35	7.71	15% (+/-)	Yes
Clinic: Avg Medicaid Pd per User	N/A	\$346	N/A	\$451	N/A	\$432	N/A	30.19	-4.25	15% (+/-)	Yes
HH: Total Medicaid Paid (TOS 13)	N/A	\$18,232,940	N/A	\$20,182,856	N/A	\$21,862,277	N/A	10.69	8.32	15% (+/-)	Yes
HH: Number of Users	N/A	2,166	N/A	2,232	N/A	2,234	N/A	3.05	0.09	15% (+/-)	Yes
HH: Avg Medicaid Pd per User	N/A	\$8,418	N/A	\$9,042	N/A	\$9,786	N/A	7.42	8.22	15% (+/-)	Yes
Lab/Xray: Total Medicaid Paid (TOS 15)	N/A	\$1,756,876	N/A	\$1,066,845	N/A	\$1,028,915	N/A	-39.30	-3.56	15% (+/-)	Yes
Lab/Xray: Number of Users	N/A	12,825	N/A	3,496	N/A	3,287	N/A	-72.70	-5.98	15% (+/-)	Yes
Lab/Xray:Avg Medicaid Pd per User	N/A	\$137	N/A	\$305	N/A	\$313	N/A	122.80	2.58	15% (+/-)	Yes
Drugs: Total Medicaid Paid (TOS 16)	N/A	\$96,271,344	N/A	\$110,366,776	N/A	\$120,603,381	N/A	14.64	9.28	15% (+/-)	Yes
Drugs: Number of Users	N/A	29,401	N/A	29,783	N/A	30,311	N/A	1.30	1.77	15% (+/-)	Yes
Drugs: Avg Medicaid Pd per User	N/A	\$3,274	N/A	\$3,706	N/A	\$3,979	N/A	13.17	7.37	15% (+/-)	Yes
Other Services: Total Medicaid Paid (TOS 19)	N/A	\$2,445,741	N/A	\$2,377,099	N/A	\$47,159,542	N/A	-2.81	1,884.00	15% (+/-)	No
Other Services: Number of Users	N/A	7,468	N/A	7,700	N/A	9,092	N/A	3.11	18.08	15% (+/-)	No



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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
Other Services: Avg Medicaid Pd per User	N/A	\$327	N/A	\$309	N/A	\$5,187	N/A	-5.74	1,580.00	15% (+/-)	No
Transportation: Total Medicaid Paid (TOS 26)	N/A	\$1,251,796	N/A	\$1,035,319	N/A	\$1,784,681	N/A	-17.30	72.38	15% (+/-)	No
Transportation: Number of Users	N/A	4,861	N/A	2,375	N/A	3,391	N/A	-51.10	42.78	15% (+/-)	No
Transportation: Avg Medicaid Pd per User	N/A	\$258	N/A	\$436	N/A	\$526	N/A	69.28	20.73	15% (+/-)	No
PCS: Total Medicaid Paid (TOS 30)	N/A	\$4,193,187	N/A	\$4,813,792	N/A	\$5,185,401	N/A	14.80	7.72	15% (+/-)	Yes
PCS: Number of Users	N/A	1,260	N/A	1,342	N/A	1,436	N/A	6.51	7.00	15% (+/-)	Yes
PCS: Avg Medicaid Pd per User	N/A	\$3,328	N/A	\$3,587	N/A	\$3,611	N/A	7.79	0.67	15% (+/-)	Yes
Target Case Management: Total Medicaid Pd (TOS 31)	N/A	\$911,149	N/A	\$1,003,220	N/A	\$968,384	N/A	10.10	-3.47	15% (+/-)	Yes
Target Case Management: Number of Users	N/A	1,080	N/A	1,141	N/A	1,106	N/A	5.65	-3.07	15% (+/-)	Yes
Target Case Management: Avg Medicaid Pd per User	N/A	\$844	N/A	\$879	N/A	\$876	N/A	4.22	-0.42	15% (+/-)	Yes
Rehab Services: Total Medicaid Pd (TOS 33)	N/A	\$24,027,599	N/A	\$890,130	N/A	\$1,113,733	N/A	-96.30	25.12	15% (+/-)	No
Rehab Services: Number of Users	N/A	3,677	N/A	1,967	N/A	2,267	N/A	-46.50	15.25	15% (+/-)	No
Rehab Services: Avg Medicaid Pd per User	N/A	\$6,535	N/A	\$453	N/A	\$491	N/A	-93.10	8.56	15% (+/-)	Yes
PT/OT/Speech/Hear: Total Medicaid Paid (TOS 34)	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
PT/OT/Speech/Hear: Number of Users	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
PT/OT/Speech/Hear: Avg Medicaid Pd per User	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Hospice: Total Medicaid Paid (TOS 35)	N/A	\$175,216	N/A	\$174,547	N/A	\$275,475	N/A	-0.38	57.82	15% (+/-)	No
Hospice: Number of Users	N/A	34	N/A	32	N/A	38	N/A	-5.88	18.75	15% (+/-)	No
Hospice: Avg Medicaid Pd per User	N/A	\$5,153	N/A	\$5,455	N/A	\$7,249	N/A	5.84	32.90	15% (+/-)	No
DME: Total Medicaid Paid (TOS 51)	N/A	\$2,843,677	N/A	\$3,595,909	N/A	\$3,969,492	N/A	26.45	10.39	15% (+/-)	Yes
DME: Number of Users	N/A	3,961	N/A	8,166	N/A	8,475	N/A	106.20	3.78	15% (+/-)	Yes
DME: Avg Medicaid Pd per User	N/A	\$718	N/A	\$440	N/A	\$468	N/A	-38.70	6.36	15% (+/-)	Yes
Residential Care: Total Medicaid Paid (TOS 52)	N/A	\$1,656,912	N/A	\$5,148,050	N/A	\$8,997,761	N/A	210.70	74.78	15% (+/-)	No
Residential Care: Number of Users	N/A	346	N/A	572	N/A	930	N/A	65.32	62.59	15% (+/-)	No
Residential Care: Avg Medicaid Pd per User	N/A	\$4,789	N/A	\$9,000	N/A	\$9,675	N/A	87.94	7.50	15% (+/-)	Yes
Psych. Services: Total Medicaid Paid (TOS 53)	N/A	\$11,898,904	N/A	\$38,102,059	N/A	\$39,486,545	N/A	220.20	3.63	15% (+/-)	Yes
Psych. Services: Number of Users	N/A	3,288	N/A	4,607	N/A	4,670	N/A	40.12	1.37	15% (+/-)	Yes
Psych. Services: Avg Medicaid Pd per User	N/A	\$3,619	N/A	\$8,270	N/A	\$8,455	N/A	128.50	2.24	15% (+/-)	Yes
Adult Day Care: Total Medicaid Paid (TOS 54)	N/A	\$25,581,992	N/A	\$25,032,764	N/A	\$25,583,161	N/A	-2.15	2.20	15% (+/-)	Yes
Adult Day Care: Number of Users	N/A	2,382	N/A	1,986	N/A	2,035	N/A	-16.60	2.47	15% (+/-)	Yes
Adult Day Care: Avg Medicaid Pd per User	N/A	\$10,740	N/A	\$12,605	N/A	\$12,572	N/A	17.36	-0.26	15% (+/-)	Yes
<b>AVG FFS MEDICAID AMT PD/FFS DUAL BY SELECTED TYPE OF SERVICE</b>											
Inpatient Hospital (TOS=01)	N/A	\$455	N/A	\$450	N/A	\$536	N/A	-1.22	19.04	15% (+/-)	No
Aged	N/A	\$326	N/A	\$331	N/A	\$421	N/A	1.75	26.92	15% (+/-)	No
Disabled	N/A	\$590	N/A	\$569	N/A	\$649	N/A	-3.47	14.05	15% (+/-)	Yes
ILTC (TOS=02,04,05,07)	N/A	\$13,346	N/A	\$13,745	N/A	\$13,737	N/A	2.99	-0.06	15% (+/-)	Yes
Aged	N/A	\$16,508	N/A	\$17,464	N/A	\$17,472	N/A	5.79	0.05	15% (+/-)	Yes
Disabled	N/A	\$10,123	N/A	\$10,060	N/A	\$10,108	N/A	-0.62	0.48	15% (+/-)	Yes
Drugs (TOS=16)	N/A	\$2,941	N/A	\$3,336	N/A	\$3,603	N/A	13.42	8.00	15% (+/-)	Yes
Aged	N/A	\$2,318	N/A	\$2,643	N/A	\$2,799	N/A	14.03	5.89	15% (+/-)	Yes
Disabled	N/A	\$3,587	N/A	\$4,036	N/A	\$4,398	N/A	12.51	8.98	15% (+/-)	Yes
All Other Services	N/A	\$3,275	N/A	\$3,404	N/A	\$4,983	N/A	3.93	46.39	15% (+/-)	No
Aged	N/A	\$1,463	N/A	\$1,714	N/A	\$2,186	N/A	17.16	27.57	15% (+/-)	No
Disabled	N/A	\$5,146	N/A	\$5,101	N/A	\$7,735	N/A	-0.86	51.63	15% (+/-)	No
<b>% OF FFS DUALS WITH CLAIMS BY SELECTED TYPE OF SERVICE</b>											
% FFS Duals with IP Claims (TOS=01)	N/A	19.03	N/A	19.15	N/A	20.22	N/A	0.62	5.59	15% (+/-)	Yes
Aged	N/A	18.91	N/A	19.05	N/A	20.87	N/A	0.69	9.56	15% (+/-)	Yes
Disabled	N/A	19.19	N/A	19.29	N/A	19.63	N/A	0.52	1.78	15% (+/-)	Yes
% FFS Duals with ILTC Claims (TOS=02,04,05,07)	N/A	31.68	N/A	30.31	N/A	29.62	N/A	-4.31	-2.27	15% (+/-)	Yes
Aged	N/A	50.54	N/A	48.72	N/A	48.40	N/A	-3.61	-0.64	15% (+/-)	Yes
Disabled	N/A	12.33	N/A	11.99	N/A	11.29	N/A	-2.78	-5.85	15% (+/-)	Yes
% FFS Duals with Drug Claims (TOS=16)	N/A	89.83	N/A	90.03	N/A	90.56	N/A	0.22	0.58	15% (+/-)	Yes
Aged	N/A	90.08	N/A	90.35	N/A	90.80	N/A	0.30	0.50	15% (+/-)	Yes
Disabled	N/A	89.62	N/A	89.80	N/A	90.41	N/A	0.20	0.67	15% (+/-)	Yes
% FFS Duals with All Other Claims	N/A	84.68	N/A	83.40	N/A	84.71	N/A	-1.50	1.57	15% (+/-)	Yes
Aged	N/A	77.78	N/A	76.11	N/A	77.57	N/A	-2.15	1.92	15% (+/-)	Yes
Disabled	N/A	91.85	N/A	90.79	N/A	91.80	N/A	-1.15	1.11	15% (+/-)	Yes

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

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	9	N/A	8	N/A	9	N/A	-1.67	9.19	15% (+/-)	Yes
Aged	N/A	8	N/A	8	N/A	8	N/A	-0.84	3.92	15% (+/-)	Yes
Disabled	N/A	9	N/A	9	N/A	10	N/A	-2.57	14.35	15% (+/-)	Yes
Avg # ILTC Days per FFS Dual User (TOS 02, 04, 05, 07)	N/A	260	N/A	260	N/A	253	N/A	-0.24	-2.56	15% (+/-)	Yes
Aged	N/A	255	N/A	256	N/A	246	N/A	0.12	-3.73	15% (+/-)	Yes
Disabled	N/A	282	N/A	277	N/A	283	N/A	-1.88	2.18	15% (+/-)	Yes
<b>FFS EXPENDITURES AND USERS BY MAX PROGRAM TYPE</b>											
FP: Total Medicaid Paid (Program Type 2)	N/A	\$81,806	N/A	\$62,078	N/A	\$21,852	N/A	-24.10	-64.80	15% (+/-)	No
FP: Number of Users	N/A	104	N/A	69	N/A	71	N/A	-33.70	2.90	15% (+/-)	Yes
FP: Average Medicaid Pd per User	N/A	\$787	N/A	\$900	N/A	\$308	N/A	14.38	-65.80	15% (+/-)	No
RHC: Total Medicaid Paid (Program Type 3)	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
RHC: Number of Users	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
RHC: Avg Medicaid Pd per User	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
FQHC: Total Medicaid Paid (Program Type 4)	N/A	\$806,340	N/A	\$854,297	N/A	\$1,001,592	N/A	5.95	17.24	15% (+/-)	No
FQHC: Number of Users	N/A	3,207	N/A	3,503	N/A	3,949	N/A	9.23	12.73	15% (+/-)	Yes
FQHC: Avg Medicaid Pd per User	N/A	\$251	N/A	\$244	N/A	\$254	N/A	-3.00	4.00	15% (+/-)	Yes
IHS: Total Medicaid Pd (Program Type 5)	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
IHS: Number of Users	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
IHS: Avg Medicaid Pd per User	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Section 1915(c) Waiver: Total Medicaid Paid (Program Types 6 and 7)	N/A	\$20,061,163	N/A	\$22,484,804	N/A	\$24,425,536	N/A	12.08	8.63	15% (+/-)	Yes
Section 1915(c) Waiver: Number of Users	N/A	2,541	N/A	2,622	N/A	2,762	N/A	3.19	5.34	15% (+/-)	Yes
Section 1915(c) Waiver: Avg Medicaid Pd per User	N/A	\$7,895	N/A	\$8,575	N/A	\$8,843	N/A	8.62	3.13	15% (+/-)	Yes
<b>FFS COMMUNITY-BASED LONG-TERM CARE EXPENDITURES AND USERS</b>											
Total FFS CLTC Expenditures (all codes - overestimate)	N/A	N/A	N/A	N/A	N/A	\$69,656,062	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	14,583	N/A	N/A	N/A	15% (+/-)	No
Average FFS CLTC Expenditures per FFS Dual User (all codes - overestimate)	N/A	N/A	N/A	N/A	N/A	\$4,777	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$4,676	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$4,852	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	43.57	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	37.74	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	49.38	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	\$62,233,520	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	5,841	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	\$10,655	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$9,015	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$12,334	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	17.45	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	17.86	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	17.09	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	\$24,425,536	N/A	N/A	N/A	15% (+/-)	No
Number of Dual CLTC Users (Section 1915(c) claims only - excludes CLTC Codes 11-20)	N/A	N/A	N/A	N/A	N/A	2,762	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	\$8,843	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$8,209	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$9,846	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	8.25	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	10.22	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	6.34	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	60,340	N/A	60,706	N/A	61,374	N/A	0.61	1.10	15% (+/-)	Yes
# FFS Recipients	N/A	53,790	N/A	53,959	N/A	55,232	N/A	0.31	2.36	15% (+/-)	Yes
% FFS Enrollees who are Recipients	65-90%	89.14	Yes	88.89	Yes	89.99	Yes	-0.29	1.25	15% (+/-)	Yes
% Aged who are Recipients	90-100%	94.11	Yes	93.59	Yes	94.21	Yes	-0.55	0.66	15% (+/-)	Yes
% Disabled who are Recipients	85-100%	90.97	Yes	91.41	Yes	91.95	Yes	0.48	0.59	15% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: RI

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%	67.83	No	66.64	No	70.67	No	-1.75	6.04	15% (+/-)	Yes
% Adults who are Recipients	80-100%	55.34	No	57.96	No	63.32	No	4.74	9.24	15% (+/-)	Yes
Total FFS PYE	N/A	53,358	N/A	53,256	N/A	54,241	N/A	-0.19	1.85	15% (+/-)	Yes
MAX Aged Total	N/A	17,811	N/A	17,558	N/A	17,665	N/A	-1.42	0.61	10% (+/-)	Yes
11: Aged, Cash	N/A	4,920	N/A	4,791	N/A	4,640	N/A	-2.62	-3.15	10% (+/-)	Yes
21: Aged, MN	N/A	3,414	N/A	3,277	N/A	3,397	N/A	-4.01	3.66	10% (+/-)	Yes
31: Aged, Poverty	N/A	492	N/A	235	N/A	237	N/A	-52.20	0.85	10% (+/-)	Yes
41: Other Aged	N/A	8,985	N/A	9,255	N/A	9,391	N/A	3.01	1.47	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	36,255	N/A	36,176	N/A	36,904	N/A	-0.22	2.01	10% (+/-)	Yes
12: Disabled, Cash	N/A	27,663	N/A	26,927	N/A	27,166	N/A	-2.66	0.89	10% (+/-)	Yes
22: Disabled, MN	N/A	954	N/A	977	N/A	1,069	N/A	2.41	9.42	10% (+/-)	Yes
32: Disabled, Poverty	N/A	161	N/A	456	N/A	525	N/A	183.20	15.13	10% (+/-)	No
42: Other Disabled	N/A	7,477	N/A	7,816	N/A	8,144	N/A	4.53	4.20	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	4,597	N/A	4,805	N/A	4,725	N/A	4.53	-1.66	10% (+/-)	Yes
14: AFDC Child, Cash	N/A	230	N/A	190	N/A	223	N/A	-17.40	17.37	10% (+/-)	No
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	2	N/A	3	N/A	Div by 0	50.00	10% (+/-)	No
34: Child Poverty	N/A	670	N/A	959	N/A	868	N/A	43.13	-9.49	10% (+/-)	Yes
44: Other Child	N/A	218	N/A	268	N/A	315	N/A	22.94	17.54	10% (+/-)	No
48: Foster Care Child	N/A	2,161	N/A	1,560	N/A	1,574	N/A	-27.80	0.90	10% (+/-)	Yes
54: 1115 Child	N/A	1,318	N/A	1,826	N/A	1,742	N/A	38.54	-4.60	10% (+/-)	Yes
MAX Adult Total	N/A	1,677	N/A	2,167	N/A	2,080	N/A	29.22	-4.01	10% (+/-)	Yes
15: AFDC Adult, Cash	N/A	150	N/A	103	N/A	145	N/A	-31.30	40.78	10% (+/-)	No
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	2	N/A	4	N/A	Div by 0	100.00	10% (+/-)	No
35: Adult, Poverty	N/A	112	N/A	116	N/A	137	N/A	3.57	18.10	10% (+/-)	No
45: Other Adult	N/A	481	N/A	611	N/A	565	N/A	27.03	-7.53	10% (+/-)	Yes
55: 1115 Adult	N/A	934	N/A	1,335	N/A	1,229	N/A	42.93	-7.94	10% (+/-)	Yes
Total FFS Medicaid Amt Paid	N/A	\$970,378,087	N/A	\$1,030,550,290	N/A	\$1,147,081,355	N/A	6.20	11.31	15% (+/-)	Yes
Average FFS Medicaid Amt Paid per FFS Enrollee	N/A	\$16,082	N/A	\$16,976	N/A	\$18,690	N/A	5.56	10.10	15% (+/-)	Yes
Average FFS Medicaid Amt Paid per FFS Recipient (User of any svc)	N/A	\$18,040	N/A	\$19,099	N/A	\$20,768	N/A	5.87	8.74	15% (+/-)	Yes
<b>AVG FFS MEDICAID AMT PD/FFS ENROLLEE BY MAX ELIGIBILITY GROUP</b>											
All Aged	N/A	\$19,769	N/A	\$21,416	N/A	\$22,081	N/A	8.33	3.10	15% (+/-)	Yes
11: Aged, Cash	N/A	\$7,182	N/A	\$7,213	N/A	\$7,722	N/A	0.43	7.05	15% (+/-)	Yes
21: Aged, MN	N/A	\$27,705	N/A	\$30,386	N/A	\$31,690	N/A	9.68	4.29	15% (+/-)	Yes
31: Aged, Poverty	N/A	\$3,365	N/A	\$1,029	N/A	\$1,440	N/A	-69.40	39.95	15% (+/-)	No
41: Other Aged	N/A	\$24,544	N/A	\$26,111	N/A	\$26,221	N/A	6.38	0.42	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	\$16,680	N/A	\$17,655	N/A	\$20,125	N/A	5.84	13.99	15% (+/-)	Yes
12: Disabled, Cash	N/A	\$14,294	N/A	\$15,218	N/A	\$17,381	N/A	6.47	14.22	15% (+/-)	Yes
22: Disabled, MN	N/A	\$23,192	N/A	\$25,858	N/A	\$28,285	N/A	11.50	9.38	15% (+/-)	Yes
32: Disabled, Poverty	N/A	\$3,568	N/A	\$5,718	N/A	\$6,524	N/A	60.26	14.10	15% (+/-)	Yes
42: Other Disabled	N/A	\$24,963	N/A	\$25,723	N/A	\$29,082	N/A	3.05	13.06	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	\$2,796	N/A	\$3,137	N/A	\$2,850	N/A	12.23	-9.15	15% (+/-)	Yes
14: AFDC Child, Cash	N/A	\$1,590	N/A	\$875	N/A	\$258	N/A	-44.90	-70.60	15% (+/-)	No
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	\$0	N/A	\$6,043	N/A	Div by 0	Div by 0	15% (+/-)	N/A
34: Child, Poverty	N/A	\$263	N/A	\$627	N/A	\$715	N/A	138.30	13.99	15% (+/-)	Yes
44: Other Child	N/A	\$421	N/A	\$444	N/A	\$442	N/A	5.48	-0.45	15% (+/-)	Yes
48: Foster Care Child	N/A	\$5,357	N/A	\$8,740	N/A	\$7,567	N/A	63.15	-13.40	15% (+/-)	Yes
54: 1115 Child	N/A	\$487	N/A	\$304	N/A	\$415	N/A	-37.50	36.43	15% (+/-)	No
All Adult	N/A	\$403	N/A	\$348	N/A	\$415	N/A	-13.70	19.42	15% (+/-)	No
15: AFDC Adult, Cash	N/A	\$258	N/A	\$340	N/A	\$1,156	N/A	31.82	239.70	15% (+/-)	No
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  
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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
25: AFDC Adult, MN	N/A	Div by 0	N/A	\$2,837	N/A	\$682	N/A	Div by 0	-76.00	15% (+/-)	No
35: Adult, Poverty	N/A	\$870	N/A	\$496	N/A	\$549	N/A	-43.00	10.76	15% (+/-)	Yes
45: Other Adult	N/A	\$519	N/A	\$267	N/A	\$359	N/A	-48.60	34.49	15% (+/-)	No
55: 1115 Adult	N/A	\$310	N/A	\$369	N/A	\$338	N/A	18.98	-8.35	15% (+/-)	Yes
<b>FFS EXPENDITURES AND USERS BY MAX TOS</b>											
IP: Total Medicaid Paid (TOS 01)	N/A	\$78,264,108	N/A	\$86,938,580	N/A	\$103,167,792	N/A	11.08	18.67	15% (+/-)	No
IP: Number of Users	N/A	9,475	N/A	9,564	N/A	10,154	N/A	0.94	6.17	15% (+/-)	Yes
IP: Average Medicaid Pd per User	N/A	\$8,260	N/A	\$9,090	N/A	\$10,160	N/A	10.05	11.77	15% (+/-)	Yes
IP: Average Medicaid Covered Days Per User	N/A	11	N/A	11	N/A	12	N/A	2.17	8.52	15% (+/-)	Yes
MH Aged: Total Medicaid Paid (TOS 02)	N/A	\$234,591	N/A	\$321,974	N/A	\$232,882	N/A	37.25	-27.70	15% (+/-)	No
MH Aged: Number of Users	N/A	161	N/A	197	N/A	148	N/A	22.36	-24.90	15% (+/-)	No
MH Aged: Avg Medicaid Pd per User	N/A	\$1,457	N/A	\$1,634	N/A	\$1,574	N/A	12.17	-3.72	15% (+/-)	Yes
IP Psych < 21: Total Medicaid Paid (TOS 04)	N/A	\$8,535,372	N/A	\$6,235,260	N/A	\$4,725,397	N/A	-26.90	-24.20	15% (+/-)	No
IP Psych < 21: Number of Users	N/A	130	N/A	93	N/A	77	N/A	-28.50	-17.20	15% (+/-)	No
IP Psych<21 :Avg Medicaid Pd per User	N/A	\$65,657	N/A	\$67,046	N/A	\$61,369	N/A	2.12	-8.47	15% (+/-)	Yes
ICF/MR: Total Medicaid Pd (TOS 05)	N/A	\$6,818,116	N/A	\$7,367,869	N/A	\$7,251,808	N/A	8.06	-1.58	15% (+/-)	Yes
ICF/MR: Number of Users	N/A	50	N/A	48	N/A	44	N/A	-4.00	-8.33	15% (+/-)	Yes
ICF/MR: Avg Medicaid Pd per User	N/A	\$136,362	N/A	\$153,497	N/A	\$164,814	N/A	12.57	7.37	15% (+/-)	Yes
NF: Total Medicaid Paid (TOS 07)	N/A	\$491,452,270	N/A	\$511,342,007	N/A	\$517,279,319	N/A	4.05	1.16	15% (+/-)	Yes
NF Number of Users	N/A	11,156	N/A	10,789	N/A	10,666	N/A	-3.29	-1.14	15% (+/-)	Yes
NF:Avg Medicaid Pd per User	N/A	\$44,053	N/A	\$47,395	N/A	\$48,498	N/A	7.59	2.33	15% (+/-)	Yes
Physician: Total Medicaid Paid (TOS 08)	N/A	\$11,931,574	N/A	\$9,662,913	N/A	\$9,950,148	N/A	-19.00	2.97	15% (+/-)	Yes
Physician: Number of Users	N/A	38,028	N/A	32,128	N/A	33,774	N/A	-15.50	5.12	15% (+/-)	Yes
Physician: Avg Medicaid Pd per User	N/A	\$314	N/A	\$301	N/A	\$295	N/A	-4.14	-2.05	15% (+/-)	Yes
Dental: Total Medicaid Paid (TOS 09)	N/A	\$3,364,112	N/A	\$3,354,373	N/A	\$3,367,662	N/A	-0.29	0.40	15% (+/-)	Yes
Dental: Number of Users	N/A	14,772	N/A	14,426	N/A	14,104	N/A	-2.34	-2.23	15% (+/-)	Yes
Dental: Avg Medicaid Pd per User	N/A	\$228	N/A	\$233	N/A	\$239	N/A	2.10	2.69	15% (+/-)	Yes
Other Practitioner: Total Medicaid Pd (TOS 10)	N/A	\$1,255,554	N/A	\$698,871	N/A	\$676,620	N/A	-44.30	-3.18	15% (+/-)	Yes
Other Practitioner: Number of Users	N/A	15,911	N/A	14,417	N/A	13,941	N/A	-9.39	-3.30	15% (+/-)	Yes
Other Practitioner: Avg Medicaid Pd per User	N/A	\$79	N/A	\$48	N/A	\$49	N/A	-38.60	0.12	15% (+/-)	Yes
OPD: Total Medicaid Paid (TOS 11)	N/A	\$17,263,818	N/A	\$22,297,085	N/A	\$23,173,066	N/A	29.16	3.93	15% (+/-)	Yes
OPD Number of Users	N/A	26,942	N/A	27,585	N/A	29,143	N/A	2.39	5.65	15% (+/-)	Yes
OPD: Avg Medicaid Pd per User	N/A	\$641	N/A	\$808	N/A	\$795	N/A	26.14	-1.63	15% (+/-)	Yes
Clinic: Total Medicaid Paid (TOS 12)	N/A	\$3,409,919	N/A	\$4,828,846	N/A	\$4,323,592	N/A	41.61	-10.50	15% (+/-)	Yes
Clinic: Number of Users	N/A	7,031	N/A	7,437	N/A	7,927	N/A	5.77	6.59	15% (+/-)	Yes
Clinic: Avg Medicaid Pd per User	N/A	\$485	N/A	\$649	N/A	\$545	N/A	33.88	-16.00	15% (+/-)	No
HH: Total Medicaid Paid (TOS 13)	N/A	\$23,345,848	N/A	\$25,573,551	N/A	\$27,242,533	N/A	9.54	6.53	15% (+/-)	Yes
HH: Number of Users	N/A	3,332	N/A	3,487	N/A	3,462	N/A	4.65	-0.72	15% (+/-)	Yes
HH: Avg Medicaid Pd per User	N/A	\$7,007	N/A	\$7,334	N/A	\$7,869	N/A	4.67	7.30	15% (+/-)	Yes
Lab/Xray: Total Medicaid Paid (TOS 15)	N/A	\$12,342,613	N/A	\$12,012,992	N/A	\$12,262,953	N/A	-2.67	2.08	15% (+/-)	Yes
Lab/Xray: Number of Users	N/A	27,410	N/A	17,417	N/A	17,292	N/A	-36.50	-0.72	15% (+/-)	Yes
Lab/Xray:Avg Medicaid Pd per User	N/A	\$450	N/A	\$690	N/A	\$709	N/A	53.17	2.82	15% (+/-)	Yes
Drugs: Total Medicaid Paid (TOS 16)	N/A	\$142,402,775	N/A	\$162,335,728	N/A	\$177,193,460	N/A	14.00	9.15	15% (+/-)	Yes
Drugs: Number of Users	N/A	48,933	N/A	49,392	N/A	50,583	N/A	0.94	2.41	15% (+/-)	Yes
Drugs: Avg Medicaid Pd per User	N/A	\$2,910	N/A	\$3,287	N/A	\$3,503	N/A	12.94	6.58	15% (+/-)	Yes
Other Services: Total Medicaid Paid (TOS 19)	N/A	\$17,784,160	N/A	\$17,440,030	N/A	\$85,914,307	N/A	-1.94	392.60	15% (+/-)	No
Other Services: Number of Users	N/A	12,745	N/A	12,421	N/A	14,576	N/A	-2.54	17.35	15% (+/-)	No
Other Services: Avg Medicaid Pd per User	N/A	\$1,395	N/A	\$1,404	N/A	\$5,894	N/A	0.62	319.80	15% (+/-)	No
Transportation: Total Medicaid Paid (TOS 26)	N/A	\$2,138,109	N/A	\$2,157,199	N/A	\$3,457,035	N/A	0.89	60.26	15% (+/-)	No
Transportation: Number of Users	N/A	8,099	N/A	5,555	N/A	6,739	N/A	-31.40	21.31	15% (+/-)	No
Transportation: Avg Medicaid Pd per User	N/A	\$264	N/A	\$388	N/A	\$513	N/A	47.10	32.10	15% (+/-)	No
PCS: Total Medicaid Paid (TOS 30)	N/A	\$5,334,316	N/A	\$5,987,631	N/A	\$6,629,588	N/A	12.25	10.72	15% (+/-)	Yes
PCS: Number of Users	N/A	1,540	N/A	1,628	N/A	1,761	N/A	5.71	8.17	15% (+/-)	Yes
PCS: Avg Medicaid Pd per User	N/A	\$3,464	N/A	\$3,678	N/A	\$3,765	N/A	6.18	2.36	15% (+/-)	Yes
Target Case Management: Total Medicaid Pd (TOS 31)	N/A	\$3,266,271	N/A	\$3,487,357	N/A	\$3,322,835	N/A	6.77	-4.72	15% (+/-)	Yes
Target Case Management: Number of Users	N/A	2,419	N/A	2,357	N/A	2,437	N/A	-2.56	3.39	15% (+/-)	Yes
Target Case Management: Avg Medicaid Pd per User	N/A	\$1,350	N/A	\$1,480	N/A	\$1,363	N/A	9.58	-7.85	15% (+/-)	Yes

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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
Rehab Services: Total Medicaid Pd (TOS 33)	N/A	\$49,263,801	N/A	\$10,408,786	N/A	\$11,750,018	N/A	-78.90	12.89	15% (+/-)	Yes
Rehab Services: Number of Users	N/A	7,396	N/A	3,456	N/A	3,635	N/A	-53.30	5.18	15% (+/-)	Yes
Rehab Services: Avg Medicaid Pd per User	N/A	\$6,661	N/A	\$3,012	N/A	\$3,232	N/A	-54.80	7.33	15% (+/-)	Yes
PT/OT/Speech/Hear: Total Medicaid Paid (TOS 34)	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
PT/OT/Speech/Hear: Number of Users	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
PT/OT/Speech/Hear: Avg Medicaid Pd per User	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Hospice: Total Medicaid Paid (TOS 35)	N/A	\$445,847	N/A	\$432,340	N/A	\$539,366	N/A	-3.03	24.76	15% (+/-)	No
Hospice: Number of Users	N/A	93	N/A	105	N/A	97	N/A	12.90	-7.62	15% (+/-)	Yes
Hospice: Avg Medicaid Pd per User	N/A	\$4,794	N/A	\$4,118	N/A	\$5,560	N/A	-14.10	35.04	15% (+/-)	No
DME: Total Medicaid Paid (TOS 51)	N/A	\$13,164,785	N/A	\$13,819,071	N/A	\$14,670,104	N/A	4.97	6.16	15% (+/-)	Yes
DME: Number of Users	N/A	10,873	N/A	16,933	N/A	17,107	N/A	55.73	1.03	15% (+/-)	Yes
DME: Avg Medicaid Pd per User	N/A	\$1,211	N/A	\$816	N/A	\$858	N/A	-32.60	5.08	15% (+/-)	Yes
Residential Care: Total Medicaid Paid (TOS 52)	N/A	\$15,380,752	N/A	\$18,773,993	N/A	\$22,629,716	N/A	22.06	20.54	15% (+/-)	No
Residential Care: Number of Users	N/A	602	N/A	785	N/A	1,165	N/A	30.40	48.41	15% (+/-)	No
Residential Care: Avg Medicaid Pd per User	N/A	\$25,549	N/A	\$23,916	N/A	\$19,425	N/A	-6.39	-18.80	15% (+/-)	No
Psych. Services: Total Medicaid Paid (TOS 53)	N/A	\$22,885,692	N/A	\$66,428,137	N/A	\$68,733,841	N/A	190.30	3.47	15% (+/-)	Yes
Psych. Services: Number of Users	N/A	10,992	N/A	12,603	N/A	12,961	N/A	14.66	2.84	15% (+/-)	Yes
Psych. Services: Avg Medicaid Pd per User	N/A	\$2,082	N/A	\$5,271	N/A	\$5,303	N/A	153.20	0.61	15% (+/-)	Yes
Adult Day Care: Total Medicaid Paid (TOS 54)	N/A	\$39,973,954	N/A	\$38,479,211	N/A	\$38,425,166	N/A	-3.74	-0.14	15% (+/-)	Yes
Adult Day Care: Number of Users	N/A	3,909	N/A	3,206	N/A	3,239	N/A	-18.00	1.03	15% (+/-)	Yes
Adult Day Care: Avg Medicaid Pd per User	N/A	\$10,226	N/A	\$12,002	N/A	\$11,863	N/A	17.37	-1.16	15% (+/-)	Yes
<b>AVG FFS MEDICAID AMT PD/FFS ENROLLEE BY SELECTED MAX TOS</b>											
Inpatient Hospital (TOS=01)	N/A	\$1,297	N/A	\$1,432	N/A	\$1,681	N/A	10.41	17.38	15% (+/-)	No
Aged	N/A	\$416	N/A	\$442	N/A	\$537	N/A	6.42	21.53	15% (+/-)	No
Disabled	N/A	\$1,926	N/A	\$2,165	N/A	\$2,528	N/A	12.36	16.81	15% (+/-)	No
Child	N/A	\$184	N/A	\$149	N/A	\$43	N/A	-18.80	-70.90	15% (+/-)	No
Adult	N/A	\$106	N/A	\$70	N/A	\$77	N/A	-34.00	9.77	15% (+/-)	Yes
ILTC (TOS=02,04,05,07)	N/A	\$8,403	N/A	\$8,653	N/A	\$8,627	N/A	2.97	-0.29	15% (+/-)	Yes
Aged	N/A	\$15,618	N/A	\$16,668	N/A	\$16,641	N/A	6.72	-0.16	15% (+/-)	Yes
Disabled	N/A	\$6,286	N/A	\$6,393	N/A	\$6,341	N/A	1.70	-0.81	15% (+/-)	Yes
Child	N/A	\$211	N/A	\$281	N/A	\$320	N/A	32.98	13.91	15% (+/-)	Yes
Adult	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Drugs (TOS=16)	N/A	\$2,360	N/A	\$2,674	N/A	\$2,887	N/A	13.31	7.96	15% (+/-)	Yes
Aged	N/A	\$2,233	N/A	\$2,566	N/A	\$2,714	N/A	14.88	5.80	15% (+/-)	Yes
Disabled	N/A	\$2,803	N/A	\$3,216	N/A	\$3,473	N/A	14.74	8.01	15% (+/-)	Yes
Child	N/A	\$178	N/A	\$146	N/A	\$161	N/A	-17.70	9.68	15% (+/-)	Yes
Adult	N/A	\$119	N/A	\$117	N/A	\$147	N/A	-1.38	26.05	15% (+/-)	No
All Other Services	N/A	\$4,022	N/A	\$4,217	N/A	\$5,495	N/A	4.86	30.29	15% (+/-)	No
Aged	N/A	\$1,502	N/A	\$1,741	N/A	\$2,188	N/A	15.92	25.72	15% (+/-)	No
Disabled	N/A	\$5,666	N/A	\$5,882	N/A	\$7,782	N/A	3.82	32.30	15% (+/-)	No
Child	N/A	\$2,223	N/A	\$2,561	N/A	\$2,326	N/A	15.21	-9.16	15% (+/-)	Yes
Adult	N/A	\$178	N/A	\$161	N/A	\$191	N/A	-9.66	18.81	15% (+/-)	No
<b>% OF FFS ENROLLEES WITH CLAIMS BY SELECTED MAX TYPE OF SERVICE</b>											
% FFS Enrollees with IP Claims (TOS=01)	N/A	15.70	N/A	15.75	N/A	16.54	N/A	0.33	5.01	15% (+/-)	Yes
Aged	N/A	18.42	N/A	18.66	N/A	20.38	N/A	1.32	9.19	15% (+/-)	Yes
Disabled	N/A	16.81	N/A	17.12	N/A	17.55	N/A	1.83	2.51	15% (+/-)	Yes
Child	N/A	1.52	N/A	1.19	N/A	0.89	N/A	-22.10	-25.10	15% (+/-)	No
Adult	N/A	1.67	N/A	1.66	N/A	1.68	N/A	-0.50	1.29	15% (+/-)	Yes
% FFS Enrollees with ILTC Claims (TOS=02,04,05,07)	N/A	18.98	N/A	18.23	N/A	17.75	N/A	-3.95	-2.60	15% (+/-)	Yes
Aged	N/A	47.85	N/A	46.54	N/A	46.10	N/A	-2.74	-0.93	15% (+/-)	Yes
Disabled	N/A	8.00	N/A	7.93	N/A	7.41	N/A	-0.89	-6.62	15% (+/-)	Yes
Child	N/A	0.57	N/A	0.48	N/A	0.36	N/A	-15.40	-24.80	15% (+/-)	No
Adult	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	15% (+/-)	N/A
% FFS Enrollees with Drug Claims (TOS=16)	N/A	81.10	N/A	81.36	N/A	82.42	N/A	0.33	1.30	15% (+/-)	Yes
Aged	N/A	88.80	N/A	89.26	N/A	89.75	N/A	0.52	0.54	15% (+/-)	Yes
Disabled	N/A	83.54	N/A	84.45	N/A	84.90	N/A	1.09	0.53	15% (+/-)	Yes
Child	N/A	45.83	N/A	45.37	N/A	49.21	N/A	-1.01	8.46	15% (+/-)	Yes

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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
Adult	N/A	43.05	N/A	45.59	N/A	51.59	N/A	5.90	13.15	15% (+/-)	Yes
% FFS Enrollees with All Other Claims	N/A	82.18	N/A	81.18	N/A	82.44	N/A	-1.21	1.55	15% (+/-)	Yes
Aged	N/A	77.61	N/A	75.84	N/A	77.37	N/A	-2.28	2.01	15% (+/-)	Yes
Disabled	N/A	88.77	N/A	88.63	N/A	89.30	N/A	-0.15	0.75	15% (+/-)	Yes
Child	N/A	61.39	N/A	59.60	N/A	62.07	N/A	-2.90	4.14	15% (+/-)	Yes
Adult	N/A	45.20	N/A	47.95	N/A	50.19	N/A	6.08	4.68	15% (+/-)	Yes
Avg # IP Days per FFS User	N/A	11	N/A	11	N/A	12	N/A	2.17	8.52	15% (+/-)	Yes
Aged	N/A	8	N/A	8	N/A	8	N/A	-0.07	3.87	15% (+/-)	Yes
Disabled	N/A	13	N/A	13	N/A	14	N/A	2.88	10.85	15% (+/-)	Yes
Child	N/A	8	N/A	6	N/A	4	N/A	-21.10	-40.10	15% (+/-)	No
Adult	N/A	5	N/A	4	N/A	5	N/A	-6.19	7.41	15% (+/-)	Yes
Avg # ILTC Days per FFS User	N/A	255	N/A	255	N/A	249	N/A	-0.03	-2.21	15% (+/-)	Yes
Aged	N/A	255	N/A	255	N/A	246	N/A	0.16	-3.66	15% (+/-)	Yes
Disabled	N/A	257	N/A	255	N/A	260	N/A	-0.66	1.83	15% (+/-)	Yes
Child	N/A	53	N/A	56	N/A	97	N/A	4.81	72.88	15% (+/-)	No
Adult	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
<b>FFS EXPENDITURES AND USERS BY MAX PGM TYPE</b>											
FP: Total Medicaid Paid (Program Type 2)	N/A	\$562,617	N/A	\$368,333	N/A	\$79,883	N/A	-34.50	-78.30	15% (+/-)	No
FP: Number of Users	N/A	300	N/A	268	N/A	270	N/A	-10.70	0.75	15% (+/-)	Yes
FP: Average Medicaid Pd per User	N/A	\$1,875	N/A	\$1,374	N/A	\$296	N/A	-26.70	-78.50	15% (+/-)	No
RHC: Total Medicaid Paid (Program Type 3)	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
RHC: Number of Users	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
RHC: Avg Medicaid Pd per User	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
FOHC: Total Medicaid Paid (Program Type 4)	N/A	\$2,583,229	N/A	\$2,760,435	N/A	\$3,251,661	N/A	6.86	17.80	15% (+/-)	No
FOHC: Number of Users	N/A	7,243	N/A	7,905	N/A	8,692	N/A	9.14	9.96	15% (+/-)	Yes
FOHC: Avg Medicaid Pd per User	N/A	\$357	N/A	\$349	N/A	\$374	N/A	-2.09	7.13	15% (+/-)	Yes
IHS: Total Medicaid Pd (Program Type 5)	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
IHS: Number of Users	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
IHS: Avg Medicaid Pd per User	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Section 1915(c) Waiver: Total Medicaid Paid (Program Types 6 and 7)	N/A	\$25,100,367	N/A	\$27,728,175	N/A	\$29,981,227	N/A	10.47	8.13	15% (+/-)	Yes
Section 1915(c) Waiver: Number of Users	N/A	3,045	N/A	3,088	N/A	3,325	N/A	1.41	7.68	15% (+/-)	Yes
Section 1915(c) Waiver: Avg Medicaid Pd per User	N/A	\$8,243	N/A	\$8,979	N/A	\$9,017	N/A	8.93	0.42	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	\$127,013,910	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	25,198	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	\$5,041	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$4,523	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$4,928	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$37,018	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$27,312	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	41.06	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	37.66	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	49.79	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	3.62	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	0.10	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	\$95,702,417	N/A	N/A	N/A	15% (+/-)	No
Number of CLTC Users (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	8,531	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	\$11,218	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$8,885	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$11,730	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$37,018	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$27,312	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	13.90	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	17.36	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	14.34	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	3.62	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	0.10	N/A	N/A	N/A	15% (+/-)	No

2003-2005 MAX PSF VALIDATION TABLE  
STATE: RI

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	\$29,981,227	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	3,325	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	\$9,017	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$8,197	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$9,901	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$21,258	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
% FFS Enrollees with CLTC Claims (Section 1915(c) claims only - excludes CLTC Codes 11-20)	N/A	N/A	N/A	N/A	N/A	5.42	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	9.84	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	4.29	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	0.04	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