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2003-2005 MAX IP VALIDATION TABLE  
STATE: SC

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	145,750	N/A	132,592	N/A	134,934	N/A	-9.03	1.77	Yes
% Encounter Claims	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% Supplemental Claims	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	N/A
Total FFS Claims	N/A	145,750	N/A	132,592	N/A	134,934	N/A	-9.03	1.77	Yes
% Crossover	5-20	20.17	No	9.82	Yes	9.07	Yes	-51.30	-7.63	Yes
% Adjusted Claims	N/A	0.00	N/A	0.01	N/A	0.04	N/A	Div by 0	514.20	No
% Standard Adjustments	> 1%	Div by 0	Yes	0.00	No	0.00	No	Div by 0	Div by 0	N/A
Aver. Amt. Pd Adjust. ( include \$0)	N/A	Div by 0	N/A	\$3,300	N/A	\$7,012	N/A	Div by 0	112.50	No
Total number of claims with missing Medicaid eligibility (excludes S-SCHIP only)	N/A	N/A	N/A	N/A	N/A	41	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	116,353	N/A	119,573	N/A	122,696	N/A	2.77	2.61	Yes
% Claims with> \$0 Paid	95-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with< \$0 Paid	0	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	N/A
Aver. Medicaid Amount Paid (claims with >\$0 paid)	\$2000 - \$7000	\$3,683	Yes	\$3,949	Yes	\$4,341	Yes	7.24	9.92	Yes
Aver. Medicaid Amt Paid per Covered Day (>\$0 paid and >0 days claims)	N/A	\$885	N/A	\$937	N/A	\$981	N/A	5.81	4.76	Yes
% Claims with TPL	>0 - 10	0.94	Yes	0.89	Yes	0.84	Yes	-5.79	-5.66	Yes
Aver. TPL Paid for claims with TPL	N/A	\$3,073	N/A	\$3,428	N/A	\$3,521	N/A	11.57	2.69	Yes
% Claims with UB-92 Accommodation Codes	95-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
Average # UB-92 Accom. Codes (at least 1 accom code)	>1	1.13	Yes	1.14	Yes	1.15	Yes	0.94	0.66	Yes
% Claims with UB-92 Ancillary Codes	95-100	99.93	Yes	99.88	Yes	99.90	Yes	-0.05	0.02	Yes
Average # UB-92 Ancillary Codes (at least 1 Ancillary code)	>3	8.95	Yes	8.98	Yes	9.10	Yes	0.33	1.31	Yes
Average LOS	2-<8	4.17	Yes	4.23	Yes	4.43	Yes	1.39	4.81	Yes
Average Covered Days (> 0 day)	2-<8	4.16	Yes	4.22	Yes	4.42	Yes	1.35	4.93	Yes
% Begin Date = Admit Date	95-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% IP Claims (MAX TOS 01)	95-100	99.99	Yes	99.98	Yes	99.97	Yes	-0.01	-0.01	Yes
% Family Planning Claims (pgm type=2)	>0-5	0.00	No	0.00	Yes	0.02	Yes	Div by 0	630.90	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	3.92	Yes	4.04	Yes	4.24	Yes	2.92	5.14	Yes
% Claims with PDX, where length=3	5-30	5.61	Yes	5.14	Yes	5.24	Yes	-8.39	1.91	Yes
% Claims with PDX, where length=4	15-75	20.23	Yes	19.15	Yes	18.37	Yes	-5.36	-4.05	Yes
% Claims with PDX, where length=5	25-70	72.67	No	74.29	No	75.04	No	2.24	1.00	Yes
% Claims with a procedure code	35-70	68.45	Yes	69.70	Yes	70.43	No	1.84	1.05	Yes
Average Number of Procedures for claims with at least 1 procedure code	>1	2.03	Yes	2.05	Yes	2.07	Yes	1.29	0.88	Yes
% Claims with Procedures that have CPT-4 Indicator	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% Claims with Procedures that have ICD-9 Indicator	N/A	99.99	N/A	99.98	N/A	99.95	N/A	-0.02	-0.03	Yes
% Claims with Procedures that have CPT-4 Indicator & CPT-4 format of 5n	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A

2003-2005 MAX IP VALIDATION TABLE  
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% Claims with Procedures that have ICD-9-CM Indicator & ICD-9-CM Format 3n or 4n	N/A	97.53	N/A	97.66	N/A	97.78	N/A	0.13	0.13	Yes
% Claims with DRG	>=90	100.00	Yes	100.00	Yes	99.98	Yes	0.00	-0.02	Yes
% Claims Maternal Delivery Indicator	N/A	20.93	N/A	21.83	N/A	22.33	N/A	4.32	2.26	Yes
% Claims Newborn Delivery Indicator (only for separate infant delivery claims using mother's ID)	N/A	24.05	N/A	24.96	N/A	25.70	N/A	3.75	2.99	Yes
<b>Patient Status</b>										
% Home	75-90	89.44	Yes	88.96	Yes	89.27	Yes	-0.54	0.35	Yes
% Transferred	1-10	9.34	Yes	9.83	Yes	9.27	Yes	5.21	-5.68	Yes
% Still a Patient	>0 - 2	0.00	No	0.00	No	0.00	No	Div by 0	Div by 0	N/A
% Died	>0 - 3	0.91	Yes	0.93	Yes	1.01	Yes	2.73	8.54	Yes
<b>FFS Crossover Claims (Type of Claim=1, Crossover Claim Indicator=1)</b>										
Total Number of Claims	N/A	29,397	N/A	13,019	N/A	12,238	N/A	-55.70	-6.00	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	\$851	N/A	\$910	N/A	\$1,063	N/A	6.94	16.82	No
% Claims with TPL	N/A	0.12	N/A	0.27	N/A	0.32	N/A	125.80	18.54	No
Aver. TPL Paid -claims with TPL	N/A	\$472	N/A	\$646	N/A	\$602	N/A	36.68	-6.71	Yes
% Claims with UB-92 Accommodation Codes	95-100	47.29	No	100.00	Yes	100.00	Yes	111.50	0.00	Yes
Average # UB-92 Accom. Codes (at least 1 accom code)	>1	1.34	Yes	1.38	Yes	1.40	Yes	2.96	1.63	Yes
% Claims with UB-92 Ancillary Codes	95-100	47.28	No	99.98	Yes	100.00	Yes	111.50	0.02	Yes
Average # UB-92 Ancillary Codes (at least 1 Ancillary code)	>3	13.64	Yes	14.06	Yes	14.36	Yes	3.08	2.17	Yes
Average LOS	2-<8	4.97	Yes	9.10	No	10.37	No	83.10	13.99	Yes
% Begin Date = Admit Date	95-100	47.27	No	100.00	Yes	99.99	Yes	111.60	-0.01	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	98.49	Yes	100.00	Yes	100.00	Yes	1.53	0.00	Yes
Average Number of DX Codes (at least 1 DX)	>=2	3.97	Yes	7.42	Yes	7.67	Yes	87.05	3.38	Yes
% Claims with PDX, where length=3	5-30	7.76	Yes	8.71	Yes	7.81	Yes	12.29	-10.30	Yes
% Claims with PDX, where length=4	15-75	42.13	Yes	35.92	Yes	35.65	Yes	-14.70	-0.76	Yes
% Claims with PDX, where length=5	25-70	50.12	Yes	55.37	Yes	56.54	Yes	10.47	2.12	Yes
% Claims with a procedure code	35-70	36.50	Yes	58.49	Yes	60.78	Yes	60.26	3.91	Yes
Average Number of Procedures for claims with at least 1 procedure code	>1	1.94	Yes	2.50	Yes	2.56	Yes	28.92	2.60	Yes
% Claims with Procedures that have CPT-4 Indicator	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% Claims with Procedures that have ICD-9 Indicator	N/A	78.39	N/A	100.00	N/A	99.84	N/A	27.57	-0.16	Yes
% Claims with Procedures that have CPT-4 Indicator & CPT-4 format of 5n	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A
% Claims with Procedures that have ICD-9-CM Indicator & ICD-9-CM Format 3n or 4n	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
% Claims with DRG	>=90	47.28	No	100.00	Yes	100.00	Yes	111.50	0.00	Yes

2003-2005 MAX LT VALIDATION TABLE  
STATE: SC

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	182,627	N/A	182,885	N/A	176,720	N/A	0.14	-3.37	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	182,627	N/A	182,885	N/A	176,720	N/A	0.14	-3.37	Yes
% Crossover	5-20	0.01	No	0.00	No	0.03	No	-46.20	594.90	No
% Adjusted Claims	> 1%	0.00	No	0.96	No	3.69	Yes	Div by 0	286.50	No
% Standard Adjustments	N/A	Div by 0	N/A	83.52	N/A	84.33	N/A	Div by 0	0.97	Yes
Aver. Amt. Pd Adjust. ( include \$0)	N/A	Div by 0	N/A	\$3,136	N/A	\$3,280	N/A	Div by 0	4.60	Yes
Total number of claims with missing Medicaid eligibility (excludes S-SCHIP only)	N/A	N/A	N/A	N/A	N/A	7	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	182,614	N/A	182,878	N/A	176,673	N/A	0.14	-3.39	Yes
% Claims with> \$0 Paid	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
% Claims with< \$0 Paid	0	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	N/A
<b>Average Medicaid Amount Paid Per Covered Day (claims with &gt;\$0 paid)</b>										
NF (TOS 07)	\$50-\$100	\$88	Yes	\$95	Yes	\$102	No	8.29	7.31	Yes
ICF/MR (TOS 05)	N/A	\$231	N/A	\$235	N/A	\$243	N/A	1.77	3.60	Yes
Aged/MH (TOS 02)	N/A	\$159	N/A	\$169	N/A	\$178	N/A	5.98	5.33	Yes
IP Psych. < 21 (TOS 04)	N/A	\$304	N/A	\$303	N/A	\$304	N/A	-0.37	0.27	Yes
% NF (TOS 07)	75-99	82.47	Yes	82.27	Yes	82.92	Yes	-0.24	0.80	Yes
% NF claims with NF Covered Days	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
Avg days for NF claims with Covered Days	N/A	28	N/A	28	N/A	28	N/A	0.30	-0.50	Yes
% ICF/MR (TOS 05)	>0-20	12.71	Yes	12.22	Yes	11.91	Yes	-3.89	-2.56	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	30	N/A	30	N/A	30	N/A	0.38	-0.49	Yes
% Aged/MH (TOS 02)	>0-10	1.58	Yes	1.50	Yes	1.36	Yes	-5.19	-9.31	Yes
% Aged/MH claims with Aged/MH Covered Days	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
Avg days for Aged/MH claims with Covered Days	N/A	29	N/A	29	N/A	29	N/A	0.09	-1.13	Yes
% IP Psych. < 21 (TOS 04)	>0-5	3.23	Yes	4.01	Yes	3.81	Yes	24.08	-5.05	Yes
% IP Psych. < 21 claims with IP Psych Covered Days	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
Avg days for IP Psych. < 21 claims with Covered Days	N/A	15	N/A	14	N/A	16	N/A	-6.24	14.53	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	3.23	No	4.01	No	3.81	No	24.08	-5.05	Yes
% Claims with DX, where length=3	5-30	10.23	Yes	11.52	Yes	10.36	Yes	12.59	-10.10	Yes
% Claims with DX, where length=4	15-75	15.77	Yes	13.05	No	14.91	No	-17.30	14.26	Yes
% Claims with DX, where length=5	25-70	74.00	No	75.44	No	74.74	No	1.94	-0.93	Yes
<b>Patient Status</b>										
% Home	1-5	0.32	No	0.36	No	0.44	No	14.37	22.43	No
% Still a Patient	8-98	2.87	No	3.59	No	3.33	No	25.12	-7.25	Yes
% Died	>0-5	0.00	No	0.00	Yes	0.00	No	Div by 0	-100.00	No
<b>FFS Crossover Claims (Type of Claim=1, Crossover Claim Indicator=1)</b>										
Total Number of Claims	N/A	13	N/A	7	N/A	47	N/A	-46.20	571.40	No
% Claims with> \$0 Paid	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
% Claims with< \$0 Paid	0	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	N/A

2003-2005 MAX LT VALIDATION TABLE  
STATE: SC

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	\$13,874	N/A	\$16,418	N/A	\$2,061	N/A	18.34	-87.40	No
% NF (TOS 07)	75-99	0.00	No	0.00	No	0.00	No	Div by 0	Div by 0	N/A
% 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	0.00	No	0.00	No	0.00	No	Div by 0	Div by 0	N/A
% IP Psych. < 21 (TOS 04)	>0-5	100.00	No	100.00	No	100.00	No	0.00	0.00	Yes
% 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	0.00	No	0.00	No	0.00	No	Div by 0	Div by 0	N/A
% Claims with DX, where length=4	15-75	7.69	No	0.00	No	8.51	No	-100.00	Div by 0	N/A
% Claims with DX, where length=5	25-70	92.31	No	100.00	No	91.49	No	8.33	-8.51	Yes
Patient Status										
% Home	1-5	38.46	No	14.29	No	53.19	No	-62.90	272.30	No
% Still a Patient	8-98	61.54	Yes	85.71	Yes	46.81	Yes	39.29	-45.40	No
% 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: SC

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	22,483,118	N/A	22,843,337	N/A	23,329,555	N/A	1.60	2.13	Yes
% Encounter Claims (Claim Type=3)	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
% Cap Claims (Claim Type=2, and MAX TOS 20,21,22)	N/A	3.68	N/A	3.47	N/A	5.24	N/A	-5.49	50.78	No
Total FFS Claims Excluding Capitation Payments	N/A	21,656,486	N/A	22,049,556	N/A	22,107,205	N/A	1.82	0.26	Yes
% Crossover	5-20	6.05	Yes	6.25	Yes	6.49	Yes	3.35	3.87	Yes
% Adjusted Claims	> 1%	0.00	No	0.11	No	0.44	No	Div by 0	310.50	No
% Standard Adjustments	N/A	Div by 0	N/A	0.00	N/A	91.81	N/A	Div by 0	Div by 0	N/A
Aver. Amt. Pd Adjust. ( include \$0)	N/A	Div by 0	N/A	\$81	N/A	\$75	N/A	Div by 0	-6.94	Yes
% Claims(TOC 1,2) TOS 20: HMO Cap Payment	N/A	2.70	N/A	2.54	N/A	2.86	N/A	-5.80	12.40	Yes
% Claims(TOC 1,2) TOS 21: PHP Cap Payments	N/A	0.98	N/A	0.80	N/A	0.90	N/A	-18.30	12.69	Yes
% Claims(TOC 1,2) TOS 22: PCCM Cap Pay.	N/A	0.00	N/A	0.13	N/A	1.48	N/A	Div by 0	1,005.00	No
Average Paid per HMO Cap Clms (TOS 20)	\$75-\$300	\$89	Yes	\$102	Yes	\$112	Yes	14.73	9.32	Yes
Average Paid per PHP Cap Clms (TOS 21)	\$20-\$250	\$69	Yes	\$69	Yes	\$60	Yes	0.19	-12.60	Yes
Average Paid per PCCM Cap Clms (TOS 22)	3-5	Div by 0	No	\$2	No	\$2	No	Div by 0	0.00	Yes
Total number of claims with missing Medicaid eligibility (excludes S-SCHIP only)	N/A	N/A	N/A	N/A	N/A	5,042	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	20,347,039	N/A	20,671,688	N/A	20,672,320	N/A	1.60	0.00	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	1.57	N/A	1.76	N/A	1.87	N/A	12.00	6.50	Yes
% OPD Claims with Span Bill/ All OPD Claims(TOS 11)	N/A	10.87	N/A	16.96	N/A	18.54	N/A	56.08	9.31	Yes
% HH Claims with Span Bill/All HH Claims (TOS 13)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% Other Claims with Span Bills/All Other Claims	N/A	1.23	N/A	1.21	N/A	1.24	N/A	-1.70	2.05	Yes
% Claims W/ Service Place 11- Office	50-90	29.31	No	29.70	No	30.80	No	1.34	3.71	Yes
% Claims W/ Service Place 12 - Home	>0-5	20.13	No	19.35	No	18.80	No	-3.90	-2.86	Yes
% Claims W/ Service Place 21 - Hospital	>0-5	4.10	Yes	4.29	Yes	4.29	Yes	4.54	0.09	Yes
% Claims W/ Service Place 32 - NF	>0-5	0.03	Yes	0.02	Yes	0.03	Yes	-18.70	26.06	No
% Claims W/ Service Place 23 - ER	1-10	3.02	Yes	2.76	Yes	2.86	Yes	-8.58	3.66	Yes
% Claims w/ Service Place 22 - OPD	>0-10	9.85	Yes	9.84	Yes	10.09	No	-0.11	2.62	Yes
% Claims W/ Service Place 99 - Unknown/Other	<5	13.80	No	9.84	No	10.12	No	-28.70	2.80	Yes
% Claims with TPL	>0 - 15	0.43	Yes	0.41	Yes	0.44	Yes	-4.64	6.51	Yes
Aver. TPL Paid -claims with TPL	N/A	\$48	N/A	\$50	N/A	\$51	N/A	2.74	2.58	Yes
<b>PERCENT CLAIMS/MAX TOS</b>										
% claims MAX TOS 08: Physicians	10-35	19.21	Yes	19.19	Yes	19.45	Yes	-0.14	1.36	Yes
% claims MAX TOS 09: Dental	2-20	9.81	Yes	9.88	Yes	10.13	Yes	0.70	2.45	Yes
% claims MAX TOS 10: Other Practioner	0.5-8	1.46	Yes	1.49	Yes	1.55	Yes	1.96	3.87	Yes
% claims MAX TOS 11: OPD	3-25	3.57	Yes	3.48	Yes	3.69	Yes	-2.31	5.85	Yes
% claims MAX TOS 12: Clinic	2-25	16.37	Yes	16.09	Yes	13.74	Yes	-1.74	-14.60	Yes
% claims MAX TOS 13: HH	>0-25	0.60	Yes	0.26	Yes	0.26	Yes	-55.80	-1.56	Yes
% claims MAX TOS 15: Lab/Xray	4-20	14.45	Yes	15.03	Yes	15.41	Yes	3.98	2.55	Yes
% claims MAX TOS 16: Drugs	<3	0.12	Yes	0.09	Yes	0.11	Yes	-24.10	22.40	No
% claims MAX TOS 19: Other Services	<25	1.24	Yes	0.51	Yes	0.22	Yes	-59.10	-56.90	No

2003-2005 MAX OT VALIDATION TABLE  
STATE: SC

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	2.51	No	3.62	Yes	4.17	Yes	43.77	15.42	No
% claims MAX TOS 26: Transportation	>1	2.29	Yes	2.61	Yes	3.07	Yes	13.94	17.67	No
% claims MAX TOS 24: Sterilizations	N/A	0.03	N/A	0.03	N/A	0.04	N/A	-3.71	20.76	No
% claims MAX TOS 25: Abortions	N/A	0.00	N/A	0.00	N/A	0.00	N/A	-1.57	-35.00	No
% claims MAX TOS 30: PCS	>0	15.92	Yes	15.04	Yes	14.92	Yes	-5.52	-0.82	Yes
% claims MAX TOS 31: TCM	>0	2.11	Yes	2.18	Yes	1.85	Yes	3.11	-15.10	No
% claims MAX TOS 33: Rehabilitation	>0	0.35	Yes	0.51	Yes	0.42	Yes	45.96	-18.90	No
% claims MAX TOS 34: PT/OT/hear/speech	>1	0.77	No	0.75	No	0.92	No	-2.62	22.95	No
% claims MAX TOS 35: Hospice	>0	0.02	Yes	0.02	Yes	0.05	Yes	34.11	117.70	No
% claims MAX TOS 36: Nurse Midwife	N/A	0.09	N/A	0.10	N/A	0.13	N/A	11.94	26.20	No
% claims MAX TOS 37: Nurse Practitioner	N/A	0.23	N/A	0.21	N/A	0.22	N/A	-6.88	4.61	Yes
% claims MAX TOS 38: Private Nursing	N/A	0.00	N/A	0.00	N/A	0.01	N/A	-10.80	91.96	No
% claims MAX TOS 39: Religious Non-Med.	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% claims MAX TOS 52: Residential Care	N/A	0.34	N/A	0.02	N/A	0.02	N/A	-95.50	3.35	Yes
% claims MAX TOS 53: Psych. Services	>1	6.69	Yes	6.98	Yes	7.31	Yes	4.35	4.84	Yes
% claims MAX TOS 54: Adult Day Care	>0	1.80	Yes	1.91	Yes	2.34	Yes	6.02	22.12	No
% claims MAX TOS 99: Unknown	<1	0.00	Yes	0.00	Yes	0.00	Yes	3,640.00	-26.30	No
Average Medicaid Amount Paid For Selected MAX TOS (excluding claims with <=\$0 paid)										
Total	N/A	\$62	N/A	\$63	N/A	\$64	N/A	0.47	1.39	Yes
08: Physicians	\$20-90	\$63	Yes	\$64	Yes	\$64	Yes	1.26	0.49	Yes
09: Dental	\$10-60	\$45	Yes	\$45	Yes	\$44	Yes	0.54	-1.07	Yes
10: Other Practioner	\$10-100	\$31	Yes	\$32	Yes	\$41	Yes	3.07	28.09	No
11: OPD	\$20-100	\$95	Yes	\$89	Yes	\$84	Yes	-6.39	-5.35	Yes
12: Clinic	\$20-100	\$58	Yes	\$55	Yes	\$46	Yes	-5.29	-16.80	No
13: HH	N/A	\$79	N/A	\$78	N/A	\$79	N/A	-0.47	1.19	Yes
15: Lab/Xray	10-60	\$19	Yes	\$20	Yes	\$21	Yes	4.28	6.37	Yes
16: Drugs	10-60	\$336	No	\$534	No	\$384	No	58.97	-28.00	No
19: Other Services	N/A	\$191	N/A	\$262	N/A	\$436	N/A	36.91	66.21	No
51: DME	N/A	\$95	N/A	\$71	N/A	\$79	N/A	-24.90	10.72	Yes
26: Transportation	N/A	\$93	N/A	\$85	N/A	\$38	N/A	-8.70	-54.90	No
30: PCS	N/A	\$23	N/A	\$26	N/A	\$27	N/A	9.83	6.36	Yes
31: Targeted Case Management	N/A	\$176	N/A	\$171	N/A	\$180	N/A	-2.99	5.58	Yes
33: Rehabilitation	N/A	\$237	N/A	\$116	N/A	\$105	N/A	-51.10	-9.20	Yes
34: PT/OT/speech/hear	N/A	\$32	N/A	\$33	N/A	\$32	N/A	2.12	-1.22	Yes
35: Hospice	N/A	\$1,261	N/A	\$1,143	N/A	\$1,692	N/A	-9.38	48.04	No
52: Residential Care	N/A	\$1,484	N/A	\$534	N/A	\$577	N/A	-64.00	8.09	Yes
53: Psych. Services	N/A	\$93	N/A	\$116	N/A	\$119	N/A	25.44	2.23	Yes
54: Adult Day Care	N/A	\$97	N/A	\$349	N/A	\$396	N/A	260.50	13.46	Yes
PERCENT OF CLAIMS BY PROGRAM TYPE (claim type 1)										
% Family Planning (code 2)	N/A	6.48	N/A	6.31	N/A	4.80	N/A	-2.68	-24.00	No
% RHC (code 3)	N/A	1.15	N/A	1.06	N/A	1.26	N/A	-8.15	19.05	No
% FQHC (code 4)	N/A	1.08	N/A	1.07	N/A	1.06	N/A	-0.78	-0.61	Yes
% IHS (code 5)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	-20.50	-50.80	No
% Waiver (code 6,7)	N/A	18.22	N/A	17.39	N/A	17.16	N/A	-4.55	-1.33	Yes
AVERAGE EXPENDITURES BY PROGRAM										
Family Planning (code 2)	N/A	\$143	N/A	\$149	N/A	\$192	N/A	4.71	28.49	No

2003-2005 MAX OT VALIDATION TABLE  
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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Change Within Expected Range
RHC (code 3)	N/A	\$62	N/A	\$64	N/A	\$67	N/A	3.30	4.28	Yes
FQHC (code 4)	N/A	\$88	N/A	\$93	N/A	\$96	N/A	6.33	3.55	Yes
IHS (code 5)	N/A	\$197	N/A	\$199	N/A	\$221	N/A	1.26	10.80	Yes
Waiver (code 6, 7)	N/A	\$26	N/A	\$28	N/A	\$30	N/A	7.08	6.62	Yes
% Claims with DX	> 60	78.71	Yes	78.68	Yes	78.11	Yes	-0.04	-0.72	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	26.00	N/A	27.19	N/A	28.07	N/A	4.57	3.27	Yes
% Claims with DX, where length=3	5-25	7.25	Yes	6.02	Yes	6.26	Yes	-16.90	3.85	Yes
% Claims with DX, where length=4	40-70	46.35	Yes	46.87	Yes	47.82	Yes	1.11	2.04	Yes
% Claims with DX, where length=5	20-55	46.39	Yes	47.11	Yes	45.92	Yes	1.55	-2.52	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	99.91	Yes	99.88	Yes	99.87	Yes	-0.03	-0.01	Yes
% CPT-4 Service Code Indicator (code 01)/Claims with Service Codes	N/A	37.55	N/A	44.98	N/A	45.97	N/A	19.79	2.22	Yes
% HCPCS (II & III) Service Codes Indicator (code 06)/Claims with Service Codes	N/A	41.32	N/A	46.13	N/A	45.49	N/A	11.64	-1.38	Yes
% Other National Code Indicator (codes 2-5, 7- 9)/Claims with Service Codes	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% State Specific Serv. Indicator (10-87)/Claims with Service Codes	N/A	21.14	N/A	8.89	N/A	8.53	N/A	-57.90	-4.06	Yes
% CPT-4 Format Codes- 5n/Claims with CPT-4	98-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% HCPCS Format Codes Cnnnn or Cnnn /Claims with HCPCS	98-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with TOS 08 with Physician Specialty	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
PERCENT OF CLAIMS BY CLTC CODE										
CLTC 00: not a CLTC claim	N/A	N/A	N/A	N/A	N/A	75.97	N/A	N/A	N/A	N/A
CLTC Non-Waiver Claims (11-20)	N/A	N/A	N/A	N/A	N/A	6.87	N/A	N/A	N/A	N/A
CLTC 11: Non-Waiver Personal Care	N/A	N/A	N/A	N/A	N/A	0.40	N/A	N/A	N/A	N/A
CLTC 12: Non-Waiver PDN	N/A	N/A	N/A	N/A	N/A	0.01	N/A	N/A	N/A	N/A
CLTC 13: Non-Waiver Adult Day	N/A	N/A	N/A	N/A	N/A	0.53	N/A	N/A	N/A	N/A
CLTC 14: Non-Waiver HH	N/A	N/A	N/A	N/A	N/A	0.26	N/A	N/A	N/A	N/A
CLTC 15: Non-Waiver Residential Care	N/A	N/A	N/A	N/A	N/A	0.01	N/A	N/A	N/A	N/A
CLTC 16: Non-Waiver Rehab	N/A	N/A	N/A	N/A	N/A	0.28	N/A	N/A	N/A	N/A
CLTC 17: Non-Waiver TCM	N/A	N/A	N/A	N/A	N/A	0.89	N/A	N/A	N/A	N/A
CLTC 18: Non-Waiver Transportation	N/A	N/A	N/A	N/A	N/A	2.62	N/A	N/A	N/A	N/A
CLTC 19: Non-Waiver Hospice	N/A	N/A	N/A	N/A	N/A	0.05	N/A	N/A	N/A	N/A
CLTC 20: Non-Waiver DME	N/A	N/A	N/A	N/A	N/A	1.82	N/A	N/A	N/A	N/A
CLTC Waiver Claims (30-40)	N/A	N/A	N/A	N/A	N/A	17.16	N/A	N/A	N/A	N/A
CLTC 30: Other Waiver	N/A	N/A	N/A	N/A	N/A	0.24	N/A	N/A	N/A	N/A
CLTC 31: Waiver Personal Care	N/A	N/A	N/A	N/A	N/A	14.52	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	1.80	N/A	N/A	N/A	N/A
CLTC 34: Waiver HH	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A



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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Change Within Expected Range
CLTC 35: Waiver Residential Care	N/A	N/A	N/A	N/A	N/A	0.00	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	0.60	N/A	N/A	N/A	N/A
<b>FFS Crossover Claims (Type of Claim=1), Crossover Claim Indicator=1, excluding capitation claims)</b>										
Total Number of Claims	N/A	1,309,447	N/A	1,377,868	N/A	1,434,885	N/A	5.23	4.14	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	1.50	N/A	1.97	N/A	2.36	N/A	31.11	19.93	No
% OPD Claims with Span Bill/ All OPD Claims(TOS 11)	N/A	18.91	N/A	28.12	N/A	38.04	N/A	48.76	35.24	No
% HH Claims with Span Bill/All HH Claims (TOS 13)	N/A	0.00	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A
% Other Claims with Span Bills/All Other Claims	N/A	0.67	N/A	0.69	N/A	0.63	N/A	3.00	-9.06	Yes
<b>PERCENT CLAIMS/MAX TOS (excluding 20-22)</b>										
% claims MAX TOS 08: Physicians	N/A	21.53	N/A	20.44	N/A	17.39	N/A	-5.06	-14.90	Yes
% claims MAX TOS 10: Other Practioner	N/A	1.84	N/A	1.53	N/A	1.03	N/A	-17.10	-32.90	No
% claims MAX TOS 11: OPD	N/A	4.53	N/A	4.64	N/A	4.61	N/A	2.42	-0.44	Yes
% claims MAX TOS 12: Clinic	N/A	26.47	N/A	28.88	N/A	29.33	N/A	9.09	1.57	Yes
% claims MAX TOS 13: HH	N/A	0.00	N/A	0.00	N/A	0.00	N/A	-100.00	Div by 0	N/A
% claims MAX TOS 15: Lab/Xray	N/A	11.03	N/A	9.76	N/A	7.97	N/A	-11.50	-18.40	No
% claims MAX TOS 19: Other Services	N/A	0.10	N/A	0.31	N/A	0.08	N/A	205.00	-73.30	No
% claims MAX TOS 51: DME	N/A	17.32	N/A	17.62	N/A	21.68	N/A	1.70	23.07	No
% claims MAX TOS 26: Transportation	N/A	4.92	N/A	4.69	N/A	5.38	N/A	-4.73	14.70	Yes
% 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	0.16	N/A	0.75	N/A	0.29	N/A	361.00	-61.20	No
% claims MAX TOS 33: Rehabilitation	N/A	0.11	N/A	0.33	N/A	0.36	N/A	187.80	9.20	Yes
% claims MAX TOS 34: PT/OT/hear/speech	N/A	0.00	N/A	0.00	N/A	0.00	N/A	-69.50	154.20	No
% claims MAX TOS 35: Hospice	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% claims MAX TOS 52: Residential Care	N/A	0.20	N/A	0.00	N/A	0.00	N/A	-100.00	Div by 0	N/A
% claims MAX TOS 53: Psych. Services	N/A	11.27	N/A	10.53	N/A	11.31	N/A	-6.53	7.45	Yes
% claims MAX TOS 54: Adult Day Care	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
Average Amount Paid	N/A	\$44	N/A	\$44	N/A	\$45	N/A	-1.11	2.32	Yes
% Claims with DX	N/A	99.59	N/A	99.77	N/A	99.75	N/A	0.18	-0.02	Yes
% Claims with DX (MAX TOS 8, 11, 12)	85-100	99.58	Yes	100.00	Yes	100.00	Yes	0.42	0.00	Yes
% Claims with 1 DX that have 2 DX	N/A	50.61	N/A	53.11	N/A	51.49	N/A	4.94	-3.05	Yes
% Claims with DX, where length=3	5-25	27.34	No	25.64	No	21.28	Yes	-6.22	-17.00	No
% Claims with DX, where length=4	40-70	30.91	No	31.24	No	33.70	No	1.06	7.85	Yes
% Claims with DX, where length=5	20-55	41.62	Yes	43.12	Yes	45.02	Yes	3.60	4.41	Yes
% OPD Claims with Service Code or UB-92/OPD Claims (TOS 11)	N/A	95.80	N/A	100.00	N/A	100.00	N/A	4.39	0.00	Yes
% HH Claims with Service Code or UB-92/HH Claims (TOS13)	N/A	100.00	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A
% Other Claims with Service Codes/All Other Claims (Excluding OPD/HH)	98-100	99.31	Yes	99.78	Yes	99.82	Yes	0.48	0.03	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
% CPT-4 Service Code Indicator (code 01)/Claims with Service Codes	N/A	41.55	N/A	43.60	N/A	36.69	N/A	4.94	-15.90	No
% HCPCS (II & III) Service Codes Indicator (code 06)/Claims with Service Codes	N/A	47.80	N/A	56.10	N/A	63.02	N/A	17.38	12.33	Yes
% Other Codes Indicator /Claims with Service Codes	N/A	10.65	N/A	0.29	N/A	0.29	N/A	-97.30	-2.25	Yes

2003-2005 MAX RX VALIDATION TABLE  
STATE: SC

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	10,823,344	N/A	11,284,309	N/A	11,902,040	N/A	4.26	5.47	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	10,823,344	N/A	11,284,309	N/A	11,902,040	N/A	4.26	5.47	Yes
% Adjusted Claims	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% Standard Adjustments	> 1%	Div by 0	Yes	Div by 0	Yes	Div by 0	Yes	Div by 0	Div by 0	N/A
Aver. Amt. Pd Adjust. ( include \$0)	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A
Total number of claims with missing Medicaid eligibility (excludes S-SCHIP only)	N/A	N/A	N/A	N/A	N/A	2,096	N/A	N/A	N/A	N/A
<b>FFS Claims (Type of Claim=1)</b>										
Total Number of Claims	N/A	10,823,344	N/A	11,284,309	N/A	11,902,040	N/A	4.26	5.47	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	\$55	Yes	\$60	Yes	\$62	No	8.88	3.41	Yes
% Claims with TPL	>0 - 15	1.71	Yes	1.83	Yes	1.95	Yes	7.37	6.38	Yes
Aver. TPL Paid for claims with TPL	N/A	\$69	N/A	\$78	N/A	\$84	N/A	12.17	7.57	Yes
% Family Planning Claims (program type=2)	N/A	2.20	N/A	2.23	N/A	2.32	N/A	1.07	3.99	Yes
% Drug Claims (TOS 16)	95-99	100.00	No	100.00	No	100.00	No	0.00	0.00	Yes
% DME Claims (TOS 51)	>0 - 6	0.00	No	0.00	No	0.00	No	Div by 0	Div by 0	N/A
% Drug Claims with Quantity	>98	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Drug Claims with Days Supply	>98	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with HICL	98-100	100.00	Yes	100.00	Yes	99.97	Yes	0.00	-0.03	Yes
% Claims with Medispan	98-100	99.36	Yes	99.63	Yes	99.62	Yes	0.27	-0.01	Yes
% Claims with AHFS	98-100	100.00	Yes	100.00	Yes	99.97	Yes	0.00	-0.03	Yes
% Claims with Generic (GTC)	98-100	100.00	Yes	100.00	Yes	99.97	Yes	0.00	-0.03	Yes
% Claims with GC3	98-100	100.00	Yes	100.00	Yes	99.97	Yes	0.00	-0.03	Yes
<b>NDC Configuration Indicator</b>										
% Prescription (codes 0-3)	N/A	76.29	N/A	74.38	N/A	72.11	N/A	-2.51	-3.05	Yes
% Products (codes 4-6)	N/A	23.60	N/A	25.52	N/A	27.79	N/A	8.12	8.90	Yes
% HRI (code 7)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	132.90	-44.20	No
% Claims with Smart Key	98-100	100.00	Yes	100.00	Yes	99.97	Yes	0.00	-0.03	Yes
% OTC-Drug Class	N/A	2.29	N/A	2.36	N/A	3.17	N/A	3.06	34.55	No
% Prescription-Drug Class	N/A	97.71	N/A	97.64	N/A	96.80	N/A	-0.08	-0.86	Yes
% Multiple Source (Code Y)	N/A	46.09	N/A	49.83	N/A	56.17	N/A	8.13	12.72	Yes
% Single Source (Code N)	N/A	48.77	N/A	43.23	N/A	39.26	N/A	-11.30	-9.20	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: SC

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	1,034,679	N/A	1,008,133	N/A	1,012,763	N/A	-2.57	0.46	10% (+/-)	Yes
Total Medicaid Amount Paid	N/A	\$3,017,155,443	N/A	\$3,192,911,883	N/A	\$3,365,373,906	N/A	5.83	5.40	15% (+/-)	Yes
% with no services (Code 0)	N/A	16.78	N/A	16.56	N/A	15.96	N/A	-1.34	-3.61	N/A	N/A
% with FFS only claims (Code 1)	N/A	73.20	N/A	73.82	N/A	68.71	N/A	0.84	-6.92	N/A	N/A
% with only cap claims (Code 2)	N/A	2.09	N/A	1.79	N/A	2.02	N/A	-14.50	12.80	N/A	N/A
% with only encounter claims (Code 3)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A	N/A
% with FFS and cap claims (Code 4)	N/A	7.93	N/A	7.84	N/A	13.31	N/A	-1.11	69.87	N/A	N/A
% with cap and encounter claims only (Code 5)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A	N/A
% with FFS and encounter claims only (Code 6)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A	N/A
% with FFS, cap and encounter records (Code 7)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A	N/A
# with claims and missing Medicaid eligibility (excludes S-SCHIP only)	N/A	1,233	N/A	1,843	N/A	476	N/A	49.47	-74.20	N/A	N/A
% with claims and missing Medicaid eligibility (excludes S-SCHIP only)	<2%	0.12	Yes	0.18	Yes	0.05	Yes	53.41	-74.30	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	412	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	0.04	N/A	N/A	N/A	N/A	N/A
Expenditures for people missing Medicaid eligibility (excludes S-SCHIP only enrollees)	N/A	\$25,884,449	N/A	\$25,709,757	N/A	\$715,434	N/A	-0.68	-97.20	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	\$691,457	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	1,033,446	N/A	1,006,290	N/A	1,012,287	N/A	-2.63	0.60	10% (+/-)	Yes
Total Medicaid PYE (Person Years of Enrollment)	N/A	883,333	N/A	858,597	N/A	860,135	N/A	-2.80	0.18	10% (+/-)	Yes
# with any M-SCHIP enrollment (Medicaid enrollees)	N/A	92,939	N/A	77,065	N/A	82,257	N/A	-17.10	6.74	N/A	N/A
Total PYE any M-SCHIP	N/A	52,074	N/A	51,610	N/A	51,802	N/A	-0.89	0.37	N/A	N/A
<b>Eligibility Demographics</b>											
% Records with Valid SSN Format	>=95%	95.67	Yes	95.28	Yes	95.45	Yes	-0.41	0.18	10% (+/-)	Yes
% Records whose MSIS SSN passed High Group Test (Code 1)	>95%	N/A	No	N/A	No	95.30	No	N/A	N/A	10% (+/-)	No
% Records whose MSIS SSN failed High Group Test due to invalid AAA (Code 2)	N/A	N/A	N/A	N/A	N/A	0.02	N/A	N/A	N/A	N/A	N/A
% Records whose MSIS SSN failed High Group Test due to GG = 00 (Code 3)	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A	N/A
% Records whose MSIS SSN failed High Group Test due to SSSS = 0000 (Code 4)	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A	N/A
% Records whose MSIS SSN failed High Group Test due to GG not yet issued (Code 5)	N/A	N/A	N/A	N/A	N/A	0.12	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	1,175	No	225	No	62	No	-80.90	-72.40	N/A	N/A
% with External SSN from EDB (Code 1)	N/A	N/A	N/A	N/A	N/A	20.88	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%	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	10% (+/-)	Yes
% with Valid 5 Digit Zip Code Format	>=95%	99.90	Yes	99.94	Yes	99.94	Yes	0.04	0.00	10% (+/-)	Yes
% Enrollees who Died During Year	0.1-3%	0.93	Yes	1.09	Yes	1.17	Yes	16.46	7.81	10% (+/-)	Yes
% White	N/A	40.22	N/A	41.05	N/A	41.28	N/A	2.074	0.56	10% (+/-)	Yes
% Black	N/A	49.06	N/A	48.41	N/A	47.96	N/A	-1.31	-0.94	10% (+/-)	Yes
% Native American/Alaskan Native	N/A	0.16	N/A	0.16	N/A	0.17	N/A	4.172	5.03	10% (+/-)	Yes
% Asian	N/A	0.30	N/A	0.33	N/A	0.37	N/A	10.48	11.28	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%	7.93	No	7.22	No	10.21	No	-9.06	41.56	N/A	N/A
% Hispanic/Latino (included with race categories prior to 2005)	N/A	2.33	N/A	2.82	N/A	3.32	N/A	20.99	17.73	10% (+/-)	No
% 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%	3.34	Yes	3.59	Yes	3.66	Yes	7.49	1.94	10% (+/-)	Yes
% Age 0-20 Years	49-74%	55.74	Yes	54.57	Yes	54.58	Yes	-2.10	0.03	10% (+/-)	Yes
% Age > 64 Years	5-18%	13.60	Yes	14.14	Yes	13.75	Yes	4.03	-2.80	10% (+/-)	Yes
% with century of birth '18', '19', '20'	N/A	99.97	N/A	99.98	N/A	100.00	N/A	0.01	0.02	N/A	N/A
% with Sex Code 'M' or 'F'	N/A	99.98	N/A	99.99	N/A	99.99	N/A	0.00	0.01	N/A	N/A
% Enrollees with 12 months enrollment	40-65%	66.51	No	68.30	No	67.23	No	2.69	-1.56	10% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: SC

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	189,714	N/A	191,729	N/A	188,798	N/A	1.06	-1.53	10% (+/-)	Yes
Total EDB Dual PYE	N/A	174,459	N/A	176,456	N/A	174,009	N/A	1.14	-1.39	15% (+/-)	Yes
% Age > 64 Years who are EDB Duals	>=90%	93.44	Yes	92.22	Yes	90.55	Yes	-1.31	-1.81	10% (+/-)	Yes
% MAX Aged Groups (11,21,31,41,51) who are EDB Duals	>=90%	93.20	Yes	91.98	Yes	90.37	Yes	-1.31	-1.75	10% (+/-)	Yes
% MAX Disabled Groups (12,22,32,42,52) who are EDB Duals	30-55%	42.31	Yes	43.72	Yes	44.61	Yes	3.34	2.04	10% (+/-)	Yes
% EDB Only (50)	<5%	30.43	No	30.67	No	2.70	Yes	0.81	-91.20	N/A	N/A
% EDB QMB Only (51)	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 QMB Plus (52)	N/A	39.81	N/A	39.68	N/A	42.05	N/A	-0.32	5.96	N/A	N/A
% EDB SLMB Only (53)	N/A	3.20	N/A	3.10	N/A	4.50	N/A	-3.23	45.38	N/A	N/A
% EDB SLMB Plus (54)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A	N/A
% EDB QDWI (55)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	-100.00	N/A	N/A
% EDB QI-1 (56)	N/A	1.91	N/A	2.03	N/A	3.32	N/A	6.11	63.28	N/A	N/A
% EDB QI-2 (57)	N/A	0.10	N/A	0.00	N/A	0.00	N/A	-99.50	1.55	N/A	N/A
% EDB Other (58)	N/A	22.60	N/A	22.12	N/A	25.20	N/A	-2.10	13.92	N/A	N/A
% EDB dual type unknown (59)	N/A	1.95	N/A	2.39	N/A	22.23	N/A	22.74	830.20	N/A	N/A
% EDB dual status unknown (58)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A	N/A
Total Non-EDB Duals (Duals rptd in MSIS, not found in EDB)	N/A	2,402	N/A	2,485	N/A	11,685	N/A	3.46	370.20	10% (+/-)	No
% Non-EDB Duals Without Valid SSN	N/A	0.25	N/A	0.68	N/A	0.37	N/A	173.90	-46.20	10% (+/-)	No
% Non-EDB Duals who are Children/Adults	N/A	1.04	N/A	0.80	N/A	3.08	N/A	-22.70	282.80	10% (+/-)	No
% EDB Duals with Spanish Language	N/A	0.09	N/A	0.11	N/A	0.13	N/A	14.78	22.56	15% (+/-)	No
% EDB Duals with EDB Date of Death During Year	6-10%	6.84	Yes	6.52	Yes	6.69	Yes	-4.61	2.56	15% (+/-)	Yes
% EDB Duals with Medicaid Reported HIC	N/A	67.02	N/A	65.78	N/A	93.36	N/A	-1.86	41.93	15% (+/-)	No
% EDB Duals with Medicaid reported HIC = Medicare HIC	N/A	98.45	N/A	99.00	N/A	98.15	N/A	0.56	-0.86	15% (+/-)	Yes
TOTAL EDB DUAL ENROLLEES IN JUNE	N/A	180,450	N/A	182,642	N/A	179,779	N/A	1.22	-1.57	10% (+/-)	Yes
<b>June Medicare Type</b>											
June % with Part A Medicare	N/A	0.86	N/A	0.96	N/A	1.12	N/A	11.28	16.76	15% (+/-)	No
June % with Part B Medicare	N/A	2.10	N/A	2.09	N/A	2.11	N/A	-0.65	1.03	15% (+/-)	Yes
June % Part A/B Medicare	N/A	97.04	N/A	96.96	N/A	96.77	N/A	-0.09	-0.19	15% (+/-)	Yes
<b>Original Reason for Medicare Entitlement</b>											
% Aged (Code 0)	N/A	56.19	N/A	55.28	N/A	53.42	N/A	-1.61	-3.38	15% (+/-)	Yes
% Disabled (Code 1)	N/A	42.22	N/A	43.12	N/A	44.92	N/A	2.15	4.16	15% (+/-)	Yes
% ESRD (Code 2)	N/A	0.57	N/A	0.63	N/A	0.57	N/A	11.93	-10.70	15% (+/-)	Yes
% Disabled with ESRD (Code 3)	N/A	1.03	N/A	0.96	N/A	1.10	N/A	-6.64	14.76	15% (+/-)	Yes
<b>Other Eligibility Characteristics (All Enrollees)</b>											
% MAX Aged Groups (11,21,31,41,51) >64 Years	>=99%	99.51	Yes	99.42	Yes	100.00	Yes	-0.09	0.58	10% (+/-)	Yes
% MAX Disabled Groups (12,22,32,42,52) >64 Years	N/A	1.71	N/A	4.68	N/A	5.57	N/A	173.80	19.14	10% (+/-)	No
% MAX Child Grps (14,16, 24, 34, 44, 48, 54) <21 Years	>=98%	99.83	Yes	99.86	Yes	99.93	Yes	0.03	0.06	10% (+/-)	Yes
% MAX Adult Groups (15,17,25,35,45,55) >20 Years	>=80%	86.41	Yes	86.38	Yes	86.55	Yes	-0.03	0.19	10% (+/-)	Yes
% MAX 1115 expansion enrollees (MASBOE=51,52,54,55) with 1115 waiver enrollment (Waiver Type=1,5,6,A,F)	100%	N/A	N/A	N/A	N/A	100.00	No	N/A	N/A	N/A	N/A
% MAX 1115 waiver enrollees (Waiver Type=1,5,6,A,F) in MAX 1115 expansion group (MASBOE=51,52,54,55)	N/A	N/A	N/A	N/A	N/A	91.21	N/A	N/A	N/A	N/A	N/A
MAX Aged Total	N/A	138,774	N/A	136,125	N/A	130,497	N/A	-1.91	-4.13	10% (+/-)	Yes
11: Aged, Cash	N/A	30,937	N/A	26,220	N/A	24,050	N/A	-15.20	-8.28	10% (+/-)	Yes
21: Aged, MN	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
31: Aged, Poverty	N/A	32,531	N/A	32,880	N/A	32,436	N/A	1.07	-1.35	10% (+/-)	Yes
41: Other Aged	N/A	18,930	N/A	18,764	N/A	18,412	N/A	-0.88	-1.88	10% (+/-)	Yes
51: 1115 Aged	N/A	56,376	N/A	58,261	N/A	55,599	N/A	3.34	-4.57	10% (+/-)	Yes
MAX Disabled Total	N/A	138,893	N/A	148,578	N/A	155,070	N/A	6.97	4.37	10% (+/-)	Yes
12: Disabled, Cash	N/A	93,881	N/A	99,836	N/A	103,167	N/A	6.34	3.34	10% (+/-)	Yes
22: Disabled, MN	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
32: Disabled, Poverty	N/A	35,721	N/A	39,203	N/A	41,718	N/A	9.75	6.42	10% (+/-)	Yes
42: Other Disabled	N/A	9,291	N/A	9,539	N/A	10,179	N/A	2.67	6.71	10% (+/-)	Yes
52: 1115 Disabled	N/A	0	N/A	0	N/A	6	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Child Total	N/A	516,267	N/A	488,160	N/A	490,420	N/A	-5.44	0.46	10% (+/-)	Yes
14: AFDC Child, Cash	N/A	101,721	N/A	100,939	N/A	101,544	N/A	-0.77	0.60	10% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: SC

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	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
34: Child Poverty	N/A	368,687	N/A	345,946	N/A	345,920	N/A	-6.17	-0.01	10% (+/-)	Yes
44: Other Child	N/A	34,175	N/A	28,626	N/A	28,697	N/A	-16.20	0.25	10% (+/-)	Yes
48: Foster Care Child	N/A	9,769	N/A	10,665	N/A	11,811	N/A	9.17	10.75	10% (+/-)	No
54: 1115 Child	N/A	1,915	N/A	1,984	N/A	2,448	N/A	3.60	23.39	10% (+/-)	No
MAX Adult Total	N/A	239,512	N/A	233,427	N/A	236,300	N/A	-2.54	1.23	10% (+/-)	Yes
15: AFDC Adult, Cash	N/A	78,973	N/A	76,761	N/A	75,168	N/A	-2.80	-2.08	10% (+/-)	Yes
17: AFDC-U Adult, Cash	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
25: AFDC Adult, MN	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
35: Adult, Poverty	N/A	27,547	N/A	27,212	N/A	24,111	N/A	-1.22	-11.40	10% (+/-)	No
45: Other Adult	N/A	30,218	N/A	27,905	N/A	28,404	N/A	-7.65	1.79	10% (+/-)	Yes
55: 1115 Adult	N/A	102,774	N/A	101,549	N/A	108,617	N/A	-1.19	6.96	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	20,407	N/A	20,274	N/A	20,138	N/A	-0.65	-0.67	N/A	N/A
% enrollees with any ILTC claims	N/A	1.97	N/A	2.01	N/A	1.99	N/A	2.03	-1.26	N/A	N/A
% AGED enrollees with any ILTC claims	N/A	11.30	N/A	11.30	N/A	11.62	N/A	-0.04	2.88	N/A	N/A
% DISABLED enrollees with any ILTC claims	N/A	2.97	N/A	2.84	N/A	2.76	N/A	-4.46	-2.89	N/A	N/A
% CHILD enrollees with any ILTC claims	N/A	0.11	N/A	0.13	N/A	0.14	N/A	22.49	3.32	N/A	N/A
% ADULT enrollees with any ILTC claims	N/A	0.01	N/A	0.01	N/A	0.00	N/A	-30.20	-36.10	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	26,671	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	2.63	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	7.18	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	10.41	N/A	N/A	N/A	15% (+/-)	No
% CHILD enrollees with any CLTC claims (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	0.17	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	0.14	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	1,268	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	20,566	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	2.03	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	6.74	N/A	N/A	N/A	15% (+/-)	No
% DISABLED enrollees in Section 1915(c) waiver	N/A	N/A	N/A	N/A	N/A	7.54	N/A	N/A	N/A	15% (+/-)	No
% CHILD enrollees in Section 1915(c) waiver	N/A	N/A	N/A	N/A	N/A	0.01	N/A	N/A	N/A	15% (+/-)	No
% ADULT enrollees in Section 1915(c) waiver	N/A	N/A	N/A	N/A	N/A	0.01	N/A	N/A	N/A	15% (+/-)	No
# with Section 1915(c) waiver for Aged and Disabled (Code G)	N/A	N/A	N/A	N/A	N/A	13,775	N/A	N/A	N/A	15% (+/-)	No
# with Section 1915(c) waiver for Aged (Code H)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
# with Section 1915(c) waiver for Physically Disabled (Code I)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
# with Section 1915(c) waiver for People with Brain Injuries (Code J)	N/A	N/A	N/A	N/A	N/A	485	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	1,238	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	5,031	N/A	N/A	N/A	15% (+/-)	No
# with Section 1915(c) waiver for People with M/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	37	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	4.45	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	0.04	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	0.10	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	182,734	N/A	N/A	N/A	15% (+/-)	No
% AGED enrollees with any 1115 waiver	N/A	N/A	N/A	N/A	N/A	43.88	N/A	N/A	N/A	15% (+/-)	No
% DISABLED enrollees with any 1115 waiver	N/A	N/A	N/A	N/A	N/A	0.21	N/A	N/A	N/A	15% (+/-)	No
% CHILD enrollees with any 1115 waiver	N/A	N/A	N/A	N/A	N/A	0.62	N/A	N/A	N/A	15% (+/-)	No
% ADULT enrollees with any 1115 waiver	N/A	N/A	N/A	N/A	N/A	51.68	N/A	N/A	N/A	15% (+/-)	No
% with any HMO/HIO enrollment	N/A	N/A	N/A	N/A	N/A	0.75	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	57,180	N/A	N/A	N/A	15% (+/-)	No
% AGED enrollees with Pharmacy waiver coverage	N/A	N/A	N/A	N/A	N/A	43.78	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	0.03	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	0.00	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	1,877	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	123,680	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	86,743	N/A	83,878	N/A	87,549	N/A	-3.30	4.38	N/A	N/A
# with ANY Family Planning Only enrollment	N/A	116,060	N/A	115,982	N/A	123,680	N/A	-0.07	6.64	N/A	N/A
# PYE ANY FP Only	N/A	84,054	N/A	81,839	N/A	88,717	N/A	-2.63	8.40	N/A	N/A
<i>Aliens with Restricted Benefits (Code 2)</i>											
# Aliens with ONLY restricted benefits	N/A	51	N/A	908	N/A	3,000	N/A	1,680.00	230.40	N/A	N/A
# Aliens with ANY restricted benefits	N/A	73	N/A	993	N/A	3,106	N/A	1,260.00	212.80	N/A	N/A
# PYE Aliens with ANY restricted benefits	N/A	60	N/A	128	N/A	384	N/A	112.30	200.70	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	9,214	N/A	8,869	N/A	9,801	N/A	-3.74	10.51	N/A	N/A
# EDB Duals with ANY restricted benefits enrollment	N/A	10,874	N/A	10,979	N/A	11,763	N/A	0.97	7.14	N/A	N/A
# PYE EDB Duals with ANY restricted benefits	N/A	8,334	N/A	8,270	N/A	8,737	N/A	-0.76	5.65	N/A	N/A
% EDB Duals with ONLY restricted benefits enrollment	N/A	N/A	N/A	N/A	N/A	5.19	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	56,344	N/A	58,426	N/A	55,459	N/A	3.70	-5.08	N/A	N/A
# with ANY Prescription Drug enrollment	N/A	57,712	N/A	60,132	N/A	57,180	N/A	4.19	-4.91	N/A	N/A
# PYE ANY Prescription Drug enrollment	N/A	52,368	N/A	54,827	N/A	51,759	N/A	4.70	-5.60	N/A	N/A
<i>Dual Prescription Drug Enrollees</i>											
# with ONLY prescription drugs who are also EDB duals	N/A	50,835	N/A	51,644	N/A	47,208	N/A	1.59	-8.59	N/A	N/A
<b>June Eligibility Profile</b>											
<b>TOTAL ENROLLEES IN JUNE</b>											
June % Full Scope Benefits (Code 1)	>80%	88.47	Yes	82.98	Yes	82.63	Yes	-6.20	-0.43	15% (+/-)	Yes
June % Restricted Benefits Alien (Code 2)	<5%	0.01	Yes	0.01	Yes	0.04	Yes	-27.60	589.10	15% (+/-)	No
June % Restricted Benefits Dual (Code 3)	<5%	0.97	Yes	0.97	Yes	1.00	Yes	0.15	3.03	15% (+/-)	Yes
June % Restricted Benefits Pregnant (Code 4)	<5%	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	15% (+/-)	N/A
June % Restricted Benefits Other (Code 5)	0%	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	15% (+/-)	N/A
June % Restricted Benefits Family Planning (Code 6)	<5%	10.56	No	9.52	No	10.39	No	-9.80	9.06	15% (+/-)	Yes
June % Unknown Benefits (Code 9)	0%	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	15% (+/-)	N/A
June % Restricted Benefits Pharm Plus Non-Dual Enrollee (Code X)	N/A	N/A	N/A	N/A	N/A	0.78	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	0.44	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	4.73	N/A	N/A	N/A	15% (+/-)	No
June % Private Health Insurance (Codes 2-4)	2-12%	7.18	Yes	6.49	Yes	6.57	Yes	-9.63	1.27	15% (+/-)	Yes

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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
June Total Enrollees with TANF Flag (Code 2)	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
June # with M-SCHIP (Code 2) - Child (<19 Years)	N/A	47,520	N/A	50,410	N/A	51,725	N/A	6.08	2.61	15% (+/-)	Yes
June # with M-SCHIP (Code 2) - Adult (>18 Years)	N/A	1,072	N/A	1,082	N/A	1,153	N/A	0.93	6.56	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	\$2,991,270,994	N/A	\$3,167,202,126	N/A	\$3,364,658,472	N/A	5.88	6.23	15% (+/-)	Yes
Average Medicaid Amt Paid per Enrollee	N/A	\$2,894	N/A	\$3,147	N/A	\$3,324	N/A	8.74	5.61	15% (+/-)	Yes
25th Percentile	N/A	\$144	N/A	\$155	N/A	\$159	N/A	7.64	2.58	15% (+/-)	Yes
50th Percentile (Median)	N/A	\$604	N/A	\$676	N/A	\$732	N/A	11.92	8.28	15% (+/-)	Yes
75th Percentile	N/A	\$1,922	N/A	\$2,128	N/A	\$2,237	N/A	10.72	5.12	15% (+/-)	Yes
95th Percentile	N/A	\$11,782	N/A	\$12,809	N/A	\$13,517	N/A	8.72	5.53	15% (+/-)	Yes
99th Percentile	N/A	\$42,667	N/A	\$46,007	N/A	\$48,642	N/A	7.83	5.73	15% (+/-)	Yes
<b>AVG MEDICAID AMT PD/ENROLLEE BY MAX ELIGIBILITY GROUP</b>											
MAX Aged	N/A	\$4,905	N/A	\$5,145	N/A	\$5,521	N/A	4.88	7.31	15% (+/-)	Yes
MAX Disabled	N/A	\$8,854	N/A	\$9,067	N/A	\$9,442	N/A	2.40	4.14	10% (+/-)	Yes
MAX Child	N/A	\$1,387	N/A	\$1,514	N/A	\$1,597	N/A	9.15	5.48	10% (+/-)	Yes
MAX Adult	N/A	\$1,523	N/A	\$1,632	N/A	\$1,680	N/A	7.13	2.98	10% (+/-)	Yes
<b>AVG MEDICAID AMT PD/EDB DUAL ENROLLEE</b>											
All EDB Dual Enrollees	N/A	\$6,084	N/A	\$6,428	N/A	\$6,848	N/A	5.65	6.54	15% (+/-)	Yes
MAX Aged	N/A	\$5,032	N/A	\$5,392	N/A	\$5,885	N/A	7.15	9.14	10% (+/-)	Yes
MAX Disabled	N/A	\$8,450	N/A	\$8,469	N/A	\$8,553	N/A	0.23	0.99	10% (+/-)	Yes
<b>AVG MEDICAID AMT PD/LONG-TERM CARE ENROLLEE</b>											
Enrollees with ILTC claims	N/A	N/A	N/A	N/A	N/A	\$36,454	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	\$23,024	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	\$31,446	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	\$22,711	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	\$13,504	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for Aged (Code H)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for Physically Disabled (Code I)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for People with Brain Injuries (Code J)	N/A	N/A	N/A	N/A	N/A	\$39,149	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	\$21,910	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	\$46,421	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	\$37,961	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for none of the above (Code O)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
<b>AVG 1915(c) WAIVER AMT PD (PROGRAM TYPES 6/7) PER ENROLLEE IN ANY 1915(c) WAIVER - MOST RECENT</b>											
All Section 1915(c) enrollees	N/A	N/A	N/A	N/A	N/A	\$5,526	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	\$5,324	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for Aged (Code H)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for Physically Disabled (Code I)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for People with Brain Injuries (Code J)	N/A	N/A	N/A	N/A	N/A	\$26,358	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	\$3,958	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for MR/DD (Code L)	N/A	N/A	N/A	N/A	N/A	\$4,334	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	\$22,489	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>											
<b>Expenditures for Family Planning enrollees with Restricted Benefits</b>											
Expenditures for ONLY FP Only enrollees	N/A	\$14,590,386	N/A	\$15,569,257	N/A	\$12,970,571	N/A	6.71	-16.70	N/A	N/A
Average Medicaid Paid for ONLY FP Only enrollees	N/A	\$168	N/A	\$186	N/A	\$148	N/A	10.35	-20.20	N/A	N/A
<b>Expenditures for Aliens with Restricted Benefits</b>											
Expend for Aliens with restricted benefits ONLY enrollment	N/A	\$59,702	N/A	\$3,115,046	N/A	\$12,400,836	N/A	5,118.00	298.10	N/A	N/A
Avg Medicaid Paid for Alien enrollees with restricted benefits ONLY	N/A	\$1,171	N/A	\$3,431	N/A	\$4,134	N/A	193.10	20.49	N/A	N/A
<b>Expenditures for EDB Duals with Restricted Benefits (Medicare Cost Sharing Only - Code 3)</b>											



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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	\$93,461	N/A	\$87,460	N/A	\$102,573	N/A	-6.42	17.28	N/A	N/A
Avg Medicaid Paid for EDB Duals with only restricted benefit enrollment	N/A	\$10	N/A	\$10	N/A	\$10	N/A	-2.78	6.13	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	\$38,980,412	N/A	\$49,126,281	N/A	\$52,608,273	N/A	26.03	7.09	N/A	N/A
Avg Medicaid Paid for Prescription Drug ONLY enrollees	N/A	\$692	N/A	\$841	N/A	\$949	N/A	21.54	12.82	N/A	N/A
<b>Dual Prescription Drug Enrollees</b>											
Expenditures for Prescription Drug ONLY enrollees who are also EDB duals	N/A	\$38,027,692	N/A	\$48,001,634	N/A	\$51,429,829	N/A	26.23	7.14	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) ----</b> <b>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	881,094	N/A	854,209	N/A	856,478	N/A	-3.05	0.27	10% (+/-)	Yes
MAX Aged Total	N/A	78,348	N/A	73,925	N/A	70,865	N/A	-5.65	-4.14	10% (+/-)	Yes
MAX Disabled Total	N/A	133,759	N/A	143,460	N/A	149,270	N/A	7.25	4.05	10% (+/-)	Yes
MAX Child Total	N/A	514,722	N/A	486,383	N/A	488,709	N/A	-5.51	0.48	10% (+/-)	Yes
MAX Adult Total	N/A	154,265	N/A	150,441	N/A	147,634	N/A	-2.48	-1.87	10% (+/-)	Yes
Total Medicaid PYE (Person Years of Enrollment)	N/A	751,840	N/A	728,867	N/A	728,499	N/A	-3.06	-0.05	10% (+/-)	Yes
Total EDB Duals	N/A	129,386	N/A	130,939	N/A	131,423	N/A	1.20	0.37	10% (+/-)	Yes
MAX Aged	N/A	74,418	N/A	69,793	N/A	66,592	N/A	-6.21	-4.59	10% (+/-)	Yes
MAX Disabled	N/A	53,626	N/A	59,855	N/A	63,471	N/A	11.62	6.04	10% (+/-)	Yes
<b>Total Medicaid Amount Paid</b>											
Total Medicaid Amt Paid	N/A	\$2,937,547,033	N/A	\$3,099,304,082	N/A	\$3,286,576,219	N/A	5.51	6.04	15% (+/-)	Yes
Average Medicaid Amt Paid per Enrollee	N/A	\$3,334	N/A	\$3,628	N/A	\$3,837	N/A	8.83	5.76	15% (+/-)	Yes
<b>AVG MEDICAID AMT PD/ENROLLEE BY MAX ELIGIBILITY GROUP</b>											
MAX Aged	N/A	\$8,191	N/A	\$8,808	N/A	\$9,414	N/A	7.54	6.87	15% (+/-)	Yes
MAX Disabled	N/A	\$9,193	N/A	\$9,387	N/A	\$9,795	N/A	2.10	4.35	10% (+/-)	Yes
MAX Child	N/A	\$1,390	N/A	\$1,518	N/A	\$1,600	N/A	9.18	5.41	10% (+/-)	Yes
MAX Adult	N/A	\$2,272	N/A	\$2,414	N/A	\$2,543	N/A	6.27	5.33	10% (+/-)	Yes
<b>AVG MEDICAID AMT PD/EDB DUAL ENROLLEE</b>											
All EDB Dual Enrollees	N/A	\$8,626	N/A	\$9,044	N/A	\$9,445	N/A	4.85	4.43	15% (+/-)	Yes
MAX Aged	N/A	\$8,234	N/A	\$8,985	N/A	\$9,649	N/A	9.11	7.39	10% (+/-)	Yes
MAX Disabled	N/A	\$9,257	N/A	\$9,190	N/A	\$9,320	N/A	-0.73	1.41	10% (+/-)	Yes
<b>MANAGED CARE PLAN INFORMATION (Enrollees in Capitated Plans - PCCM, HMO, HIO, &amp; PHPs, excludes people with missing eligibility information, S-SCHIP only, FP Only, Aliens with only restricted benefits, duals with restricted benefits only, and prescription drug only enrollees) ---- NOTE: FP Only, duals with restricted benefits, and Aliens with restricted benefits were NOT excluded prior to 2003. Prescription drug only enrollees were NOT excluded prior to 2003.</b>											
% Total Enrollees in MC Anytime During Year	N/A	11.84	N/A	11.53	N/A	17.97	N/A	-2.59	55.80	25% (+)	No
Total MC Enrollees	N/A	104,312	N/A	98,505	N/A	153,881	N/A	-5.57	56.22	25% (+)	No
Aged	N/A	390	N/A	361	N/A	2,333	N/A	-7.44	546.30	25% (+)	No
Disabled	N/A	7,317	N/A	8,274	N/A	15,636	N/A	13.08	88.98	25% (+)	No
Child	N/A	82,636	N/A	76,059	N/A	115,951	N/A	-7.96	52.45	25% (+)	No
Adult	N/A	13,969	N/A	13,811	N/A	19,961	N/A	-1.13	44.53	25% (+)	No
% of MC Enrollees in HMO/HIO (Dups)	N/A	77.00	N/A	77.71	N/A	58.73	N/A	0.92	-24.40	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	0.34	N/A	0.35	N/A	0.20	N/A	4.08	-41.60	25% (+)	No
% 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	0.35	N/A	0.39	N/A	0.28	N/A	10.77	-28.40	25% (+)	No
% of MC Enrollees in PCCM (Dups)	N/A	0.00	N/A	4.57	N/A	31.12	N/A	Div by 0	580.70	25% (+)	No
% of MC Enrollees in Other MC (Dups)	N/A	22.82	N/A	21.09	N/A	10.58	N/A	-7.57	-49.80	25% (+)	No
% EDB Duals ever enrolled in HMO/HIOs	<20%	0.22	Yes	0.22	Yes	0.31	Yes	3.05	40.24	25% (+)	No
% EDB Duals in PHP only or PHP/PCCM only	N/A	0.53	N/A	0.54	N/A	0.55	N/A	3.02	0.89	25% (+)	Yes
% EDB Duals in PCCM only	N/A	0.00	N/A	0.01	N/A	3.22	N/A	Div by 0	52,543.00	25% (+)	No
% Section 1915(c) waiver enrollees ever enrolled in HMO/HIOs	N/A	N/A	N/A	N/A	N/A	0.10	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	0.24	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	0.19	N/A	N/A	N/A	25% (+)	No
TOTAL ENROLLEES IN JUNE	N/A	743,724	N/A	729,294	N/A	729,842	N/A	-1.94	0.08	25% (+)	Yes
June % HMO/HIO only (Code 1)	N/A	7.24	N/A	7.21	N/A	8.12	N/A	-0.41	12.64	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	0.04	N/A	0.04	N/A	0.04	N/A	-3.76	-1.48	25% (+)	Yes
June % PCCM only (Code 4)	N/A	0.00	N/A	0.00	N/A	1.49	N/A	Div by 0	Div by 0	25% (+)	N/A
June % Other MC only (Code 5)	N/A	2.38	N/A	2.29	N/A	1.59	N/A	-3.84	-30.70	25% (+)	No
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	90.34	N/A	90.46	N/A	88.76	N/A	0.14	-1.88	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	\$68,944,737	N/A	\$71,806,236	N/A	\$87,765,638	N/A	4.15	22.23	15% (+/-)	No
HMO/HIO	N/A	\$53,844,977	N/A	\$59,202,204	N/A	\$74,460,512	N/A	9.95	25.77	15% (+/-)	No
PHP	N/A	\$15,099,760	N/A	\$12,542,766	N/A	\$12,623,764	N/A	-16.90	0.65	15% (+/-)	Yes
PCCM	N/A	\$0	N/A	\$61,266	N/A	\$681,362	N/A	Div by 0	1,012.00	15% (+/-)	No
Ratio of Cap Claims to PME (person mo. enroll.) in MC	-9.2	0.94	Yes	0.96	Yes	1.13	Yes	1.74	18.64	15% (+/-)	No
HMO/HIO	-9.2	0.92	Yes	0.92	Yes	0.93	Yes	-0.10	0.29	15% (+/-)	Yes
PHP	-9.2	0.99	Yes	0.98	Yes	1.44	Yes	-0.37	46.85	15% (+/-)	No
PCCM	-9.2	Div by 0	No	1.98	Yes	1.64	Yes	Div by 0	-17.10	15% (+/-)	No
Average Cap Payment for PME in MC	N/A	\$79	N/A	\$87	N/A	\$82	N/A	10.42	-5.51	15% (+/-)	Yes
HMO/HIO	N/A	\$82	N/A	\$94	N/A	\$103	N/A	14.84	9.69	15% (+/-)	Yes
PHP	N/A	\$68	N/A	\$68	N/A	\$88	N/A	-0.13	29.08	15% (+/-)	No
PCCM	N/A	Div by 0	N/A	\$4	N/A	\$3	N/A	Div by 0	-17.10	15% (+/-)	No
<b>Persons enrolled in PHP only or PHP/PCCM only</b>											
Total Cap Payments	N/A	\$15,037,778	N/A	\$12,542,833	N/A	\$12,440,835	N/A	-16.60	-0.81	15% (+/-)	Yes
Total Medicaid Amt Paid	N/A	\$64,549,304	N/A	\$61,774,266	N/A	\$53,872,979	N/A	-4.30	-12.80	15% (+/-)	Yes
Count of Enrollees	N/A	23,992	N/A	21,036	N/A	16,598	N/A	-12.30	-21.10	15% (+/-)	No
<b>Persons enrolled in PCCM only</b>											
Total Cap Payments	N/A	\$0	N/A	\$7,936	N/A	\$799,316	N/A	Div by 0	9,972.00	15% (+/-)	No
Count of Enrollees	N/A	0	N/A	919	N/A	46,909	N/A	Div by 0	5,004.00	15% (+/-)	No
<b>Persons ever enrolled in HMO/HIOs during year</b>											
Count of Enrollees	N/A	80,320	N/A	76,550	N/A	90,374	N/A	-4.69	18.06	15% (+/-)	No
Aged	N/A	12	N/A	5	N/A	1	N/A	-58.30	-80.00	25% (+)	No
Disabled	N/A	5,010	N/A	5,689	N/A	6,974	N/A	13.55	22.59	25% (+)	Yes
Child	N/A	63,601	N/A	59,468	N/A	69,564	N/A	-6.50	16.98	25% (+)	Yes
Adult	N/A	11,697	N/A	11,388	N/A	13,835	N/A	-2.64	21.49	25% (+)	Yes
Total Ever Enrolled in HMO/HIO PYE	N/A	54,630	N/A	52,295	N/A	59,964	N/A	-4.27	14.66	25% (+)	Yes
Total Cap Payments	N/A	\$53,906,959	N/A	\$59,255,467	N/A	\$74,525,487	N/A	9.92	25.77	15% (+/-)	No
Average Cap Payments	N/A	\$671	N/A	\$774	N/A	\$825	N/A	15.34	6.53	15% (+/-)	Yes
Aged	N/A	\$1,695	N/A	\$2,026	N/A	\$2,094	N/A	19.53	3.38	15% (+/-)	Yes
Disabled	N/A	\$2,819	N/A	\$3,036	N/A	\$2,918	N/A	7.71	-3.90	15% (+/-)	Yes
Child	N/A	\$447	N/A	\$514	N/A	\$560	N/A	15.02	8.86	15% (+/-)	Yes
Adult	N/A	\$969	N/A	\$1,001	N/A	\$1,102	N/A	3.30	10.08	15% (+/-)	Yes
Total FFS Payments	N/A	\$79,218,589	N/A	\$80,122,670	N/A	\$104,173,580	N/A	1.14	30.02	15% (+/-)	No
Average FFS Payments per enrollee	N/A	\$986.29	N/A	\$1,047	N/A	\$1,153	N/A	6.12	10.13	15% (+/-)	Yes
Aged	N/A	\$3,826.42	N/A	\$1,894	N/A	\$425	N/A	-50.50	-77.60	15% (+/-)	No
Disabled	N/A	\$3,326.22	N/A	\$2,972	N/A	\$3,432	N/A	-10.60	15.48	15% (+/-)	No
Child	N/A	\$786.64	N/A	\$866	N/A	\$909	N/A	10.09	4.99	15% (+/-)	Yes
Adult	N/A	\$1,066.72	N/A	\$1,028	N/A	\$1,228	N/A	-3.65	19.48	15% (+/-)	No
<b>Total FFS Payments by Type of Service</b>											
IP	N/A	\$11,860,610	N/A	\$11,616,693	N/A	\$21,114,472	N/A	-2.06	81.76	15% (+/-)	No

2003-2005 MAX PSF VALIDATION TABLE  
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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
ILTC	N/A	\$1,858,922	N/A	\$2,005,443	N/A	\$1,861,837	N/A	7.88	-7.16	15% (+/-)	Yes
Drug	N/A	\$6,426,676	N/A	\$6,577,888	N/A	\$10,044,518	N/A	2.35	52.70	15% (+/-)	No
All Other (excluding cap payments)	N/A	\$59,072,381	N/A	\$59,922,646	N/A	\$71,152,753	N/A	1.44	18.74	15% (+/-)	No
Average FFS Payments by Type of Service											
IP	N/A	\$148	N/A	\$152	N/A	\$234	N/A	2.77	53.96	15% (+/-)	No
ILTC	N/A	\$23	N/A	\$26	N/A	\$21	N/A	13.20	-21.40	15% (+/-)	No
Drug	N/A	\$80	N/A	\$86	N/A	\$111	N/A	7.39	29.34	15% (+/-)	No
All Other (excluding cap payments)	N/A	\$735	N/A	\$783	N/A	\$787	N/A	6.44	0.58	15% (+/-)	Yes
<b>FFS INFORMATION FOR NON-DUAL MEDICAID ENROLLEES (excludes EDB Duals, people ever enrolled in HMO/HIOS, with missing eligibility information, S-SCHIP only, FP Only, Aliens with restricted benefits only, and prescription drug only enrollees) ---- NOTE: S-SCHIP only, FP Only, and Aliens with restricted benefits were NOT excluded prior to 2001. Prescription drug only enrollees were NOT excluded prior to 2003.</b>											
Total Non-Dual FFS Enrollees	N/A	671,668	N/A	647,012	N/A	635,092	N/A	-3.67	-1.84	15% (+/-)	Yes
Total Non-Dual FFS Recipients	N/A	576,018	N/A	557,894	N/A	554,089	N/A	-3.15	-0.68	15% (+/-)	Yes
Total Non-Dual FFS PYE	N/A	558,674	N/A	538,317	N/A	525,733	N/A	-3.64	-2.34	15% (+/-)	Yes
MAX Aged Total	N/A	3,922	N/A	4,130	N/A	4,273	N/A	5.30	3.46	10% (+/-)	Yes
11: Aged, Cash	N/A	1,199	N/A	875	N/A	1,225	N/A	-27.00	40.00	10% (+/-)	No
21: Aged, MN	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
31: Aged, Poverty	N/A	1,712	N/A	2,204	N/A	2,041	N/A	28.74	-7.40	10% (+/-)	Yes
41: Other Aged	N/A	1,009	N/A	1,048	N/A	993	N/A	3.87	-5.25	10% (+/-)	Yes
51: 1115 Aged	N/A	2	N/A	3	N/A	14	N/A	50.00	366.70	10% (+/-)	No
MAX Disabled Total	N/A	75,328	N/A	78,132	N/A	79,143	N/A	3.72	1.29	10% (+/-)	Yes
12: Disabled, Cash	N/A	65,405	N/A	67,002	N/A	67,412	N/A	2.44	0.61	10% (+/-)	Yes
22: Disabled, MN	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
32: Disabled, Poverty	N/A	5,912	N/A	7,095	N/A	7,438	N/A	20.01	4.83	10% (+/-)	Yes
42: Other Disabled	N/A	4,011	N/A	4,035	N/A	4,293	N/A	0.60	6.39	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	451,108	N/A	426,907	N/A	419,137	N/A	-5.36	-1.82	10% (+/-)	Yes
14: AFDC Child, Cash	N/A	83,403	N/A	83,157	N/A	81,018	N/A	-0.30	-2.57	10% (+/-)	Yes
16: AFDC-U Child, Cash	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
24: AFDC Child, MN	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
34: Child Poverty	N/A	330,335	N/A	310,016	N/A	303,253	N/A	-6.15	-2.18	10% (+/-)	Yes
44: Other Child	N/A	27,860	N/A	23,519	N/A	23,006	N/A	-15.60	-2.18	10% (+/-)	Yes
48: Foster Care Child	N/A	9,130	N/A	9,944	N/A	10,974	N/A	8.92	10.36	10% (+/-)	No
54: 1115 Child	N/A	380	N/A	271	N/A	886	N/A	-28.70	226.90	10% (+/-)	No
MAX Adult Total	N/A	141,310	N/A	137,843	N/A	132,539	N/A	-2.45	-3.85	10% (+/-)	Yes
15: AFDC Adult, Cash	N/A	70,691	N/A	68,487	N/A	65,054	N/A	-3.12	-5.01	10% (+/-)	Yes
17: AFDC-U Adult, Cash	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
25: AFDC Adult, MN	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
35: Adult, Poverty	N/A	26,884	N/A	26,575	N/A	23,292	N/A	-1.15	-12.40	10% (+/-)	No
45: Other Adult	N/A	26,907	N/A	24,086	N/A	22,441	N/A	-10.50	-6.83	10% (+/-)	Yes
55: 1115 Adult	N/A	16,828	N/A	18,695	N/A	21,752	N/A	11.09	16.35	10% (+/-)	No
# Non-Dual FFS Enrollees w/ MSIS Dual Code/No EDB Confirmation	N/A	2,148	N/A	2,340	N/A	5,827	N/A	8.94	149.00	10% (+/-)	No
Total FFS Medicaid Amt Paid	N/A	\$1,683,961,246	N/A	\$1,772,366,444	N/A	\$1,863,916,873	N/A	5.25	5.17	15% (+/-)	Yes
Average FFS Medicaid Amt Paid per Non-Dual FFS Enrollee	N/A	\$2,507	N/A	\$2,739	N/A	\$2,935	N/A	9.26	7.14	15% (+/-)	Yes
Avg FFS Medicaid Amt Paid per Non-Dual FFS Recipient (User of any service)	N/A	\$2,923	N/A	\$3,177	N/A	\$3,364	N/A	8.67	5.89	15% (+/-)	Yes
<b>AVG FFS MEDICAID AMT PD/NON-DUAL FFS ENROLLEE BY MAX ELIG GRP</b>											
All Aged	N/A	\$7,298	N/A	\$5,780	N/A	\$5,645	N/A	-20.80	-2.34	15% (+/-)	Yes
11: Aged, Cash	N/A	\$11,378	N/A	\$12,254	N/A	\$8,507	N/A	7.69	-30.60	15% (+/-)	No
21: Aged, MN	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
31: Aged, Poverty	N/A	\$3,188	N/A	\$1,930	N/A	\$1,762	N/A	-39.50	-8.73	15% (+/-)	Yes
41: Other Aged	N/A	\$9,436	N/A	\$8,483	N/A	\$10,167	N/A	-10.10	19.85	15% (+/-)	No
51: 1115 Aged	N/A	\$48	N/A	\$1,618	N/A	\$486	N/A	3,306.00	-70.00	15% (+/-)	No
All Disabled	N/A	\$9,331	N/A	\$9,763	N/A	\$10,451	N/A	4.64	7.04	15% (+/-)	Yes
12: Disabled, Cash	N/A	\$9,308	N/A	\$9,714	N/A	\$10,223	N/A	4.36	5.24	15% (+/-)	Yes
22: Disabled, MN	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
32: Disabled, Poverty	N/A	\$8,439	N/A	\$9,261	N/A	\$10,772	N/A	9.74	16.32	15% (+/-)	No
42: Other Disabled	N/A	\$11,015	N/A	\$11,466	N/A	\$13,474	N/A	4.10	17.52	15% (+/-)	No
52: 1115 Disabled	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A

2003-2005 MAX PSF VALIDATION TABLE  
STATE: SC

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
All Child	N/A	\$1,403	N/A	\$1,529	N/A	\$1,614	N/A	9.01	5.58	15% (+/-)	Yes
14: AFDC Child, Cash	N/A	\$1,052	N/A	\$1,126	N/A	\$1,147	N/A	7.01	1.85	15% (+/-)	Yes
16: AFDC-U Child, Cash	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
24: AFDC Child, MN	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
34: Child, Poverty	N/A	\$1,329	N/A	\$1,442	N/A	\$1,519	N/A	8.52	5.30	15% (+/-)	Yes
44: Other Child	N/A	\$1,034	N/A	\$1,090	N/A	\$1,158	N/A	5.39	6.28	15% (+/-)	Yes
48: Foster Care Child	N/A	\$8,357	N/A	\$8,593	N/A	\$8,709	N/A	2.82	1.35	15% (+/-)	Yes
54: 1115 Child	N/A	\$2,073	N/A	\$3,156	N/A	\$987	N/A	52.25	-68.70	15% (+/-)	No
All Adult	N/A	\$2,263	N/A	\$2,415	N/A	\$2,535	N/A	6.74	4.99	15% (+/-)	Yes
15: AFDC Adult, Cash	N/A	\$2,100	N/A	\$2,273	N/A	\$2,387	N/A	8.21	5.03	15% (+/-)	Yes
17: AFDC-U Adult, Cash	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
25: AFDC Adult, MN	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
35: Adult, Poverty	N/A	\$2,862	N/A	\$2,806	N/A	\$2,657	N/A	-1.96	-5.29	15% (+/-)	Yes
45: Other Adult	N/A	\$1,646	N/A	\$1,651	N/A	\$1,840	N/A	0.30	11.46	15% (+/-)	Yes
55: 1115 Adult	N/A	\$2,972	N/A	\$3,364	N/A	\$3,565	N/A	13.20	5.99	15% (+/-)	Yes
FFS EXPENDITURES AND USERS BY MAX TOS											
IP: Total Medicaid Paid (TOS 01)	N/A	\$390,853,662	N/A	\$428,525,466	N/A	\$470,255,414	N/A	9.64	9.74	15% (+/-)	Yes
IP: Number of Users	N/A	83,955	N/A	85,574	N/A	85,664	N/A	1.93	0.11	15% (+/-)	Yes
IP: Average Medicaid Pd per User	N/A	\$4,656	N/A	\$5,008	N/A	\$5,490	N/A	7.56	9.62	15% (+/-)	Yes
IP: Average Medicaid Covered Days Per User	N/A	5	N/A	5	N/A	6	N/A	1.42	4.70	15% (+/-)	Yes
MH Aged: Total Medicaid Paid (TOS 02)	N/A	\$864,195	N/A	\$836,731	N/A	\$761,353	N/A	-3.18	-9.01	15% (+/-)	Yes
MH Aged: Number of Users	N/A	16	N/A	18	N/A	18	N/A	12.50	0.00	15% (+/-)	Yes
MH Aged: Avg Medicaid Pd per User	N/A	\$54,012	N/A	\$46,485	N/A	\$42,297	N/A	-13.90	-9.01	15% (+/-)	Yes
IP Psych < 21: Total Medicaid Paid (TOS 04)	N/A	\$25,040,416	N/A	\$29,180,990	N/A	\$30,980,644	N/A	16.54	6.17	15% (+/-)	Yes
IP Psych < 21: Number of Users	N/A	767	N/A	889	N/A	920	N/A	15.91	3.49	15% (+/-)	Yes
IP Psych<21 :Avg Medicaid Pd per User	N/A	\$32,647	N/A	\$32,825	N/A	\$33,675	N/A	0.54	2.59	15% (+/-)	Yes
ICF/MR: Total Medicaid Pd (TOS 05)	N/A	\$62,211,574	N/A	\$61,187,258	N/A	\$57,198,834	N/A	-1.65	-6.52	15% (+/-)	Yes
ICF/MR: Number of Users	N/A	754	N/A	731	N/A	649	N/A	-3.05	-11.20	15% (+/-)	Yes
ICF/MR: Avg Medicaid Pd per User	N/A	\$82,509	N/A	\$83,703	N/A	\$88,134	N/A	1.45	5.29	15% (+/-)	Yes
NF: Total Medicaid Paid (TOS 07)	N/A	\$25,440,838	N/A	\$27,027,619	N/A	\$31,306,199	N/A	6.24	15.83	15% (+/-)	No
NF Number of Users	N/A	1,079	N/A	992	N/A	1,108	N/A	-8.06	11.69	15% (+/-)	Yes
NF:Avg Medicaid Pd per User	N/A	\$23,578	N/A	\$27,246	N/A	\$28,255	N/A	15.55	3.70	15% (+/-)	Yes
Physician: Total Medicaid Paid (TOS 08)	N/A	\$231,550,207	N/A	\$236,957,972	N/A	\$239,866,009	N/A	2.34	1.23	15% (+/-)	Yes
Physician: Number of Users	N/A	439,471	N/A	424,654	N/A	427,354	N/A	-3.37	0.64	15% (+/-)	Yes
Physician: Avg Medicaid Pd per User	N/A	\$527	N/A	\$558	N/A	\$561	N/A	5.91	0.59	15% (+/-)	Yes
Dental: Total Medicaid Paid (TOS 09)	N/A	\$72,366,824	N/A	\$74,507,862	N/A	\$74,228,797	N/A	2.96	-0.38	15% (+/-)	Yes
Dental: Number of Users	N/A	209,698	N/A	210,262	N/A	211,021	N/A	0.27	0.36	15% (+/-)	Yes
Dental: Avg Medicaid Pd per User	N/A	\$345	N/A	\$354	N/A	\$352	N/A	2.68	-0.73	15% (+/-)	Yes
Other Practitioner: Total Medicaid Pd (TOS 10)	N/A	\$7,948,663	N/A	\$8,423,435	N/A	\$11,019,905	N/A	5.97	30.82	15% (+/-)	No
Other Practitioner: Number of Users	N/A	94,192	N/A	95,034	N/A	103,278	N/A	0.89	8.68	15% (+/-)	Yes
Other Practitioner: Avg Medicaid Pd per User	N/A	\$84	N/A	\$89	N/A	\$107	N/A	5.03	20.38	15% (+/-)	No
OPD: Total Medicaid Paid (TOS 11)	N/A	\$64,502,213	N/A	\$59,925,225	N/A	\$59,823,676	N/A	-7.10	-0.17	15% (+/-)	Yes
OPD Number of Users	N/A	259,158	N/A	240,881	N/A	244,179	N/A	-7.05	1.37	15% (+/-)	Yes
OPD: Avg Medicaid Pd per User	N/A	\$249	N/A	\$249	N/A	\$245	N/A	-0.05	-1.52	15% (+/-)	Yes
Clinic: Total Medicaid Paid (TOS 12)	N/A	\$133,663,144	N/A	\$123,088,588	N/A	\$105,963,612	N/A	-7.91	-13.90	15% (+/-)	Yes
Clinic: Number of Users	N/A	273,896	N/A	265,840	N/A	254,898	N/A	-2.94	-4.12	15% (+/-)	Yes
Clinic: Avg Medicaid Pd per User	N/A	\$488	N/A	\$463	N/A	\$416	N/A	-5.12	-10.20	15% (+/-)	Yes
HH: Total Medicaid Paid (TOS 13)	N/A	\$7,360,807	N/A	\$3,526,119	N/A	\$3,649,366	N/A	-52.10	3.50	15% (+/-)	Yes
HH: Number of Users	N/A	5,621	N/A	2,573	N/A	2,816	N/A	-54.20	9.44	15% (+/-)	Yes
HH: Avg Medicaid Pd per User	N/A	\$1,310	N/A	\$1,370	N/A	\$1,296	N/A	4.65	-5.44	15% (+/-)	Yes
Lab/Xray: Total Medicaid Paid (TOS 15)	N/A	\$52,083,861	N/A	\$57,303,321	N/A	\$63,037,893	N/A	10.02	10.01	15% (+/-)	Yes
Lab/Xray: Number of Users	N/A	329,230	N/A	318,610	N/A	323,807	N/A	-3.23	1.63	15% (+/-)	Yes
Lab/Xray:Avg Medicaid Pd per User	N/A	\$158	N/A	\$180	N/A	\$195	N/A	13.69	8.24	15% (+/-)	Yes
Drugs: Total Medicaid Paid (TOS 16)	N/A	\$267,018,838	N/A	\$291,325,250	N/A	\$313,364,406	N/A	9.10	7.57	15% (+/-)	Yes
Drugs: Number of Users	N/A	456,079	N/A	432,104	N/A	436,190	N/A	-5.26	0.95	15% (+/-)	Yes
Drugs: Avg Medicaid Pd per User	N/A	\$585	N/A	\$674	N/A	\$718	N/A	15.16	6.56	15% (+/-)	Yes
Other Services: Total Medicaid Paid (TOS 19)	N/A	\$44,605,004	N/A	\$23,129,041	N/A	\$18,050,056	N/A	-48.10	-22.00	15% (+/-)	No

2003-2005 MAX PSF VALIDATION TABLE  
STATE: SC

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	50,849	N/A	10,635	N/A	7,084	N/A	-79.10	-33.40	15% (+/-)	No
Other Services: Avg Medicaid Pd per User	N/A	\$877	N/A	\$2,175	N/A	\$2,548	N/A	147.90	17.16	15% (+/-)	No
Transportation: Total Medicaid Paid (TOS 26)	N/A	\$11,738,413	N/A	\$12,895,036	N/A	\$14,992,274	N/A	9.85	16.26	15% (+/-)	No
Transportation: Number of Users	N/A	36,151	N/A	36,938	N/A	38,932	N/A	2.18	5.40	15% (+/-)	Yes
Transportation: Avg Medicaid Pd per User	N/A	\$325	N/A	\$349	N/A	\$385	N/A	7.51	10.31	15% (+/-)	Yes
PCS: Total Medicaid Paid (TOS 30)	N/A	\$20,005,418	N/A	\$21,322,146	N/A	\$24,517,024	N/A	6.58	14.98	15% (+/-)	Yes
PCS: Number of Users	N/A	3,043	N/A	3,101	N/A	3,582	N/A	1.91	15.51	15% (+/-)	No
PCS: Avg Medicaid Pd per User	N/A	\$6,574	N/A	\$6,876	N/A	\$6,845	N/A	4.59	-0.46	15% (+/-)	Yes
Target Case Management: Total Medicaid Pd (TOS 31)	N/A	\$58,286,494	N/A	\$58,704,188	N/A	\$54,130,934	N/A	0.72	-7.79	15% (+/-)	Yes
Target Case Management: Number of Users	N/A	38,054	N/A	39,318	N/A	32,842	N/A	3.32	-16.50	15% (+/-)	No
Target Case Management: Avg Medicaid Pd per User	N/A	\$1,532	N/A	\$1,493	N/A	\$1,648	N/A	-2.52	10.39	15% (+/-)	Yes
Rehab Services: Total Medicaid Pd (TOS 33)	N/A	\$14,149,662	N/A	\$9,018,453	N/A	\$7,153,728	N/A	-36.30	-20.70	15% (+/-)	No
Rehab Services: Number of Users	N/A	5,021	N/A	3,767	N/A	4,557	N/A	-25.00	20.97	15% (+/-)	No
Rehab Services: Avg Medicaid Pd per User	N/A	\$2,818	N/A	\$2,394	N/A	\$1,570	N/A	-15.00	-34.40	15% (+/-)	No
PT/OT/Speech/Hear: Total Medicaid Paid (TOS 34)	N/A	\$4,611,605	N/A	\$4,608,790	N/A	\$5,485,606	N/A	-0.06	19.02	15% (+/-)	No
PT/OT/Speech/Hear: Number of Users	N/A	6,572	N/A	6,976	N/A	7,190	N/A	6.15	3.07	15% (+/-)	Yes
PT/OT/Speech/Hear: Avg Medicaid Pd per User	N/A	\$702	N/A	\$661	N/A	\$763	N/A	-5.85	15.48	15% (+/-)	No
Hospice: Total Medicaid Paid (TOS 35)	N/A	\$3,075,038	N/A	\$3,704,037	N/A	\$5,768,331	N/A	20.45	55.73	15% (+/-)	No
Hospice: Number of Users	N/A	467	N/A	551	N/A	662	N/A	17.99	20.15	15% (+/-)	No
Hospice: Avg Medicaid Pd per User	N/A	\$6,585	N/A	\$6,722	N/A	\$8,713	N/A	2.09	29.62	15% (+/-)	No
DME: Total Medicaid Paid (TOS 51)	N/A	\$39,855,998	N/A	\$44,508,153	N/A	\$55,080,654	N/A	11.67	23.75	15% (+/-)	No
DME: Number of Users	N/A	69,540	N/A	111,449	N/A	112,889	N/A	60.27	1.29	15% (+/-)	Yes
DME: Avg Medicaid Pd per User	N/A	\$573	N/A	\$399	N/A	\$488	N/A	-30.30	22.18	15% (+/-)	No
Residential Care: Total Medicaid Paid (TOS 52)	N/A	\$38,035,140	N/A	\$1,104,123	N/A	\$1,283,960	N/A	-97.10	16.29	15% (+/-)	No
Residential Care: Number of Users	N/A	2,399	N/A	200	N/A	221	N/A	-91.70	10.50	15% (+/-)	Yes
Residential Care: Avg Medicaid Pd per User	N/A	\$15,855	N/A	\$5,521	N/A	\$5,810	N/A	-65.20	5.24	15% (+/-)	Yes
Psych. Services: Total Medicaid Paid (TOS 53)	N/A	\$86,474,149	N/A	\$134,338,512	N/A	\$141,840,558	N/A	55.35	5.58	15% (+/-)	Yes
Psych. Services: Number of Users	N/A	73,691	N/A	84,544	N/A	84,772	N/A	14.73	0.27	15% (+/-)	Yes
Psych. Services: Avg Medicaid Pd per User	N/A	\$1,173	N/A	\$1,589	N/A	\$1,673	N/A	35.41	5.30	15% (+/-)	Yes
Adult Day Care: Total Medicaid Paid (TOS 54)	N/A	\$9,385,160	N/A	\$42,648,942	N/A	\$60,361,273	N/A	354.40	41.53	15% (+/-)	No
Adult Day Care: Number of Users	N/A	1,433	N/A	1,358	N/A	3,048	N/A	-5.23	124.40	15% (+/-)	No
Adult Day Care: Avg Medicaid Pd per User	N/A	\$6,549	N/A	\$31,406	N/A	\$19,804	N/A	379.50	-36.90	15% (+/-)	No
<b>AVG FFS MEDICAID AMT PD/NON-DUAL FFS ENROLLEE BY MAX TOS</b>											
Inpatient Hospital (TOS 01)	N/A	\$582	N/A	\$662	N/A	\$740	N/A	13.82	11.80	15% (+/-)	Yes
Aged	N/A	\$1,821	N/A	\$1,482	N/A	\$868	N/A	-18.60	-41.50	15% (+/-)	No
Disabled	N/A	\$2,158	N/A	\$2,462	N/A	\$2,836	N/A	14.09	15.23	15% (+/-)	No
Child	N/A	\$268	N/A	\$293	N/A	\$323	N/A	9.60	10.18	15% (+/-)	Yes
Adult	N/A	\$711	N/A	\$761	N/A	\$804	N/A	7.01	5.74	15% (+/-)	Yes
ILTC (TOS=02,04,05,07)	N/A	\$169	N/A	\$183	N/A	\$189	N/A	8.09	3.61	15% (+/-)	Yes
Aged	N/A	\$2,546	N/A	\$2,291	N/A	\$2,555	N/A	-10.00	11.53	15% (+/-)	Yes
Disabled	N/A	\$1,137	N/A	\$1,130	N/A	\$1,112	N/A	-0.63	-1.55	15% (+/-)	Yes
Child	N/A	\$39	N/A	\$48	N/A	\$51	N/A	21.79	6.01	15% (+/-)	Yes
Adult	N/A	\$2	N/A	\$1	N/A	\$0	N/A	-60.50	-35.60	15% (+/-)	No
Drugs (TOS=16)	N/A	\$398	N/A	\$450	N/A	\$493	N/A	13.26	9.58	15% (+/-)	Yes
Aged	N/A	\$960	N/A	\$776	N/A	\$1,024	N/A	-19.20	31.89	15% (+/-)	No
Disabled	N/A	\$1,623	N/A	\$1,770	N/A	\$1,935	N/A	9.04	9.34	15% (+/-)	Yes
Child	N/A	\$204	N/A	\$230	N/A	\$243	N/A	12.44	5.71	15% (+/-)	Yes
Adult	N/A	\$346	N/A	\$376	N/A	\$408	N/A	8.71	8.59	15% (+/-)	Yes
All Other Services	N/A	\$1,359	N/A	\$1,444	N/A	\$1,512	N/A	6.29	4.69	15% (+/-)	Yes
Aged	N/A	\$1,971	N/A	\$1,230	N/A	\$1,198	N/A	-37.60	-2.62	15% (+/-)	Yes
Disabled	N/A	\$4,413	N/A	\$4,402	N/A	\$4,567	N/A	-0.25	3.75	15% (+/-)	Yes
Child	N/A	\$892	N/A	\$958	N/A	\$998	N/A	7.49	4.11	15% (+/-)	Yes
Adult	N/A	\$1,205	N/A	\$1,278	N/A	\$1,323	N/A	6.10	3.50	15% (+/-)	Yes
<b>% OF NON-DUAL FFS ENROLLEES WITH CLAIMS BY SELECTED MAX TOS</b>											
% Non-Dual FFS Enrollees with IP Claims (TOS=01)	N/A	12.50	N/A	13.23	N/A	13.49	N/A	5.81	1.98	15% (+/-)	Yes
Aged	N/A	14.58	N/A	9.76	N/A	7.79	N/A	-33.10	-20.10	15% (+/-)	No
Disabled	N/A	17.25	N/A	17.08	N/A	17.35	N/A	-0.99	1.55	15% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
Child	N/A	8.75	N/A	9.40	N/A	9.72	N/A	7.46	3.44	15% (+/-)	Yes
Adult	N/A	21.89	N/A	23.00	N/A	23.28	N/A	5.07	1.22	15% (+/-)	Yes
% Non-Dual FFS Enrollees with ILTC Claims (TOS=02,04,05,07)	N/A	0.39	N/A	0.41	N/A	0.42	N/A	4.37	4.32	15% (+/-)	Yes
Aged	N/A	11.37	N/A	8.57	N/A	10.11	N/A	-24.60	17.95	15% (+/-)	No
Disabled	N/A	2.14	N/A	2.10	N/A	2.02	N/A	-1.97	-3.51	15% (+/-)	Yes
Child	N/A	0.12	N/A	0.14	N/A	0.15	N/A	22.78	6.48	15% (+/-)	Yes
Adult	N/A	0.02	N/A	0.01	N/A	0.01	N/A	-28.70	-35.00	15% (+/-)	No
% with ratio of ILTC days/enroll days > 1	N/A	0.42	N/A	0.27	N/A	0.04	N/A	-36.70	-86.00	15% (+/-)	No
% Non-Dual FFS Enrollees with Drug Claims (TOS=16)	N/A	67.90	N/A	66.78	N/A	68.68	N/A	-1.65	2.84	15% (+/-)	Yes
Aged	N/A	51.20	N/A	36.83	N/A	47.72	N/A	-28.10	29.57	15% (+/-)	No
Disabled	N/A	77.95	N/A	76.13	N/A	76.35	N/A	-2.33	0.29	15% (+/-)	Yes
Child	N/A	64.66	N/A	63.09	N/A	65.21	N/A	-2.43	3.37	15% (+/-)	Yes
Adult	N/A	73.36	N/A	73.83	N/A	75.74	N/A	0.64	2.60	15% (+/-)	Yes
% Non-Dual FFS Enrollees with All Other Claims	N/A	83.78	N/A	84.51	N/A	85.63	N/A	0.87	1.33	15% (+/-)	Yes
Aged	N/A	54.92	N/A	39.44	N/A	48.05	N/A	-28.20	21.81	15% (+/-)	No
Disabled	N/A	87.73	N/A	86.89	N/A	86.25	N/A	-0.96	-0.73	15% (+/-)	Yes
Child	N/A	83.67	N/A	84.92	N/A	86.39	N/A	1.49	1.74	15% (+/-)	Yes
Adult	N/A	82.82	N/A	83.24	N/A	84.07	N/A	0.50	1.00	15% (+/-)	Yes
Avg # IP Days per Non-Dual FFS User	N/A	5	N/A	5	N/A	6	N/A	1.42	4.70	15% (+/-)	Yes
Aged	N/A	14	N/A	16	N/A	14	N/A	16.09	-13.20	15% (+/-)	Yes
Disabled	N/A	13	N/A	13	N/A	14	N/A	6.69	7.15	15% (+/-)	Yes
Child	N/A	4	N/A	4	N/A	4	N/A	-1.18	2.90	15% (+/-)	Yes
Adult	N/A	4	N/A	4	N/A	4	N/A	-2.40	1.30	15% (+/-)	Yes
Avg # ILTC Days per Non-Dual FFS User	N/A	228	N/A	226	N/A	221	N/A	-1.03	-1.96	15% (+/-)	Yes
Aged	N/A	234	N/A	253	N/A	231	N/A	8.13	-8.71	15% (+/-)	Yes
Disabled	N/A	268	N/A	266	N/A	266	N/A	-0.83	-0.09	15% (+/-)	Yes
Child	N/A	111	N/A	109	N/A	108	N/A	-1.20	-1.02	15% (+/-)	Yes
Adult	N/A	30	N/A	14	N/A	19	N/A	-54.20	40.83	15% (+/-)	No
% Non-Dual FFS Enrollees with Delivery	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	15% (+/-)	No
<b>FFS EXPENDITURES AND USERS BY MAX PGM TYPE</b>											
FP: Total Medicaid Paid (Program Type 2)	N/A	\$77,028,032	N/A	\$79,135,793	N/A	\$73,074,243	N/A	2.74	-7.66	15% (+/-)	Yes
FP: Number of Users	N/A	99,049	N/A	94,610	N/A	81,874	N/A	-4.48	-13.50	15% (+/-)	Yes
FP: Average Medicaid Pd per User	N/A	\$778	N/A	\$836	N/A	\$893	N/A	7.56	6.70	15% (+/-)	Yes
RHC: Total Medicaid Paid (Program Type 3)	N/A	\$13,963,238	N/A	\$13,301,085	N/A	\$16,291,107	N/A	-4.74	22.48	15% (+/-)	No
RHC: Number of Users	N/A	62,498	N/A	59,405	N/A	71,754	N/A	-4.95	20.79	15% (+/-)	No
RHC: Avg Medicaid Pd per User	N/A	\$223	N/A	\$224	N/A	\$227	N/A	0.22	1.40	15% (+/-)	Yes
FQHC: Total Medicaid Paid (Program Type 4)	N/A	\$17,431,586	N/A	\$18,113,600	N/A	\$18,546,061	N/A	3.91	2.39	15% (+/-)	Yes
FQHC: Number of Users	N/A	59,112	N/A	57,924	N/A	58,775	N/A	-2.01	1.47	15% (+/-)	Yes
FQHC: Avg Medicaid Pd per User	N/A	\$295	N/A	\$313	N/A	\$316	N/A	6.04	0.91	15% (+/-)	Yes
IHS: Total Medicaid Pd (Program Type 5)	N/A	\$31,717	N/A	\$25,736	N/A	\$13,031	N/A	-18.90	-49.40	15% (+/-)	No
IHS: Number of Users	N/A	101	N/A	82	N/A	36	N/A	-18.80	-56.10	15% (+/-)	No
IHS: Avg Medicaid Pd per User	N/A	\$314	N/A	\$314	N/A	\$362	N/A	-0.06	15.33	15% (+/-)	No
Section 1915(c) Waiver: Total Medicaid Paid (Program Types 6 and 7)	N/A	\$26,830,494	N/A	\$28,435,925	N/A	\$30,794,062	N/A	5.98	8.29	15% (+/-)	Yes
Section 1915(c) Waiver: Number of Users	N/A	4,296	N/A	4,343	N/A	4,285	N/A	1.09	-1.34	15% (+/-)	Yes
Section 1915(c) Waiver: Avg Medicaid Pd per User	N/A	\$6,245	N/A	\$6,548	N/A	\$7,186	N/A	4.84	9.76	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	\$167,714,413	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	41,894	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	\$4,003	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$3,233	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$4,065	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$2,995	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$928	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	6.60	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	25.51	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	50.27	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	0.17	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	0.22	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	\$94,319,903	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	8,775	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	\$10,749	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$6,178	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$12,124	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$2,995	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$928	N/A	N/A	N/A	15% (+/-)	No
% Non-Dual FFS Enrollees with CLTC Claims (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	1.38	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	8.42	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	9.34	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	0.17	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	0.22	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	\$28,946,302	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	4,149	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	\$6,977	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$5,632	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$7,075	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$11,515	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$1,242	N/A	N/A	N/A	15% (+/-)	No
% Non-Dual FFS Enrollees with CLTC Claims (Section 1915(c) claims only - excludes CLTC Codes 11-20)	N/A	N/A	N/A	N/A	N/A	0.65	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	6.97	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	4.78	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	0.01	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	0.02	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	129,106	N/A	130,647	N/A	131,012	N/A	1.19	0.28	15% (+/-)	Yes
Number of EDB Dual FFS Recipients	N/A	122,109	N/A	123,257	N/A	123,256	N/A	0.94	0.00	15% (+/-)	Yes
Total EDB Dual FFS PYE	N/A	119,548	N/A	120,550	N/A	120,514	N/A	0.84	-0.03	15% (+/-)	Yes
% EDB Only Dual (Code 50)	N/A	7.88	N/A	8.87	N/A	2.80	N/A	12.57	-68.50	15% (+/-)	No
% QMB Only (Code 51)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	15% (+/-)	N/A
% QMB Plus (Code 52)	N/A	58.47	N/A	58.21	N/A	60.53	N/A	-0.44	3.98	15% (+/-)	Yes
% SLMB Only (Code 53)	N/A	0.27	N/A	0.28	N/A	0.38	N/A	1.63	38.84	15% (+/-)	No
% 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	-100.00	15% (+/-)	No
% Q1 1 (Code 56)	N/A	0.18	N/A	0.15	N/A	0.24	N/A	-15.50	55.29	15% (+/-)	No
% Q1 2 (Code 57)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	-100.00	Div by 0	15% (+/-)	N/A
% Other Type Dual (Code 58)	N/A	33.12	N/A	32.39	N/A	35.99	N/A	-2.21	11.10	15% (+/-)	Yes
% Dual Type Unknown (Code 59)	N/A	0.08	N/A	0.10	N/A	0.06	N/A	30.40	-35.30	15% (+/-)	No
MAX Aged EDB Dual FFS Total	N/A	74,414	N/A	69,790	N/A	66,591	N/A	-6.21	-4.58	10% (+/-)	Yes
11: Aged, Cash	N/A	29,732	N/A	25,345	N/A	22,825	N/A	-14.80	-9.94	10% (+/-)	Yes
21: Aged, MN	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
31: Aged, Poverty	N/A	26,630	N/A	26,536	N/A	26,151	N/A	-0.35	-1.45	10% (+/-)	Yes
41: Other Aged	N/A	17,917	N/A	17,699	N/A	17,331	N/A	-1.22	-2.08	10% (+/-)	Yes
51: 1115 Aged	N/A	135	N/A	210	N/A	284	N/A	55.56	35.24	10% (+/-)	No
MAX Disabled EDB Dual FFS Total	N/A	53,421	N/A	59,639	N/A	63,153	N/A	11.64	5.89	10% (+/-)	Yes
12: Disabled, Cash	N/A	23,652	N/A	27,350	N/A	29,050	N/A	15.64	6.22	10% (+/-)	Yes
22: Disabled, MN	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
32: Disabled, Poverty	N/A	24,524	N/A	26,827	N/A	28,349	N/A	9.39	5.67	10% (+/-)	Yes
42: Other Disabled	N/A	5,245	N/A	5,462	N/A	5,754	N/A	4.14	5.35	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	\$1,105,239,685	N/A	\$1,174,929,652	N/A	\$1,230,678,692	N/A	6.31	4.75	15% (+/-)	Yes
Average FFS Medicaid Amt Paid per FFS Dual	N/A	\$8,561	N/A	\$8,993	N/A	\$9,394	N/A	5.05	4.45	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	\$9,051	N/A	\$9,532	N/A	\$9,985	N/A	5.32	4.75	15% (+/-)	Yes
<b>AVG FFS MEDICAID AMT PD/FFS DUAL BY MAX ELIGIBILITY GROUP</b>											
All Aged	N/A	\$8,119	N/A	\$8,887	N/A	\$9,538	N/A	9.47	7.33	15% (+/-)	Yes
11: Aged, Cash	N/A	\$5,077	N/A	\$5,353	N/A	\$5,662	N/A	5.44	5.76	15% (+/-)	Yes
21: Aged, MN	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
31: Aged, Poverty	N/A	\$3,558	N/A	\$3,886	N/A	\$4,168	N/A	9.23	7.25	15% (+/-)	Yes
41: Other Aged	N/A	\$19,985	N/A	\$21,516	N/A	\$22,876	N/A	7.66	6.32	15% (+/-)	Yes
51: 1115 Aged	N/A	\$2,725	N/A	\$3,050	N/A	\$1,725	N/A	11.93	-43.40	15% (+/-)	No
All Disabled	N/A	\$9,258	N/A	\$9,186	N/A	\$9,321	N/A	-0.78	1.47	15% (+/-)	Yes
12: Disabled, Cash	N/A	\$7,613	N/A	\$7,576	N/A	\$7,575	N/A	-0.49	-0.02	15% (+/-)	Yes
22: Disabled, MN	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
32: Disabled, Poverty	N/A	\$5,749	N/A	\$5,942	N/A	\$6,056	N/A	3.36	1.92	15% (+/-)	Yes
42: Other Disabled	N/A	\$33,083	N/A	\$33,182	N/A	\$34,226	N/A	0.30	3.15	15% (+/-)	Yes
52: 1115 Disabled	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
<b>FFS EXPENDITURES AND USERS BY MAX TOS</b>											
IP: Total Medicaid Paid (TOS 01)	N/A	\$50,559,881	N/A	\$41,495,971	N/A	\$44,613,094	N/A	-17.90	7.51	15% (+/-)	Yes
IP: Number of Users	N/A	24,383	N/A	13,718	N/A	12,791	N/A	-43.70	-6.76	15% (+/-)	Yes
IP: Average Medicaid Pd per User	N/A	\$2,074	N/A	\$3,025	N/A	\$3,488	N/A	45.88	15.30	15% (+/-)	No
IP: Average Medicaid Covered Days Per User	N/A	7	N/A	11	N/A	12	N/A	52.38	13.10	15% (+/-)	Yes
MH Aged: Total Medicaid Paid (TOS 02)	N/A	\$12,631,884	N/A	\$12,756,710	N/A	\$11,640,734	N/A	0.99	-8.75	15% (+/-)	Yes
MH Aged: Number of Users	N/A	270	N/A	253	N/A	229	N/A	-6.30	-9.49	15% (+/-)	Yes
MH Aged: Avg Medicaid Pd per User	N/A	\$46,785	N/A	\$50,422	N/A	\$50,833	N/A	7.77	0.82	15% (+/-)	Yes
IP Psych < 21: Total Medicaid Paid (TOS 04)	N/A	\$221,020	N/A	\$225,665	N/A	\$140,483	N/A	2.10	-37.70	15% (+/-)	No
IP Psych < 21: Number of Users	N/A	9	N/A	8	N/A	44	N/A	-11.10	450.00	15% (+/-)	No
IP Psych<21 :Avg Medicaid Pd per User	N/A	\$24,558	N/A	\$28,208	N/A	\$3,193	N/A	14.86	-88.70	15% (+/-)	No
ICF/MR: Total Medicaid Pd (TOS 05)	N/A	\$96,671,460	N/A	\$95,033,354	N/A	\$94,463,130	N/A	-1.69	-0.60	15% (+/-)	Yes
ICF/MR: Number of Users	N/A	1,276	N/A	1,227	N/A	1,182	N/A	-3.84	-3.67	15% (+/-)	Yes
ICF/MR: Avg Medicaid Pd per User	N/A	\$75,761	N/A	\$77,452	N/A	\$79,918	N/A	2.23	3.18	15% (+/-)	Yes
NF: Total Medicaid Paid (TOS 07)	N/A	\$349,245,475	N/A	\$379,567,225	N/A	\$391,419,130	N/A	8.68	3.12	15% (+/-)	Yes
NF Number of Users	N/A	16,189	N/A	16,094	N/A	15,929	N/A	-0.59	-1.03	15% (+/-)	Yes
NF:Avg Medicaid Pd per User	N/A	\$21,573	N/A	\$23,584	N/A	\$24,573	N/A	9.32	4.19	15% (+/-)	Yes
Physician: Total Medicaid Paid (TOS 08)	N/A	\$17,907,645	N/A	\$19,656,467	N/A	\$16,950,074	N/A	9.77	-13.80	15% (+/-)	Yes
Physician: Number of Users	N/A	81,576	N/A	81,528	N/A	75,909	N/A	-0.06	-6.89	15% (+/-)	Yes
Physician: Avg Medicaid Pd per User	N/A	\$220	N/A	\$241	N/A	\$223	N/A	9.83	-7.39	15% (+/-)	Yes
Dental: Total Medicaid Paid (TOS 09)	N/A	\$3,752,548	N/A	\$3,638,899	N/A	\$3,630,145	N/A	-3.03	-0.24	15% (+/-)	Yes
Dental: Number of Users	N/A	12,007	N/A	12,102	N/A	12,553	N/A	0.79	3.73	15% (+/-)	Yes
Dental: Avg Medicaid Pd per User	N/A	\$313	N/A	\$301	N/A	\$289	N/A	-3.79	-3.82	15% (+/-)	Yes
Other Practitioner: Total Medicaid Pd (TOS 10)	N/A	\$718,781	N/A	\$685,006	N/A	\$796,617	N/A	-4.70	16.29	15% (+/-)	No
Other Practitioner: Number of Users	N/A	19,863	N/A	18,760	N/A	16,408	N/A	-5.55	-12.50	15% (+/-)	Yes
Other Practitioner: Avg Medicaid Pd per User	N/A	\$36	N/A	\$37	N/A	\$49	N/A	0.90	32.96	15% (+/-)	No
OPD: Total Medicaid Paid (TOS 11)	N/A	\$7,191,443	N/A	\$6,580,899	N/A	\$5,787,540	N/A	-8.49	-12.10	15% (+/-)	Yes
OPD Number of Users	N/A	34,866	N/A	33,913	N/A	30,840	N/A	-2.73	-9.06	15% (+/-)	Yes
OPD: Avg Medicaid Pd per User	N/A	\$206	N/A	\$194	N/A	\$188	N/A	-5.92	-3.29	15% (+/-)	Yes
Clinic: Total Medicaid Paid (TOS 12)	N/A	\$52,906,902	N/A	\$58,779,786	N/A	\$25,754,215	N/A	11.10	-56.20	15% (+/-)	No
Clinic: Number of Users	N/A	34,738	N/A	36,713	N/A	35,865	N/A	5.69	-2.31	15% (+/-)	Yes
Clinic: Avg Medicaid Pd per User	N/A	\$1,523	N/A	\$1,601	N/A	\$718	N/A	5.12	-55.10	15% (+/-)	No
HH: Total Medicaid Paid (TOS 13)	N/A	\$2,063,373	N/A	\$695,134	N/A	\$533,882	N/A	-66.30	-23.20	15% (+/-)	No
HH: Number of Users	N/A	1,403	N/A	633	N/A	521	N/A	-54.90	-17.70	15% (+/-)	No
HH: Avg Medicaid Pd per User	N/A	\$1,471	N/A	\$1,098	N/A	\$1,025	N/A	-25.30	-6.69	15% (+/-)	Yes
Lab/Xray: Total Medicaid Paid (TOS 15)	N/A	\$8,392,118	N/A	\$9,301,597	N/A	\$8,038,965	N/A	10.84	-13.60	15% (+/-)	Yes
Lab/Xray: Number of Users	N/A	52,445	N/A	50,388	N/A	43,787	N/A	-3.92	-13.10	15% (+/-)	Yes
Lab/Xray:Avg Medicaid Pd per User	N/A	\$160	N/A	\$185	N/A	\$184	N/A	15.36	-0.55	15% (+/-)	Yes
Drugs: Total Medicaid Paid (TOS 16)	N/A	\$277,775,621	N/A	\$322,870,344	N/A	\$354,066,301	N/A	16.23	9.66	15% (+/-)	Yes
Drugs: Number of Users	N/A	110,716	N/A	112,528	N/A	114,917	N/A	1.64	2.12	15% (+/-)	Yes
Drugs: Avg Medicaid Pd per User	N/A	\$2,509	N/A	\$2,869	N/A	\$3,081	N/A	14.36	7.38	15% (+/-)	Yes
Other Services: Total Medicaid Paid (TOS 19)	N/A	\$1,439,954	N/A	\$3,634,898	N/A	\$860,988	N/A	152.40	-76.30	15% (+/-)	No
Other Services: Number of Users	N/A	8,406	N/A	8,781	N/A	1,325	N/A	4.46	-84.90	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	\$171	N/A	\$414	N/A	\$650	N/A	141.70	56.98	15% (+/-)	No
Transportation: Total Medicaid Paid (TOS 26)	N/A	\$9,297,406	N/A	\$11,148,666	N/A	\$12,749,098	N/A	19.91	14.36	15% (+/-)	Yes
Transportation: Number of Users	N/A	16,528	N/A	16,283	N/A	16,287	N/A	-1.48	0.02	15% (+/-)	Yes
Transportation: Avg Medicaid Pd per User	N/A	\$563	N/A	\$685	N/A	\$783	N/A	21.72	14.33	15% (+/-)	Yes
PCS: Total Medicaid Paid (TOS 30)	N/A	\$55,531,995	N/A	\$58,309,957	N/A	\$59,491,655	N/A	5.00	2.03	15% (+/-)	Yes
PCS: Number of Users	N/A	13,414	N/A	13,582	N/A	13,493	N/A	1.25	-0.66	15% (+/-)	Yes
PCS: Avg Medicaid Pd per User	N/A	\$4,140	N/A	\$4,293	N/A	\$4,409	N/A	3.70	2.70	15% (+/-)	Yes
Target Case Management: Total Medicaid Pd (TOS 31)	N/A	\$12,366,069	N/A	\$14,147,950	N/A	\$10,510,080	N/A	14.41	-25.70	15% (+/-)	No
Target Case Management: Number of Users	N/A	10,496	N/A	12,661	N/A	9,622	N/A	20.63	-24.00	15% (+/-)	No
Target Case Management: Avg Medicaid Pd per User	N/A	\$1,178	N/A	\$1,117	N/A	\$1,092	N/A	-5.15	-2.25	15% (+/-)	Yes
Rehab Services: Total Medicaid Paid (TOS 33)	N/A	\$1,647,921	N/A	\$3,032,697	N/A	\$1,554,295	N/A	84.03	-48.70	15% (+/-)	No
Rehab Services: Number of Users	N/A	748	N/A	871	N/A	1,072	N/A	16.44	23.08	15% (+/-)	No
Rehab Services: Avg Medicaid Pd per User	N/A	\$2,203	N/A	\$3,482	N/A	\$1,450	N/A	58.04	-58.40	15% (+/-)	No
PT/OT/Speech/Hear: Total Medicaid Paid (TOS 34)	N/A	\$2,263	N/A	\$2,326	N/A	\$6,380	N/A	2.78	174.30	15% (+/-)	No
PT/OT/Speech/Hear: Number of Users	N/A	58	N/A	25	N/A	32	N/A	-56.90	28.00	15% (+/-)	No
PT/OT/Speech/Hear: Avg Medicaid Pd per User	N/A	\$39	N/A	\$93	N/A	\$199	N/A	138.50	114.30	15% (+/-)	No
Hospice: Total Medicaid Paid (TOS 35)	N/A	\$1,060,616	N/A	\$1,409,411	N/A	\$10,766,995	N/A	32.89	663.90	15% (+/-)	No
Hospice: Number of Users	N/A	104	N/A	147	N/A	1,153	N/A	41.35	684.40	15% (+/-)	No
Hospice: Avg Medicaid Pd per User	N/A	\$10,198	N/A	\$9,588	N/A	\$9,338	N/A	-5.99	-2.60	15% (+/-)	Yes
DME: Total Medicaid Paid (TOS 51)	N/A	\$12,440,304	N/A	\$11,993,937	N/A	\$18,265,644	N/A	-3.59	52.29	15% (+/-)	No
DME: Number of Users	N/A	35,572	N/A	34,508	N/A	41,557	N/A	-2.99	20.43	15% (+/-)	No
DME: Avg Medicaid Pd per User	N/A	\$350	N/A	\$348	N/A	\$440	N/A	-0.62	26.46	15% (+/-)	No
Residential Care: Total Medicaid Paid (TOS 52)	N/A	\$65,557,314	N/A	\$598,101	N/A	\$606,187	N/A	-99.10	1.35	15% (+/-)	Yes
Residential Care: Number of Users	N/A	2,423	N/A	118	N/A	154	N/A	-95.10	30.51	15% (+/-)	No
Residential Care: Avg Medicaid Pd per User	N/A	\$27,056	N/A	\$5,069	N/A	\$3,936	N/A	-81.30	-22.30	15% (+/-)	No
Psych. Services: Total Medicaid Paid (TOS 53)	N/A	\$39,516,716	N/A	\$23,782,020	N/A	\$27,437,949	N/A	-39.80	15.37	15% (+/-)	No
Psych. Services: Number of Users	N/A	16,245	N/A	17,016	N/A	16,805	N/A	4.75	-1.24	15% (+/-)	Yes
Psych. Services: Avg Medicaid Pd per User	N/A	\$2,433	N/A	\$1,398	N/A	\$1,633	N/A	-42.50	16.82	15% (+/-)	No
Adult Day Care: Total Medicaid Paid (TOS 54)	N/A	\$26,178,858	N/A	\$95,409,505	N/A	\$130,396,473	N/A	264.50	36.67	15% (+/-)	No
Adult Day Care: Number of Users	N/A	4,303	N/A	3,951	N/A	5,837	N/A	-8.18	47.73	15% (+/-)	No
Adult Day Care: Avg Medicaid Pd per User	N/A	\$6,084	N/A	\$24,148	N/A	\$22,340	N/A	296.90	-7.49	15% (+/-)	Yes
<b>AVG FFS MEDICAID AMT PD/FFS DUAL BY SELECTED TYPE OF SERVICE</b>											
Inpatient Hospital (TOS=01)	N/A	\$392	N/A	\$318	N/A	\$341	N/A	-18.90	7.21	15% (+/-)	Yes
Aged	N/A	\$348	N/A	\$226	N/A	\$262	N/A	-35.00	15.61	15% (+/-)	No
Disabled	N/A	\$430	N/A	\$400	N/A	\$403	N/A	-6.84	0.76	15% (+/-)	Yes
ILTC (TOS=02,04,05,07)	N/A	\$3,553	N/A	\$3,732	N/A	\$3,799	N/A	5.03	1.78	15% (+/-)	Yes
Aged	N/A	\$4,598	N/A	\$5,243	N/A	\$5,562	N/A	14.05	6.09	15% (+/-)	Yes
Disabled	N/A	\$2,183	N/A	\$2,040	N/A	\$2,015	N/A	-6.59	-1.21	15% (+/-)	Yes
Drugs (TOS=16)	N/A	\$2,152	N/A	\$2,471	N/A	\$2,703	N/A	14.86	9.36	15% (+/-)	Yes
Aged	N/A	\$1,785	N/A	\$2,044	N/A	\$2,222	N/A	14.47	8.74	15% (+/-)	Yes
Disabled	N/A	\$2,664	N/A	\$2,977	N/A	\$3,215	N/A	11.75	8.00	15% (+/-)	Yes
All Other Services	N/A	\$2,464	N/A	\$2,472	N/A	\$2,552	N/A	0.33	3.23	15% (+/-)	Yes
Aged	N/A	\$1,387	N/A	\$1,374	N/A	\$1,492	N/A	-0.97	8.58	15% (+/-)	Yes
Disabled	N/A	\$3,981	N/A	\$3,769	N/A	\$3,688	N/A	-5.32	-2.16	15% (+/-)	Yes
<b>% OF FFS DUALS WITH CLAIMS BY SELECTED TYPE OF SERVICE</b>											
% FFS Duals with IP Claims (TOS=01)	N/A	18.89	N/A	10.50	N/A	9.76	N/A	-44.40	-7.02	15% (+/-)	Yes
Aged	N/A	18.95	N/A	11.04	N/A	10.30	N/A	-41.80	-6.71	15% (+/-)	Yes
Disabled	N/A	18.78	N/A	9.72	N/A	9.10	N/A	-48.30	-6.33	15% (+/-)	Yes
% FFS Duals with ILTC Claims (TOS=02,04,05,07)	N/A	13.72	N/A	13.44	N/A	13.25	N/A	-2.01	-1.42	15% (+/-)	Yes
Aged	N/A	20.46	N/A	21.53	N/A	22.12	N/A	5.21	2.74	15% (+/-)	Yes
Disabled	N/A	4.66	N/A	4.26	N/A	4.18	N/A	-8.55	-2.00	15% (+/-)	Yes
% FFS Duals with Drug Claims (TOS=16)	N/A	85.76	N/A	86.13	N/A	87.71	N/A	0.44	1.84	15% (+/-)	Yes
Aged	N/A	83.80	N/A	84.27	N/A	86.72	N/A	0.56	2.91	15% (+/-)	Yes
Disabled	N/A	88.37	N/A	88.25	N/A	88.74	N/A	-0.13	0.56	15% (+/-)	Yes
% FFS Duals with All Other Claims	N/A	87.03	N/A	86.58	N/A	85.82	N/A	-0.52	-0.88	15% (+/-)	Yes
Aged	N/A	85.56	N/A	85.00	N/A	84.37	N/A	-0.66	-0.75	15% (+/-)	Yes
Disabled	N/A	89.01	N/A	88.39	N/A	87.34	N/A	-0.71	-1.18	15% (+/-)	Yes

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

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
Avg # IP Days per FFS Dual User (TOS 01)	N/A	7	N/A	11	N/A	12	N/A	52.38	13.10	15% (+/-)	Yes
Aged	N/A	7	N/A	11	N/A	12	N/A	45.64	11.95	15% (+/-)	Yes
Disabled	N/A	7	N/A	11	N/A	12	N/A	64.43	14.41	15% (+/-)	Yes
Avg # ILTC Days per FFS Dual User (TOS 02, 04, 05, 07)	N/A	255	N/A	257	N/A	250	N/A	0.82	-2.93	15% (+/-)	Yes
Aged	N/A	249	N/A	251	N/A	243	N/A	0.81	-3.22	15% (+/-)	Yes
Disabled	N/A	293	N/A	295	N/A	288	N/A	0.44	-2.24	15% (+/-)	Yes
<b>FFS EXPENDITURES AND USERS BY MAX PROGRAM TYPE</b>											
FP: Total Medicaid Paid (Program Type 2)	N/A	\$101,134,381	N/A	\$105,543,703	N/A	\$111,689,115	N/A	4.36	5.82	15% (+/-)	Yes
FP: Number of Users	N/A	6,192	N/A	7,726	N/A	6,669	N/A	24.77	-13.70	15% (+/-)	Yes
FP: Average Medicaid Pd per User	N/A	\$16,333	N/A	\$13,661	N/A	\$16,748	N/A	-16.40	22.59	15% (+/-)	No
RHC: Total Medicaid Paid (Program Type 3)	N/A	\$1,515,147	N/A	\$1,604,031	N/A	\$1,874,219	N/A	5.87	16.84	15% (+/-)	No
RHC: Number of Users	N/A	15,173	N/A	13,880	N/A	16,266	N/A	-8.52	17.19	15% (+/-)	No
RHC: Avg Medicaid Pd per User	N/A	\$100	N/A	\$116	N/A	\$115	N/A	15.73	-0.30	15% (+/-)	Yes
FQHC: Total Medicaid Paid (Program Type 4)	N/A	\$1,615,465	N/A	\$2,026,190	N/A	\$2,240,285	N/A	25.42	10.57	15% (+/-)	Yes
FQHC: Number of Users	N/A	10,178	N/A	10,498	N/A	11,275	N/A	3.14	7.40	15% (+/-)	Yes
FQHC: Avg Medicaid Pd per User	N/A	\$159	N/A	\$193	N/A	\$199	N/A	21.60	2.95	15% (+/-)	Yes
IHS: Total Medicaid Pd (Program Type 5)	N/A	\$0	N/A	\$197	N/A	\$1,115	N/A	Div by 0	466.00	15% (+/-)	No
IHS: Number of Users	N/A	0	N/A	1	N/A	3	N/A	Div by 0	200.00	15% (+/-)	No
IHS: Avg Medicaid Pd per User	N/A	Div by 0	N/A	\$197	N/A	\$372	N/A	Div by 0	88.66	15% (+/-)	No
Section 1915(c) Waiver: Total Medicaid Paid (Program Types 6 and 7)	N/A	\$75,997,019	N/A	\$79,216,127	N/A	\$82,829,598	N/A	4.24	4.56	15% (+/-)	Yes
Section 1915(c) Waiver: Number of Users	N/A	15,362	N/A	15,374	N/A	15,350	N/A	0.08	-0.16	15% (+/-)	Yes
Section 1915(c) Waiver: Avg Medicaid Pd per User	N/A	\$4,947	N/A	\$5,153	N/A	\$5,396	N/A	4.15	4.73	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	\$247,054,665	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	57,948	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	\$4,263	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$2,593	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$6,023	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	44.23	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	44.63	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	44.68	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	\$199,979,489	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	17,641	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	\$11,336	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$5,994	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$16,924	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	13.47	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	13.53	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	13.66	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	\$78,760,729	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	14,999	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	\$5,251	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$5,358	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$5,119	N/A	N/A	N/A	15% (+/-)	No
% FFS Dual Enrollees with CLTC Claims (Section 1915(c) claims only - excludes CLTC Codes 11-20)	N/A	N/A	N/A	N/A	N/A	11.45	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	12.46	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	10.61	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	800,774	N/A	777,659	N/A	766,104	N/A	-2.89	-1.49	15% (+/-)	Yes
# FFS Recipients	N/A	698,127	N/A	681,151	N/A	677,345	N/A	-2.43	-0.56	15% (+/-)	Yes
% FFS Enrollees who are Recipients	65-90%	87.18	Yes	87.59	Yes	88.41	Yes	0.47	0.94	15% (+/-)	Yes
% Aged who are Recipients	90-100%	93.28	Yes	92.17	Yes	92.45	Yes	-1.19	0.31	15% (+/-)	Yes
% Disabled who are Recipients	85-100%	91.10	Yes	90.52	Yes	90.10	Yes	-0.64	-0.46	15% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: SC

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%	85.40	Yes	86.28	Yes	87.63	Yes	1.03	1.56	15% (+/-)	Yes
% Adults who are Recipients	80-100%	85.92	Yes	86.27	Yes	86.94	Yes	0.40	0.78	15% (+/-)	Yes
Total FFS PYE	N/A	678,222	N/A	658,868	N/A	646,247	N/A	-2.85	-1.92	15% (+/-)	Yes
MAX Aged Total	N/A	78,336	N/A	73,920	N/A	70,864	N/A	-5.64	-4.13	10% (+/-)	Yes
11: Aged, Cash	N/A	30,931	N/A	26,220	N/A	24,050	N/A	-15.20	-8.28	10% (+/-)	Yes
21: Aged, MN	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
31: Aged, Poverty	N/A	28,342	N/A	28,740	N/A	28,192	N/A	1.40	-1.91	10% (+/-)	Yes
41: Other Aged	N/A	18,926	N/A	18,747	N/A	18,324	N/A	-0.95	-2.26	10% (+/-)	Yes
51: 1115 Aged	N/A	137	N/A	213	N/A	298	N/A	55.47	39.91	10% (+/-)	No
MAX Disabled Total	N/A	128,749	N/A	137,771	N/A	142,296	N/A	7.01	3.28	10% (+/-)	Yes
12: Disabled, Cash	N/A	89,057	N/A	94,352	N/A	96,462	N/A	5.95	2.24	10% (+/-)	Yes
22: Disabled, MN	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
32: Disabled, Poverty	N/A	30,436	N/A	33,922	N/A	35,787	N/A	11.45	5.50	10% (+/-)	Yes
42: Other Disabled	N/A	9,256	N/A	9,497	N/A	10,047	N/A	2.60	5.79	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	451,121	N/A	426,915	N/A	419,145	N/A	-5.37	-1.82	10% (+/-)	Yes
14: AFDC Child, Cash	N/A	83,403	N/A	83,157	N/A	81,019	N/A	-0.30	-2.57	10% (+/-)	Yes
16: AFDC-U Child, Cash	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
24: AFDC Child, MN	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
34: Child Poverty	N/A	330,341	N/A	310,019	N/A	303,256	N/A	-6.15	-2.18	10% (+/-)	Yes
44: Other Child	N/A	27,860	N/A	23,519	N/A	23,006	N/A	-15.60	-2.18	10% (+/-)	Yes
48: Foster Care Child	N/A	9,137	N/A	9,949	N/A	10,978	N/A	8.89	10.34	10% (+/-)	No
54: 1115 Child	N/A	380	N/A	271	N/A	886	N/A	-28.70	226.90	10% (+/-)	No
MAX Adult Total	N/A	142,568	N/A	139,053	N/A	133,799	N/A	-2.47	-3.78	10% (+/-)	Yes
15: AFDC Adult, Cash	N/A	71,593	N/A	69,343	N/A	65,912	N/A	-3.14	-4.95	10% (+/-)	Yes
17: AFDC-U Adult, Cash	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
25: AFDC Adult, MN	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
35: Adult, Poverty	N/A	26,945	N/A	26,640	N/A	23,354	N/A	-1.13	-12.30	10% (+/-)	No
45: Other Adult	N/A	27,154	N/A	24,319	N/A	22,652	N/A	-10.40	-6.85	10% (+/-)	Yes
55: 1115 Adult	N/A	16,876	N/A	18,751	N/A	21,881	N/A	11.11	16.69	10% (+/-)	No
Total FFS Medicaid Amt Paid	N/A	\$2,789,200,931	N/A	\$2,947,296,096	N/A	\$3,094,595,565	N/A	5.67	5.00	15% (+/-)	Yes
Average FFS Medicaid Amt Paid per FFS Enrollee	N/A	\$3,483	N/A	\$3,790	N/A	\$4,039	N/A	8.81	6.58	15% (+/-)	Yes
Average FFS Medicaid Amt Paid per FFS Recipient (User of any svc)	N/A	\$3,995	N/A	\$4,327	N/A	\$4,569	N/A	8.30	5.59	15% (+/-)	Yes
AVG FFS MEDICAID AMT PD/FFS ENROLLEE BY MAX ELIGIBILITY GROUP											
All Aged	N/A	\$8,078	N/A	\$8,714	N/A	\$9,304	N/A	7.88	6.77	15% (+/-)	Yes
11: Aged, Cash	N/A	\$5,321	N/A	\$5,584	N/A	\$5,807	N/A	4.93	3.99	15% (+/-)	Yes
21: Aged, MN	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
31: Aged, Poverty	N/A	\$3,535	N/A	\$3,736	N/A	\$3,994	N/A	5.68	6.89	15% (+/-)	Yes
41: Other Aged	N/A	\$19,423	N/A	\$20,787	N/A	\$22,187	N/A	7.03	6.73	15% (+/-)	Yes
51: 1115 Aged	N/A	\$2,686	N/A	\$3,030	N/A	\$1,667	N/A	12.81	-45.00	15% (+/-)	No
All Disabled	N/A	\$9,300	N/A	\$9,513	N/A	\$9,949	N/A	2.29	4.59	15% (+/-)	Yes
12: Disabled, Cash	N/A	\$8,858	N/A	\$9,094	N/A	\$9,425	N/A	2.67	3.64	15% (+/-)	Yes
22: Disabled, MN	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
32: Disabled, Poverty	N/A	\$6,271	N/A	\$6,636	N/A	\$7,036	N/A	5.82	6.03	15% (+/-)	Yes
42: Other Disabled	N/A	\$23,520	N/A	\$23,955	N/A	\$25,359	N/A	1.85	5.86	15% (+/-)	Yes
52: 1115 Disabled	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
All Child	N/A	\$1,403	N/A	\$1,529	N/A	\$1,615	N/A	9.02	5.58	15% (+/-)	Yes
14: AFDC Child, Cash	N/A	\$1,052	N/A	\$1,126	N/A	\$1,147	N/A	7.01	1.88	15% (+/-)	Yes
16: AFDC-U Child, Cash	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
24: AFDC Child, MN	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
34: Child, Poverty	N/A	\$1,329	N/A	\$1,443	N/A	\$1,519	N/A	8.53	5.30	15% (+/-)	Yes
44: Other Child	N/A	\$1,034	N/A	\$1,090	N/A	\$1,158	N/A	5.39	6.28	15% (+/-)	Yes
48: Foster Care Child	N/A	\$8,352	N/A	\$8,589	N/A	\$8,708	N/A	2.84	1.38	15% (+/-)	Yes
54: 1115 Child	N/A	\$2,073	N/A	\$3,156	N/A	\$987	N/A	52.25	-68.70	15% (+/-)	No
All Adult	N/A	\$2,288	N/A	\$2,443	N/A	\$2,562	N/A	6.76	4.88	15% (+/-)	Yes
15: AFDC Adult, Cash	N/A	\$2,144	N/A	\$2,317	N/A	\$2,431	N/A	8.08	4.91	15% (+/-)	Yes
17: AFDC-U Adult, Cash	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A

2003-2005 MAX PSF VALIDATION TABLE  
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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	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
35: Adult, Poverty	N/A	\$2,863	N/A	\$2,806	N/A	\$2,657	N/A	-1.99	-5.32	15% (+/-)	Yes
45: Other Adult	N/A	\$1,672	N/A	\$1,695	N/A	\$1,886	N/A	1.42	11.23	15% (+/-)	Yes
55: 1115 Adult	N/A	\$2,977	N/A	\$3,363	N/A	\$3,558	N/A	12.97	5.79	15% (+/-)	Yes
<b>FFS EXPENDITURES AND USERS BY MAX TOS</b>											
IP: Total Medicaid Paid (TOS 01)	N/A	\$441,413,543	N/A	\$470,021,437	N/A	\$514,868,508	N/A	6.48	9.54	15% (+/-)	Yes
IP: Number of Users	N/A	108,338	N/A	99,292	N/A	98,455	N/A	-8.35	-0.84	15% (+/-)	Yes
IP: Average Medicaid Pd per User	N/A	\$4,074	N/A	\$4,734	N/A	\$5,229	N/A	16.18	10.47	15% (+/-)	Yes
IP: Average Medicaid Covered Days Per User	N/A	6	N/A	6	N/A	6	N/A	7.43	5.86	15% (+/-)	Yes
MH Aged: Total Medicaid Paid (TOS 02)	N/A	\$13,496,079	N/A	\$13,593,441	N/A	\$12,402,087	N/A	0.72	-8.76	15% (+/-)	Yes
MH Aged: Number of Users	N/A	286	N/A	271	N/A	247	N/A	-5.24	-8.86	15% (+/-)	Yes
MH Aged: Avg Medicaid Pd per User	N/A	\$47,189	N/A	\$50,160	N/A	\$50,211	N/A	6.30	0.10	15% (+/-)	Yes
IP Psych < 21: Total Medicaid Paid (TOS 04)	N/A	\$25,261,436	N/A	\$29,406,655	N/A	\$31,121,127	N/A	16.41	5.83	15% (+/-)	Yes
IP Psych < 21: Number of Users	N/A	776	N/A	897	N/A	964	N/A	15.59	7.47	15% (+/-)	Yes
IP Psych<21 :Avg Medicaid Pd per User	N/A	\$32,553	N/A	\$32,783	N/A	\$32,283	N/A	0.71	-1.53	15% (+/-)	Yes
ICF/MR: Total Medicaid Pd (TOS 05)	N/A	\$158,883,034	N/A	\$156,220,612	N/A	\$151,661,964	N/A	-1.68	-2.92	15% (+/-)	Yes
ICF/MR: Number of Users	N/A	2,030	N/A	1,958	N/A	1,831	N/A	-3.55	-6.49	15% (+/-)	Yes
ICF/MR: Avg Medicaid Pd per User	N/A	\$78,268	N/A	\$79,786	N/A	\$82,830	N/A	1.94	3.82	15% (+/-)	Yes
NF: Total Medicaid Paid (TOS 07)	N/A	\$374,686,313	N/A	\$406,594,844	N/A	\$422,725,329	N/A	8.52	3.97	15% (+/-)	Yes
NF Number of Users	N/A	17,268	N/A	17,086	N/A	17,037	N/A	-1.05	-0.29	15% (+/-)	Yes
NF:Avg Medicaid Pd per User	N/A	\$21,698	N/A	\$23,797	N/A	\$24,812	N/A	9.67	4.27	15% (+/-)	Yes
Physician: Total Medicaid Paid (TOS 08)	N/A	\$249,457,852	N/A	\$256,614,439	N/A	\$256,816,083	N/A	2.87	0.08	15% (+/-)	Yes
Physician: Number of Users	N/A	521,047	N/A	506,182	N/A	503,263	N/A	-2.85	-0.58	15% (+/-)	Yes
Physician: Avg Medicaid Pd per User	N/A	\$479	N/A	\$507	N/A	\$510	N/A	5.89	0.66	15% (+/-)	Yes
Dental: Total Medicaid Paid (TOS 09)	N/A	\$76,119,372	N/A	\$78,146,761	N/A	\$77,858,942	N/A	2.66	-0.37	15% (+/-)	Yes
Dental: Number of Users	N/A	221,705	N/A	222,364	N/A	223,574	N/A	0.30	0.54	15% (+/-)	Yes
Dental: Avg Medicaid Pd per User	N/A	\$343	N/A	\$351	N/A	\$348	N/A	2.36	-0.91	15% (+/-)	Yes
Other Practitioner: Total Medicaid Pd (TOS 10)	N/A	\$8,667,444	N/A	\$9,108,441	N/A	\$11,816,522	N/A	5.09	29.73	15% (+/-)	No
Other Practitioner: Number of Users	N/A	114,055	N/A	113,794	N/A	119,686	N/A	-0.23	5.18	15% (+/-)	Yes
Other Practitioner: Avg Medicaid Pd per User	N/A	\$76	N/A	\$80	N/A	\$99	N/A	5.33	23.35	15% (+/-)	No
OPD: Total Medicaid Paid (TOS 11)	N/A	\$71,693,656	N/A	\$66,506,124	N/A	\$65,611,216	N/A	-7.24	-1.35	15% (+/-)	Yes
OPD Number of Users	N/A	294,024	N/A	274,794	N/A	275,019	N/A	-6.54	0.08	15% (+/-)	Yes
OPD: Avg Medicaid Pd per User	N/A	\$244	N/A	\$242	N/A	\$239	N/A	-0.74	-1.43	15% (+/-)	Yes
Clinic: Total Medicaid Paid (TOS 12)	N/A	\$186,570,046	N/A	\$181,868,374	N/A	\$131,717,827	N/A	-2.52	-27.60	15% (+/-)	No
Clinic: Number of Users	N/A	308,634	N/A	302,553	N/A	290,763	N/A	-1.97	-3.90	15% (+/-)	Yes
Clinic: Avg Medicaid Pd per User	N/A	\$605	N/A	\$601	N/A	\$453	N/A	-0.56	-24.60	15% (+/-)	No
HH: Total Medicaid Paid (TOS 13)	N/A	\$9,424,180	N/A	\$4,221,253	N/A	\$4,183,248	N/A	-55.20	-0.90	15% (+/-)	Yes
HH: Number of Users	N/A	7,024	N/A	3,206	N/A	3,337	N/A	-54.40	4.09	15% (+/-)	Yes
HH: Avg Medicaid Pd per User	N/A	\$1,342	N/A	\$1,317	N/A	\$1,254	N/A	-1.87	-4.79	15% (+/-)	Yes
Lab/Xray: Total Medicaid Paid (TOS 15)	N/A	\$60,475,979	N/A	\$66,604,918	N/A	\$71,076,858	N/A	10.13	6.71	15% (+/-)	Yes
Lab/Xray: Number of Users	N/A	381,675	N/A	368,998	N/A	367,594	N/A	-3.32	-0.38	15% (+/-)	Yes
Lab/Xray:Avg Medicaid Pd per User	N/A	\$158	N/A	\$181	N/A	\$193	N/A	13.92	7.12	15% (+/-)	Yes
Drugs: Total Medicaid Paid (TOS 16)	N/A	\$544,794,459	N/A	\$614,195,594	N/A	\$667,430,707	N/A	12.74	8.67	15% (+/-)	Yes
Drugs: Number of Users	N/A	566,795	N/A	544,632	N/A	551,107	N/A	-3.91	1.19	15% (+/-)	Yes
Drugs: Avg Medicaid Pd per User	N/A	\$961	N/A	\$1,128	N/A	\$1,211	N/A	17.33	7.39	15% (+/-)	Yes
Other Services: Total Medicaid Paid (TOS 19)	N/A	\$46,044,958	N/A	\$26,763,939	N/A	\$18,911,044	N/A	-41.90	-29.30	15% (+/-)	No
Other Services: Number of Users	N/A	59,255	N/A	19,416	N/A	8,409	N/A	-67.20	-56.70	15% (+/-)	No
Other Services: Avg Medicaid Pd per User	N/A	\$777	N/A	\$1,378	N/A	\$2,249	N/A	77.39	63.15	15% (+/-)	No
Transportation: Total Medicaid Paid (TOS 26)	N/A	\$21,035,819	N/A	\$24,043,702	N/A	\$27,741,372	N/A	14.30	15.38	15% (+/-)	No
Transportation: Number of Users	N/A	52,679	N/A	53,221	N/A	55,219	N/A	1.03	3.75	15% (+/-)	Yes
Transportation: Avg Medicaid Pd per User	N/A	\$399	N/A	\$452	N/A	\$502	N/A	13.13	11.20	15% (+/-)	Yes
PCS: Total Medicaid Paid (TOS 30)	N/A	\$75,537,413	N/A	\$79,632,103	N/A	\$84,008,679	N/A	5.42	5.50	15% (+/-)	Yes
PCS: Number of Users	N/A	16,457	N/A	16,683	N/A	17,075	N/A	1.37	2.35	15% (+/-)	Yes
PCS: Avg Medicaid Pd per User	N/A	\$4,590	N/A	\$4,773	N/A	\$4,920	N/A	3.99	3.07	15% (+/-)	Yes
Target Case Management: Total Medicaid Pd (TOS 31)	N/A	\$70,652,563	N/A	\$72,852,138	N/A	\$64,641,014	N/A	3.11	-11.30	15% (+/-)	Yes
Target Case Management: Number of Users	N/A	48,550	N/A	51,979	N/A	42,464	N/A	7.06	-18.30	15% (+/-)	No
Target Case Management: Avg Medicaid Pd per User	N/A	\$1,455	N/A	\$1,402	N/A	\$1,522	N/A	-3.69	8.61	15% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
Rehab Services: Total Medicaid Pd (TOS 33)	N/A	\$15,797,583	N/A	\$12,051,150	N/A	\$8,708,023	N/A	-23.70	-27.70	15% (+/-)	No
Rehab Services: Number of Users	N/A	5,769	N/A	4,638	N/A	5,629	N/A	-19.60	21.37	15% (+/-)	No
Rehab Services: Avg Medicaid Pd per User	N/A	\$2,738	N/A	\$2,598	N/A	\$1,547	N/A	-5.11	-40.50	15% (+/-)	No
PT/OT/Speech/Hear: Total Medicaid Paid (TOS 34)	N/A	\$4,613,868	N/A	\$4,611,116	N/A	\$5,491,986	N/A	-0.06	19.10	15% (+/-)	No
PT/OT/Speech/Hear: Number of Users	N/A	6,630	N/A	7,001	N/A	7,222	N/A	5.60	3.16	15% (+/-)	Yes
PT/OT/Speech/Hear: Avg Medicaid Pd per User	N/A	\$696	N/A	\$659	N/A	\$760	N/A	-5.36	15.46	15% (+/-)	No
Hospice: Total Medicaid Paid (TOS 35)	N/A	\$4,135,654	N/A	\$5,113,448	N/A	\$16,535,326	N/A	23.64	223.40	15% (+/-)	No
Hospice: Number of Users	N/A	571	N/A	698	N/A	1,815	N/A	22.24	160.00	15% (+/-)	No
Hospice: Avg Medicaid Pd per User	N/A	\$7,243	N/A	\$7,326	N/A	\$9,110	N/A	1.15	24.36	15% (+/-)	No
DME: Total Medicaid Paid (TOS 51)	N/A	\$52,296,302	N/A	\$56,502,090	N/A	\$73,346,298	N/A	8.04	29.81	15% (+/-)	No
DME: Number of Users	N/A	105,112	N/A	145,957	N/A	154,446	N/A	38.86	5.82	15% (+/-)	Yes
DME: Avg Medicaid Pd per User	N/A	\$498	N/A	\$387	N/A	\$475	N/A	-22.20	22.68	15% (+/-)	No
Residential Care: Total Medicaid Paid (TOS 52)	N/A	\$103,592,454	N/A	\$1,702,224	N/A	\$1,890,147	N/A	-98.40	11.04	15% (+/-)	Yes
Residential Care: Number of Users	N/A	4,822	N/A	318	N/A	375	N/A	-93.40	17.92	15% (+/-)	No
Residential Care: Avg Medicaid Pd per User	N/A	\$21,483	N/A	\$5,353	N/A	\$5,040	N/A	-75.10	-5.84	15% (+/-)	Yes
Psych. Services: Total Medicaid Paid (TOS 53)	N/A	\$125,990,865	N/A	\$158,120,532	N/A	\$169,278,507	N/A	25.50	7.06	15% (+/-)	Yes
Psych. Services: Number of Users	N/A	89,936	N/A	101,560	N/A	101,577	N/A	12.92	0.02	15% (+/-)	Yes
Psych. Services: Avg Medicaid Pd per User	N/A	\$1,401	N/A	\$1,557	N/A	\$1,667	N/A	11.14	7.04	15% (+/-)	Yes
Adult Day Care: Total Medicaid Paid (TOS 54)	N/A	\$35,564,018	N/A	\$138,058,447	N/A	\$190,757,746	N/A	288.20	38.17	15% (+/-)	No
Adult Day Care: Number of Users	N/A	5,736	N/A	5,309	N/A	8,885	N/A	-7.44	67.36	15% (+/-)	No
Adult Day Care: Avg Medicaid Pd per User	N/A	\$6,200	N/A	\$26,005	N/A	\$21,470	N/A	319.40	-17.40	15% (+/-)	No
<b>AVG FFS MEDICAID AMT PD/FFS ENROLLEE BY SELECTED MAX TOS</b>											
Inpatient Hospital (TOS=01)	N/A	\$551	N/A	\$604	N/A	\$672	N/A	9.65	11.19	15% (+/-)	Yes
Aged	N/A	\$422	N/A	\$297	N/A	\$298	N/A	-29.70	0.57	15% (+/-)	Yes
Disabled	N/A	\$1,441	N/A	\$1,569	N/A	\$1,757	N/A	8.93	11.93	15% (+/-)	Yes
Child	N/A	\$268	N/A	\$293	N/A	\$323	N/A	9.61	10.18	15% (+/-)	Yes
Adult	N/A	\$716	N/A	\$767	N/A	\$810	N/A	7.07	5.53	15% (+/-)	Yes
ILTC (TOS=02,04,05,07)	N/A	\$715	N/A	\$779	N/A	\$807	N/A	9.00	3.54	15% (+/-)	Yes
Aged	N/A	\$4,495	N/A	\$5,078	N/A	\$5,381	N/A	12.98	5.96	15% (+/-)	Yes
Disabled	N/A	\$1,571	N/A	\$1,524	N/A	\$1,513	N/A	-3.03	-0.71	15% (+/-)	Yes
Child	N/A	\$39	N/A	\$48	N/A	\$51	N/A	21.79	6.01	15% (+/-)	Yes
Adult	N/A	\$2	N/A	\$1	N/A	\$0	N/A	-57.20	-40.50	15% (+/-)	No
Drugs (TOS=16)	N/A	\$680	N/A	\$790	N/A	\$871	N/A	16.09	10.31	15% (+/-)	Yes
Aged	N/A	\$1,744	N/A	\$1,973	N/A	\$2,150	N/A	13.12	8.98	15% (+/-)	Yes
Disabled	N/A	\$2,055	N/A	\$2,293	N/A	\$2,503	N/A	11.55	9.20	15% (+/-)	Yes
Child	N/A	\$204	N/A	\$230	N/A	\$243	N/A	12.43	5.73	15% (+/-)	Yes
Adult	N/A	\$361	N/A	\$392	N/A	\$427	N/A	8.58	8.89	15% (+/-)	Yes
All Other Services	N/A	\$1,537	N/A	\$1,617	N/A	\$1,690	N/A	5.20	4.51	15% (+/-)	Yes
Aged	N/A	\$1,417	N/A	\$1,366	N/A	\$1,474	N/A	-3.57	7.92	15% (+/-)	Yes
Disabled	N/A	\$4,234	N/A	\$4,128	N/A	\$4,177	N/A	-2.50	1.18	15% (+/-)	Yes
Child	N/A	\$892	N/A	\$958	N/A	\$998	N/A	7.49	4.12	15% (+/-)	Yes
Adult	N/A	\$1,209	N/A	\$1,283	N/A	\$1,325	N/A	6.11	3.29	15% (+/-)	Yes
<b>% OF FFS ENROLLEES WITH CLAIMS BY SELECTED MAX TYPE OF SERVICE</b>											
% FFS Enrollees with IP Claims (TOS=01)	N/A	13.53	N/A	12.77	N/A	12.85	N/A	-5.63	0.65	15% (+/-)	Yes
Aged	N/A	18.74	N/A	10.97	N/A	10.15	N/A	-41.50	-7.48	15% (+/-)	Yes
Disabled	N/A	17.89	N/A	13.89	N/A	13.69	N/A	-22.30	-1.49	15% (+/-)	Yes
Child	N/A	8.75	N/A	9.40	N/A	9.72	N/A	7.46	3.44	15% (+/-)	Yes
Adult	N/A	21.87	N/A	22.96	N/A	23.20	N/A	4.99	1.06	15% (+/-)	Yes
% FFS Enrollees with ILTC Claims (TOS=02,04,05,07)	N/A	2.54	N/A	2.60	N/A	2.62	N/A	2.29	0.81	15% (+/-)	Yes
Aged	N/A	20.00	N/A	20.80	N/A	21.39	N/A	3.99	2.83	15% (+/-)	Yes
Disabled	N/A	3.18	N/A	3.03	N/A	2.98	N/A	-4.75	-1.81	15% (+/-)	Yes
Child	N/A	0.12	N/A	0.14	N/A	0.15	N/A	22.78	6.48	15% (+/-)	Yes
Adult	N/A	0.02	N/A	0.01	N/A	0.01	N/A	-24.20	-38.90	15% (+/-)	No
% FFS Enrollees with Drug Claims (TOS=16)	N/A	70.78	N/A	70.03	N/A	71.94	N/A	-1.05	2.72	15% (+/-)	Yes
Aged	N/A	82.17	N/A	81.62	N/A	84.36	N/A	-0.67	3.37	15% (+/-)	Yes
Disabled	N/A	82.27	N/A	81.37	N/A	81.85	N/A	-1.09	0.58	15% (+/-)	Yes
Child	N/A	64.66	N/A	63.09	N/A	65.21	N/A	-2.43	3.37	15% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
Adult	N/A	73.51	N/A	73.97	N/A	75.87	N/A	0.61	2.58	15% (+/-)	Yes
% FFS Enrollees with All Other Claims	N/A	84.31	N/A	84.85	N/A	85.66	N/A	0.65	0.95	15% (+/-)	Yes
Aged	N/A	84.03	N/A	82.46	N/A	82.18	N/A	-1.87	-0.34	15% (+/-)	Yes
Disabled	N/A	88.26	N/A	87.54	N/A	86.74	N/A	-0.82	-0.92	15% (+/-)	Yes
Child	N/A	83.67	N/A	84.91	N/A	86.39	N/A	1.49	1.74	15% (+/-)	Yes
Adult	N/A	82.89	N/A	83.29	N/A	84.08	N/A	0.48	0.96	15% (+/-)	Yes
Avg # IP Days per FFS User	N/A	6	N/A	6	N/A	6	N/A	7.43	5.86	15% (+/-)	Yes
Aged	N/A	8	N/A	11	N/A	12	N/A	44.30	10.07	15% (+/-)	Yes
Disabled	N/A	10	N/A	13	N/A	14	N/A	26.74	9.16	15% (+/-)	Yes
Child	N/A	4	N/A	4	N/A	4	N/A	-1.18	2.90	15% (+/-)	Yes
Adult	N/A	4	N/A	4	N/A	4	N/A	-2.31	1.25	15% (+/-)	Yes
Avg # ILTC Days per FFS User	N/A	252	N/A	253	N/A	246	N/A	0.58	-2.86	15% (+/-)	Yes
Aged	N/A	249	N/A	251	N/A	243	N/A	1.01	-3.38	15% (+/-)	Yes
Disabled	N/A	283	N/A	283	N/A	280	N/A	-0.02	-1.34	15% (+/-)	Yes
Child	N/A	111	N/A	109	N/A	108	N/A	-1.20	-1.02	15% (+/-)	Yes
Adult	N/A	30	N/A	16	N/A	19	N/A	-46.40	20.26	15% (+/-)	No
<b>FFS EXPENDITURES AND USERS BY MAX PGM TYPE</b>											
FP: Total Medicaid Paid (Program Type 2)	N/A	\$178,162,413	N/A	\$184,679,496	N/A	\$184,763,358	N/A	3.66	0.05	15% (+/-)	Yes
FP: Number of Users	N/A	105,241	N/A	102,336	N/A	88,543	N/A	-2.76	-13.50	15% (+/-)	Yes
FP: Average Medicaid Pd per User	N/A	\$1,693	N/A	\$1,805	N/A	\$2,087	N/A	6.60	15.63	15% (+/-)	No
RHC: Total Medicaid Paid (Program Type 3)	N/A	\$15,478,385	N/A	\$14,905,116	N/A	\$18,165,326	N/A	-3.70	21.87	15% (+/-)	No
RHC: Number of Users	N/A	77,671	N/A	73,285	N/A	88,020	N/A	-5.65	20.11	15% (+/-)	No
RHC: Avg Medicaid Pd per User	N/A	\$199	N/A	\$203	N/A	\$206	N/A	2.06	1.47	15% (+/-)	Yes
FQHC: Total Medicaid Paid (Program Type 4)	N/A	\$19,047,051	N/A	\$20,139,790	N/A	\$20,786,346	N/A	5.74	3.21	15% (+/-)	Yes
FQHC: Number of Users	N/A	69,290	N/A	68,422	N/A	70,050	N/A	-1.25	2.38	15% (+/-)	Yes
FQHC: Avg Medicaid Pd per User	N/A	\$275	N/A	\$294	N/A	\$297	N/A	7.08	0.81	15% (+/-)	Yes
IHS: Total Medicaid Pd (Program Type 5)	N/A	\$31,717	N/A	\$25,933	N/A	\$14,146	N/A	-18.20	-45.50	15% (+/-)	No
IHS: Number of Users	N/A	101	N/A	83	N/A	39	N/A	-17.80	-53.00	15% (+/-)	No
IHS: Avg Medicaid Pd per User	N/A	\$314	N/A	\$312	N/A	\$363	N/A	-0.50	16.09	15% (+/-)	No
Section 1915(c) Waiver: Total Medicaid Paid (Program Types 6 and 7)	N/A	\$102,827,513	N/A	\$107,652,052	N/A	\$113,623,660	N/A	4.69	5.55	15% (+/-)	Yes
Section 1915(c) Waiver: Number of Users	N/A	19,658	N/A	19,717	N/A	19,635	N/A	0.30	-0.42	15% (+/-)	Yes
Section 1915(c) Waiver: Avg Medicaid Pd per User	N/A	\$5,231	N/A	\$5,460	N/A	\$5,787	N/A	4.38	5.99	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	\$414,769,078	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	99,842	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	\$4,154	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$2,616	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$4,878	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$2,995	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$971	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	13.03	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	43.48	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	47.79	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	0.17	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	0.22	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	\$294,299,392	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	26,416	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	\$11,141	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$6,001	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$14,709	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$2,995	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$971	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	3.45	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	13.22	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	11.26	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	0.17	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	0.22	N/A	N/A	N/A	15% (+/-)	No

2003-2005 MAX PSF VALIDATION TABLE  
STATE: SC

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	\$107,707,031	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	19,148	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	\$5,625	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$5,367	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$5,824	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$11,515	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$1,442	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	2.50	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	12.13	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	7.36	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	0.01	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	0.02	N/A	N/A	N/A	15% (+/-)	No