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2003-2005 MAX IP VALIDATION TABLE  
STATE: SD

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Change Within Expected Range
<b>All IP Claims</b>										
Total Number of Claims	N/A	20,688	N/A	18,695	N/A	19,503	N/A	-9.63	4.32	Yes
% Encounter Claims	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% Supplemental Claims	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	N/A
Total FFS Claims	N/A	20,688	N/A	18,695	N/A	19,503	N/A	-9.63	4.32	Yes
% Crossover	5-20	20.94	No	11.35	Yes	13.17	Yes	-45.80	16.05	No
% Adjusted Claims	N/A	3.46	N/A	2.81	N/A	12.40	N/A	-18.70	340.70	No
% Standard Adjustments	> 1%	93.44	Yes	96.39	Yes	87.39	Yes	3.16	-9.34	Yes
Aver. Amt. Pd Adjust. ( include \$0)	N/A	\$9,814	N/A	\$9,309	N/A	\$3,553	N/A	-5.14	-61.80	No
Total number of claims with missing Medicaid eligibility (excludes S-SCHIP only)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	N/A
<b>FFS Non-Crossover Claims (Type of Claim=1, Crossover Claim Indicator=0)</b>										
Total Number of Claims	N/A	16,355	N/A	16,573	N/A	16,934	N/A	1.33	2.18	Yes
% Claims with> \$0 Paid	95-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with< \$0 Paid	0	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	N/A
Aver. Medicaid Amount Paid (claims with >\$0 paid)	\$2000 - \$7000	\$4,842	Yes	\$4,821	Yes	\$4,872	Yes	-0.45	1.07	Yes
Aver. Medicaid Amt Paid per Covered Day (>\$0 paid and >0 days claims)	N/A	\$1,235	N/A	\$1,220	N/A	\$1,239	N/A	-1.14	1.51	Yes
% Claims with TPL	>0 - 10	1.49	Yes	1.16	Yes	0.87	Yes	-22.00	-25.10	No
Aver. TPL Paid for claims with TPL	N/A	\$1,770	N/A	\$1,711	N/A	\$3,260	N/A	-3.30	90.49	No
% Claims with UB-92 Accommodation Codes	95-100	100.00	Yes	99.99	Yes	100.00	Yes	-0.01	0.01	Yes
Average # UB-92 Accom. Codes (at least 1 accom code)	>1	1.10	Yes	1.11	Yes	1.11	Yes	0.67	0.14	Yes
% Claims with UB-92 Ancillary Codes	95-100	90.38	No	90.91	No	90.45	No	0.59	-0.50	Yes
Average # UB-92 Ancillary Codes (at least 1 Ancillary code)	>3	9.04	Yes	8.90	Yes	9.04	Yes	-1.56	1.66	Yes
Average LOS	2-<8	3.92	Yes	3.95	Yes	3.94	Yes	0.72	-0.38	Yes
Average Covered Days (> 0 day)	2-<8	3.92	Yes	3.95	Yes	3.93	Yes	0.71	-0.44	Yes
% Begin Date = Admit Date	95-100	99.39	Yes	99.31	Yes	99.49	Yes	-0.09	0.18	Yes
% IP Claims (MAX TOS 01)	95-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Family Planning Claims (pgm type=2)	>0-5	0.33	Yes	0.33	Yes	0.33	Yes	-1.32	1.49	Yes
% 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	3.93	Yes	3.92	Yes	4.10	Yes	-0.29	4.69	Yes
% Claims with PDX, where length=3	5-30	9.11	Yes	8.04	Yes	7.92	Yes	-11.80	-1.40	Yes
% Claims with PDX, where length=4	15-75	20.19	Yes	19.12	Yes	18.25	Yes	-5.32	-4.51	Yes
% Claims with PDX, where length=5	25-70	70.70	No	72.85	No	73.82	No	3.04	1.34	Yes
% Claims with a procedure code	35-70	53.93	Yes	54.96	Yes	53.14	Yes	1.91	-3.32	Yes
Average Number of Procedures for claims with at least 1 procedure code	>1	2.18	Yes	2.12	Yes	2.14	Yes	-2.58	0.78	Yes
% Claims with Procedures that have CPT-4 Indicator	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% Claims with Procedures that have ICD-9 Indicator	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
% Claims with Procedures that have CPT-4 Indicator & CPT-4 format of 5n	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A

2003-2005 MAX IP VALIDATION TABLE  
STATE: SD

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Change Within Expected Range
% Claims with Procedures that have ICD-9-CM Indicator & ICD-9-CM Format 3n or 4n	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
% Claims with DRG	>=90	79.27	No	78.75	No	78.26	No	-0.65	-0.63	Yes
% Claims Maternal Delivery Indicator	N/A	23.77	N/A	24.92	N/A	25.30	N/A	4.85	1.52	Yes
% Claims Newborn Delivery Indicator (only for separate infant delivery claims using mother's ID)	N/A	24.84	N/A	26.34	N/A	26.56	N/A	6.02	0.83	Yes
<b>Patient Status</b>										
% Home	75-90	89.21	Yes	88.30	Yes	89.55	Yes	-1.02	1.42	Yes
% Transferred	1-10	9.80	Yes	10.61	No	9.66	Yes	8.23	-8.98	Yes
% Still a Patient	>0 - 2	0.31	Yes	0.39	Yes	0.19	Yes	28.29	-50.30	No
% Died	>0 - 3	0.65	Yes	0.69	Yes	0.57	Yes	5.14	-16.70	No
<b>FFS Crossover Claims (Type of Claim=1, Crossover Claim Indicator=1)</b>										
Total Number of Claims	N/A	4,333	N/A	2,122	N/A	2,569	N/A	-51.00	21.07	No
% Claims with> \$0 Paid	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
% Claims with< \$0 Paid	0	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	N/A
Aver. Medicaid Amount Paid (claims with >\$0 paid)	N/A	\$711	N/A	\$854	N/A	\$856	N/A	20.12	0.15	Yes
% Claims with TPL	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
Aver. TPL Paid -claims with TPL	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 UB-92 Accommodation Codes	95-100	0.00	No	0.05	No	0.08	No	Div by 0	65.20	No
Average # UB-92 Accom. Codes (at least 1 accom code)	>1	Div by 0	Yes	1.00	No	1.00	No	Div by 0	0.00	Yes
% Claims with UB-92 Ancillary Codes	95-100	0.00	No	0.05	No	0.08	No	Div by 0	65.20	No
Average # UB-92 Ancillary Codes (at least 1 Ancillary code)	>3	Div by 0	Yes	21.00	Yes	6.50	Yes	Div by 0	-69.00	No
Average LOS	2-<8	4.57	Yes	4.41	Yes	5.21	Yes	-3.57	18.33	No
% Begin Date = Admit Date	95-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	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	0.00	No	0.05	No	0.08	No	Div by 0	65.20	No
Average Number of DX Codes (at least 1 DX)	>=2	Div by 0	Yes	9.00	Yes	4.00	Yes	Div by 0	-55.60	No
% Claims with PDX, where length=3	5-30	Div by 0	No	0.00	No	0.00	No	Div by 0	Div by 0	N/A
% Claims with PDX, where length=4	15-75	Div by 0	No	0.00	No	0.00	No	Div by 0	Div by 0	N/A
% Claims with PDX, where length=5	25-70	Div by 0	No	100.00	No	100.00	No	Div by 0	0.00	Yes
% Claims with a procedure code	35-70	0.00	No	0.00	No	0.00	No	Div by 0	Div by 0	N/A
Average Number of Procedures for claims with at least 1 procedure code	>1	Div by 0	Yes	Div by 0	Yes	Div by 0	Yes	Div by 0	Div by 0	N/A
% Claims with Procedures that have CPT-4 Indicator	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 Indicator	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 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	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A
% Claims with DRG	>=90	0.00	No	0.00	No	0.00	No	Div by 0	Div by 0	N/A

2003-2005 MAX LT VALIDATION TABLE  
STATE: SD

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	59,509	N/A	54,564	N/A	54,319	N/A	-8.31	-0.45	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	59,509	N/A	54,564	N/A	54,319	N/A	-8.31	-0.45	Yes
% Crossover	5-20	1.91	No	1.80	No	2.28	No	-5.89	26.74	No
% Adjusted Claims	> 1%	5.00	Yes	1.41	Yes	1.26	Yes	-71.70	-10.60	Yes
% Standard Adjustments	N/A	95.19	N/A	83.68	N/A	91.12	N/A	-12.10	8.89	Yes
Aver. Amt. Pd Adjust. ( include \$0)	N/A	\$2,698	N/A	\$2,898	N/A	\$2,545	N/A	7.41	-12.20	Yes
Total number of claims with missing Medicaid eligibility (excludes S-SCHIP only)	N/A	N/A	N/A	N/A	N/A	0	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	58,371	N/A	53,582	N/A	53,080	N/A	-8.20	-0.94	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	\$79	Yes	\$84	Yes	\$88	Yes	5.61	5.25	Yes
ICF/MR (TOS 05)	N/A	\$273	N/A	\$315	N/A	\$337	N/A	15.20	7.01	Yes
Aged/MH (TOS 02)	N/A	\$264	N/A	\$281	N/A	\$334	N/A	6.36	18.88	No
IP Psych. < 21 (TOS 04)	N/A	\$266	N/A	\$268	N/A	\$309	N/A	0.82	15.49	No
% NF (TOS 07)	75-99	91.10	Yes	90.63	Yes	90.67	Yes	-0.52	0.05	Yes
% NF claims with NF Covered Days	N/A	100.00	N/A	99.99	N/A	100.00	N/A	-0.01	0.01	Yes
Avg days for NF claims with Covered Days	N/A	27	N/A	29	N/A	29	N/A	7.08	-0.27	Yes
% ICF/MR (TOS 05)	>0-20	3.84	Yes	3.82	Yes	3.78	Yes	-0.63	-0.88	Yes
% ICF/MR claims with ICF/MR Covered Days	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
Avg days for ICF/MR claims with Covered Days	N/A	28	N/A	30	N/A	29	N/A	7.18	-0.69	Yes
% Aged/MH (TOS 02)	>0-10	0.62	Yes	0.59	Yes	0.63	Yes	-4.91	7.65	Yes
% Aged/MH claims with Aged/MH Covered Days	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
Avg days for Aged/MH claims with Covered Days	N/A	28	N/A	28	N/A	28	N/A	1.56	0.47	Yes
% IP Psych. < 21 (TOS 04)	>0-5	4.44	Yes	4.97	Yes	4.91	Yes	11.88	-1.10	Yes
% IP Psych. < 21 claims with IP Psych Covered Days	N/A	32.56	N/A	28.14	N/A	28.53	N/A	-13.60	1.39	Yes
Avg days for IP Psych. < 21 claims with Covered Days	N/A	29	N/A	29	N/A	29	N/A	-0.40	0.86	Yes
% Claims with Leave Days	1-20	2.92	Yes	1.41	Yes	1.67	Yes	-51.70	18.86	No
% Claims with DX	95-100	0.69	No	0.85	No	0.89	No	22.99	4.50	Yes
% Claims with DX, where length=3	5-30	19.85	Yes	35.16	No	30.79	No	77.14	-12.50	Yes
% Claims with DX, where length=4	15-75	30.02	Yes	22.64	Yes	21.02	Yes	-24.60	-7.15	Yes
% Claims with DX, where length=5	25-70	50.12	Yes	42.20	Yes	48.20	Yes	-15.80	14.21	Yes
<b>Patient Status</b>										
% Home	1-5	0.42	No	0.66	No	0.83	No	56.76	24.90	No
% Still a Patient	8-98	94.43	Yes	97.31	Yes	96.99	Yes	3.05	-0.33	Yes
% Died	>0-5	1.03	Yes	1.21	Yes	1.34	Yes	17.83	10.28	Yes
<b>FFS Crossover Claims (Type of Claim=1, Crossover Claim Indicator=1)</b>										
Total Number of Claims	N/A	1,138	N/A	982	N/A	1,239	N/A	-13.70	26.17	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: SD

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Change Within Expected Range
Aver. Medicaid Amount Paid (claims with >\$0 paid)	N/A	\$1,308	N/A	\$1,346	N/A	\$1,449	N/A	2.88	7.67	Yes
% NF (TOS 07)	75-99	99.74	No	99.19	No	99.52	No	-0.55	0.33	Yes
% ICF/MR (TOS 05)	>0-20	0.00	No	0.00	No	0.00	No	Div by 0	Div by 0	N/A
% Aged/MH (TOS 02)	>0-10	0.26	Yes	0.81	Yes	0.24	Yes	209.00	-70.30	No
% IP Psych. < 21 (TOS 04)	>0-5	0.00	No	0.00	No	0.24	Yes	Div by 0	Div by 0	N/A
% Claims with DX	95-100	0.00	No	0.00	No	0.00	No	Div by 0	Div by 0	N/A
% Claims with DX, where length=3	5-30	Div by 0	No	Div by 0	No	Div by 0	No	Div by 0	Div by 0	N/A
% Claims with DX, where length=4	15-75	Div by 0	No	Div by 0	No	Div by 0	No	Div by 0	Div by 0	N/A
% Claims with DX, where length=5	25-70	Div by 0	No	Div by 0	No	Div by 0	No	Div by 0	Div by 0	N/A
Patient Status										
% Home	1-5	3.16	Yes	8.55	No	10.65	No	170.40	24.55	No
% Still a Patient	8-98	33.39	Yes	75.15	Yes	74.58	Yes	125.10	-0.77	Yes
% Died	>0-5	1.14	Yes	2.14	Yes	1.94	Yes	87.20	-9.42	Yes

2003-2005 MAX OT VALIDATION TABLE  
STATE: SD

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Change Within Expected Range
<b>All OT Claims</b>										
Total Number of Claims	N/A	3,555,855	N/A	3,584,911	N/A	3,745,812	N/A	0.82	4.49	Yes
% Encounter Claims (Claim Type=3)	N/A	3.88	N/A	1.83	N/A	1.79	N/A	-52.80	-2.54	Yes
% Supplemental Claims	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% Cap Claims (Claim Type=2, and MAX TOS 20,21,22)	N/A	46.24	N/A	47.10	N/A	46.30	N/A	1.85	-1.70	Yes
Total FFS Claims Excluding Capitation Payments	N/A	1,773,556	N/A	1,830,804	N/A	1,944,688	N/A	3.23	6.22	Yes
% Crossover	5-20	18.48	Yes	18.39	Yes	19.18	Yes	-0.51	4.34	Yes
% Adjusted Claims	> 1%	0.48	No	0.74	No	0.86	No	54.75	15.77	No
% Standard Adjustments	N/A	75.96	N/A	85.48	N/A	87.82	N/A	12.53	2.74	Yes
Aver. Amt. Pd Adjust. ( include \$0)	N/A	\$435	N/A	\$425	N/A	\$392	N/A	-2.27	-7.64	Yes
% Claims(TOC 1,2) TOS 20: HMO Cap Payment	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% Claims(TOC 1,2) TOS 21: PHP Cap Payments	N/A	33.52	N/A	33.51	N/A	32.91	N/A	-0.02	-1.78	Yes
% Claims(TOC 1,2) TOS 22: PCCM Cap Pay.	N/A	14.59	N/A	14.47	N/A	14.23	N/A	-0.87	-1.66	Yes
Average Paid per HMO Cap Clms (TOS 20)	\$75-\$300	Div by 0	No	Div by 0	No	Div by 0	No	Div by 0	Div by 0	N/A
Average Paid per PHP Cap Clms (TOS 21)	\$20-\$250	\$6	No	\$6	No	\$6	No	0.09	0.03	Yes
Average Paid per PCCM Cap Clms (TOS 22)	3-5	\$3	Yes	\$3	Yes	\$3	Yes	0.00	0.00	Yes
Total number of claims with missing Medicaid eligibility (excludes S-SCHIP only)	N/A	N/A	N/A	N/A	N/A	306	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	1,445,791	N/A	1,494,183	N/A	1,571,624	N/A	3.35	5.18	Yes
% Claims with> \$0 Paid	>95%	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with< \$0 Paid	0	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	N/A
% Claims with Span Bill	N/A	8.38	N/A	8.50	N/A	7.79	N/A	1.44	-8.28	Yes
% OPD Claims with Span Bill/ All OPD Claims(TOS 11)	N/A	9.70	N/A	11.90	N/A	12.33	N/A	22.67	3.56	Yes
% HH Claims with Span Bill/All HH Claims (TOS 13)	N/A	41.53	N/A	35.10	N/A	38.99	N/A	-15.50	11.10	Yes
% Other Claims with Span Bills/All Other Claims	N/A	8.24	N/A	8.30	N/A	7.53	N/A	0.71	-9.19	Yes
% Claims W/ Service Place 11- Office	50-90	47.18	No	47.83	No	47.47	No	1.39	-0.76	Yes
% Claims W/ Service Place 12 - Home	>0-5	2.59	Yes	2.65	Yes	2.97	Yes	2.33	12.02	Yes
% Claims W/ Service Place 21 - Hospital	>0-5	7.24	No	7.39	No	7.33	No	2.06	-0.81	Yes
% Claims W/ Service Place 32 - NF	>0-5	0.09	Yes	0.11	Yes	0.17	Yes	24.12	60.46	No
% Claims W/ Service Place 23 - ER	1-10	3.02	Yes	3.04	Yes	3.20	Yes	0.95	5.05	Yes
% Claims w/ Service Place 22 - OPD	>0-10	18.80	No	18.04	No	17.60	No	-4.05	-2.44	Yes
% Claims W/ Service Place 99 - Unknown/Other	<5	10.00	No	9.63	No	9.12	No	-3.75	-5.32	Yes
% Claims with TPL	>0 - 15	1.11	Yes	1.09	Yes	1.07	Yes	-2.04	-1.82	Yes
Aver. TPL Paid -claims with TPL	N/A	\$67	N/A	\$69	N/A	\$65	N/A	3.59	-6.56	Yes
<b>PERCENT CLAIMS/MAX TOS</b>										
% claims MAX TOS 08: Physicians	10-35	27.82	Yes	27.88	Yes	27.11	Yes	0.22	-2.74	Yes
% claims MAX TOS 09: Dental	2-20	0.01	No	0.01	No	0.01	No	3.67	33.10	No
% claims MAX TOS 10: Other Practioner	0.5-8	7.78	Yes	7.21	Yes	7.18	Yes	-7.41	-0.41	Yes
% claims MAX TOS 11: OPD	3-25	5.27	Yes	3.96	Yes	4.05	Yes	-24.90	2.30	Yes
% claims MAX TOS 12: Clinic	2-25	11.75	Yes	11.24	Yes	10.74	Yes	-4.27	-4.47	Yes
% claims MAX TOS 13: HH	>0-25	0.19	Yes	0.22	Yes	0.21	Yes	17.77	-4.49	Yes
% claims MAX TOS 15: Lab/Xray	4-20	21.98	No	23.17	No	23.05	No	5.43	-0.54	Yes
% claims MAX TOS 16: Drugs	<3	2.41	Yes	1.75	Yes	1.84	Yes	-27.00	5.10	Yes
% claims MAX TOS 19: Other Services	<25	2.75	Yes	2.29	Yes	2.22	Yes	-16.70	-3.13	Yes

2003-2005 MAX OT VALIDATION TABLE  
STATE: SD

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Change Within Expected Range
% claims MAX TOS 51: DME	>3	3.41	Yes	4.63	Yes	4.47	Yes	35.86	-3.52	Yes
% claims MAX TOS 26: Transportation	>1	3.76	Yes	3.87	Yes	3.93	Yes	2.96	1.50	Yes
% claims MAX TOS 24: Sterilizations	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 25: Abortions	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 30: PCS	>0	2.11	Yes	2.10	Yes	1.98	Yes	-0.45	-5.78	Yes
% claims MAX TOS 31: TCM	>0	0.00	No	0.00	No	0.00	No	Div by 0	Div by 0	N/A
% claims MAX TOS 33: Rehabilitation	>0	0.82	Yes	0.20	Yes	0.14	Yes	-76.00	-28.40	No
% claims MAX TOS 34: PT/OT/hear/speech	>1	2.66	Yes	3.25	Yes	3.06	Yes	22.50	-5.87	Yes
% claims MAX TOS 35: Hospice	>0	0.02	Yes	0.02	Yes	0.05	Yes	42.57	96.73	No
% claims MAX TOS 36: Nurse Midwife	N/A	0.12	N/A	0.17	N/A	0.13	N/A	42.40	-24.00	No
% claims MAX TOS 37: Nurse Practitioner	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 38: Private Nursing	N/A	0.00	N/A	0.00	N/A	0.00	N/A	-3.24	38.65	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	0.00	N/A	0.63	N/A	0.62	N/A	91,378.00	-2.52	Yes
% claims MAX TOS 53: Psych. Services	>1	6.91	Yes	7.07	Yes	8.83	Yes	2.33	24.86	No
% claims MAX TOS 54: Adult Day Care	>0	0.00	Yes	0.00	Yes	0.00	Yes	1.37	-13.60	Yes
% claims MAX TOS 99: Unknown	<1	0.26	Yes	0.32	Yes	0.39	Yes	23.26	21.68	No
Average Medicaid Amount Paid For Selected MAX TOS (excluding claims with <=\$0 paid)										
Total	N/A	\$152	N/A	\$159	N/A	\$163	N/A	4.65	2.50	Yes
08: Physicians	\$20-90	\$62	Yes	\$65	Yes	\$69	Yes	4.45	5.43	Yes
09: Dental	\$10-60	\$253	No	\$152	No	\$211	No	-39.90	38.95	No
10: Other Practioner	\$10-100	\$38	Yes	\$35	Yes	\$35	Yes	-8.52	1.30	Yes
11: OPD	\$20-100	\$319	No	\$399	No	\$409	No	25.03	2.60	Yes
12: Clinic	\$20-100	\$178	No	\$186	No	\$194	No	4.21	4.48	Yes
13: HH	N/A	\$284	N/A	\$284	N/A	\$341	N/A	0.28	19.90	No
15: Lab/Xray	10-60	\$35	Yes	\$42	Yes	\$44	Yes	19.77	3.87	Yes
16: Drugs	10-60	\$19	Yes	\$25	Yes	\$25	Yes	33.00	0.95	Yes
19: Other Services	N/A	\$1,636	N/A	\$2,057	N/A	\$2,151	N/A	25.76	4.54	Yes
51: DME	N/A	\$127	N/A	\$125	N/A	\$131	N/A	-1.52	5.28	Yes
26: Transportation	N/A	\$71	N/A	\$66	N/A	\$65	N/A	-6.90	-2.61	Yes
30: PCS	N/A	\$226	N/A	\$264	N/A	\$301	N/A	16.51	14.17	Yes
31: Targeted Case Management	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
33: Rehabilitation	N/A	\$1,912	N/A	\$805	N/A	\$594	N/A	-57.90	-26.20	No
34: PT/OT/speech/hear	N/A	\$69	N/A	\$63	N/A	\$69	N/A	-7.65	9.67	Yes
35: Hospice	N/A	\$2,107	N/A	\$2,074	N/A	\$2,188	N/A	-1.60	5.51	Yes
52: Residential Care	N/A	\$33	N/A	\$2,347	N/A	\$2,541	N/A	6,928.00	8.26	Yes
53: Psych. Services	N/A	\$155	N/A	\$154	N/A	\$129	N/A	-0.76	-16.20	No
54: Adult Day Care	N/A	\$417	N/A	\$459	N/A	\$442	N/A	10.15	-3.80	Yes
PERCENT OF CLAIMS BY PROGRAM TYPE (claim type 1)										
% Family Planning (code 2)	N/A	0.27	N/A	0.27	N/A	0.25	N/A	1.91	-7.65	Yes
% RHC (code 3)	N/A	1.84	N/A	1.79	N/A	1.77	N/A	-2.50	-1.61	Yes
% FQHC (code 4)	N/A	2.13	N/A	2.30	N/A	2.28	N/A	8.03	-0.96	Yes
% IHS (code 5)	N/A	9.28	N/A	8.52	N/A	8.07	N/A	-8.20	-5.28	Yes
% Waiver (code 6,7)	N/A	1.72	N/A	1.67	N/A	1.62	N/A	-2.88	-2.91	Yes
AVERAGE EXPENDITURES BY PROGRAM										
Family Planning (code 2)	N/A	\$136	N/A	\$130	N/A	\$113	N/A	-4.39	-13.20	Yes

2003-2005 MAX OT VALIDATION TABLE  
STATE: SD

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	\$86	N/A	\$90	N/A	\$91	N/A	3.80	1.69	Yes
FQHC (code 4)	N/A	\$116	N/A	\$121	N/A	\$124	N/A	3.74	2.63	Yes
IHS (code 5)	N/A	\$201	N/A	\$212	N/A	\$221	N/A	5.40	4.21	Yes
Waiver (code 6, 7)	N/A	\$2,573	N/A	\$2,796	N/A	\$2,919	N/A	8.68	4.39	Yes
% Claims with DX	> 60	88.42	Yes	88.04	Yes	88.34	Yes	-0.43	0.33	Yes
% Claims with DX (MAX TOS 8, 11, 12)	85-100	99.95	Yes	99.95	Yes	99.95	Yes	-0.01	0.00	Yes
% Claims with 1 DX that have 2 DX	N/A	39.89	N/A	34.74	N/A	37.69	N/A	-12.90	8.49	Yes
% Claims with DX, where length=3	5-25	7.14	Yes	6.69	Yes	6.50	Yes	-6.29	-2.88	Yes
% Claims with DX, where length=4	40-70	54.67	Yes	53.47	Yes	51.72	Yes	-2.20	-3.28	Yes
% Claims with DX, where length=5	20-55	38.18	Yes	39.83	Yes	41.78	Yes	4.32	4.89	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	87.42	No	86.86	No	87.21	No	-0.64	0.41	Yes
% CPT-4 Service Code Indicator (code 01)/Claims with Service Codes	N/A	75.01	N/A	76.71	N/A	76.71	N/A	2.27	0.00	Yes
% HCPCS (II & III) Service Codes Indicator (code 06)/Claims with Service Codes	N/A	14.88	N/A	14.97	N/A	17.80	N/A	0.65	18.88	No
% Other National Code Indicator (codes 2-5, 7- 9)/ Claims with Service Codes	N/A	0.80	N/A	0.52	N/A	0.20	N/A	-34.60	-62.00	No
% State Specific Serv. Indicator (10-87)/Claims with Service Codes	N/A	9.31	N/A	7.79	N/A	5.29	N/A	-16.30	-32.10	No
% CPT-4 Format Codes- 5n/Claims with CPT-4	98-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% HCPCS Format Codes Cnnnn or Cnnn /Claims with HCPCS	98-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with TOS 08 with Physician Specialty	N/A	55.55	N/A	56.94	N/A	57.22	N/A	2.50	0.49	Yes
PERCENT OF CLAIMS BY CLTC CODE										
CLTC 00: not a CLTC claim	N/A	N/A	N/A	N/A	N/A	90.82	N/A	N/A	N/A	N/A
CLTC Non-Waiver Claims (11-20)	N/A	N/A	N/A	N/A	N/A	7.56	N/A	N/A	N/A	N/A
CLTC 11: Non-Waiver Personal Care	N/A	N/A	N/A	N/A	N/A	1.98	N/A	N/A	N/A	N/A
CLTC 12: Non-Waiver PDN	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A
CLTC 13: Non-Waiver Adult Day	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A
CLTC 14: Non-Waiver HH	N/A	N/A	N/A	N/A	N/A	0.21	N/A	N/A	N/A	N/A
CLTC 15: Non-Waiver Residential Care	N/A	N/A	N/A	N/A	N/A	0.62	N/A	N/A	N/A	N/A
CLTC 16: Non-Waiver Rehab	N/A	N/A	N/A	N/A	N/A	0.10	N/A	N/A	N/A	N/A
CLTC 17: Non-Waiver TCM	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A
CLTC 18: Non-Waiver Transportation	N/A	N/A	N/A	N/A	N/A	2.61	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	2.00	N/A	N/A	N/A	N/A
CLTC Waiver Claims (30-40)	N/A	N/A	N/A	N/A	N/A	1.62	N/A	N/A	N/A	N/A
CLTC 30: Other Waiver	N/A	N/A	N/A	N/A	N/A	1.62	N/A	N/A	N/A	N/A
CLTC 31: Waiver Personal Care	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A
CLTC 32: Waiver PDN	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A
CLTC 33: Waiver Adult Day	N/A	N/A	N/A	N/A	N/A	0.00	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



2003-2005 MAX OT VALIDATION TABLE  
STATE: SD

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	0.00	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	327,765	N/A	336,621	N/A	373,064	N/A	2.70	10.83	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	3.94	N/A	3.88	N/A	3.50	N/A	-1.61	-9.75	Yes
% OPD Claims with Span Bill/ All OPD Claims(TOS 11)	N/A	15.24	N/A	16.98	N/A	17.45	N/A	11.42	2.78	Yes
% HH Claims with Span Bill/All HH Claims (TOS 13)	N/A	100.00	N/A	0.00	N/A	8.11	N/A	-100.00	Div by 0	N/A
% Other Claims with Span Bills/All Other Claims	N/A	2.90	N/A	2.79	N/A	2.39	N/A	-3.82	-14.30	Yes
<b>PERCENT CLAIMS/MAX TOS (excluding 20-22)</b>										
% claims MAX TOS 08: Physicians	N/A	50.02	N/A	48.47	N/A	47.07	N/A	-3.10	-2.88	Yes
% claims MAX TOS 10: Other Practioner	N/A	10.05	N/A	11.31	N/A	11.88	N/A	12.57	5.09	Yes
% claims MAX TOS 11: OPD	N/A	8.43	N/A	7.67	N/A	7.35	N/A	-9.02	-4.11	Yes
% claims MAX TOS 12: Clinic	N/A	8.38	N/A	8.79	N/A	8.88	N/A	4.95	1.04	Yes
% claims MAX TOS 13: HH	N/A	0.00	N/A	0.00	N/A	0.01	N/A	354.40	138.50	No
% claims MAX TOS 15: Lab/Xray	N/A	10.90	N/A	10.49	N/A	10.69	N/A	-3.73	1.90	Yes
% claims MAX TOS 19: Other Services	N/A	7.82	N/A	8.52	N/A	8.73	N/A	8.99	2.41	Yes
% claims MAX TOS 51: DME	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% claims MAX TOS 26: Transportation	N/A	2.80	N/A	2.70	N/A	2.77	N/A	-3.70	2.66	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	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% claims MAX TOS 33: Rehabilitation	N/A	0.10	N/A	0.09	N/A	0.08	N/A	-2.63	-15.80	No
% claims MAX TOS 34: PT/OT/hear/speech	N/A	1.52	N/A	1.95	N/A	2.53	N/A	28.80	29.51	No
% claims MAX TOS 35: Hospice	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% claims MAX TOS 52: Residential Care	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% claims MAX TOS 53: Psych. Services	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% claims MAX TOS 54: Adult Day Care	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
Average Amount Paid	N/A	\$28	N/A	\$30	N/A	\$32	N/A	9.51	5.44	Yes
% Claims with DX	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% Claims with DX (MAX TOS 8, 11, 12)	85-100	0.00	No	0.00	No	0.00	No	Div by 0	Div by 0	N/A
% Claims with 1 DX that have 2 DX	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 DX, where length=3	5-25	Div by 0	No	Div by 0	No	Div by 0	No	Div by 0	Div by 0	N/A
% Claims with DX, where length=4	40-70	Div by 0	No	Div by 0	No	Div by 0	No	Div by 0	Div by 0	N/A
% Claims with DX, where length=5	20-55	Div by 0	No	Div by 0	No	Div by 0	No	Div by 0	Div by 0	N/A
% OPD Claims with Service Code or UB-92/OPD Claims (TOS 11)	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A
% HH Claims with Service Code or UB-92/HH Claims (TOS13)	N/A	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	Div by 0	No	Div by 0	No	Div by 0	No	Div by 0	Div by 0	N/A

2003-2005 MAX OT VALIDATION TABLE  
STATE: SD

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Change Within Expected Range
% CPT-4 Service Code Indicator (code 01)/Claims with Service Codes	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A
% HCPCS (II & III) Service Codes Indicator (code 06)/Claims with Service Codes	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A
% Other Codes Indicator /Claims with Service Codes	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A

2003-2005 MAX RX VALIDATION TABLE  
STATE: SD

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Change Within Expected Range
<b>All RX Claims</b>										
Total Number of Claims	N/A	1,308,999	N/A	1,378,977	N/A	1,451,751	N/A	5.35	5.28	Yes
% Encounter Claims	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% Supplemental Claims	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
Total FFS Claims	N/A	1,308,999	N/A	1,378,977	N/A	1,451,751	N/A	5.35	5.28	Yes
% Adjusted Claims	N/A	1.68	N/A	1.57	N/A	1.83	N/A	-6.06	16.23	No
% Standard Adjustments	> 1%	99.75	Yes	99.41	Yes	99.42	Yes	-0.34	0.00	Yes
Aver. Amt. Pd Adjust. ( include \$0)	N/A	\$72	N/A	\$81	N/A	\$73	N/A	11.94	-9.12	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 Claims (Type of Claim=1)</b>										
Total Number of Claims	N/A	1,308,999	N/A	1,378,977	N/A	1,451,751	N/A	5.35	5.28	Yes
% Claims with> \$0 Paid	95-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with< \$0 Paid	0	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	N/A
Aver. Medicaid Amount Paid (claims with >\$0 paid)	\$15-\$60	\$57	Yes	\$63	No	\$63	No	8.90	1.40	Yes
% Claims with TPL	>0 - 15	1.06	Yes	0.96	Yes	3.05	Yes	-8.93	216.50	No
Aver. TPL Paid for claims with TPL	N/A	\$58	N/A	\$60	N/A	\$63	N/A	2.27	5.16	Yes
% Family Planning Claims (program type=2)	N/A	1.55	N/A	1.58	N/A	1.51	N/A	1.91	-4.65	Yes
% Drug Claims (TOS 16)	95-99	100.00	No	100.00	No	100.00	No	0.00	0.00	Yes
% DME Claims (TOS 51)	>0 - 6	0.00	No	0.00	No	0.00	No	Div by 0	Div by 0	N/A
% Drug Claims with Quantity	>98	99.76	Yes	99.72	Yes	99.70	Yes	-0.04	-0.02	Yes
% Drug Claims with Days Supply	>98	99.74	Yes	99.75	Yes	99.75	Yes	0.01	0.01	Yes
% Claims with HICL	98-100	99.37	Yes	99.22	Yes	99.15	Yes	-0.15	-0.07	Yes
% Claims with Medispan	98-100	98.99	Yes	98.83	Yes	98.93	Yes	-0.16	0.10	Yes
% Claims with AHFS	98-100	99.37	Yes	99.22	Yes	99.15	Yes	-0.15	-0.07	Yes
% Claims with Generic (GTC)	98-100	99.37	Yes	99.22	Yes	99.15	Yes	-0.15	-0.07	Yes
% Claims with GC3	98-100	99.37	Yes	99.22	Yes	99.15	Yes	-0.15	-0.07	Yes
<b>NDC Configuration Indicator</b>										
% Prescription (codes 0-3)	N/A	75.86	N/A	73.32	N/A	72.10	N/A	-3.35	-1.66	Yes
% Products (codes 4-6)	N/A	23.43	N/A	25.81	N/A	26.97	N/A	10.16	4.47	Yes
% HRI (code 7)	N/A	0.01	N/A	0.01	N/A	0.00	N/A	-2.40	-32.30	No
% Claims with Smart Key	98-100	99.37	Yes	99.22	Yes	99.15	Yes	-0.15	-0.07	Yes
% OTC-Drug Class	N/A	2.30	N/A	2.19	N/A	2.44	N/A	-4.68	11.34	Yes
% Prescription-Drug Class	N/A	97.07	N/A	97.03	N/A	96.71	N/A	-0.04	-0.33	Yes
% Multiple Source (Code Y)	N/A	46.88	N/A	48.87	N/A	53.04	N/A	4.24	8.54	Yes
% Single Source (Code N)	N/A	45.95	N/A	42.07	N/A	39.46	N/A	-8.45	-6.20	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: SD

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	124,028	N/A	127,888	N/A	130,988	N/A	3.11	2.42	10% (+/-)	Yes
Total Medicaid Amount Paid	N/A	\$548,307,968	N/A	\$583,943,955	N/A	\$621,345,745	N/A	6.50	6.41	15% (+/-)	Yes
% with no services (Code 0)	N/A	1.33	N/A	1.40	N/A	1.38	N/A	5.50	-1.61	N/A	N/A
% with FFS only claims (Code 1)	N/A	0.04	N/A	0.00	N/A	0.01	N/A	-87.40	46.45	N/A	N/A
% with only cap claims (Code 2)	N/A	13.43	N/A	14.51	N/A	14.05	N/A	8.02	-3.16	N/A	N/A
% with only encounter claims (Code 3)	N/A	0.13	N/A	0.06	N/A	0.06	N/A	-54.50	9.20	N/A	N/A
% with FFS and cap claims (Code 4)	N/A	63.07	N/A	70.57	N/A	71.53	N/A	11.89	1.36	N/A	N/A
% with cap and encounter claims only (Code 5)	N/A	1.01	N/A	0.69	N/A	0.57	N/A	-31.80	-16.40	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	-100.00	Div by 0	N/A	N/A
% with FFS, cap and encounter records (Code 7)	N/A	20.99	N/A	12.77	N/A	12.40	N/A	-39.20	-2.95	N/A	N/A
# with claims and missing Medicaid eligibility (excludes S-SCHIP only)	N/A	266	N/A	251	N/A	94	N/A	-5.64	-62.50	N/A	N/A
% with claims and missing Medicaid eligibility (excludes S-SCHIP only)	<2%	0.21	Yes	0.20	Yes	0.07	Yes	-8.49	-63.40	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	9	N/A	N/A	N/A	N/A	N/A
% with FFS claims and missing Medicaid eligibility (excludes S-SCHIP only)	N/A	N/A	N/A	N/A	N/A	0.01	N/A	N/A	N/A	N/A	N/A
Expenditures for people missing Medicaid eligibility (excludes S-SCHIP only enrollees)	N/A	\$3,582	N/A	\$1,171	N/A	\$1,589	N/A	-67.30	35.70	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	\$1,589	N/A	N/A	N/A	N/A	N/A
<b>S-SCHIP ENROLLMENT</b>											
# with ONLY S-SCHIP enrollment	N/A	1,541	N/A	1,642	N/A	1,810	N/A	6.55	10.23	N/A	N/A
% with ONLY S-SCHIP enrollment	N/A	1.24	N/A	1.28	N/A	1.38	N/A	3.34	7.62	N/A	N/A
# with ANY S-SCHIP enrollment	N/A	3,754	N/A	3,935	N/A	4,421	N/A	4.82	12.35	N/A	N/A
% with ANY S-SCHIP enrollment	N/A	3.03	N/A	3.08	N/A	3.38	N/A	1.66	9.69	N/A	N/A
Total PYE ANY S-SCHIP enrollment	N/A	1,957	N/A	2,149	N/A	2,385	N/A	9.84	10.97	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	122,221	N/A	125,995	N/A	129,084	N/A	3.09	2.45	10% (+/-)	Yes
Total Medicaid PYE (Person Years of Enrollment)	N/A	95,489	N/A	98,278	N/A	100,906	N/A	2.92	2.67	10% (+/-)	Yes
# with any M-SCHIP enrollment (Medicaid enrollees)	N/A	12,777	N/A	13,451	N/A	14,345	N/A	5.28	6.65	N/A	N/A
Total PYE any M-SCHIP	N/A	7,506	N/A	7,919	N/A	8,545	N/A	5.51	7.91	N/A	N/A
<b>Eligibility Demographics</b>											
% Records with Valid SSN Format	>=95%	95.95	Yes	96.52	Yes	97.30	Yes	0.60	0.81	10% (+/-)	Yes
% Records whose MSIS SSN passed High Group Test (Code 1)	>95%	N/A	No	N/A	No	97.21	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	0.01	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	0.08	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	1,675	No	1,862	No	2,061	No	11.16	10.69	N/A	N/A
% with External SSN from EDB (Code 1)	N/A	N/A	N/A	N/A	N/A	16.31	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%	98.40	Yes	98.35	Yes	98.41	Yes	-0.05	0.06	10% (+/-)	Yes
% with Valid 5 Digit Zip Code Format	>=95%	100.00	Yes	100.00	Yes	99.95	Yes	0.00	-0.05	10% (+/-)	Yes
% Enrollees who Died During Year	0.1-3%	1.31	Yes	1.18	Yes	1.24	Yes	-10.10	5.12	10% (+/-)	Yes
% White	N/A	60.97	N/A	60.83	N/A	65.74	N/A	-2.30	8.08	10% (+/-)	Yes
% Black	N/A	2.17	N/A	2.16	N/A	3.06	N/A	-6.57	41.98	10% (+/-)	No
% Native American/Alaskan Native	N/A	33.99	N/A	30.73	N/A	34.19	N/A	-9.60	11.26	10% (+/-)	No
% Asian	N/A	0.57	N/A	0.46	N/A	0.71	N/A	-18.9	54.49	N/A	N/A
% Native Hawaiian or other Pacific Islander	N/A	0.22	N/A	0.17	N/A	0.41	N/A	-21.6	138.40	N/A	N/A
% More than one race	N/A	0.00	N/A	3.03	N/A	4.00	N/A	Div by 0	32.04	N/A	N/A
% Unknown race	<5%	0.02	Yes	0.00	Yes	0.00	Yes	-92.8	46.41	N/A	N/A
% Hispanic/Latino (included with race categories prior to 2005)	N/A	2.06	N/A	2.62	N/A	2.77	N/A	27.35	5.63	10% (+/-)	Yes
% of Hispanic/Latino with unknown race	N/A	N/A	N/A	N/A	N/A	0.08	N/A	N/A	N/A	N/A	N/A
% Age 0	2-8%	4.55	Yes	4.62	Yes	4.59	Yes	1.47	-0.68	10% (+/-)	Yes
% Age 0-20 Years	49-74%	65.32	Yes	65.47	Yes	65.44	Yes	0.22	-0.04	10% (+/-)	Yes
% Age > 64 Years	5-18%	10.14	Yes	9.81	Yes	9.60	Yes	-3.19	-2.16	10% (+/-)	Yes
% with century of birth '18', '19', '20'	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	N/A	N/A
% with Sex Code 'M' or 'F'	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	N/A	N/A
% Enrollees with 12 months enrollment	40-65%	55.29	Yes	54.83	Yes	55.73	Yes	-0.83	1.64	10% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: SD

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
<b>EDB Dual Eligibles</b>											
Total EDB Duals (Duals confirmed by EDB)	N/A	18,945	N/A	19,202	N/A	19,697	N/A	1.36	2.58	10% (+/-)	Yes
Total EDB Dual PYE	N/A	16,660	N/A	16,827	N/A	17,162	N/A	1.00	1.99	15% (+/-)	Yes
% Age > 64 Years who are EDB Duals	>=90%	97.84	Yes	98.16	Yes	98.71	Yes	0.33	0.56	10% (+/-)	Yes
% MAX Aged Groups (11,21,31,41,51) who are EDB Duals	>=90%	97.76	Yes	98.38	Yes	98.84	Yes	0.64	0.46	10% (+/-)	Yes
% MAX Disabled Groups (12,22,32,42,52) who are EDB Duals	30-55%	50.74	Yes	51.35	Yes	52.30	Yes	1.20	1.85	10% (+/-)	Yes
% EDB Only (50)	<5%	6.38	No	4.49	Yes	3.50	Yes	-29.50	-22.20	N/A	N/A
% EDB QMB Only (51)	N/A	14.78	N/A	15.59	N/A	16.18	N/A	5.43	3.81	N/A	N/A
% EDB QMB Plus (52)	N/A	49.36	N/A	50.45	N/A	50.25	N/A	2.21	-0.40	N/A	N/A
% EDB SLMB Only (53)	N/A	8.05	N/A	7.98	N/A	8.78	N/A	-0.89	10.09	N/A	N/A
% EDB SLMB Plus (54)	N/A	5.36	N/A	5.30	N/A	5.35	N/A	-1.14	0.94	N/A	N/A
% EDB ODWI (55)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A	N/A
% EDB QI-1 (56)	N/A	3.42	N/A	3.33	N/A	3.56	N/A	-2.56	7.10	N/A	N/A
% EDB QI-2 (57)	N/A	0.01	N/A	0.02	N/A	0.01	N/A	47.99	-35.00	N/A	N/A
% EDB Other (58)	N/A	12.64	N/A	12.85	N/A	12.37	N/A	1.63	-3.74	N/A	N/A
% EDB dual type unknown (59)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A	N/A
% EDB dual status unknown (98)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A	N/A
Total Non-EDB Duals (Duals rptd in MSIS, not found in EDB)	N/A	144	N/A	192	N/A	155	N/A	33.33	-19.30	10% (+/-)	No
% Non-EDB Duals Without Valid SSN	N/A	2.78	N/A	3.13	N/A	3.23	N/A	12.50	3.23	10% (+/-)	Yes
% Non-EDB Duals who are Children/Adults	N/A	0.00	N/A	6.77	N/A	3.23	N/A	Div by 0	-52.40	10% (+/-)	No
% EDB Duals with Spanish Language	N/A	0.05	N/A	0.05	N/A	0.05	N/A	-1.34	-12.30	15% (+/-)	Yes
% EDB Duals with EDB Date of Death During Year	6-10%	9.46	Yes	9.14	Yes	9.06	Yes	-3.38	-0.85	15% (+/-)	Yes
% EDB Duals with Medicaid Reported HIC	N/A	86.58	N/A	88.63	N/A	89.98	N/A	2.36	1.53	15% (+/-)	Yes
% EDB Duals with Medicaid reported HIC = Medicare HIC	N/A	98.12	N/A	98.54	N/A	98.37	N/A	0.43	-0.18	15% (+/-)	Yes
TOTAL EDB DUAL ENROLLEES IN JUNE	N/A	17,855	N/A	18,069	N/A	18,587	N/A	1.20	2.87	10% (+/-)	Yes
<b>June Medicare Type</b>											
June % with Part A Medicare	N/A	0.96	N/A	0.95	N/A	1.04	N/A	-1.18	10.29	15% (+/-)	Yes
June % with Part B Medicare	N/A	1.17	N/A	1.00	N/A	0.30	N/A	-14.40	-69.90	15% (+/-)	No
June % Part A/B Medicare	N/A	97.87	N/A	98.05	N/A	98.65	N/A	0.18	0.62	15% (+/-)	Yes
<b>Original Reason for Medicare Entitlement</b>											
% Aged (Code 0)	N/A	53.07	N/A	52.10	N/A	50.90	N/A	-1.84	-2.30	15% (+/-)	Yes
% Disabled (Code 1)	N/A	45.61	N/A	46.64	N/A	47.83	N/A	2.26	2.57	15% (+/-)	Yes
% ESRD (Code 2)	N/A	0.53	N/A	0.53	N/A	0.50	N/A	-1.34	-4.44	15% (+/-)	Yes
% Disabled with ESRD (Code 3)	N/A	0.79	N/A	0.74	N/A	0.76	N/A	-5.97	2.98	15% (+/-)	Yes
<b>Other Eligibility Characteristics (All Enrollees)</b>											
% MAX Aged Groups (11,21,31,41,51) >64 Years	>=99%	99.67	Yes	99.99	Yes	100.00	Yes	0.32	0.01	10% (+/-)	Yes
% MAX Disabled Groups (12,22,32,42,52) >64 Years	N/A	12.17	N/A	12.22	N/A	12.19	N/A	0.45	-0.26	10% (+/-)	Yes
% MAX Child Grps (14,16, 24, 34, 44, 48, 54) <21 Years	>=98%	99.98	Yes	99.98	Yes	99.97	Yes	0.00	-0.01	10% (+/-)	Yes
% MAX Adult Groups (15,17,25,35,45,55) >20 Years	>=80%	90.43	Yes	90.53	Yes	90.87	Yes	0.11	0.37	10% (+/-)	Yes
% MAX 1115 expansion enrollees (MASBOE=51,52,54,55) with 1115 waiver enrollment (Waiver Type=1,5,6,A,F)	100%	N/A	N/A	N/A	N/A	Div by 0	Yes	N/A	N/A	N/A	N/A
% MAX 1115 waiver enrollees (Waiver Type=1,5,6,A,F) in MAX 1115 expansion group (MASBOE=51,52,54,55)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	N/A	N/A
<b>MAX Aged Total</b>											
11: Aged, Cash	N/A	10,313	N/A	10,194	N/A	10,160	N/A	-1.15	-0.33	10% (+/-)	Yes
21: Aged, MN	N/A	2,080	N/A	2,032	N/A	1,946	N/A	-2.31	-4.23	10% (+/-)	Yes
31: Aged, Poverty	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
41: Other Aged	N/A	2,896	N/A	2,907	N/A	3,057	N/A	0.38	5.16	10% (+/-)	Yes
51: 1115 Aged	N/A	5,337	N/A	5,255	N/A	5,157	N/A	-1.54	-1.86	10% (+/-)	Yes
<b>MAX Disabled Total</b>											
12: Disabled, Cash	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
22: Disabled, MN	N/A	17,193	N/A	17,615	N/A	18,186	N/A	2.45	3.24	10% (+/-)	Yes
32: Disabled, Poverty	N/A	12,775	N/A	12,816	N/A	12,988	N/A	0.32	1.34	10% (+/-)	Yes
42: Other Disabled	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
52: 1115 Disabled	N/A	2,210	N/A	2,428	N/A	2,754	N/A	9.86	13.43	10% (+/-)	No
<b>MAX Child Total</b>											
14: AFDC Child, Cash	N/A	2,208	N/A	2,371	N/A	2,444	N/A	7.38	3.08	10% (+/-)	Yes
	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
	N/A	74,900	N/A	77,471	N/A	79,442	N/A	3.43	2.54	10% (+/-)	Yes
	N/A	17,532	N/A	17,375	N/A	17,103	N/A	-0.90	-1.57	10% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: SD

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	43,652	N/A	45,172	N/A	46,561	N/A	3.48	3.08	10% (+/-)	Yes
44: Other Child	N/A	9,175	N/A	10,131	N/A	10,687	N/A	10.42	5.49	10% (+/-)	Yes
48: Foster Care Child	N/A	4,541	N/A	4,793	N/A	5,091	N/A	5.55	6.22	10% (+/-)	Yes
54: 1115 Child	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Adult Total	N/A	19,815	N/A	20,715	N/A	21,296	N/A	4.54	2.81	10% (+/-)	Yes
15: AFDC Adult, Cash	N/A	10,420	N/A	10,480	N/A	10,514	N/A	0.58	0.32	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	4,376	N/A	4,497	N/A	4,375	N/A	2.77	-2.71	10% (+/-)	Yes
45: Other Adult	N/A	5,019	N/A	5,738	N/A	6,407	N/A	14.33	11.66	10% (+/-)	No
55: 1115 Adult	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
<b>Long-Term Care Enrollees</b>											
<b>INSTITUTIONAL STATUS</b>											
# enrollees with any ILTC claims (includes NF, ICF/MR, Aged Mental Hospital, IP Psych. < 21 years)	N/A	6,460	N/A	6,395	N/A	6,445	N/A	-1.01	0.78	N/A	N/A
% enrollees with any ILTC claims	N/A	5.29	N/A	5.08	N/A	4.99	N/A	-3.97	-1.63	N/A	N/A
% AGED enrollees with any ILTC claims	N/A	46.94	N/A	46.59	N/A	45.98	N/A	-0.76	-1.29	N/A	N/A
% DISABLED enrollees with any ILTC claims	N/A	7.38	N/A	7.23	N/A	7.71	N/A	-2.09	6.68	N/A	N/A
% CHILD enrollees with any ILTC claims	N/A	0.46	N/A	0.46	N/A	0.46	N/A	0.60	-0.58	N/A	N/A
% ADULT enrollees with any ILTC claims	N/A	0.03	N/A	0.07	N/A	0.02	N/A	167.80	-65.30	N/A	N/A
<b>COMMUNITY LONG-TERM CARE STATUS</b>											
# enrollees with any CLTC claims (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	6,210	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	4.81	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	12.26	N/A	N/A	N/A	15% (+/-)	No
% DISABLED enrollees with any CLTC claims (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	19.07	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	1.80	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	0.31	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	530	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	2,059	N/A	N/A	N/A	15% (+/-)	No
% enrolled in any Section 1915(c) waiver	N/A	N/A	N/A	N/A	N/A	1.60	N/A	N/A	N/A	15% (+/-)	No
% AGED enrollees in Section 1915(c) waiver	N/A	N/A	N/A	N/A	N/A	9.34	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	6.09	N/A	N/A	N/A	15% (+/-)	No
% CHILD enrollees in Section 1915(c) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% ADULT enrollees in Section 1915(c) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
# with Section 1915(c) waiver for Aged and Disabled (Code G)	N/A	N/A	N/A	N/A	N/A	0	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	958	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	124	N/A	N/A	N/A	15% (+/-)	No
# with Section 1915(c) waiver for People with Brain Injuries (Code J)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
# with Section 1915(c) waiver for People with HIV/AIDS (Code K)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
# with Section 1915(c) waiver for MR/DD (Code L)	N/A	N/A	N/A	N/A	N/A	977	N/A	N/A	N/A	15% (+/-)	No
# with Section 1915(c) waiver for People with MI/SED (Code M)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
# with Section 1915(c) waiver for Technologically Dependent/Medically Fragile (Code N)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
# with Section 1915(c) waiver enrollment for unspecified or unknown populations (Code O)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
% of Section 1915(c) waiver enrollees with no waiver claim (Program Type 6 or 7)	<10%	N/A	No	N/A	No	72.41	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	74.62	Yes	N/A	N/A	15% (+/-)	No
% of Section 1915(c) waiver enrollees with any HMO/HIO enrollment	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
<b>Other Waiver Enrollment (Enrolled Any Time During the Year)</b>											
# with any 1115 waiver (Codes 1,5,6,A,F)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
% AGED enrollees with any 1115 waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% DISABLED enrollees with any 1115 waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% CHILD enrollees with any 1115 waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% ADULT enrollees with any 1115 waiver	N/A	N/A	N/A	N/A	N/A	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 1915(b) waiver (Code 2)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No

2003-2005 MAX PSF VALIDATION TABLE  
STATE: SD

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
% AGED enrollees with any 1915(b) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% DISABLED enrollees with any 1915(b) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% CHILD enrollees with any 1915(b) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% ADULT enrollees with any 1915(b) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% with any HMO/HIO enrollment	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
# with any combined 1915(b)(c) waiver (Code 4)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
% AGED enrollees with any combined 1915(b)(c) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% DISABLED enrollees with any combined 1915(b)(c) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% CHILD enrollees with any combined 1915(b)(c) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% ADULT enrollees with any combined 1915(b)(c) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% with any HMO/HIO enrollment	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
# with 1115 HIFA waiver (Code 5)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
# with 1115 Pharmacy waiver coverage (Code 6)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
% AGED enrollees with Pharmacy waiver coverage	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% DISABLED enrollees with any Pharmacy waiver coverage	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% CHILD enrollees with any Pharmacy waiver coverage	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% ADULT enrollees with any combined 1915(b)(c) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% with any HMO/HIO enrollment	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
# with other type of waiver (Code 7)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
# with unknown type of waiver (Code 9)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
# with 1115 disaster-related waiver (Code A)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
# with 1115 Family Planning Only waiver (Code F)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
<b>Enrollees with Restricted Benefits</b>											
<i>Family Planning enrollees with Restricted Benefits (Code 6)</i>											
# with ONLY Family Planning Only enrollment	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	N/A	N/A
# with ANY Family Planning Only enrollment	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	N/A	N/A
# PYE ANY FP Only	N/A	Div by 0	N/A	Div by 0	N/A	0	N/A	Div by 0	Div by 0	N/A	N/A
<i>Aliens with Restricted Benefits (Code 2)</i>											
# Aliens with ONLY restricted benefits	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	N/A	N/A
# Aliens with ANY restricted benefits	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	N/A	N/A
# PYE Aliens with ANY restricted benefits	N/A	Div by 0	N/A	Div by 0	N/A	0	N/A	Div by 0	Div by 0	N/A	N/A
<i>EDB Duals with Restricted Benefits (Medicare Cost Sharing Only - Code 3)</i>											
# EDB Duals with ONLY restricted benefits enrollment	N/A	4,842	N/A	5,041	N/A	5,430	N/A	4.11	7.72	N/A	N/A
# EDB Duals with ANY restricted benefits enrollment	N/A	5,305	N/A	5,550	N/A	5,977	N/A	4.62	7.69	N/A	N/A
# PYE EDB Duals with ANY restricted benefits	N/A	4,472	N/A	4,633	N/A	4,912	N/A	3.61	6.03	N/A	N/A
% EDB Duals with ONLY restricted benefits enrollment	N/A	N/A	N/A	N/A	N/A	27.57	N/A	N/A	N/A	15% (+/-)	No
<i>Prescription Drug Enrollees (Codes X, Y, or Z)</i>											
# with ONLY Prescription Drug enrollment (may also have a month or more of Code 3)	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	N/A	N/A
# with ANY Prescription Drug enrollment	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	N/A	N/A
# PYE ANY Prescription Drug enrollment	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	N/A	N/A
<i>Dual Prescription Drug Enrollees</i>											
# with ONLY prescription drugs who are also EDB duals	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	N/A	N/A
<b>June Eligibility Profile</b>											
TOTAL ENROLLEES IN JUNE	N/A	95,250	N/A	97,227	N/A	100,550	N/A	2.08	3.42	15% (+/-)	Yes
June % Full Scope Benefits (Code 1)	>80%	93.08	Yes	92.95	Yes	93.15	Yes	-0.14	0.21	15% (+/-)	Yes
June % Restricted Benefits Alien (Code 2)	<5%	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	15% (+/-)	N/A
June % Restricted Benefits Dual (Code 3)	<5%	4.74	Yes	4.84	Yes	4.89	Yes	2.13	0.99	15% (+/-)	Yes
June % Restricted Benefits Pregnant (Code 4)	<5%	2.18	Yes	2.20	Yes	1.96	Yes	1.18	-11.10	15% (+/-)	Yes
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%	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	15% (+/-)	N/A
June % Unknown Benefits (Code 9)	0%	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	15% (+/-)	N/A
June % Restricted Benefits Pharm Plus Non-Dual Enrollee (Code X)	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
June % Restricted Benefits Pharm Plus Dual Receiving Medicare Cost Sharing (Code Y)	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
June % Restricted Benefits Pharm Plus Dual Not Receiving Medicare Cost Sharing (Code Z)	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
June % Private Health Insurance (Codes 2-4)	2-12%	13.80	No	13.72	No	13.07	No	-0.54	-4.76	15% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: SD

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	7,355	N/A	7,579	N/A	8,198	N/A	3.05	8.17	15% (+/-)	Yes
June # with M-SCHIP (Code 2) - Adult (>18 Years)	N/A	182	N/A	176	N/A	213	N/A	-3.30	21.02	15% (+/-)	No
June # with S-SCHIP Flag (Code 3) - Child (<19 Years)	N/A	834	N/A	921	N/A	1,105	N/A	10.43	19.98	15% (+/-)	No
June # with S-SCHIP Flag (Code 3) - Adult (>18 Years)	N/A	15	N/A	17	N/A	18	N/A	13.33	5.88	15% (+/-)	Yes
<b>Medicaid Expenditures</b>											
Total Medicaid Amt Paid	N/A	\$548,302,861	N/A	\$583,942,784	N/A	\$621,344,156	N/A	6.50	6.41	15% (+/-)	Yes
Average Medicaid Amt Paid per Enrollee	N/A	\$4,486	N/A	\$4,635	N/A	\$4,813	N/A	3.31	3.86	15% (+/-)	Yes
25th Percentile	N/A	\$213	N/A	\$226	N/A	\$226	N/A	-0.94	7.11	15% (+/-)	Yes
50th Percentile (Median)	N/A	\$703	N/A	\$723	N/A	\$772	N/A	2.85	6.78	15% (+/-)	Yes
75th Percentile	N/A	\$2,611	N/A	\$2,685	N/A	\$2,831	N/A	2.83	5.44	15% (+/-)	Yes
95th Percentile	N/A	\$26,484	N/A	\$27,547	N/A	\$28,342	N/A	4.01	2.89	15% (+/-)	Yes
99th Percentile	N/A	\$53,331	N/A	\$55,725	N/A	\$58,808	N/A	4.49	5.53	15% (+/-)	Yes
<b>AVG MEDICAID AMT PD/ENROLLEE BY MAX ELIGIBILITY GROUP</b>											
MAX Aged	N/A	\$12,814	N/A	\$13,289	N/A	\$13,865	N/A	3.71	4.33	15% (+/-)	Yes
MAX Disabled	N/A	\$13,647	N/A	\$14,132	N/A	\$14,557	N/A	3.55	3.00	10% (+/-)	Yes
MAX Child	N/A	\$1,727	N/A	\$1,823	N/A	\$1,924	N/A	5.54	5.55	10% (+/-)	Yes
MAX Adult	N/A	\$2,631	N/A	\$2,814	N/A	\$2,953	N/A	6.96	4.91	10% (+/-)	Yes
<b>AVG MEDICAID AMT PD/EDB DUAL ENROLLEE</b>											
All EDB Dual Enrollees	N/A	\$12,545	N/A	\$13,140	N/A	\$13,571	N/A	4.75	3.28	15% (+/-)	Yes
MAX Aged	N/A	\$12,830	N/A	\$13,305	N/A	\$13,902	N/A	3.70	4.49	10% (+/-)	Yes
MAX Disabled	N/A	\$12,328	N/A	\$13,074	N/A	\$13,323	N/A	6.06	1.90	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	\$33,232	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	\$27,386	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	\$38,675	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	\$23,626	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	Div by 0	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	\$13,832	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	\$40,232	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for People with Brain Injuries (Code J)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for People with HIV/AIDS (Code K)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for MR/DD (Code L)	N/A	N/A	N/A	N/A	N/A	\$31,122	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for People with MI/SED (Code M)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for Technologically Dependent/Medically Fragile (Code N)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for none of the above (Code O)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
<b>AVG 1915(c) WAIVER AMT PD (PROGRAM TYPES 6/7) PER ENROLLEE IN ANY 1915(c) WAIVER - MOST RECENT</b>											
All Section 1915(c) enrollees	N/A	N/A	N/A	N/A	N/A	\$10,614	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	Div by 0	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	\$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	\$228	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for People with Brain Injuries (Code J)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for People with HIV/AIDS (Code K)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for MR/DD (Code L)	N/A	N/A	N/A	N/A	N/A	\$22,339	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for People with MI/SED (Code M)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for Technologically Dependent/Medically Fragile (Code N)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for none of the above (Code O)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
<b>EXPENDITURES FOR RESTRICTED BENEFIT ENROLLEES</b>											
<i>Expenditures for Family Planning enrollees with Restricted Benefits</i>											
Expenditures for ONLY FP Only enrollees	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A	N/A
Average Medicaid Paid for ONLY FP Only enrollees	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A	N/A
<i>Expenditures for Aliens with Restricted Benefits</i>											
Expend for Aliens with restricted benefits ONLY enrollment	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A	N/A
Avg Medicaid Paid for Alien enrollees with restricted benefits ONLY	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A	N/A
<i>Expenditures for EDB Duals with Restricted Benefits (Medicare Cost Sharing Only - Code 3)</i>											



2003-2005 MAX PSF VALIDATION TABLE  
STATE: SD

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	\$2,535,567	N/A	\$2,609,831	N/A	\$3,453,513	N/A	2.93	32.33	N/A	N/A
Avg Medicaid Paid for EDB Duals with only restricted benefit enrollment	N/A	\$524	N/A	\$518	N/A	\$636	N/A	-1.13	22.85	N/A	N/A
<b>Prescription Drug Enrollees</b>											
Expenditures for Prescription Drug ONLY enrollees (may also have a month or more of Code 3)	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A	N/A
Avg Medicaid Paid for Prescription Drug ONLY enrollees	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A	N/A
<b>Dual Prescription Drug Enrollees</b>											
Expenditures for Prescription Drug ONLY enrollees who are also EDB duals	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A	N/A
<b>MEDICAID ENROLLEES - EXCLUDING SELECT RESTRICTED BENEFIT GROUPS (excludes people with missing eligibility information, S-SCHIP only, FP Only, Aliens with only restricted benefits, duals with restricted benefits only, and prescription drug only enrollees) ---- NOTE: S-SCHIP only, FP Only, duals with restricted benefits, and Aliens with restricted benefits were NOT excluded prior to 2001. Prescription drug only enrollees were NOT excluded prior to 2003.</b>											
Total Medicaid Enrollees	N/A	117,379	N/A	120,954	N/A	123,654	N/A	3.05	2.23	10% (+/-)	Yes
MAX Aged Total	N/A	7,570	N/A	7,418	N/A	7,237	N/A	-2.01	-2.44	10% (+/-)	Yes
MAX Disabled Total	N/A	15,094	N/A	15,350	N/A	15,679	N/A	1.70	2.14	10% (+/-)	Yes
MAX Child Total	N/A	74,900	N/A	77,471	N/A	79,442	N/A	3.43	2.54	10% (+/-)	Yes
MAX Adult Total	N/A	19,815	N/A	20,715	N/A	21,296	N/A	4.54	2.81	10% (+/-)	Yes
Total Medicaid PYE (Person Years of Enrollment)	N/A	91,227	N/A	93,866	N/A	96,240	N/A	2.89	2.53	10% (+/-)	Yes
Total EDB Duals	N/A	14,103	N/A	14,161	N/A	14,267	N/A	0.41	0.75	10% (+/-)	Yes
MAX Aged	N/A	7,339	N/A	7,253	N/A	7,119	N/A	-1.17	-1.85	10% (+/-)	Yes
MAX Disabled	N/A	6,625	N/A	6,780	N/A	7,004	N/A	2.34	3.30	10% (+/-)	Yes
<b>Total Medicaid Amount Paid</b>											
Total Medicaid Amt Paid	N/A	\$545,767,294	N/A	\$581,332,953	N/A	\$617,890,643	N/A	6.52	6.29	15% (+/-)	Yes
Average Medicaid Amt Paid per Enrollee	N/A	\$4,650	N/A	\$4,806	N/A	\$4,997	N/A	3.37	3.97	15% (+/-)	Yes
<b>AVG MEDICAID AMT PD/ENROLLEE BY MAX ELIGIBILITY GROUP</b>											
MAX Aged	N/A	\$17,303	N/A	\$18,109	N/A	\$19,269	N/A	4.66	6.41	15% (+/-)	Yes
MAX Disabled	N/A	\$15,455	N/A	\$16,122	N/A	\$16,755	N/A	4.32	3.93	10% (+/-)	Yes
MAX Child	N/A	\$1,727	N/A	\$1,823	N/A	\$1,924	N/A	5.54	5.55	10% (+/-)	Yes
MAX Adult	N/A	\$2,631	N/A	\$2,814	N/A	\$2,953	N/A	6.96	4.91	10% (+/-)	Yes
<b>AVG MEDICAID AMT PD/EDB DUAL ENROLLEE</b>											
All EDB Dual Enrollees	N/A	\$16,672	N/A	\$17,633	N/A	\$18,494	N/A	5.77	4.88	15% (+/-)	Yes
MAX Aged	N/A	\$17,466	N/A	\$18,240	N/A	\$19,410	N/A	4.43	6.42	10% (+/-)	Yes
MAX Disabled	N/A	\$16,027	N/A	\$17,226	N/A	\$17,801	N/A	7.48	3.34	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	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	25% (+)	Yes
Total MC Enrollees	N/A	117,379	N/A	120,954	N/A	123,654	N/A	3.05	2.23	25% (+)	Yes
Aged	N/A	7,570	N/A	7,418	N/A	7,237	N/A	-2.01	-2.44	25% (+)	Yes
Disabled	N/A	15,094	N/A	15,350	N/A	15,679	N/A	1.70	2.14	25% (+)	Yes
Child	N/A	74,900	N/A	77,471	N/A	79,442	N/A	3.43	2.54	25% (+)	Yes
Adult	N/A	19,815	N/A	20,715	N/A	21,296	N/A	4.54	2.81	25% (+)	Yes
% of MC Enrollees in HMO/HIO (Dups)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
% of MC Enrollees in Dental (Dups)	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	25% (+)	Yes
% of MC Enrollees in BHO (Dups)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
% of MC Enrollees in Prenatal (Dups)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
% of MC Enrollees in LTC (Dups)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
% of MC Enrollees in PACE (Dups)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
% of MC Enrollees in PCCM (Dups)	N/A	75.90	N/A	76.17	N/A	77.61	N/A	0.36	1.89	25% (+)	Yes
% of MC Enrollees in Other MC (Dups)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
% EDB Duals ever enrolled in HMO/HIOs	<20%	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	25% (+)	N/A
% EDB Duals in PHP only or PHP/PCCM only	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	25% (+)	Yes
% EDB Duals in PCCM only	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
% Section 1915(c) waiver enrollees ever enrolled in HMO/HIOs	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	25% (+)	No
% Section 1915(c) waiver enrollees in PHP only or PHP/PCCM only	N/A	N/A	N/A	N/A	N/A	100.00	N/A	N/A	N/A	25% (+)	No
% Section 1915(c) waiver enrollees in PCCM only	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	25% (+)	No
TOTAL ENROLLEES IN JUNE	N/A	91,006	N/A	92,829	N/A	95,920	N/A	2.00	3.33	25% (+)	Yes
June % HMO/HIO only (Code 1)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A

2003-2005 MAX PSF VALIDATION TABLE  
STATE: SD

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	25.24	N/A	21.61	N/A	21.62	N/A	-14.40	0.02	25% (+)	Yes
June % BHO only (Code 3)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % PCCM only (Code 4)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % Other MC only (Code 5)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % HMO/HIO & Dental (Code 6)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % HMO/HIO & BHO (Code 7)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % HMO/HIO & Other MC (Code 8)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % HMO/HIO & Dental & BHO (Code 9)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % Dental & PCCM (Code 10)	N/A	74.76	N/A	78.39	N/A	78.38	N/A	4.85	-0.01	25% (+)	Yes
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	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
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	\$8,484,374	N/A	\$8,726,538	N/A	\$8,955,753	N/A	2.85	2.63	15% (+/-)	Yes
HMO/HIO	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
PHP	N/A	\$6,988,091	N/A	\$7,199,265	N/A	\$7,385,598	N/A	3.02	2.59	15% (+/-)	Yes
PCCM	N/A	\$1,496,283	N/A	\$1,527,273	N/A	\$1,570,155	N/A	2.07	2.81	15% (+/-)	Yes
Ratio of Cap Claims to PME (person mo. enroll.) in MC	-9-2	1.46	Yes	1.45	Yes	1.45	Yes	-0.23	0.08	15% (+/-)	Yes
HMO/HIO	-9-2	Div by 0	No	Div by 0	No	Div by 0	No	Div by 0	Div by 0	15% (+/-)	N/A
PHP	-9-2	1.00	Yes	1.00	Yes	1.00	Yes	0.03	0.00	15% (+/-)	Yes
PCCM	-9-2	0.63	No	0.61	No	0.60	No	-3.19	-1.82	15% (+/-)	Yes
Average Cap Payment for PME in MC	N/A	\$8	N/A	\$8	N/A	\$8	N/A	-0.04	0.09	15% (+/-)	Yes
HMO/HIO	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
PHP	N/A	\$6	N/A	\$6	N/A	\$6	N/A	0.13	0.06	15% (+/-)	Yes
PCCM	N/A	\$2	N/A	\$2	N/A	\$2	N/A	-3.19	-1.82	15% (+/-)	Yes
<b>Persons enrolled in PHP only or PHP/PCCM only</b>											
Total Cap Payments	N/A	\$8,484,374	N/A	\$8,726,538	N/A	\$8,955,753	N/A	2.85	2.63	15% (+/-)	Yes
Total Medicaid Amt Paid	N/A	\$545,767,294	N/A	\$581,332,953	N/A	\$617,890,643	N/A	6.52	6.29	15% (+/-)	Yes
Count of Enrollees	N/A	117,379	N/A	120,954	N/A	123,654	N/A	3.05	2.23	15% (+/-)	Yes
<b>Persons enrolled in PCCM only</b>											
Total Cap Payments	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Count of Enrollees	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
<b>Persons ever enrolled in HMO/HIOs during year</b>											
Count of Enrollees	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Aged	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	25% (+)	N/A
Disabled	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	25% (+)	N/A
Child	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	25% (+)	N/A
Adult	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	25% (+)	N/A
Total Ever Enrolled in HMO/HIO PYE	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	25% (+)	N/A
Total Cap Payments	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Average Cap Payments	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Aged	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Disabled	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Child	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Adult	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Total FFS Payments	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Average FFS Payments per enrollee	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Aged	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Disabled	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Child	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Adult	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Total FFS Payments by Type of Service											
IP	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A

2003-2005 MAX PSF VALIDATION TABLE  
STATE: SD

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
ILTC	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Drug	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
All Other (excluding cap payments)	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Average FFS Payments by Type of Service											
IP	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
ILTC	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Drug	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
All Other (excluding cap payments)	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
<b>FFS INFORMATION FOR NON-DUAL MEDICAID ENROLLEES (excludes EDB Duals, people ever enrolled in HMO/HIOS, with missing eligibility information, S-SCHIP only, FP Only, Aliens with restricted benefits only, and prescription drug only enrollees) ---- NOTE: S-SCHIP only, FP Only, and Aliens with restricted benefits were NOT excluded prior to 2001. Prescription drug only enrollees were NOT excluded prior to 2003.</b>											
Total Non-Dual FFS Enrollees	N/A	103,276	N/A	106,793	N/A	109,387	N/A	3.41	2.43	15% (+/-)	Yes
Total Non-Dual FFS Recipients	N/A	88,525	N/A	90,647	N/A	93,725	N/A	2.40	3.40	15% (+/-)	Yes
Total Non-Dual FFS PYE	N/A	78,828	N/A	81,451	N/A	83,744	N/A	3.33	2.82	15% (+/-)	Yes
MAX Aged Total	N/A	231	N/A	165	N/A	118	N/A	-28.60	-28.50	10% (+/-)	No
11: Aged, Cash	N/A	87	N/A	61	N/A	41	N/A	-29.90	-32.80	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	72	N/A	36	N/A	28	N/A	-50.00	-22.20	10% (+/-)	No
41: Other Aged	N/A	72	N/A	68	N/A	49	N/A	-5.56	-27.90	10% (+/-)	No
51: 1115 Aged	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Disabled Total	N/A	8,469	N/A	8,570	N/A	8,675	N/A	1.19	1.23	10% (+/-)	Yes
12: Disabled, Cash	N/A	7,795	N/A	7,798	N/A	7,893	N/A	0.04	1.22	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	13	N/A	68	N/A	82	N/A	423.10	20.59	10% (+/-)	No
42: Other Disabled	N/A	661	N/A	704	N/A	700	N/A	6.51	-0.57	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	74,894	N/A	77,468	N/A	79,436	N/A	3.44	2.54	10% (+/-)	Yes
14: AFDC Child, Cash	N/A	17,532	N/A	17,374	N/A	17,102	N/A	-0.90	-1.57	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	43,649	N/A	45,172	N/A	46,558	N/A	3.49	3.07	10% (+/-)	Yes
44: Other Child	N/A	9,174	N/A	10,130	N/A	10,687	N/A	10.42	5.50	10% (+/-)	Yes
48: Foster Care Child	N/A	4,539	N/A	4,792	N/A	5,089	N/A	5.57	6.20	10% (+/-)	Yes
54: 1115 Child	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Adult Total	N/A	19,682	N/A	20,590	N/A	21,158	N/A	4.61	2.76	10% (+/-)	Yes
15: AFDC Adult, Cash	N/A	10,329	N/A	10,402	N/A	10,417	N/A	0.71	0.14	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	4,361	N/A	4,488	N/A	4,360	N/A	2.91	-2.85	10% (+/-)	Yes
45: Other Adult	N/A	4,992	N/A	5,700	N/A	6,381	N/A	14.18	11.95	10% (+/-)	No
55: 1115 Adult	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
# Non-Dual FFS Enrollees w/ MSIS Dual Code/No EDB Confirmation	N/A	144	N/A	192	N/A	155	N/A	33.33	-19.30	10% (+/-)	No
Total FFS Medicaid Amt Paid	N/A	\$302,914,386	N/A	\$323,659,254	N/A	\$345,838,077	N/A	6.85	6.85	15% (+/-)	Yes
Average FFS Medicaid Amt Paid per Non-Dual FFS Enrollee	N/A	\$2,933	N/A	\$3,031	N/A	\$3,162	N/A	3.33	4.32	15% (+/-)	Yes
Avg FFS Medicaid Amt Paid per Non-Dual FFS Recipient (User of any service)	N/A	\$3,422	N/A	\$3,571	N/A	\$3,690	N/A	4.35	3.34	15% (+/-)	Yes
<b>AVG FFS MEDICAID AMT PD/NON-DUAL FFS ENROLLEE BY MAX ELIG GRP</b>											
All Aged	N/A	\$12,081	N/A	\$12,293	N/A	\$10,679	N/A	1.75	-13.10	15% (+/-)	Yes
11: Aged, Cash	N/A	\$7,245	N/A	\$6,994	N/A	\$5,333	N/A	-3.47	-23.70	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	\$7,022	N/A	\$151	N/A	\$1,322	N/A	-97.80	774.30	15% (+/-)	No
41: Other Aged	N/A	\$22,984	N/A	\$23,475	N/A	\$20,498	N/A	2.14	-12.70	15% (+/-)	Yes
51: 1115 Aged	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
All Disabled	N/A	\$14,939	N/A	\$15,181	N/A	\$15,842	N/A	1.62	4.35	15% (+/-)	Yes
12: Disabled, Cash	N/A	\$13,719	N/A	\$14,411	N/A	\$14,841	N/A	5.05	2.98	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	\$148	N/A	\$12,225	N/A	\$9,996	N/A	8,169.00	-18.20	15% (+/-)	No
42: Other Disabled	N/A	\$29,611	N/A	\$23,995	N/A	\$27,820	N/A	-19.00	15.94	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: SD

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	\$1,645	N/A	\$1,740	N/A	\$1,841	N/A	5.76	5.82	15% (+/-)	Yes
14: AFDC Child, Cash	N/A	\$1,322	N/A	\$1,396	N/A	\$1,460	N/A	5.58	4.57	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	\$1,008	N/A	\$1,103	N/A	\$1,098	N/A	9.44	-0.40	15% (+/-)	Yes
44: Other Child	N/A	\$2,434	N/A	\$2,249	N/A	\$2,687	N/A	-7.63	19.50	15% (+/-)	No
48: Foster Care Child	N/A	\$7,429	N/A	\$7,918	N/A	\$8,143	N/A	6.58	2.85	15% (+/-)	Yes
54: 1115 Child	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
All Adult	N/A	\$2,560	N/A	\$2,756	N/A	\$2,878	N/A	7.63	4.43	15% (+/-)	Yes
15: AFDC Adult, Cash	N/A	\$2,641	N/A	\$2,803	N/A	\$3,063	N/A	6.14	9.30	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	\$2,620	N/A	\$2,771	N/A	\$2,866	N/A	5.75	3.42	15% (+/-)	Yes
45: Other Adult	N/A	\$2,341	N/A	\$2,658	N/A	\$2,583	N/A	13.51	-2.82	15% (+/-)	Yes
55: 1115 Adult	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
<b>FFS EXPENDITURES AND USERS BY MAX TOS</b>											
IP: Total Medicaid Paid (TOS 01)	N/A	\$76,733,850	N/A	\$77,593,123	N/A	\$81,130,428	N/A	1.12	4.56	15% (+/-)	Yes
IP: Number of Users	N/A	12,849	N/A	13,265	N/A	13,548	N/A	3.24	2.13	15% (+/-)	Yes
IP: Average Medicaid Pd per User	N/A	\$5,972	N/A	\$5,849	N/A	\$5,988	N/A	-2.05	2.38	15% (+/-)	Yes
IP: Average Medicaid Covered Days Per User	N/A	5	N/A	5	N/A	5	N/A	-0.72	0.28	15% (+/-)	Yes
MH Aged: Total Medicaid Paid (TOS 02)	N/A	\$0	N/A	\$42,946	N/A	\$125,421	N/A	Div by 0	192.00	15% (+/-)	No
MH Aged: Number of Users	N/A	0	N/A	1	N/A	1	N/A	Div by 0	0.00	15% (+/-)	Yes
MH Aged: Avg Medicaid Pd per User	N/A	Div by 0	N/A	\$42,946	N/A	\$125,421	N/A	Div by 0	192.00	15% (+/-)	No
IP Psych < 21: Total Medicaid Paid (TOS 04)	N/A	\$16,234,148	N/A	\$16,300,646	N/A	\$17,511,671	N/A	0.41	7.43	15% (+/-)	Yes
IP Psych < 21: Number of Users	N/A	483	N/A	471	N/A	483	N/A	-2.48	2.55	15% (+/-)	Yes
IP Psych<21 :Avg Medicaid Pd per User	N/A	\$33,611	N/A	\$34,609	N/A	\$36,256	N/A	2.97	4.76	15% (+/-)	Yes
ICF/MR: Total Medicaid Pd (TOS 05)	N/A	\$7,220,569	N/A	\$8,032,331	N/A	\$8,212,369	N/A	11.24	2.24	15% (+/-)	Yes
ICF/MR: Number of Users	N/A	89	N/A	83	N/A	85	N/A	-6.74	2.41	15% (+/-)	Yes
ICF/MR: Avg Medicaid Pd per User	N/A	\$81,130	N/A	\$96,775	N/A	\$96,616	N/A	19.28	-0.16	15% (+/-)	Yes
NF: Total Medicaid Paid (TOS 07)	N/A	\$7,073,839	N/A	\$6,992,987	N/A	\$6,524,669	N/A	-1.14	-6.70	15% (+/-)	Yes
NF Number of Users	N/A	339	N/A	347	N/A	340	N/A	2.36	-2.02	15% (+/-)	Yes
NF:Avg Medicaid Pd per User	N/A	\$20,867	N/A	\$20,153	N/A	\$19,190	N/A	-3.42	-4.78	15% (+/-)	Yes
Physician: Total Medicaid Paid (TOS 08)	N/A	\$24,370,038	N/A	\$26,484,555	N/A	\$28,627,429	N/A	8.68	8.09	15% (+/-)	Yes
Physician: Number of Users	N/A	57,061	N/A	58,337	N/A	60,616	N/A	2.24	3.91	15% (+/-)	Yes
Physician: Avg Medicaid Pd per User	N/A	\$427	N/A	\$454	N/A	\$472	N/A	6.30	4.03	15% (+/-)	Yes
Dental: Total Medicaid Paid (TOS 09)	N/A	\$22,797	N/A	\$15,475	N/A	\$29,651	N/A	-32.10	91.61	15% (+/-)	No
Dental: Number of Users	N/A	44	N/A	51	N/A	65	N/A	15.91	27.45	15% (+/-)	No
Dental: Avg Medicaid Pd per User	N/A	\$518	N/A	\$303	N/A	\$456	N/A	-41.40	50.34	15% (+/-)	No
Other Practitioner: Total Medicaid Pd (TOS 10)	N/A	\$3,964,099	N/A	\$3,549,929	N/A	\$3,788,174	N/A	-10.40	6.71	15% (+/-)	Yes
Other Practitioner: Number of Users	N/A	34,084	N/A	34,692	N/A	36,113	N/A	1.78	4.10	15% (+/-)	Yes
Other Practitioner: Avg Medicaid Pd per User	N/A	\$116	N/A	\$102	N/A	\$105	N/A	-12.00	2.51	15% (+/-)	Yes
OPD: Total Medicaid Paid (TOS 11)	N/A	\$23,454,240	N/A	\$22,965,837	N/A	\$25,334,950	N/A	-2.08	10.32	15% (+/-)	Yes
OPD Number of Users	N/A	33,110	N/A	28,373	N/A	29,999	N/A	-14.30	5.73	15% (+/-)	Yes
OPD: Avg Medicaid Pd per User	N/A	\$708	N/A	\$809	N/A	\$845	N/A	14.27	4.34	15% (+/-)	Yes
Clinic: Total Medicaid Paid (TOS 12)	N/A	\$28,159,681	N/A	\$29,034,472	N/A	\$30,884,031	N/A	3.11	6.37	15% (+/-)	Yes
Clinic: Number of Users	N/A	33,462	N/A	34,073	N/A	35,273	N/A	1.83	3.52	15% (+/-)	Yes
Clinic: Avg Medicaid Pd per User	N/A	\$842	N/A	\$852	N/A	\$876	N/A	1.26	2.75	15% (+/-)	Yes
HH: Total Medicaid Paid (TOS 13)	N/A	\$743,109	N/A	\$908,719	N/A	\$1,097,935	N/A	22.29	20.82	15% (+/-)	No
HH: Number of Users	N/A	391	N/A	381	N/A	410	N/A	-2.56	7.61	15% (+/-)	Yes
HH: Avg Medicaid Pd per User	N/A	\$1,901	N/A	\$2,385	N/A	\$2,678	N/A	25.50	12.28	15% (+/-)	Yes
Lab/Xray: Total Medicaid Paid (TOS 15)	N/A	\$10,802,261	N/A	\$14,141,600	N/A	\$15,481,053	N/A	30.91	9.47	15% (+/-)	Yes
Lab/Xray: Number of Users	N/A	47,909	N/A	48,972	N/A	50,963	N/A	2.22	4.07	15% (+/-)	Yes
Lab/Xray:Avg Medicaid Pd per User	N/A	\$225	N/A	\$289	N/A	\$304	N/A	28.07	5.20	15% (+/-)	Yes
Drugs: Total Medicaid Paid (TOS 16)	N/A	\$34,229,693	N/A	\$39,725,703	N/A	\$42,620,044	N/A	16.06	7.29	15% (+/-)	Yes
Drugs: Number of Users	N/A	58,624	N/A	59,035	N/A	62,662	N/A	0.70	6.14	15% (+/-)	Yes
Drugs: Avg Medicaid Pd per User	N/A	\$584	N/A	\$673	N/A	\$680	N/A	15.25	1.08	15% (+/-)	Yes
Other Services: Total Medicaid Paid (TOS 19)	N/A	\$21,645,077	N/A	\$24,168,566	N/A	\$25,698,905	N/A	11.66	6.33	15% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: SD

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
Other Services: Number of Users	N/A	6,901	N/A	7,281	N/A	7,453	N/A	5.51	2.36	15% (+/-)	Yes
Other Services: Avg Medicaid Pd per User	N/A	\$3,137	N/A	\$3,319	N/A	\$3,448	N/A	5.83	3.88	15% (+/-)	Yes
Transportation: Total Medicaid Paid (TOS 26)	N/A	\$3,122,553	N/A	\$3,140,358	N/A	\$3,265,894	N/A	0.57	4.00	15% (+/-)	Yes
Transportation: Number of Users	N/A	6,484	N/A	7,066	N/A	7,453	N/A	8.98	5.48	15% (+/-)	Yes
Transportation: Avg Medicaid Pd per User	N/A	\$482	N/A	\$444	N/A	\$438	N/A	-7.71	-1.40	15% (+/-)	Yes
PCS: Total Medicaid Paid (TOS 30)	N/A	\$1,195,034	N/A	\$1,397,191	N/A	\$1,588,519	N/A	16.92	13.69	15% (+/-)	Yes
PCS: Number of Users	N/A	617	N/A	604	N/A	613	N/A	-2.11	1.49	15% (+/-)	Yes
PCS: Avg Medicaid Pd per User	N/A	\$1,937	N/A	\$2,313	N/A	\$2,591	N/A	19.43	12.02	15% (+/-)	Yes
Target Case Management: Total Medicaid Pd (TOS 31)	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Target Case Management: Number of Users	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Target Case Management: Avg Medicaid Pd per User	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Rehab Services: Total Medicaid Pd (TOS 33)	N/A	\$21,460,282	N/A	\$1,143,054	N/A	\$798,567	N/A	-94.70	-30.10	15% (+/-)	No
Rehab Services: Number of Users	N/A	1,810	N/A	664	N/A	649	N/A	-63.30	-2.26	15% (+/-)	Yes
Rehab Services: Avg Medicaid Pd per User	N/A	\$11,857	N/A	\$1,721	N/A	\$1,230	N/A	-85.50	-28.50	15% (+/-)	No
PT/OT/Speech/Hear: Total Medicaid Paid (TOS 34)	N/A	\$2,457,520	N/A	\$3,013,229	N/A	\$3,284,262	N/A	22.61	9.00	15% (+/-)	Yes
PT/OT/Speech/Hear: Number of Users	N/A	3,440	N/A	3,921	N/A	4,130	N/A	13.98	5.33	15% (+/-)	Yes
PT/OT/Speech/Hear: Avg Medicaid Pd per User	N/A	\$714	N/A	\$768	N/A	\$795	N/A	7.57	3.48	15% (+/-)	Yes
Hospice: Total Medicaid Paid (TOS 35)	N/A	\$163,952	N/A	\$190,727	N/A	\$531,194	N/A	16.33	178.50	15% (+/-)	No
Hospice: Number of Users	N/A	34	N/A	36	N/A	53	N/A	5.88	47.22	15% (+/-)	No
Hospice: Avg Medicaid Pd per User	N/A	\$4,822	N/A	\$5,298	N/A	\$10,023	N/A	9.87	89.18	15% (+/-)	No
DME: Total Medicaid Paid (TOS 51)	N/A	\$5,869,448	N/A	\$7,702,969	N/A	\$8,309,602	N/A	31.24	7.88	15% (+/-)	Yes
DME: Number of Users	N/A	13,567	N/A	26,495	N/A	26,445	N/A	95.29	-0.19	15% (+/-)	Yes
DME: Avg Medicaid Pd per User	N/A	\$433	N/A	\$291	N/A	\$314	N/A	-32.80	8.08	15% (+/-)	Yes
Residential Care: Total Medicaid Paid (TOS 52)	N/A	\$297	N/A	\$22,193,217	N/A	\$24,634,322	N/A	7,470,000.00	11.00	15% (+/-)	Yes
Residential Care: Number of Users	N/A	7	N/A	1,229	N/A	1,267	N/A	17,457.00	3.09	15% (+/-)	Yes
Residential Care: Avg Medicaid Pd per User	N/A	\$42	N/A	\$18,058	N/A	\$19,443	N/A	42,461.00	7.67	15% (+/-)	Yes
Psych. Services: Total Medicaid Paid (TOS 53)	N/A	\$12,739,940	N/A	\$13,525,437	N/A	\$14,785,460	N/A	6.17	9.32	15% (+/-)	Yes
Psych. Services: Number of Users	N/A	11,356	N/A	12,213	N/A	12,898	N/A	7.55	5.61	15% (+/-)	Yes
Psych. Services: Avg Medicaid Pd per User	N/A	\$1,122	N/A	\$1,107	N/A	\$1,146	N/A	-1.28	3.51	15% (+/-)	Yes
Adult Day Care: Total Medicaid Paid (TOS 54)	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Adult Day Care: Number of Users	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Adult Day Care: Avg Medicaid Pd per User	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
<b>AVG FFS MEDICAID AMT PD/NON-DUAL FFS ENROLLEE BY MAX TOS</b>											
Inpatient Hospital (TOS 01)	N/A	\$743	N/A	\$727	N/A	\$742	N/A	-2.21	2.08	15% (+/-)	Yes
Aged	N/A	\$1,832	N/A	\$1,022	N/A	\$772	N/A	-44.20	-24.50	15% (+/-)	No
Disabled	N/A	\$4,059	N/A	\$3,563	N/A	\$3,660	N/A	-12.20	2.74	15% (+/-)	Yes
Child	N/A	\$349	N/A	\$381	N/A	\$380	N/A	9.08	-0.07	15% (+/-)	Yes
Adult	N/A	\$802	N/A	\$845	N/A	\$901	N/A	5.31	6.64	15% (+/-)	Yes
ILTC (TOS=02,04,05,07)	N/A	\$296	N/A	\$294	N/A	\$296	N/A	-0.63	0.76	15% (+/-)	Yes
Aged	N/A	\$6,027	N/A	\$8,353	N/A	\$7,882	N/A	38.59	-5.63	15% (+/-)	Yes
Disabled	N/A	\$2,382	N/A	\$2,335	N/A	\$2,451	N/A	-1.97	4.97	15% (+/-)	Yes
Child	N/A	\$119	N/A	\$129	N/A	\$128	N/A	7.74	-0.36	15% (+/-)	Yes
Adult	N/A	\$1	N/A	\$1	N/A	\$0	N/A	-29.40	-75.30	15% (+/-)	No
Drugs (TOS=16)	N/A	\$331	N/A	\$372	N/A	\$390	N/A	12.23	4.74	15% (+/-)	Yes
Aged	N/A	\$1,350	N/A	\$1,487	N/A	\$1,002	N/A	10.13	-32.60	15% (+/-)	No
Disabled	N/A	\$1,891	N/A	\$2,126	N/A	\$2,156	N/A	12.42	1.40	15% (+/-)	Yes
Child	N/A	\$167	N/A	\$190	N/A	\$211	N/A	13.84	11.20	15% (+/-)	Yes
Adult	N/A	\$275	N/A	\$318	N/A	\$332	N/A	15.77	4.41	15% (+/-)	Yes
All Other Services	N/A	\$1,563	N/A	\$1,638	N/A	\$1,734	N/A	4.82	5.85	15% (+/-)	Yes
Aged	N/A	\$2,872	N/A	\$1,431	N/A	\$1,023	N/A	-50.20	-28.50	15% (+/-)	No
Disabled	N/A	\$6,606	N/A	\$7,158	N/A	\$7,575	N/A	8.34	5.84	15% (+/-)	Yes
Child	N/A	\$1,010	N/A	\$1,122	N/A	\$1,122	N/A	3.04	7.76	15% (+/-)	Yes
Adult	N/A	\$1,482	N/A	\$1,592	N/A	\$1,644	N/A	7.41	3.31	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	12.44	N/A	12.42	N/A	12.39	N/A	-0.16	-0.29	15% (+/-)	Yes
Aged	N/A	18.18	N/A	9.09	N/A	9.32	N/A	-50.00	2.54	15% (+/-)	Yes
Disabled	N/A	19.54	N/A	18.58	N/A	18.55	N/A	-4.94	-0.16	15% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: SD

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	8.91	N/A	8.92	N/A	9.00	N/A	0.11	0.91	15% (+/-)	Yes
Adult	N/A	22.75	N/A	23.05	N/A	22.57	N/A	1.33	-2.07	15% (+/-)	Yes
% Non-Dual FFS Enrollees with ILTC Claims (TOS=02,04,05,07)	N/A	0.88	N/A	0.84	N/A	0.83	N/A	-3.93	-1.61	15% (+/-)	Yes
Aged	N/A	28.14	N/A	37.58	N/A	35.59	N/A	33.54	-5.28	15% (+/-)	Yes
Disabled	N/A	5.81	N/A	5.43	N/A	5.69	N/A	-6.60	4.95	15% (+/-)	Yes
Child	N/A	0.46	N/A	0.46	N/A	0.46	N/A	0.89	-0.58	15% (+/-)	Yes
Adult	N/A	0.02	N/A	0.06	N/A	0.02	N/A	210.70	-70.10	15% (+/-)	No
% with ratio of ILTC days/enroll days > 1	N/A	0.00	N/A	0.11	N/A	0.22	N/A	Div by 0	98.45	15% (+/-)	No
% Non-Dual FFS Enrollees with Drug Claims (TOS=16)	N/A	56.76	N/A	55.28	N/A	57.28	N/A	-2.62	3.63	15% (+/-)	Yes
Aged	N/A	64.07	N/A	61.82	N/A	50.00	N/A	-3.51	-19.10	15% (+/-)	No
Disabled	N/A	66.62	N/A	66.13	N/A	67.69	N/A	-0.74	2.36	15% (+/-)	Yes
Child	N/A	55.66	N/A	53.48	N/A	55.82	N/A	-3.92	4.37	15% (+/-)	Yes
Adult	N/A	56.63	N/A	57.48	N/A	58.57	N/A	1.51	1.90	15% (+/-)	Yes
% Non-Dual FFS Enrollees with All Other Claims	N/A	83.37	N/A	82.63	N/A	83.27	N/A	-0.88	0.77	15% (+/-)	Yes
Aged	N/A	67.10	N/A	60.00	N/A	53.39	N/A	-10.60	-11.00	15% (+/-)	Yes
Disabled	N/A	88.64	N/A	88.67	N/A	88.44	N/A	0.03	-0.26	15% (+/-)	Yes
Child	N/A	83.03	N/A	82.00	N/A	82.84	N/A	-1.25	1.03	15% (+/-)	Yes
Adult	N/A	82.57	N/A	82.71	N/A	82.92	N/A	0.16	0.26	15% (+/-)	Yes
Avg # IP Days per Non-Dual FFS User	N/A	5	N/A	5	N/A	5	N/A	-0.72	0.28	15% (+/-)	Yes
Aged	N/A	9	N/A	10	N/A	8	N/A	7.58	-15.00	15% (+/-)	Yes
Disabled	N/A	14	N/A	13	N/A	13	N/A	-6.61	1.29	15% (+/-)	Yes
Child	N/A	4	N/A	4	N/A	4	N/A	7.43	-0.94	15% (+/-)	Yes
Adult	N/A	3	N/A	3	N/A	3	N/A	2.93	2.10	15% (+/-)	Yes
Avg # ILTC Days per Non-Dual FFS User	N/A	131	N/A	123	N/A	113	N/A	-5.65	-8.17	15% (+/-)	Yes
Aged	N/A	262	N/A	240	N/A	227	N/A	-8.12	-5.51	15% (+/-)	Yes
Disabled	N/A	205	N/A	206	N/A	188	N/A	0.35	-8.66	15% (+/-)	Yes
Child	N/A	1	N/A	1	N/A	0	N/A	-49.30	-16.50	15% (+/-)	No
Adult	N/A	10	N/A	7	N/A	11	N/A	-31.40	56.90	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	\$1,370,346	N/A	\$1,448,304	N/A	\$1,384,227	N/A	5.69	-4.42	15% (+/-)	Yes
FP: Number of Users	N/A	6,982	N/A	7,607	N/A	7,584	N/A	8.95	-0.30	15% (+/-)	Yes
FP: Average Medicaid Pd per User	N/A	\$196	N/A	\$190	N/A	\$183	N/A	-2.99	-4.13	15% (+/-)	Yes
RHC: Total Medicaid Paid (Program Type 3)	N/A	\$2,258,484	N/A	\$2,375,987	N/A	\$2,507,202	N/A	5.20	5.52	15% (+/-)	Yes
RHC: Number of Users	N/A	7,435	N/A	7,469	N/A	7,820	N/A	0.46	4.70	15% (+/-)	Yes
RHC: Avg Medicaid Pd per User	N/A	\$304	N/A	\$318	N/A	\$321	N/A	4.72	0.79	15% (+/-)	Yes
FOHC: Total Medicaid Paid (Program Type 4)	N/A	\$3,527,433	N/A	\$4,113,187	N/A	\$4,405,829	N/A	16.61	7.12	15% (+/-)	Yes
FOHC: Number of Users	N/A	8,228	N/A	9,297	N/A	9,928	N/A	12.99	6.79	15% (+/-)	Yes
FOHC: Avg Medicaid Pd per User	N/A	\$429	N/A	\$442	N/A	\$444	N/A	3.20	0.31	15% (+/-)	Yes
IHS: Total Medicaid Pd (Program Type 5)	N/A	\$31,489,312	N/A	\$31,092,361	N/A	\$32,736,028	N/A	-1.26	5.29	15% (+/-)	Yes
IHS: Number of Users	N/A	21,856	N/A	21,467	N/A	22,183	N/A	-1.78	3.34	15% (+/-)	Yes
IHS: Avg Medicaid Pd per User	N/A	\$1,441	N/A	\$1,448	N/A	\$1,476	N/A	0.53	1.89	15% (+/-)	Yes
Section 1915(c) Waiver: Total Medicaid Paid (Program Types 6 and 7)	N/A	\$20,868,472	N/A	\$23,594,434	N/A	\$25,142,678	N/A	13.06	6.56	15% (+/-)	Yes
Section 1915(c) Waiver: Number of Users	N/A	643	N/A	671	N/A	664	N/A	4.36	-1.04	15% (+/-)	Yes
Section 1915(c) Waiver: Avg Medicaid Pd per User	N/A	\$32,455	N/A	\$35,163	N/A	\$37,865	N/A	8.35	7.69	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	\$58,980,395	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	6,298	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	\$9,365	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$1,550	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$7,293	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$16,841	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$620	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	5.76	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	23.73	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	55.05	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	1.80	N/A	N/A	N/A	15% (+/-)	No

2003-2005 MAX PSF VALIDATION TABLE  
STATE: SD

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	0.31	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	\$52,510,343	N/A	N/A	N/A	15% (+/-)	No
Number of Non-Dual CLTC Users (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	2,902	N/A	N/A	N/A	15% (+/-)	No
Average FFS CLTC Expenditures per Non-Dual User (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	\$18,095	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$4,986	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$20,249	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$16,841	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$620	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	2.65	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	5.93	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	16.15	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	1.80	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	0.31	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	\$25,142,678	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	664	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	\$37,865	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$37,965	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$15,948	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
% Non-Dual FFS Enrollees with CLTC Claims (Section 1915(c) claims only - excludes CLTC Codes 11-20)	N/A	N/A	N/A	N/A	N/A	0.61	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	7.62	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
<b>FFS INFORMATION FOR DUAL MEDICAID ENROLLEES (excludes non-EDB duals, duals ever enrolled in HMO/HIOs, duals with only restricted benefits, duals with missing eligibility information, and prescription drug only enrollees)—NOTE: non-EDB duals and duals with restricted benefits were not excluded prior to 2001. Prescription drug only enrollees were NOT excluded prior to 2003.</b>											
Total EDB Dual FFS Enrollees	N/A	14,103	N/A	14,161	N/A	14,267	N/A	0.41	0.75	15% (+/-)	Yes
Number of EDB Dual FFS Recipients	N/A	13,551	N/A	13,577	N/A	13,677	N/A	0.19	0.74	15% (+/-)	Yes
Total EDB Dual FFS PYE	N/A	12,398	N/A	12,415	N/A	12,496	N/A	0.14	0.65	15% (+/-)	Yes
% EDB Only Dual (Code 50)	N/A	8.13	N/A	5.59	N/A	4.29	N/A	-31.30	-23.20	15% (+/-)	No
% QMB Only (Code 51)	N/A	0.90	N/A	0.97	N/A	1.23	N/A	8.22	26.59	15% (+/-)	No
% QMB Plus (Code 52)	N/A	66.31	N/A	68.41	N/A	69.38	N/A	3.17	1.41	15% (+/-)	Yes
% SLMB Only (Code 53)	N/A	0.40	N/A	0.28	N/A	0.53	N/A	-28.90	86.11	15% (+/-)	No
% SLMB Plus (Code 54)	N/A	7.20	N/A	7.18	N/A	7.38	N/A	-0.21	2.77	15% (+/-)	Yes
% QDWI (Code 55)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	15% (+/-)	N/A
% QI 1 (Code 56)	N/A	0.08	N/A	0.14	N/A	0.12	N/A	81.07	-15.60	15% (+/-)	No
% QI 2 (Code 57)	N/A	0.01	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	16.98	N/A	17.42	N/A	17.07	N/A	2.58	-1.99	15% (+/-)	Yes
% Dual Type Unknown (Code 59)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	15% (+/-)	N/A
MAX Aged EDB Dual FFS Total	N/A	7,339	N/A	7,253	N/A	7,119	N/A	-1.17	-1.85	10% (+/-)	Yes
11: Aged, Cash	N/A	1,993	N/A	1,971	N/A	1,905	N/A	-1.10	-3.35	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	81	N/A	95	N/A	106	N/A	17.28	11.58	10% (+/-)	No
41: Other Aged	N/A	5,265	N/A	5,187	N/A	5,108	N/A	-1.48	-1.52	10% (+/-)	Yes
51: 1115 Aged	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Disabled EDB Dual FFS Total	N/A	6,625	N/A	6,780	N/A	7,004	N/A	2.34	3.30	10% (+/-)	Yes
12: Disabled, Cash	N/A	4,980	N/A	5,018	N/A	5,095	N/A	0.76	1.53	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	98	N/A	95	N/A	165	N/A	-3.06	73.68	10% (+/-)	No
42: Other Disabled	N/A	1,547	N/A	1,667	N/A	1,744	N/A	7.76	4.62	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	\$234,368,534	N/A	\$248,947,161	N/A	\$263,096,813	N/A	6.22	5.68	15% (+/-)	Yes
Average FFS Medicaid Amt Paid per FFS Dual	N/A	\$16,618	N/A	\$17,580	N/A	\$18,441	N/A	5.79	4.90	15% (+/-)	Yes



2003-2005 MAX PSF VALIDATION TABLE  
STATE: SD

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	\$17,295	N/A	\$18,336	N/A	\$19,236	N/A	6.02	4.91	15% (+/-)	Yes
<b>AVG FFS MEDICAID AMT PD/FFS DUAL BY MAX ELIGIBILITY GROUP</b>											
All Aged	N/A	\$17,416	N/A	\$18,190	N/A	\$19,361	N/A	4.45	6.43	15% (+/-)	Yes
11: Aged, Cash	N/A	\$5,359	N/A	\$5,772	N/A	\$6,107	N/A	7.71	5.79	15% (+/-)	Yes
21: Aged, MN	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
31: Aged, Poverty	N/A	\$5,625	N/A	\$3,934	N/A	\$6,821	N/A	-30.10	73.36	15% (+/-)	No
41: Other Aged	N/A	\$22,161	N/A	\$23,170	N/A	\$24,564	N/A	4.56	6.02	15% (+/-)	Yes
51: 1115 Aged	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
All Disabled	N/A	\$15,970	N/A	\$17,168	N/A	\$17,745	N/A	7.51	3.36	15% (+/-)	Yes
12: Disabled, Cash	N/A	\$11,068	N/A	\$11,473	N/A	\$11,997	N/A	3.67	4.56	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	\$5,610	N/A	\$9,223	N/A	\$4,476	N/A	64.39	-51.50	15% (+/-)	No
42: Other Disabled	N/A	\$32,407	N/A	\$34,764	N/A	\$35,792	N/A	7.28	2.96	15% (+/-)	Yes
52: 1115 Disabled	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
<b>FFS EXPENDITURES AND USERS BY MAX TOS</b>											
IP: Total Medicaid Paid (TOS 01)	N/A	\$5,060,156	N/A	\$3,822,939	N/A	\$3,189,485	N/A	-24.50	-16.60	15% (+/-)	No
IP: Number of Users	N/A	2,849	N/A	1,658	N/A	1,896	N/A	-41.80	14.35	15% (+/-)	Yes
IP: Average Medicaid Pd per User	N/A	\$1,776	N/A	\$2,306	N/A	\$1,682	N/A	29.82	-27.00	15% (+/-)	No
IP: Average Medicaid Covered Days Per User	N/A	7	N/A	6	N/A	6	N/A	-13.20	11.54	15% (+/-)	Yes
MH Aged: Total Medicaid Paid (TOS 02)	N/A	\$2,673,012	N/A	\$2,480,275	N/A	\$3,086,216	N/A	-7.21	24.43	15% (+/-)	No
MH Aged: Number of Users	N/A	51	N/A	44	N/A	44	N/A	-13.70	0.00	15% (+/-)	Yes
MH Aged: Avg Medicaid Pd per User	N/A	\$52,412	N/A	\$56,370	N/A	\$70,141	N/A	7.55	24.43	15% (+/-)	No
IP Psych < 21: Total Medicaid Paid (TOS 04)	N/A	\$11,762	N/A	\$166,150	N/A	\$182,267	N/A	1,313.00	9.70	15% (+/-)	Yes
IP Psych < 21: Number of Users	N/A	1	N/A	3	N/A	6	N/A	200.00	100.00	15% (+/-)	No
IP Psych<21 :Avg Medicaid Pd per User	N/A	\$11,762	N/A	\$55,383	N/A	\$30,378	N/A	370.90	-45.10	15% (+/-)	No
ICF/MR: Total Medicaid Pd (TOS 05)	N/A	\$9,686,599	N/A	\$11,007,714	N/A	\$11,656,898	N/A	13.64	5.90	15% (+/-)	Yes
ICF/MR: Number of Users	N/A	117	N/A	108	N/A	113	N/A	-7.69	4.63	15% (+/-)	Yes
ICF/MR: Avg Medicaid Pd per User	N/A	\$82,791	N/A	\$101,923	N/A	\$103,158	N/A	23.11	1.21	15% (+/-)	Yes
NF: Total Medicaid Paid (TOS 07)	N/A	\$109,921,128	N/A	\$113,596,901	N/A	\$119,266,305	N/A	3.34	4.99	15% (+/-)	Yes
NF Number of Users	N/A	5,388	N/A	5,342	N/A	5,351	N/A	-0.85	0.17	15% (+/-)	Yes
NF:Avg Medicaid Pd per User	N/A	\$20,401	N/A	\$21,265	N/A	\$22,289	N/A	4.23	4.81	15% (+/-)	Yes
Physician: Total Medicaid Paid (TOS 08)	N/A	\$3,181,148	N/A	\$3,200,424	N/A	\$3,395,153	N/A	0.61	6.08	15% (+/-)	Yes
Physician: Number of Users	N/A	10,069	N/A	10,033	N/A	10,074	N/A	-0.36	0.41	15% (+/-)	Yes
Physician: Avg Medicaid Pd per User	N/A	\$316	N/A	\$319	N/A	\$337	N/A	0.97	5.65	15% (+/-)	Yes
Dental: Total Medicaid Paid (TOS 09)	N/A	\$1,817	N/A	\$482	N/A	\$1,152	N/A	-73.50	139.00	15% (+/-)	No
Dental: Number of Users	N/A	10	N/A	7	N/A	10	N/A	-30.00	42.86	15% (+/-)	No
Dental: Avg Medicaid Pd per User	N/A	\$182	N/A	\$69	N/A	\$115	N/A	-62.10	67.30	15% (+/-)	No
Other Practitioner: Total Medicaid Pd (TOS 10)	N/A	\$865,779	N/A	\$843,993	N/A	\$948,123	N/A	-2.52	12.34	15% (+/-)	Yes
Other Practitioner: Number of Users	N/A	6,679	N/A	6,861	N/A	7,114	N/A	2.73	3.69	15% (+/-)	Yes
Other Practitioner: Avg Medicaid Pd per User	N/A	\$130	N/A	\$123	N/A	\$133	N/A	-5.10	8.34	15% (+/-)	Yes
OPD: Total Medicaid Paid (TOS 11)	N/A	\$3,565,008	N/A	\$3,750,796	N/A	\$4,251,317	N/A	5.21	13.34	15% (+/-)	Yes
OPD Number of Users	N/A	6,109	N/A	6,118	N/A	6,308	N/A	0.15	3.11	15% (+/-)	Yes
OPD: Avg Medicaid Pd per User	N/A	\$584	N/A	\$613	N/A	\$674	N/A	5.06	9.93	15% (+/-)	Yes
Clinic: Total Medicaid Paid (TOS 12)	N/A	\$2,575,221	N/A	\$2,776,670	N/A	\$2,737,276	N/A	7.82	-1.42	15% (+/-)	Yes
Clinic: Number of Users	N/A	4,187	N/A	4,138	N/A	4,148	N/A	-1.17	0.24	15% (+/-)	Yes
Clinic: Avg Medicaid Pd per User	N/A	\$615	N/A	\$671	N/A	\$660	N/A	9.10	-1.66	15% (+/-)	Yes
HH: Total Medicaid Paid (TOS 13)	N/A	\$25,454	N/A	\$27,741	N/A	\$30,671	N/A	8.99	10.56	15% (+/-)	Yes
HH: Number of Users	N/A	22	N/A	17	N/A	22	N/A	-22.70	29.41	15% (+/-)	No
HH: Avg Medicaid Pd per User	N/A	\$1,157	N/A	\$1,632	N/A	\$1,394	N/A	41.04	-14.60	15% (+/-)	Yes
Lab/Xray: Total Medicaid Paid (TOS 15)	N/A	\$564,499	N/A	\$617,143	N/A	\$556,221	N/A	9.33	-9.87	15% (+/-)	Yes
Lab/Xray: Number of Users	N/A	6,378	N/A	6,421	N/A	6,517	N/A	0.67	1.50	15% (+/-)	Yes
Lab/Xray:Avg Medicaid Pd per User	N/A	\$89	N/A	\$96	N/A	\$85	N/A	8.59	-11.20	15% (+/-)	Yes
Drugs: Total Medicaid Paid (TOS 16)	N/A	\$40,890,623	N/A	\$46,448,517	N/A	\$49,372,006	N/A	13.59	6.29	15% (+/-)	Yes
Drugs: Number of Users	N/A	12,265	N/A	12,283	N/A	12,450	N/A	0.15	1.36	15% (+/-)	Yes
Drugs: Avg Medicaid Pd per User	N/A	\$3,334	N/A	\$3,782	N/A	\$3,966	N/A	13.43	4.87	15% (+/-)	Yes
Other Services: Total Medicaid Paid (TOS 19)	N/A	\$43,796,269	N/A	\$46,741,401	N/A	\$49,827,574	N/A	6.73	6.60	15% (+/-)	Yes
Other Services: Number of Users	N/A	3,902	N/A	3,987	N/A	4,128	N/A	2.18	3.54	15% (+/-)	Yes



2003-2005 MAX PSF VALIDATION TABLE  
STATE: SD

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	\$11,224	N/A	\$11,723	N/A	\$12,071	N/A	4.45	2.96	15% (+/-)	Yes
Transportation: Total Medicaid Paid (TOS 26)	N/A	\$1,025,450	N/A	\$1,026,602	N/A	\$1,150,758	N/A	0.11	12.09	15% (+/-)	Yes
Transportation: Number of Users	N/A	3,247	N/A	3,260	N/A	3,481	N/A	0.40	6.78	15% (+/-)	Yes
Transportation: Avg Medicaid Pd per User	N/A	\$316	N/A	\$315	N/A	\$331	N/A	-0.29	4.98	15% (+/-)	Yes
PCS: Total Medicaid Paid (TOS 30)	N/A	\$5,714,690	N/A	\$6,885,961	N/A	\$7,779,288	N/A	20.50	12.97	15% (+/-)	Yes
PCS: Number of Users	N/A	1,582	N/A	1,690	N/A	1,727	N/A	6.83	2.19	15% (+/-)	Yes
PCS: Avg Medicaid Pd per User	N/A	\$3,612	N/A	\$4,075	N/A	\$4,505	N/A	12.80	10.55	15% (+/-)	Yes
Target Case Management: Total Medicaid Pd (TOS 31)	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Target Case Management: Number of Users	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Target Case Management: Avg Medicaid Pd per User	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Rehab Services: Total Medicaid Pd (TOS 33)	N/A	\$1,133,165	N/A	\$1,227,080	N/A	\$525,730	N/A	8.29	-57.20	15% (+/-)	No
Rehab Services: Number of Users	N/A	202	N/A	209	N/A	207	N/A	3.47	-0.96	15% (+/-)	Yes
Rehab Services: Avg Medicaid Pd per User	N/A	\$5,610	N/A	\$5,871	N/A	\$2,540	N/A	4.66	-56.70	15% (+/-)	No
PT/OT/Speech/Hear: Total Medicaid Paid (TOS 34)	N/A	\$205,599	N/A	\$105,582	N/A	\$113,787	N/A	-48.60	7.77	15% (+/-)	Yes
PT/OT/Speech/Hear: Number of Users	N/A	695	N/A	795	N/A	899	N/A	14.39	13.08	15% (+/-)	Yes
PT/OT/Speech/Hear: Avg Medicaid Pd per User	N/A	\$296	N/A	\$133	N/A	\$127	N/A	-55.10	-4.70	15% (+/-)	Yes
Hospice: Total Medicaid Paid (TOS 35)	N/A	\$352,007	N/A	\$557,329	N/A	\$1,099,790	N/A	58.33	97.33	15% (+/-)	No
Hospice: Number of Users	N/A	68	N/A	97	N/A	204	N/A	42.65	110.30	15% (+/-)	No
Hospice: Avg Medicaid Pd per User	N/A	\$5,177	N/A	\$5,746	N/A	\$5,391	N/A	10.99	-6.17	15% (+/-)	Yes
DME: Total Medicaid Paid (TOS 51)	N/A	\$376,854	N/A	\$924,959	N/A	\$910,560	N/A	145.40	-1.56	15% (+/-)	Yes
DME: Number of Users	N/A	1,482	N/A	3,448	N/A	3,507	N/A	132.70	1.71	15% (+/-)	Yes
DME: Avg Medicaid Pd per User	N/A	\$254	N/A	\$268	N/A	\$260	N/A	5.50	-3.21	15% (+/-)	Yes
Residential Care: Total Medicaid Paid (TOS 52)	N/A	\$37	N/A	\$31	N/A	\$31	N/A	-16.20	0.00	15% (+/-)	Yes
Residential Care: Number of Users	N/A	1	N/A	1	N/A	1	N/A	0.00	0.00	15% (+/-)	Yes
Residential Care: Avg Medicaid Pd per User	N/A	\$37	N/A	\$31	N/A	\$31	N/A	-16.20	0.00	15% (+/-)	Yes
Psych. Services: Total Medicaid Paid (TOS 53)	N/A	\$2,717,135	N/A	\$2,698,821	N/A	\$2,968,163	N/A	-0.67	9.98	15% (+/-)	Yes
Psych. Services: Number of Users	N/A	1,295	N/A	1,373	N/A	1,397	N/A	6.02	1.75	15% (+/-)	Yes
Psych. Services: Avg Medicaid Pd per User	N/A	\$2,098	N/A	\$1,966	N/A	\$2,125	N/A	-6.32	8.09	15% (+/-)	Yes
Adult Day Care: Total Medicaid Paid (TOS 54)	N/A	\$8,751	N/A	\$10,098	N/A	\$8,831	N/A	15.39	-12.50	15% (+/-)	Yes
Adult Day Care: Number of Users	N/A	2	N/A	2	N/A	3	N/A	0.00	50.00	15% (+/-)	No
Adult Day Care: Avg Medicaid Pd per User	N/A	\$4,376	N/A	\$5,049	N/A	\$2,944	N/A	15.39	-41.70	15% (+/-)	No
<b>AVG FFS MEDICAID AMT PD/FFS DUAL BY SELECTED TYPE OF SERVICE</b>											
Inpatient Hospital (TOS=01)	N/A	\$359	N/A	\$270	N/A	\$224	N/A	-24.80	-17.20	15% (+/-)	No
Aged	N/A	\$216	N/A	\$132	N/A	\$129	N/A	-39.00	-2.41	15% (+/-)	Yes
Disabled	N/A	\$493	N/A	\$408	N/A	\$283	N/A	-17.20	-30.80	15% (+/-)	No
ILTC (TOS=02,04,05,07)	N/A	\$8,671	N/A	\$8,986	N/A	\$9,406	N/A	3.63	4.67	15% (+/-)	Yes
Aged	N/A	\$13,250	N/A	\$13,640	N/A	\$14,453	N/A	2.95	5.96	15% (+/-)	Yes
Disabled	N/A	\$3,780	N/A	\$4,176	N/A	\$4,469	N/A	10.49	7.00	15% (+/-)	Yes
Drugs (TOS=16)	N/A	\$2,899	N/A	\$3,280	N/A	\$3,461	N/A	13.13	5.50	15% (+/-)	Yes
Aged	N/A	\$2,737	N/A	\$3,053	N/A	\$3,220	N/A	11.54	5.47	15% (+/-)	Yes
Disabled	N/A	\$3,111	N/A	\$3,550	N/A	\$3,731	N/A	14.13	5.09	15% (+/-)	Yes
All Other Services	N/A	\$4,689	N/A	\$5,044	N/A	\$5,351	N/A	7.57	6.09	15% (+/-)	Yes
Aged	N/A	\$1,213	N/A	\$1,366	N/A	\$1,559	N/A	12.57	14.19	15% (+/-)	Yes
Disabled	N/A	\$8,586	N/A	\$9,034	N/A	\$9,262	N/A	5.21	2.53	15% (+/-)	Yes
<b>% OF FFS DUALS WITH CLAIMS BY SELECTED TYPE OF SERVICE</b>											
% FFS Duals with IP Claims (TOS=01)	N/A	20.20	N/A	11.71	N/A	13.29	N/A	-42.00	13.51	15% (+/-)	Yes
Aged	N/A	19.85	N/A	10.74	N/A	11.98	N/A	-45.90	11.56	15% (+/-)	Yes
Disabled	N/A	20.54	N/A	12.73	N/A	14.55	N/A	-38.00	14.30	15% (+/-)	Yes
% FFS Duals with ILTC Claims (TOS=02,04,05,07)	N/A	39.21	N/A	38.66	N/A	38.50	N/A	-1.40	-0.42	15% (+/-)	Yes
Aged	N/A	64.80	N/A	64.39	N/A	64.52	N/A	-0.64	0.20	15% (+/-)	Yes
Disabled	N/A	11.65	N/A	11.86	N/A	12.84	N/A	1.76	8.24	15% (+/-)	Yes
% FFS Duals with Drug Claims (TOS=16)	N/A	86.97	N/A	86.74	N/A	87.26	N/A	-0.26	0.61	15% (+/-)	Yes
Aged	N/A	92.45	N/A	92.09	N/A	92.74	N/A	-0.40	0.71	15% (+/-)	Yes
Disabled	N/A	81.04	N/A	81.18	N/A	82.01	N/A	0.17	1.02	15% (+/-)	Yes
% FFS Duals with All Other Claims	N/A	86.92	N/A	87.07	N/A	87.03	N/A	0.18	-0.05	15% (+/-)	Yes
Aged	N/A	81.67	N/A	81.73	N/A	81.42	N/A	0.07	-0.39	15% (+/-)	Yes
Disabled	N/A	92.63	N/A	92.70	N/A	92.68	N/A	0.07	-0.03	15% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: SD

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	6	N/A	6	N/A	-13.20	11.54	15% (+/-)	Yes
Aged	N/A	6	N/A	5	N/A	6	N/A	-12.50	9.13	15% (+/-)	Yes
Disabled	N/A	7	N/A	6	N/A	7	N/A	-14.60	11.50	15% (+/-)	Yes
Avg # ILTC Days per FFS Dual User (TOS 02, 04, 05, 07)	N/A	260	N/A	257	N/A	254	N/A	-1.13	-0.99	15% (+/-)	Yes
Aged	N/A	258	N/A	255	N/A	254	N/A	-1.21	-0.42	15% (+/-)	Yes
Disabled	N/A	268	N/A	265	N/A	254	N/A	-0.99	-4.15	15% (+/-)	Yes
<b>FFS EXPENDITURES AND USERS BY MAX PROGRAM TYPE</b>											
FP: Total Medicaid Paid (Program Type 2)	N/A	\$132,510	N/A	\$139,479	N/A	\$121,383	N/A	5.26	-13.00	15% (+/-)	Yes
FP: Number of Users	N/A	431	N/A	454	N/A	441	N/A	5.34	-2.86	15% (+/-)	Yes
FP: Average Medicaid Pd per User	N/A	\$307	N/A	\$307	N/A	\$275	N/A	-0.07	-10.40	15% (+/-)	Yes
RHC: Total Medicaid Paid (Program Type 3)	N/A	\$201,258	N/A	\$212,604	N/A	\$216,253	N/A	5.64	1.72	15% (+/-)	Yes
RHC: Number of Users	N/A	1,482	N/A	1,527	N/A	1,522	N/A	3.04	-0.33	15% (+/-)	Yes
RHC: Avg Medicaid Pd per User	N/A	\$136	N/A	\$139	N/A	\$142	N/A	2.52	2.05	15% (+/-)	Yes
FQHC: Total Medicaid Paid (Program Type 4)	N/A	\$102,537	N/A	\$96,866	N/A	\$91,016	N/A	-5.53	-6.04	15% (+/-)	Yes
FQHC: Number of Users	N/A	671	N/A	726	N/A	713	N/A	8.20	-1.79	15% (+/-)	Yes
FQHC: Avg Medicaid Pd per User	N/A	\$153	N/A	\$133	N/A	\$128	N/A	-12.70	-4.33	15% (+/-)	Yes
IHS: Total Medicaid Pd (Program Type 5)	N/A	\$2,302,231	N/A	\$2,347,618	N/A	\$2,068,933	N/A	1.97	-11.90	15% (+/-)	Yes
IHS: Number of Users	N/A	1,220	N/A	1,159	N/A	1,192	N/A	-5.00	2.85	15% (+/-)	Yes
IHS: Avg Medicaid Pd per User	N/A	\$1,887	N/A	\$2,026	N/A	\$1,736	N/A	7.34	-14.30	15% (+/-)	Yes
Section 1915(c) Waiver: Total Medicaid Paid (Program Types 6 and 7)	N/A	\$43,019,341	N/A	\$46,096,045	N/A	\$49,149,207	N/A	7.15	6.62	15% (+/-)	Yes
Section 1915(c) Waiver: Number of Users	N/A	1,463	N/A	1,509	N/A	1,574	N/A	3.14	4.31	15% (+/-)	Yes
Section 1915(c) Waiver: Avg Medicaid Pd per User	N/A	\$29,405	N/A	\$30,547	N/A	\$31,226	N/A	3.89	2.22	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	\$60,639,197	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	7,656	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	\$7,920	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$2,098	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$12,763	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	53.66	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	48.80	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	59.68	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	\$56,968,368	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	3,305	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	\$17,237	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$4,292	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$24,993	N/A	N/A	N/A	15% (+/-)	No
% FFS Dual Enrollees with CLTC Claims (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	23.17	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	17.36	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	29.51	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	\$49,149,207	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	1,574	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	\$31,226	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$32,598	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$31,224	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	11.03	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	0.03	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	22.44	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	117,379	N/A	120,954	N/A	123,654	N/A	3.05	2.23	15% (+/-)	Yes
# FFS Recipients	N/A	102,076	N/A	104,224	N/A	107,402	N/A	2.10	3.05	15% (+/-)	Yes
% FFS Enrollees who are Recipients	65-90%	86.96	Yes	86.17	Yes	86.86	Yes	-0.91	0.80	15% (+/-)	Yes
% Aged who are Recipients	90-100%	96.99	Yes	96.68	Yes	96.74	Yes	-0.31	0.06	15% (+/-)	Yes
% Disabled who are Recipients	85-100%	91.94	Yes	91.83	Yes	92.00	Yes	-0.12	0.18	15% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: SD

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%	85.41	Yes	84.29	Yes	85.32	Yes	-1.31	1.21	15% (+/-)	Yes
% Adults who are Recipients	80-100%	85.19	Yes	85.21	Yes	85.46	Yes	0.02	0.29	15% (+/-)	Yes
Total FFS PYE	N/A	91,227	N/A	93,866	N/A	96,240	N/A	2.89	2.53	15% (+/-)	Yes
MAX Aged Total	N/A	7,570	N/A	7,418	N/A	7,237	N/A	-2.01	-2.44	10% (+/-)	Yes
11: Aged, Cash	N/A	2,080	N/A	2,032	N/A	1,946	N/A	-2.31	-4.23	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	153	N/A	131	N/A	134	N/A	-14.40	2.29	10% (+/-)	Yes
41: Other Aged	N/A	5,337	N/A	5,255	N/A	5,157	N/A	-1.54	-1.86	10% (+/-)	Yes
51: 1115 Aged	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Disabled Total	N/A	15,094	N/A	15,350	N/A	15,679	N/A	1.70	2.14	10% (+/-)	Yes
12: Disabled, Cash	N/A	12,775	N/A	12,816	N/A	12,988	N/A	0.32	1.34	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	111	N/A	163	N/A	247	N/A	46.85	51.53	10% (+/-)	No
42: Other Disabled	N/A	2,208	N/A	2,371	N/A	2,444	N/A	7.38	3.08	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	74,900	N/A	77,471	N/A	79,442	N/A	3.43	2.54	10% (+/-)	Yes
14: AFDC Child, Cash	N/A	17,532	N/A	17,375	N/A	17,103	N/A	-0.90	-1.57	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	43,652	N/A	45,172	N/A	46,561	N/A	3.48	3.08	10% (+/-)	Yes
44: Other Child	N/A	9,175	N/A	10,131	N/A	10,687	N/A	10.42	5.49	10% (+/-)	Yes
48: Foster Care Child	N/A	4,541	N/A	4,793	N/A	5,091	N/A	5.55	6.22	10% (+/-)	Yes
54: 1115 Child	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Adult Total	N/A	19,815	N/A	20,715	N/A	21,296	N/A	4.54	2.81	10% (+/-)	Yes
15: AFDC Adult, Cash	N/A	10,420	N/A	10,480	N/A	10,514	N/A	0.58	0.32	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	4,376	N/A	4,497	N/A	4,375	N/A	2.77	-2.71	10% (+/-)	Yes
45: Other Adult	N/A	5,019	N/A	5,738	N/A	6,407	N/A	14.33	11.66	10% (+/-)	No
55: 1115 Adult	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
Total FFS Medicaid Amt Paid	N/A	\$537,282,920	N/A	\$572,606,415	N/A	\$608,934,890	N/A	6.57	6.34	15% (+/-)	Yes
Average FFS Medicaid Amt Paid per FFS Enrollee	N/A	\$4,577	N/A	\$4,734	N/A	\$4,925	N/A	3.42	4.02	15% (+/-)	Yes
Average FFS Medicaid Amt Paid per FFS Recipient (User of any svc)	N/A	\$5,264	N/A	\$5,494	N/A	\$5,670	N/A	4.38	3.20	15% (+/-)	Yes
<b>AVG FFS MEDICAID AMT PD/FFS ENROLLEE BY MAX ELIGIBILITY GROUP</b>											
All Aged	N/A	\$17,253	N/A	\$18,059	N/A	\$19,219	N/A	4.67	6.42	15% (+/-)	Yes
11: Aged, Cash	N/A	\$5,438	N/A	\$5,809	N/A	\$6,090	N/A	6.82	4.85	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	\$6,283	N/A	\$2,895	N/A	\$5,672	N/A	-53.90	95.94	15% (+/-)	No
41: Other Aged	N/A	\$22,172	N/A	\$23,174	N/A	\$24,526	N/A	4.52	5.83	15% (+/-)	Yes
51: 1115 Aged	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
All Disabled	N/A	\$15,391	N/A	\$16,059	N/A	\$16,692	N/A	4.34	3.94	15% (+/-)	Yes
12: Disabled, Cash	N/A	\$12,685	N/A	\$13,261	N/A	\$13,725	N/A	4.54	3.50	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	\$4,971	N/A	\$10,476	N/A	\$6,309	N/A	110.80	-39.80	15% (+/-)	No
42: Other Disabled	N/A	\$31,570	N/A	\$31,567	N/A	\$33,509	N/A	-0.01	6.15	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
All Child	N/A	\$1,645	N/A	\$1,741	N/A	\$1,842	N/A	5.83	5.79	15% (+/-)	Yes
14: AFDC Child, Cash	N/A	\$1,322	N/A	\$1,396	N/A	\$1,462	N/A	5.59	4.73	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	\$1,008	N/A	\$1,103	N/A	\$1,099	N/A	9.41	-0.34	15% (+/-)	Yes
44: Other Child	N/A	\$2,434	N/A	\$2,256	N/A	\$2,687	N/A	-7.31	19.10	15% (+/-)	No
48: Foster Care Child	N/A	\$7,428	N/A	\$7,922	N/A	\$8,141	N/A	6.65	2.76	15% (+/-)	Yes
54: 1115 Child	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
All Adult	N/A	\$2,580	N/A	\$2,763	N/A	\$2,901	N/A	7.10	5.00	15% (+/-)	Yes
15: AFDC Adult, Cash	N/A	\$2,672	N/A	\$2,811	N/A	\$3,099	N/A	5.20	10.23	15% (+/-)	Yes
17: AFDC-U Adult, Cash	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A

2003-2005 MAX PSF VALIDATION TABLE  
STATE: SD

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	\$2,618	N/A	\$2,767	N/A	\$2,864	N/A	5.71	3.51	15% (+/-)	Yes
45: Other Adult	N/A	\$2,354	N/A	\$2,671	N/A	\$2,602	N/A	13.46	-2.60	15% (+/-)	Yes
55: 1115 Adult	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
<b>FFS EXPENDITURES AND USERS BY MAX TOS</b>											
IP: Total Medicaid Paid (TOS 01)	N/A	\$81,794,006	N/A	\$81,416,062	N/A	\$84,319,913	N/A	-0.46	3.57	15% (+/-)	Yes
IP: Number of Users	N/A	15,698	N/A	14,923	N/A	15,444	N/A	-4.94	3.49	15% (+/-)	Yes
IP: Average Medicaid Pd per User	N/A	\$5,210	N/A	\$5,456	N/A	\$5,460	N/A	4.71	0.07	15% (+/-)	Yes
IP: Average Medicaid Covered Days Per User	N/A	5	N/A	5	N/A	5	N/A	-4.78	2.09	15% (+/-)	Yes
MH Aged: Total Medicaid Paid (TOS 02)	N/A	\$2,673,012	N/A	\$2,523,221	N/A	\$3,211,637	N/A	-5.60	27.28	15% (+/-)	No
MH Aged: Number of Users	N/A	51	N/A	45	N/A	45	N/A	-11.80	0.00	15% (+/-)	Yes
MH Aged: Avg Medicaid Pd per User	N/A	\$52,412	N/A	\$56,072	N/A	\$71,370	N/A	6.98	27.28	15% (+/-)	No
IP Psych < 21: Total Medicaid Paid (TOS 04)	N/A	\$16,245,910	N/A	\$16,466,796	N/A	\$17,693,938	N/A	1.36	7.45	15% (+/-)	Yes
IP Psych < 21: Number of Users	N/A	484	N/A	474	N/A	489	N/A	-2.07	3.17	15% (+/-)	Yes
IP Psych<21 :Avg Medicaid Pd per User	N/A	\$33,566	N/A	\$34,740	N/A	\$36,184	N/A	3.50	4.16	15% (+/-)	Yes
ICF/MR: Total Medicaid Pd (TOS 05)	N/A	\$16,907,168	N/A	\$19,040,045	N/A	\$19,869,267	N/A	12.62	4.36	15% (+/-)	Yes
ICF/MR: Number of Users	N/A	206	N/A	191	N/A	198	N/A	-7.28	3.67	15% (+/-)	Yes
ICF/MR: Avg Medicaid Pd per User	N/A	\$82,074	N/A	\$99,686	N/A	\$100,350	N/A	21.46	0.67	15% (+/-)	Yes
NF: Total Medicaid Paid (TOS 07)	N/A	\$116,994,967	N/A	\$120,589,888	N/A	\$125,790,974	N/A	3.07	4.31	15% (+/-)	Yes
NF Number of Users	N/A	5,727	N/A	5,689	N/A	5,691	N/A	-0.66	0.04	15% (+/-)	Yes
NF:Avg Medicaid Pd per User	N/A	\$20,429	N/A	\$21,197	N/A	\$22,103	N/A	3.76	4.28	15% (+/-)	Yes
Physician: Total Medicaid Paid (TOS 08)	N/A	\$27,551,186	N/A	\$29,684,979	N/A	\$32,022,582	N/A	7.75	7.88	15% (+/-)	Yes
Physician: Number of Users	N/A	67,130	N/A	68,370	N/A	70,690	N/A	1.85	3.39	15% (+/-)	Yes
Physician: Avg Medicaid Pd per User	N/A	\$410	N/A	\$434	N/A	\$453	N/A	5.79	4.33	15% (+/-)	Yes
Dental: Total Medicaid Paid (TOS 09)	N/A	\$24,614	N/A	\$15,957	N/A	\$30,803	N/A	-35.20	93.04	15% (+/-)	No
Dental: Number of Users	N/A	54	N/A	58	N/A	75	N/A	7.41	29.31	15% (+/-)	No
Dental: Avg Medicaid Pd per User	N/A	\$456	N/A	\$275	N/A	\$411	N/A	-39.60	49.28	15% (+/-)	No
Other Practitioner: Total Medicaid Pd (TOS 10)	N/A	\$4,829,878	N/A	\$4,393,922	N/A	\$4,736,297	N/A	-9.03	7.79	15% (+/-)	Yes
Other Practitioner: Number of Users	N/A	40,763	N/A	41,553	N/A	43,227	N/A	1.94	4.03	15% (+/-)	Yes
Other Practitioner: Avg Medicaid Pd per User	N/A	\$118	N/A	\$106	N/A	\$110	N/A	-10.80	3.62	15% (+/-)	Yes
OPD: Total Medicaid Paid (TOS 11)	N/A	\$27,019,248	N/A	\$26,716,633	N/A	\$29,586,267	N/A	-1.12	10.74	15% (+/-)	Yes
OPD Number of Users	N/A	39,219	N/A	34,491	N/A	36,307	N/A	-12.10	5.27	15% (+/-)	Yes
OPD: Avg Medicaid Pd per User	N/A	\$689	N/A	\$775	N/A	\$815	N/A	12.43	5.20	15% (+/-)	Yes
Clinic: Total Medicaid Paid (TOS 12)	N/A	\$30,734,902	N/A	\$31,811,142	N/A	\$33,621,307	N/A	3.50	5.69	15% (+/-)	Yes
Clinic: Number of Users	N/A	37,649	N/A	38,211	N/A	39,421	N/A	1.49	3.17	15% (+/-)	Yes
Clinic: Avg Medicaid Pd per User	N/A	\$816	N/A	\$833	N/A	\$853	N/A	1.98	2.45	15% (+/-)	Yes
HH: Total Medicaid Paid (TOS 13)	N/A	\$768,563	N/A	\$936,460	N/A	\$1,128,606	N/A	21.85	20.52	15% (+/-)	No
HH: Number of Users	N/A	413	N/A	398	N/A	432	N/A	-3.63	8.54	15% (+/-)	Yes
HH: Avg Medicaid Pd per User	N/A	\$1,861	N/A	\$2,353	N/A	\$2,613	N/A	26.44	11.03	15% (+/-)	Yes
Lab/Xray: Total Medicaid Paid (TOS 15)	N/A	\$11,366,760	N/A	\$14,758,743	N/A	\$16,037,274	N/A	29.84	8.66	15% (+/-)	Yes
Lab/Xray: Number of Users	N/A	54,287	N/A	55,393	N/A	57,480	N/A	2.04	3.77	15% (+/-)	Yes
Lab/Xray:Avg Medicaid Pd per User	N/A	\$209	N/A	\$266	N/A	\$279	N/A	27.25	4.72	15% (+/-)	Yes
Drugs: Total Medicaid Paid (TOS 16)	N/A	\$75,120,316	N/A	\$86,174,220	N/A	\$91,992,050	N/A	14.71	6.75	15% (+/-)	Yes
Drugs: Number of Users	N/A	70,889	N/A	71,318	N/A	75,112	N/A	0.61	5.32	15% (+/-)	Yes
Drugs: Avg Medicaid Pd per User	N/A	\$1,060	N/A	\$1,208	N/A	\$1,225	N/A	14.02	1.36	15% (+/-)	Yes
Other Services: Total Medicaid Paid (TOS 19)	N/A	\$65,441,346	N/A	\$70,909,967	N/A	\$75,526,479	N/A	8.36	6.51	15% (+/-)	Yes
Other Services: Number of Users	N/A	10,803	N/A	11,268	N/A	11,581	N/A	4.30	2.78	15% (+/-)	Yes
Other Services: Avg Medicaid Pd per User	N/A	\$6,058	N/A	\$6,293	N/A	\$6,522	N/A	3.89	3.63	15% (+/-)	Yes
Transportation: Total Medicaid Paid (TOS 26)	N/A	\$4,148,003	N/A	\$4,166,960	N/A	\$4,416,652	N/A	0.46	5.99	15% (+/-)	Yes
Transportation: Number of Users	N/A	9,731	N/A	10,326	N/A	10,934	N/A	6.11	5.89	15% (+/-)	Yes
Transportation: Avg Medicaid Pd per User	N/A	\$426	N/A	\$404	N/A	\$404	N/A	-5.33	0.10	15% (+/-)	Yes
PCS: Total Medicaid Paid (TOS 30)	N/A	\$6,909,724	N/A	\$8,283,152	N/A	\$9,367,807	N/A	19.88	13.09	15% (+/-)	Yes
PCS: Number of Users	N/A	2,199	N/A	2,294	N/A	2,340	N/A	4.32	2.01	15% (+/-)	Yes
PCS: Avg Medicaid Pd per User	N/A	\$3,142	N/A	\$3,611	N/A	\$4,003	N/A	14.91	10.87	15% (+/-)	Yes
Target Case Management: Total Medicaid Pd (TOS 31)	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Target Case Management: Number of Users	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Target Case Management: Avg Medicaid Pd per User	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A

2003-2005 MAX PSF VALIDATION TABLE  
STATE: SD

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	\$22,593,447	N/A	\$2,370,134	N/A	\$1,324,297	N/A	-89.50	-44.10	15% (+/-)	No
Rehab Services: Number of Users	N/A	2,012	N/A	873	N/A	856	N/A	-56.60	-1.95	15% (+/-)	Yes
Rehab Services: Avg Medicaid Pd per User	N/A	\$11,229	N/A	\$2,715	N/A	\$1,547	N/A	-75.80	-43.00	15% (+/-)	No
PT/OT/Speech/Hear: Total Medicaid Paid (TOS 34)	N/A	\$2,663,119	N/A	\$3,118,811	N/A	\$3,398,049	N/A	17.11	8.95	15% (+/-)	Yes
PT/OT/Speech/Hear: Number of Users	N/A	4,135	N/A	4,716	N/A	5,029	N/A	14.05	6.64	15% (+/-)	Yes
PT/OT/Speech/Hear: Avg Medicaid Pd per User	N/A	\$644	N/A	\$661	N/A	\$676	N/A	2.68	2.17	15% (+/-)	Yes
Hospice: Total Medicaid Paid (TOS 35)	N/A	\$515,959	N/A	\$748,056	N/A	\$1,630,984	N/A	44.98	118.00	15% (+/-)	No
Hospice: Number of Users	N/A	102	N/A	133	N/A	257	N/A	30.39	93.23	15% (+/-)	No
Hospice: Avg Medicaid Pd per User	N/A	\$5,058	N/A	\$5,624	N/A	\$6,346	N/A	11.19	12.83	15% (+/-)	Yes
DME: Total Medicaid Paid (TOS 51)	N/A	\$6,246,302	N/A	\$8,627,928	N/A	\$9,220,162	N/A	38.13	6.86	15% (+/-)	Yes
DME: Number of Users	N/A	15,049	N/A	29,943	N/A	29,952	N/A	98.97	0.03	15% (+/-)	Yes
DME: Avg Medicaid Pd per User	N/A	\$415	N/A	\$288	N/A	\$308	N/A	-30.60	6.83	15% (+/-)	Yes
Residential Care: Total Medicaid Paid (TOS 52)	N/A	\$334	N/A	\$22,193,248	N/A	\$24,634,353	N/A	6,640,000.00	11.00	15% (+/-)	Yes
Residential Care: Number of Users	N/A	8	N/A	1,230	N/A	1,268	N/A	15,275.00	3.09	15% (+/-)	Yes
Residential Care: Avg Medicaid Pd per User	N/A	\$42	N/A	\$18,043	N/A	\$19,428	N/A	43,117.00	7.67	15% (+/-)	Yes
Psych. Services: Total Medicaid Paid (TOS 53)	N/A	\$15,457,075	N/A	\$16,224,258	N/A	\$17,753,623	N/A	4.96	9.43	15% (+/-)	Yes
Psych. Services: Number of Users	N/A	12,651	N/A	13,586	N/A	14,295	N/A	7.39	5.22	15% (+/-)	Yes
Psych. Services: Avg Medicaid Pd per User	N/A	\$1,222	N/A	\$1,194	N/A	\$1,242	N/A	-2.26	4.00	15% (+/-)	Yes
Adult Day Care: Total Medicaid Paid (TOS 54)	N/A	\$8,751	N/A	\$10,098	N/A	\$8,831	N/A	15.39	-12.50	15% (+/-)	Yes
Adult Day Care: Number of Users	N/A	2	N/A	2	N/A	3	N/A	0.00	50.00	15% (+/-)	No
Adult Day Care: Avg Medicaid Pd per User	N/A	\$4,376	N/A	\$5,049	N/A	\$2,944	N/A	15.39	-41.70	15% (+/-)	No
AVG FFS MEDICAID AMT PD/FFS ENROLLEE BY SELECTED MAX TOS											
Inpatient Hospital (TOS=01)	N/A	\$697	N/A	\$673	N/A	\$682	N/A	-3.40	1.31	15% (+/-)	Yes
Aged	N/A	\$265	N/A	\$152	N/A	\$139	N/A	-42.80	-8.24	15% (+/-)	Yes
Disabled	N/A	\$2,494	N/A	\$2,169	N/A	\$2,151	N/A	-13.00	-0.83	15% (+/-)	Yes
Child	N/A	\$349	N/A	\$381	N/A	\$381	N/A	9.27	-0.20	15% (+/-)	Yes
Adult	N/A	\$807	N/A	\$842	N/A	\$908	N/A	4.29	7.86	15% (+/-)	Yes
ILTC (TOS=02,04,05,07)	N/A	\$1,302	N/A	\$1,311	N/A	\$1,347	N/A	0.73	2.72	15% (+/-)	Yes
Aged	N/A	\$13,029	N/A	\$13,522	N/A	\$14,346	N/A	3.79	6.09	15% (+/-)	Yes
Disabled	N/A	\$2,995	N/A	\$3,148	N/A	\$3,352	N/A	5.10	6.48	15% (+/-)	Yes
Child	N/A	\$120	N/A	\$129	N/A	\$128	N/A	7.60	-0.37	15% (+/-)	Yes
Adult	N/A	\$1	N/A	\$1	N/A	\$0	N/A	-18.30	-70.10	15% (+/-)	No
Drugs (TOS=16)	N/A	\$640	N/A	\$712	N/A	\$744	N/A	11.32	4.42	15% (+/-)	Yes
Aged	N/A	\$2,695	N/A	\$3,018	N/A	\$3,184	N/A	12.00	5.49	15% (+/-)	Yes
Disabled	N/A	\$2,427	N/A	\$2,755	N/A	\$2,859	N/A	13.54	3.78	15% (+/-)	Yes
Child	N/A	\$167	N/A	\$190	N/A	\$211	N/A	13.91	11.21	15% (+/-)	Yes
Adult	N/A	\$283	N/A	\$327	N/A	\$344	N/A	15.69	5.25	15% (+/-)	Yes
All Other Services	N/A	\$1,939	N/A	\$2,037	N/A	\$2,152	N/A	5.08	5.62	15% (+/-)	Yes
Aged	N/A	\$1,264	N/A	\$1,367	N/A	\$1,551	N/A	8.17	13.43	15% (+/-)	Yes
Disabled	N/A	\$7,475	N/A	\$7,986	N/A	\$8,329	N/A	6.83	4.29	15% (+/-)	Yes
Child	N/A	\$1,010	N/A	\$1,041	N/A	\$1,122	N/A	3.09	7.76	15% (+/-)	Yes
Adult	N/A	\$1,489	N/A	\$1,593	N/A	\$1,649	N/A	7.02	3.49	15% (+/-)	Yes
% OF FFS ENROLLEES WITH CLAIMS BY SELECTED MAX TYPE OF SERVICE											
% FFS Enrollees with IP Claims (TOS=01)	N/A	13.37	N/A	12.34	N/A	12.49	N/A	-7.75	1.23	15% (+/-)	Yes
Aged	N/A	19.80	N/A	10.70	N/A	11.94	N/A	-45.90	11.54	15% (+/-)	Yes
Disabled	N/A	19.98	N/A	15.99	N/A	16.76	N/A	-20.00	4.80	15% (+/-)	Yes
Child	N/A	8.91	N/A	8.92	N/A	9.01	N/A	0.13	0.90	15% (+/-)	Yes
Adult	N/A	22.75	N/A	22.98	N/A	22.53	N/A	1.03	-1.95	15% (+/-)	Yes
% FFS Enrollees with ILTC Claims (TOS=02,04,05,07)	N/A	5.48	N/A	5.27	N/A	5.17	N/A	-3.88	-1.80	15% (+/-)	Yes
Aged	N/A	63.69	N/A	63.79	N/A	64.05	N/A	0.17	0.40	15% (+/-)	Yes
Disabled	N/A	8.37	N/A	8.27	N/A	8.88	N/A	-1.28	7.47	15% (+/-)	Yes
Child	N/A	0.46	N/A	0.46	N/A	0.46	N/A	0.00	-0.58	15% (+/-)	Yes
Adult	N/A	0.03	N/A	0.07	N/A	0.02	N/A	167.80	-65.30	15% (+/-)	No
% FFS Enrollees with Drug Claims (TOS=16)	N/A	60.39	N/A	58.96	N/A	60.74	N/A	-2.37	3.02	15% (+/-)	Yes
Aged	N/A	91.59	N/A	91.41	N/A	92.04	N/A	-0.19	0.69	15% (+/-)	Yes
Disabled	N/A	72.95	N/A	72.78	N/A	74.09	N/A	-0.24	1.80	15% (+/-)	Yes
Child	N/A	55.66	N/A	53.48	N/A	55.82	N/A	-3.92	4.37	15% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: SD

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	56.79	N/A	57.61	N/A	58.66	N/A	1.44	1.83	15% (+/-)	Yes
% FFS Enrollees with All Other Claims	N/A	83.80	N/A	83.15	N/A	83.70	N/A	-0.77	0.66	15% (+/-)	Yes
Aged	N/A	81.23	N/A	81.25	N/A	80.96	N/A	0.02	-0.36	15% (+/-)	Yes
Disabled	N/A	90.39	N/A	90.45	N/A	90.33	N/A	0.06	-0.13	15% (+/-)	Yes
Child	N/A	83.03	N/A	82.00	N/A	82.84	N/A	-1.25	1.03	15% (+/-)	Yes
Adult	N/A	82.63	N/A	82.76	N/A	82.97	N/A	0.15	0.26	15% (+/-)	Yes
Avg # IP Days per FFS User	N/A	5	N/A	5	N/A	5	N/A	-4.78	2.09	15% (+/-)	Yes
Aged	N/A	6	N/A	5	N/A	6	N/A	-12.40	8.02	15% (+/-)	Yes
Disabled	N/A	11	N/A	11	N/A	11	N/A	-2.66	1.19	15% (+/-)	Yes
Child	N/A	4	N/A	4	N/A	4	N/A	7.46	-0.97	15% (+/-)	Yes
Adult	N/A	3	N/A	3	N/A	3	N/A	2.27	2.93	15% (+/-)	Yes
Avg # ILTC Days per FFS User	N/A	241	N/A	238	N/A	234	N/A	-1.50	-1.55	15% (+/-)	Yes
Aged	N/A	258	N/A	255	N/A	254	N/A	-1.30	-0.44	15% (+/-)	Yes
Disabled	N/A	244	N/A	244	N/A	231	N/A	0.00	-5.23	15% (+/-)	Yes
Child	N/A	1	N/A	1	N/A	0	N/A	-49.10	-16.50	15% (+/-)	No
Adult	N/A	10	N/A	7	N/A	9	N/A	-35.60	33.91	15% (+/-)	No
<b>FFS EXPENDITURES AND USERS BY MAX PGM TYPE</b>											
FP: Total Medicaid Paid (Program Type 2)	N/A	\$1,502,856	N/A	\$1,587,783	N/A	\$1,505,610	N/A	5.65	-5.18	15% (+/-)	Yes
FP: Number of Users	N/A	7,413	N/A	8,061	N/A	8,025	N/A	8.74	-0.45	15% (+/-)	Yes
FP: Average Medicaid Pd per User	N/A	\$203	N/A	\$197	N/A	\$188	N/A	-2.84	-4.75	15% (+/-)	Yes
RHC: Total Medicaid Paid (Program Type 3)	N/A	\$2,459,742	N/A	\$2,588,591	N/A	\$2,723,455	N/A	5.24	5.21	15% (+/-)	Yes
RHC: Number of Users	N/A	8,917	N/A	8,996	N/A	9,342	N/A	0.89	3.85	15% (+/-)	Yes
RHC: Avg Medicaid Pd per User	N/A	\$276	N/A	\$288	N/A	\$292	N/A	4.31	1.31	15% (+/-)	Yes
FOHC: Total Medicaid Paid (Program Type 4)	N/A	\$3,629,970	N/A	\$4,210,053	N/A	\$4,496,845	N/A	15.98	6.81	15% (+/-)	Yes
FOHC: Number of Users	N/A	8,899	N/A	10,023	N/A	10,641	N/A	12.63	6.17	15% (+/-)	Yes
FOHC: Avg Medicaid Pd per User	N/A	\$408	N/A	\$420	N/A	\$423	N/A	2.97	0.61	15% (+/-)	Yes
IHS: Total Medicaid Pd (Program Type 5)	N/A	\$33,791,543	N/A	\$33,439,979	N/A	\$34,804,961	N/A	-1.04	4.08	15% (+/-)	Yes
IHS: Number of Users	N/A	23,076	N/A	22,626	N/A	23,375	N/A	-1.95	3.31	15% (+/-)	Yes
IHS: Avg Medicaid Pd per User	N/A	\$1,464	N/A	\$1,478	N/A	\$1,489	N/A	0.93	0.75	15% (+/-)	Yes
Section 1915(c) Waiver: Total Medicaid Paid (Program Types 6 and 7)	N/A	\$63,887,813	N/A	\$69,690,479	N/A	\$74,291,885	N/A	9.08	6.60	15% (+/-)	Yes
Section 1915(c) Waiver: Number of Users	N/A	2,106	N/A	2,180	N/A	2,238	N/A	3.51	2.66	15% (+/-)	Yes
Section 1915(c) Waiver: Avg Medicaid Pd per User	N/A	\$30,336	N/A	\$31,968	N/A	\$33,196	N/A	5.38	3.84	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	\$119,619,592	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	13,954	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	\$8,572	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$2,094	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$9,846	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$16,841	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$639	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	11.28	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	48.39	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	57.12	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	1.80	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	0.31	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	\$109,478,711	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	6,207	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	\$17,638	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$4,296	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$23,077	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$16,841	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$639	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	5.02	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	17.18	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	22.12	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	1.80	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	0.31	N/A	N/A	N/A	15% (+/-)	No

2003-2005 MAX PSF VALIDATION TABLE  
STATE: SD

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	\$74,291,885	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	2,238	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	\$33,196	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$32,598	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$33,219	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$15,948	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
% FFS Enrollees with CLTC Claims (Section 1915(c) claims only - excludes CLTC Codes 11-20)	N/A	N/A	N/A	N/A	N/A	1.81	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	0.03	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	14.24	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No