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2003-2005 MAX IP VALIDATION TABLE  
STATE: VT

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	13,507	N/A	14,011	N/A	14,218	N/A	3.73	1.48	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	13,507	N/A	14,011	N/A	14,218	N/A	3.73	1.48	Yes
% Crossover	5-20	27.75	No	25.02	No	24.71	No	-9.82	-1.26	Yes
% Adjusted Claims	N/A	5.00	N/A	8.80	N/A	6.43	N/A	75.84	-27.00	No
% Standard Adjustments	> 1%	96.75	Yes	99.68	Yes	99.45	Yes	3.03	-0.22	Yes
Aver. Amt. Pd Adjust. ( include \$0)	N/A	\$4,376	N/A	\$5,109	N/A	\$5,703	N/A	16.74	11.64	Yes
Total number of claims with missing Medicaid eligibility (excludes S-SCHIP only)	N/A	N/A	N/A	N/A	N/A	63	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	9,759	N/A	10,505	N/A	10,705	N/A	7.64	1.90	Yes
% Claims with> \$0 Paid	95-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with< \$0 Paid	0	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	N/A
Aver. Medicaid Amount Paid (claims with >\$0 paid)	\$2000 - \$7000	\$4,385	Yes	\$5,003	Yes	\$5,325	Yes	14.10	6.43	Yes
Aver. Medicaid Amt Paid per Covered Day (>\$0 paid and >0 days claims)	N/A	\$932	N/A	\$1,027	N/A	\$1,116	N/A	10.18	8.66	Yes
% Claims with TPL	>0 - 10	0.99	Yes	1.09	Yes	1.13	Yes	10.14	3.25	Yes
Aver. TPL Paid for claims with TPL	N/A	\$1,615	N/A	\$1,548	N/A	\$2,074	N/A	-4.10	33.97	No
% Claims with UB-92 Accommodation Codes	95-100	99.99	Yes	99.94	Yes	100.00	Yes	-0.05	0.06	Yes
Average # UB-92 Accom. Codes (at least 1 accom code)	>1	1.24	Yes	1.23	Yes	1.24	Yes	-0.44	0.60	Yes
% Claims with UB-92 Ancillary Codes	95-100	99.75	Yes	99.68	Yes	99.71	Yes	-0.08	0.03	Yes
Average # UB-92 Ancillary Codes (at least 1 Ancillary code)	>3	7.33	Yes	7.13	Yes	7.21	Yes	-2.76	1.03	Yes
Average LOS	2-<8	4.42	Yes	4.31	Yes	4.65	Yes	-2.36	7.75	Yes
Average Covered Days (> 0 day)	2-<8	4.71	Yes	4.87	Yes	4.77	Yes	3.56	-2.05	Yes
% Begin Date = Admit Date	95-100	98.17	Yes	98.37	Yes	98.17	Yes	0.21	-0.21	Yes
% IP Claims (MAX TOS 01)	95-100	99.43	Yes	99.26	Yes	99.38	Yes	-0.17	0.13	Yes
% Family Planning Claims (pgm type=2)	>0-5	0.69	Yes	0.83	Yes	0.71	Yes	20.63	-14.30	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	4.68	Yes	4.72	Yes	4.90	Yes	0.80	3.81	Yes
% Claims with PDX, where length=3	5-30	5.85	Yes	5.06	Yes	5.15	Yes	-13.40	1.64	Yes
% Claims with PDX, where length=4	15-75	24.88	Yes	24.04	Yes	24.04	Yes	-3.39	0.04	Yes
% Claims with PDX, where length=5	25-70	69.27	Yes	70.90	No	70.81	No	2.35	-0.13	Yes
% Claims with a procedure code	35-70	60.51	Yes	60.82	Yes	61.75	Yes	0.51	1.53	Yes
Average Number of Procedures for claims with at least 1 procedure code	>1	2.15	Yes	2.17	Yes	2.22	Yes	1.15	2.15	Yes
% Claims with Procedures that have CPT-4 Indicator	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% Claims with Procedures that have ICD-9 Indicator	N/A	99.98	N/A	100.00	N/A	100.00	N/A	0.02	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: VT

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	98.78	N/A	99.37	N/A	99.92	N/A	0.60	0.55	Yes
% Claims with DRG	>=90	0.00	No	0.00	No	0.00	No	Div by 0	Div by 0	N/A
% Claims Maternal Delivery Indicator	N/A	22.75	N/A	23.77	N/A	23.33	N/A	4.49	-1.87	Yes
% Claims Newborn Delivery Indicator (only for separate infant delivery claims using mother's ID)	N/A	9.27	N/A	10.15	N/A	9.94	N/A	9.43	-2.05	Yes
<b>Patient Status</b>										
% Home	75-90	74.67	No	74.55	No	72.99	No	-0.15	-2.09	Yes
% Transferred	1-10	23.75	No	24.24	No	25.39	No	2.04	4.76	Yes
% Still a Patient	>0 - 2	0.82	Yes	0.55	Yes	0.74	Yes	-32.60	33.66	No
% Died	>0 - 3	0.76	Yes	0.66	Yes	0.88	Yes	-13.40	33.69	No
<b>FFS Crossover Claims (Type of Claim=1, Crossover Claim Indicator=1)</b>										
Total Number of Claims	N/A	3,748	N/A	3,506	N/A	3,513	N/A	-6.46	0.20	Yes
% Claims with > \$0 Paid	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
% Claims with < \$0 Paid	0	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	N/A
Aver. Medicaid Amount Paid (claims with >\$0 paid)	N/A	\$904	N/A	\$893	N/A	\$1,018	N/A	-1.20	14.04	Yes
% Claims with TPL	N/A	0.00	N/A	0.29	N/A	1.62	N/A	Div by 0	468.90	No
Aver. TPL Paid -claims with TPL	N/A	Div by 0	N/A	\$522	N/A	\$516	N/A	Div by 0	-1.12	Yes
% Claims with UB-92 Accommodation Codes	95-100	0.03	No	0.00	No	0.09	No	-100.00	Div by 0	N/A
Average # UB-92 Accom. Codes (at least 1 accom code)	>1	2.00	Yes	Div by 0	Yes	2.00	Yes	Div by 0	Div by 0	N/A
% Claims with UB-92 Ancillary Codes	95-100	0.03	No	0.00	No	0.09	No	-100.00	Div by 0	N/A
Average # UB-92 Ancillary Codes (at least 1 Ancillary code)	>3	15.00	Yes	Div by 0	Yes	15.00	Yes	Div by 0	Div by 0	N/A
Average LOS	2-<8	5.72	Yes	5.66	Yes	5.90	Yes	-1.03	4.13	Yes
% Begin Date = Admit Date	95-100	63.77	No	99.80	Yes	99.57	Yes	56.51	-0.23	Yes
% Claims with IP TOS	95-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with DX	98-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
Average Number of DX Codes (at least 1 DX)	>=2	1.03	No	1.00	No	1.01	No	-2.90	0.48	Yes
% Claims with PDX, where length=3	5-30	5.52	Yes	9.67	Yes	9.37	Yes	75.07	-3.14	Yes
% Claims with PDX, where length=4	15-75	22.25	Yes	37.34	Yes	37.66	Yes	67.79	0.87	Yes
% Claims with PDX, where length=5	25-70	72.23	No	52.99	Yes	52.97	Yes	-26.60	-0.04	Yes
% Claims with a procedure code	35-70	42.69	Yes	0.00	No	0.03	No	-100.00	Div by 0	N/A
Average Number of Procedures for claims with at least 1 procedure code	>1	1.00	No	Div by 0	Yes	5.00	Yes	Div by 0	Div by 0	N/A
% Claims with Procedures that have CPT-4 Indicator	N/A	0.00	N/A	Div by 0	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% Claims with Procedures that have ICD-9 Indicator	N/A	0.00	N/A	Div by 0	N/A	100.00	N/A	Div by 0	Div by 0	N/A
% Claims with Procedures that have 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	100.00	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: VT

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	33,236	N/A	34,423	N/A	37,889	N/A	3.57	10.07	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	33,236	N/A	34,423	N/A	37,889	N/A	3.57	10.07	Yes
% Crossover	5-20	9.51	Yes	9.77	Yes	10.65	Yes	2.66	9.09	Yes
% Adjusted Claims	> 1%	6.04	Yes	4.22	Yes	71.90	Yes	-30.20	1,606.00	No
% Standard Adjustments	N/A	99.50	N/A	99.66	N/A	99.69	N/A	0.15	0.04	Yes
Aver. Amt. Pd Adjust. ( include \$0)	N/A	\$2,763	N/A	\$3,055	N/A	\$3,045	N/A	10.55	-0.32	Yes
Total number of claims with missing Medicaid eligibility (excludes S-SCHIP only)	N/A	N/A	N/A	N/A	N/A	110	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	30,074	N/A	31,061	N/A	33,852	N/A	3.28	8.99	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	\$107	No	\$112	No	\$130	No	5.43	15.17	No
ICF/MR (TOS 05)	N/A	\$450	N/A	\$455	N/A	\$474	N/A	1.22	3.98	Yes
Aged/MH (TOS 02)	N/A	\$508	N/A	Div by 0	N/A	\$803	N/A	Div by 0	Div by 0	N/A
IP Psych. < 21 (TOS 04)	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A
% NF (TOS 07)	75-99	98.77	Yes	98.91	Yes	99.14	No	0.14	0.24	Yes
% NF claims with NF Covered Days	N/A	99.99	N/A	99.97	N/A	99.95	N/A	-0.01	-0.03	Yes
Avg days for NF claims with Covered Days	N/A	27	N/A	26	N/A	23	N/A	-2.60	-11.00	Yes
% ICF/MR (TOS 05)	>0-20	1.13	Yes	1.09	Yes	0.85	Yes	-3.46	-22.00	No
% ICF/MR claims with ICF/MR Covered Days	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
Avg days for ICF/MR claims with Covered Days	N/A	7	N/A	6	N/A	7	N/A	-15.00	10.88	Yes
% Aged/MH (TOS 02)	>0-10	0.10	Yes	0.00	No	0.01	Yes	-100.00	Div by 0	N/A
% Aged/MH claims with Aged/MH Covered Days	N/A	100.00	N/A	Div by 0	N/A	100.00	N/A	Div by 0	Div by 0	N/A
Avg days for Aged/MH claims with Covered Days	N/A	16	N/A	Div by 0	N/A	30	N/A	Div by 0	Div by 0	N/A
% IP Psych. < 21 (TOS 04)	>0-5	0.00	No	0.00	No	0.00	No	Div by 0	Div by 0	N/A
% IP Psych. < 21 claims with IP Psych Covered Days	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
Avg days for IP Psych. < 21 claims with Covered Days	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 Leave Days	1-20	0.10	No	0.00	No	0.17	No	-100.00	Div by 0	N/A
% Claims with DX	95-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with DX, where length=3	5-30	17.43	Yes	16.28	Yes	15.97	Yes	-6.60	-1.87	Yes
% Claims with DX, where length=4	15-75	60.51	Yes	59.74	Yes	57.70	Yes	-1.28	-3.42	Yes
% Claims with DX, where length=5	25-70	22.06	No	23.99	No	26.33	Yes	8.72	9.79	Yes
<b>Patient Status</b>										
% Home	1-5	0.63	No	0.73	No	0.68	No	16.29	-7.44	Yes
% Still a Patient	8-98	95.65	Yes	95.22	Yes	95.63	Yes	-0.45	0.43	Yes
% Died	>0-5	1.79	Yes	1.86	Yes	1.63	Yes	4.02	-12.20	Yes
<b>FFS Crossover Claims (Type of Claim=1, Crossover Claim Indicator=1)</b>										
Total Number of Claims	N/A	3,162	N/A	3,362	N/A	4,037	N/A	6.33	20.08	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: VT

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	\$726	N/A	\$767	N/A	\$713	N/A	5.60	-6.98	Yes
% NF (TOS 07)	75-99	98.51	Yes	95.48	Yes	88.21	Yes	-3.08	-7.61	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	1.49	Yes	4.52	Yes	11.79	No	204.20	160.80	No
% IP Psych. < 21 (TOS 04)	>0-5	0.00	No	0.00	No	0.00	No	Div by 0	Div by 0	N/A
% Claims with DX	95-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with DX, where length=3	5-30	15.28	Yes	13.38	Yes	13.43	Yes	-12.40	0.31	Yes
% Claims with DX, where length=4	15-75	46.81	Yes	46.34	Yes	42.61	Yes	-0.99	-8.06	Yes
% Claims with DX, where length=5	25-70	37.82	Yes	40.18	Yes	43.94	Yes	6.24	9.36	Yes
Patient Status										
% Home	1-5	4.21	Yes	9.25	No	5.87	No	119.90	-36.50	No
% Still a Patient	8-98	28.97	Yes	50.18	Yes	54.15	Yes	73.21	7.91	Yes
% Died	>0-5	1.08	Yes	1.43	Yes	1.81	Yes	32.78	26.65	No

2003-2005 MAX OT VALIDATION TABLE  
STATE: VT

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	4,163,997	N/A	4,049,042	N/A	4,240,536	N/A	-2.76	4.73	Yes
% Encounter Claims (Claim Type=3)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% Supplemental Claims	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% Cap Claims (Claim Type=2, and MAX TOS 20,21,22)	N/A	13.21	N/A	0.00	N/A	0.00	N/A	-100.00	Div by 0	N/A
Total FFS Claims Excluding Capitation Payments	N/A	3,614,052	N/A	4,049,042	N/A	4,240,536	N/A	12.04	4.73	Yes
% Crossover	5-20	8.30	Yes	8.17	Yes	7.84	Yes	-1.50	-4.04	Yes
% Adjusted Claims	> 1%	1.50	Yes	1.87	Yes	2.91	Yes	24.91	55.81	No
% Standard Adjustments	N/A	78.45	N/A	79.04	N/A	70.49	N/A	0.75	-10.80	Yes
Aver. Amt. Pd Adjust. ( include \$0)	N/A	\$173	N/A	\$327	N/A	\$254	N/A	88.82	-22.40	No
% Claims(TOC 1,2) TOS 20: HMO Cap Payment	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% Claims(TOC 1,2) TOS 21: PHP Cap Payments	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% Claims(TOC 1,2) TOS 22: PCCM Cap Pay.	N/A	13.21	N/A	0.00	N/A	0.00	N/A	-100.00	Div by 0	N/A
Average Paid per HMO Cap Clms (TOS 20)	\$75-\$300	Div by 0	No	Div by 0	No	Div by 0	No	Div by 0	Div by 0	N/A
Average Paid per PHP Cap Clms (TOS 21)	\$20-\$250	Div by 0	No	Div by 0	No	Div by 0	No	Div by 0	Div by 0	N/A
Average Paid per PCCM Cap Clms (TOS 22)	3-5	\$5	Yes	Div by 0	No	Div by 0	No	Div by 0	Div by 0	N/A
Total number of claims with missing Medicaid eligibility (excludes S-SCHIP only)	N/A	N/A	N/A	N/A	N/A	4,279	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	3,314,176	N/A	3,718,125	N/A	3,907,966	N/A	12.19	5.11	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	7.45	N/A	6.61	N/A	6.84	N/A	-11.20	3.44	Yes
% OPD Claims with Span Bill/ All OPD Claims(TOS 11)	N/A	4.75	N/A	5.07	N/A	4.84	N/A	6.92	-4.55	Yes
% HH Claims with Span Bill/All HH Claims (TOS 13)	N/A	85.23	N/A	30.50	N/A	20.16	N/A	-64.20	-33.90	No
% Other Claims with Span Bills/All Other Claims	N/A	6.82	N/A	6.37	N/A	6.75	N/A	-6.61	5.93	Yes
% Claims W/ Service Place 11- Office	50-90	39.48	No	36.22	No	34.81	No	-8.26	-3.89	Yes
% Claims W/ Service Place 12 - Home	>0-5	8.38	No	9.58	No	11.05	No	14.38	15.32	No
% Claims W/ Service Place 21 - Hospital	>0-5	2.02	Yes	1.93	Yes	2.04	Yes	-4.43	5.54	Yes
% Claims W/ Service Place 32 - NF	>0-5	0.16	Yes	0.17	Yes	0.16	Yes	3.99	-3.90	Yes
% Claims W/ Service Place 23 - ER	1-10	2.15	Yes	2.13	Yes	2.23	Yes	-0.93	4.76	Yes
% Claims w/ Service Place 22 - OPD	>0-10	21.74	No	22.62	No	22.40	No	4.04	-0.95	Yes
% Claims W/ Service Place 99 - Unknown/Other	<5	11.41	No	13.87	No	14.37	No	21.60	3.57	Yes
% Claims with TPL	>0 - 15	0.77	Yes	0.53	Yes	0.45	Yes	-30.30	-15.30	No
Aver. TPL Paid -claims with TPL	N/A	\$73	N/A	\$82	N/A	\$92	N/A	13.66	11.83	Yes
<b>PERCENT CLAIMS/MAX TOS</b>										
% claims MAX TOS 08: Physicians	10-35	17.08	Yes	16.88	Yes	16.92	Yes	-1.20	0.22	Yes
% claims MAX TOS 09: Dental	2-20	8.25	Yes	7.77	Yes	7.32	Yes	-5.80	-5.80	Yes
% claims MAX TOS 10: Other Practioner	0.5-8	0.94	Yes	0.95	Yes	0.86	Yes	0.52	-8.76	Yes
% claims MAX TOS 11: OPD	3-25	7.25	Yes	7.32	Yes	7.29	Yes	1.03	-0.46	Yes
% claims MAX TOS 12: Clinic	2-25	2.62	Yes	2.84	Yes	2.58	Yes	8.27	-9.11	Yes
% claims MAX TOS 13: HH	>0-25	0.98	Yes	1.37	Yes	1.67	Yes	39.40	21.92	No
% claims MAX TOS 15: Lab/Xray	4-20	21.24	No	20.66	No	19.53	Yes	-2.74	-5.48	Yes
% claims MAX TOS 16: Drugs	<3	1.22	Yes	0.33	Yes	0.25	Yes	-72.80	-24.20	No
% claims MAX TOS 19: Other Services	<25	13.35	Yes	7.56	Yes	8.85	Yes	-43.40	17.08	No

2003-2005 MAX OT VALIDATION TABLE  
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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Change Within Expected Range
% claims MAX TOS 51: DME	>3	1.40	No	1.60	No	1.60	No	14.50	-0.37	Yes
% claims MAX TOS 26: Transportation	>1	5.04	Yes	4.09	Yes	5.69	Yes	-18.70	39.09	No
% claims MAX TOS 24: Sterilizations	N/A	0.08	N/A	0.07	N/A	0.07	N/A	-13.30	1.86	Yes
% claims MAX TOS 25: Abortions	N/A	0.01	N/A	0.01	N/A	0.01	N/A	28.36	-40.40	No
% claims MAX TOS 30: PCS	>0	0.96	Yes	1.20	Yes	1.38	Yes	25.35	14.83	Yes
% claims MAX TOS 31: TCM	>0	0.00	Yes	2.82	Yes	3.09	Yes	9,340,000.00	9.69	Yes
% claims MAX TOS 33: Rehabilitation	>0	0.00	Yes	0.00	Yes	0.00	No	18.85	-100.00	No
% claims MAX TOS 34: PT/OT/hear/speech	>1	1.01	Yes	1.39	Yes	1.45	Yes	37.25	4.98	Yes
% claims MAX TOS 35: Hospice	>0	0.01	Yes	0.01	Yes	0.01	Yes	-2.57	-17.00	No
% claims MAX TOS 36: Nurse Midwife	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% claims MAX TOS 37: Nurse Practitioner	N/A	0.09	N/A	0.10	N/A	0.10	N/A	3.71	8.21	Yes
% claims MAX TOS 38: Private Nursing	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% claims MAX TOS 39: Religious Non-Med.	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% claims MAX TOS 52: Residential Care	N/A	0.17	N/A	0.06	N/A	0.06	N/A	-64.50	-4.24	Yes
% claims MAX TOS 53: Psych. Services	>1	18.04	Yes	20.87	Yes	21.07	Yes	15.63	0.96	Yes
% claims MAX TOS 54: Adult Day Care	>0	0.00	Yes	0.00	No	0.00	No	-100.00	Div by 0	N/A
% claims MAX TOS 99: Unknown	<1	0.08	Yes	1.54	No	0.20	Yes	1,854.00	-87.30	No
Average Medicaid Amount Paid For Selected MAX TOS (excluding claims with <=\$0 paid)										
Total	N/A	\$115	N/A	\$118	N/A	\$122	N/A	2.38	3.59	Yes
08: Physicians	\$20-90	\$60	Yes	\$61	Yes	\$61	Yes	1.42	-0.43	Yes
09: Dental	\$10-60	\$43	Yes	\$45	Yes	\$47	Yes	5.44	3.16	Yes
10: Other Practioner	\$10-100	\$164	No	\$154	No	\$153	No	-5.99	-0.79	Yes
11: OPD	\$20-100	\$135	No	\$146	No	\$155	No	8.53	5.85	Yes
12: Clinic	\$20-100	\$92	Yes	\$93	Yes	\$98	Yes	1.98	4.87	Yes
13: HH	N/A	\$246	N/A	\$155	N/A	\$119	N/A	-37.00	-23.00	No
15: Lab/Xray	10-60	\$26	Yes	\$29	Yes	\$31	Yes	11.08	7.63	Yes
16: Drugs	10-60	\$11	Yes	\$22	Yes	\$24	Yes	90.03	11.30	Yes
19: Other Services	N/A	\$383	N/A	\$336	N/A	\$303	N/A	-12.20	-9.78	Yes
51: DME	N/A	\$128	N/A	\$119	N/A	\$121	N/A	-7.07	1.86	Yes
26: Transportation	N/A	\$33	N/A	\$34	N/A	\$36	N/A	2.25	7.25	Yes
30: PCS	N/A	\$301	N/A	\$271	N/A	\$278	N/A	-9.98	2.43	Yes
31: Targeted Case Management	N/A	\$35	N/A	\$66	N/A	\$60	N/A	88.50	-9.74	Yes
33: Rehabilitation	N/A	\$8,624	N/A	\$26,843	N/A	Div by 0	N/A	211.20	Div by 0	N/A
34: PT/OT/speech/hear	N/A	\$20	N/A	\$20	N/A	\$20	N/A	0.85	-2.57	Yes
35: Hospice	N/A	\$2,342	N/A	\$2,204	N/A	\$2,638	N/A	-5.88	19.68	No
52: Residential Care	N/A	\$1,647	N/A	\$975	N/A	\$765	N/A	-40.80	-21.60	No
53: Psych. Services	N/A	\$98	N/A	\$214	N/A	\$223	N/A	118.90	4.09	Yes
54: Adult Day Care	N/A	\$1,343	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A
PERCENT OF CLAIMS BY PROGRAM TYPE (claim type 1)										
% Family Planning (code 2)	N/A	0.79	N/A	0.75	N/A	0.71	N/A	-4.66	-6.53	Yes
% RHC (code 3)	N/A	1.54	N/A	1.48	N/A	1.42	N/A	-3.66	-4.54	Yes
% FQHC (code 4)	N/A	0.98	N/A	0.99	N/A	0.96	N/A	1.63	-3.46	Yes
% IHS (code 5)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% Waiver (code 6,7)	N/A	7.99	N/A	7.48	N/A	7.45	N/A	-6.29	-0.49	Yes
AVERAGE EXPENDITURES BY PROGRAM										
Family Planning (code 2)	N/A	\$50	N/A	\$57	N/A	\$60	N/A	14.07	5.06	Yes

2003-2005 MAX OT VALIDATION TABLE  
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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Change Within Expected Range
RHC (code 3)	N/A	\$74	N/A	\$78	N/A	\$80	N/A	5.93	2.84	Yes
FQHC (code 4)	N/A	\$115	N/A	\$121	N/A	\$122	N/A	5.13	0.68	Yes
IHS (code 5)	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A
Waiver (code 6, 7)	N/A	\$405	N/A	\$422	N/A	\$432	N/A	3.99	2.54	Yes
% Claims with DX	> 60	99.45	Yes	99.37	Yes	99.35	Yes	-0.08	-0.03	Yes
% Claims with DX (MAX TOS 8, 11, 12)	85-100	99.97	Yes	99.99	Yes	99.99	Yes	0.02	0.00	Yes
% Claims with 1 DX that have 2 DX	N/A	11.44	N/A	13.25	N/A	14.23	N/A	15.82	7.39	Yes
% Claims with DX, where length=3	5-25	9.79	Yes	9.53	Yes	9.68	Yes	-2.74	1.65	Yes
% Claims with DX, where length=4	40-70	54.60	Yes	54.36	Yes	52.23	Yes	-0.43	-3.92	Yes
% Claims with DX, where length=5	20-55	35.61	Yes	36.11	Yes	38.09	Yes	1.42	5.47	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	99.85	N/A	99.95	N/A	99.97	N/A	0.09	0.02	Yes
% Other Claims with Service Codes /All Other Claims (Excluding OPD/HH)	98-100	97.71	No	96.36	No	95.16	No	-1.38	-1.25	Yes
% CPT-4 Service Code Indicator (code 01)/Claims with Service Codes	N/A	46.97	N/A	50.90	N/A	52.23	N/A	8.38	2.61	Yes
% HCPCS (II & III) Service Codes Indicator (code 06)/Claims with Service Codes	N/A	12.43	N/A	46.49	N/A	47.10	N/A	274.10	1.31	Yes
% Other National Code Indicator (codes 2-5, 7- 9)/Claims with Service Codes	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% State Specific Serv. Indicator (10-87)/Claims with Service Codes	N/A	40.06	N/A	1.96	N/A	0.00	N/A	-95.10	-99.90	No
% CPT-4 Format Codes- 5n/Claims with CPT-4	98-100	100.00	Yes	99.99	Yes	99.99	Yes	-0.01	-0.01	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	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
PERCENT OF CLAIMS BY CLTC CODE										
CLTC 00: not a CLTC claim	N/A	N/A	N/A	N/A	N/A	83.55	N/A	N/A	N/A	N/A
CLTC Non-Waiver Claims (11-20)	N/A	N/A	N/A	N/A	N/A	9.00	N/A	N/A	N/A	N/A
CLTC 11: Non-Waiver Personal Care	N/A	N/A	N/A	N/A	N/A	1.38	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	1.67	N/A	N/A	N/A	N/A
CLTC 15: Non-Waiver Residential Care	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A
CLTC 16: Non-Waiver Rehab	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A
CLTC 17: Non-Waiver TCM	N/A	N/A	N/A	N/A	N/A	0.87	N/A	N/A	N/A	N/A
CLTC 18: Non-Waiver Transportation	N/A	N/A	N/A	N/A	N/A	4.39	N/A	N/A	N/A	N/A
CLTC 19: Non-Waiver Hospice	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A
CLTC 20: Non-Waiver DME	N/A	N/A	N/A	N/A	N/A	0.69	N/A	N/A	N/A	N/A
CLTC Waiver Claims (30-40)	N/A	N/A	N/A	N/A	N/A	7.44	N/A	N/A	N/A	N/A
CLTC 30: Other Waiver	N/A	N/A	N/A	N/A	N/A	7.28	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



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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Change Within Expected Range
CLTC 35: Waiver Residential Care	N/A	N/A	N/A	N/A	N/A	0.06	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	0.11	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	299,876	N/A	330,917	N/A	332,570	N/A	10.35	0.50	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	7.81	N/A	7.17	N/A	7.22	N/A	-8.28	0.74	Yes
% OPD Claims with Span Bill/ All OPD Claims(TOS 11)	N/A	14.76	N/A	16.09	N/A	14.48	N/A	8.99	-9.97	Yes
% HH Claims with Span Bill/All HH Claims (TOS 13)	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A
% Other Claims with Span Bills/All Other Claims	N/A	6.86	N/A	6.34	N/A	6.42	N/A	-7.54	1.32	Yes
<b>PERCENT CLAIMS/MAX TOS (excluding 20-22)</b>										
% claims MAX TOS 08: Physicians	N/A	56.75	N/A	49.93	N/A	47.50	N/A	-12.00	-4.87	Yes
% claims MAX TOS 10: Other Practioner	N/A	2.98	N/A	2.76	N/A	2.61	N/A	-7.18	-5.39	Yes
% claims MAX TOS 11: OPD	N/A	12.13	N/A	8.50	N/A	9.90	N/A	-29.90	16.54	No
% claims MAX TOS 12: Clinic	N/A	4.94	N/A	4.64	N/A	5.39	N/A	-6.11	16.11	No
% claims MAX TOS 13: HH	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% claims MAX TOS 15: Lab/Xray	N/A	9.83	N/A	17.58	N/A	16.65	N/A	78.73	-5.27	Yes
% claims MAX TOS 19: Other Services	N/A	1.58	N/A	0.23	N/A	0.49	N/A	-85.20	110.10	No
% claims MAX TOS 51: DME	N/A	3.77	N/A	6.37	N/A	6.14	N/A	69.02	-3.56	Yes
% claims MAX TOS 26: Transportation	N/A	3.31	N/A	3.13	N/A	3.36	N/A	-5.47	7.45	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	0.00	N/A	0.00	N/A	0.00	N/A	-100.00	Div by 0	N/A
% claims MAX TOS 34: PT/OT/hear/speech	N/A	0.88	N/A	1.19	N/A	1.73	N/A	35.52	44.74	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	3.44	N/A	5.16	N/A	5.81	N/A	50.18	12.67	Yes
% claims MAX TOS 54: Adult Day Care	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
Average Amount Paid	N/A	\$40	N/A	\$41	N/A	\$46	N/A	3.14	11.25	Yes
% Claims with DX	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
% Claims with DX (MAX TOS 8, 11, 12)	85-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with 1 DX that have 2 DX	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% Claims with DX, where length=3	5-25	1.09	No	1.51	No	1.41	No	38.89	-6.47	Yes
% Claims with DX, where length=4	40-70	6.05	No	8.62	No	9.19	No	42.57	6.62	Yes
% Claims with DX, where length=5	20-55	92.86	No	89.87	No	89.39	No	-3.23	-0.53	Yes
% OPD Claims with Service Code or UB-92/OPD Claims (TOS 11)	N/A	66.83	N/A	49.13	N/A	53.86	N/A	-26.50	9.63	Yes
% HH Claims with Service Code or UB-92/HH Claims (TOS13)	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A
% Other Claims with Service Codes/All Other Claims (Excluding OPD/HH)	98-100	98.96	Yes	99.28	Yes	99.13	Yes	0.32	-0.15	Yes

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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Change Within Expected Range
% CPT-4 Service Code Indicator (code 01)/Claims with Service Codes	N/A	91.34	N/A	85.60	N/A	85.64	N/A	-6.29	0.05	Yes
% HCPCS (II & III) Service Codes Indicator (code 06)/Claims with Service Codes	N/A	8.01	N/A	14.33	N/A	14.36	N/A	78.93	0.22	Yes
% Other Codes Indicator /Claims with Service Codes	N/A	0.65	N/A	0.07	N/A	0.00	N/A	-89.00	-98.70	No

2003-2005 MAX RX VALIDATION TABLE  
STATE: VT

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	2,517,409	N/A	2,829,442	N/A	3,054,459	N/A	12.40	7.95	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	2,517,409	N/A	2,829,442	N/A	3,054,459	N/A	12.40	7.95	Yes
% Adjusted Claims	N/A	0.11	N/A	0.42	N/A	0.56	N/A	288.90	32.65	No
% Standard Adjustments	> 1%	95.19	Yes	99.71	Yes	99.73	Yes	4.75	0.02	Yes
Aver. Amt. Pd Adjust. ( include \$0)	N/A	\$93	N/A	\$102	N/A	\$101	N/A	9.13	-0.88	Yes
Total number of claims with missing Medicaid eligibility (excludes S-SCHIP only)	N/A	N/A	N/A	N/A	N/A	119,597	N/A	N/A	N/A	N/A
<b>FFS Claims (Type of Claim=1)</b>										
Total Number of Claims	N/A	2,517,409	N/A	2,829,442	N/A	3,054,459	N/A	12.40	7.95	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	\$54	Yes	\$63	No	\$65	No	16.82	3.40	Yes
% Claims with TPL	>0 - 15	2.00	Yes	2.33	Yes	1.97	Yes	16.79	-15.70	No
Aver. TPL Paid for claims with TPL	N/A	\$65	N/A	\$63	N/A	\$68	N/A	-3.23	9.15	Yes
% Family Planning Claims (program type=2)	N/A	0.91	N/A	0.62	N/A	0.46	N/A	-32.10	-24.80	No
% Drug Claims (TOS 16)	95-99	100.00	No	100.00	No	100.00	No	0.00	0.00	Yes
% DME Claims (TOS 51)	>0 - 6	0.00	No	0.00	Yes	0.00	Yes	Div by 0	177.90	No
% Drug Claims with Quantity	>98	98.56	Yes	99.96	Yes	100.00	Yes	1.42	0.04	Yes
% Drug Claims with Days Supply	>98	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with HICL	98-100	99.85	Yes	99.83	Yes	99.84	Yes	-0.02	0.01	Yes
% Claims with Medispan	98-100	99.53	Yes	99.57	Yes	99.69	Yes	0.04	0.12	Yes
% Claims with AHFS	98-100	99.85	Yes	99.83	Yes	99.84	Yes	-0.02	0.01	Yes
% Claims with Generic (GTC)	98-100	99.85	Yes	99.83	Yes	99.84	Yes	-0.02	0.01	Yes
% Claims with GC3	98-100	99.85	Yes	99.83	Yes	99.84	Yes	-0.02	0.01	Yes
<b>NDC Configuration Indicator</b>										
% Prescription (codes 0-3)	N/A	78.06	N/A	76.90	N/A	77.39	N/A	-1.48	0.64	Yes
% Products (codes 4-6)	N/A	21.59	N/A	22.72	N/A	22.25	N/A	5.26	-2.11	Yes
% HRI (code 7)	N/A	0.02	N/A	0.03	N/A	0.03	N/A	43.34	4.64	Yes
% Claims with Smart Key	98-100	99.85	Yes	99.83	Yes	99.84	Yes	-0.02	0.01	Yes
% OTC-Drug Class	N/A	4.43	N/A	4.15	N/A	5.23	N/A	-6.40	26.16	No
% Prescription-Drug Class	N/A	95.42	N/A	95.68	N/A	94.61	N/A	0.28	-1.12	Yes
% Multiple Source (Code Y)	N/A	51.91	N/A	53.29	N/A	57.84	N/A	2.68	8.53	Yes
% Single Source (Code N)	N/A	43.02	N/A	39.84	N/A	37.71	N/A	-7.40	-5.35	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: VT

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	165,479	N/A	168,697	N/A	165,860	N/A	1.95	-1.68	10% (+/-)	Yes
Total Medicaid Amount Paid	N/A	\$665,178,095	N/A	\$777,505,668	N/A	\$854,512,495	N/A	16.89	9.90	15% (+/-)	Yes
% with no services (Code 0)	N/A	8.04	N/A	13.66	N/A	12.29	N/A	69.79	-9.97	N/A	N/A
% with FFS only claims (Code 1)	N/A	32.42	N/A	86.34	N/A	87.71	N/A	166.30	1.58	N/A	N/A
% with only cap claims (Code 2)	N/A	5.75	N/A	0.00	N/A	0.00	N/A	-100.00	Div by 0	N/A	N/A
% with only encounter claims (Code 3)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A	N/A
% with FFS and cap claims (Code 4)	N/A	53.79	N/A	0.00	N/A	0.00	N/A	-100.00	Div by 0	N/A	N/A
% with cap and encounter claims only (Code 5)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A	N/A
% with FFS and encounter claims only (Code 6)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A	N/A
% with FFS, cap and encounter records (Code 7)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A	N/A
# with claims and missing Medicaid eligibility (excludes S-SCHIP only)	N/A	2,843	N/A	3,503	N/A	3,098	N/A	23.21	-11.60	N/A	N/A
% with claims and missing Medicaid eligibility (excludes S-SCHIP only)	<2%	1.72	Yes	2.08	No	1.87	Yes	20.86	-10.00	N/A	N/A
# with FFS claims and missing Medicaid eligibility (excludes S-SCHIP only)	N/A	N/A	N/A	N/A	N/A	3,098	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	1.87	N/A	N/A	N/A	N/A	N/A
Expenditures for people missing Medicaid eligibility (excludes S-SCHIP only enrollees)	N/A	\$2,450,169	N/A	\$6,622,749	N/A	\$8,561,065	N/A	170.30	29.27	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	\$8,561,065	N/A	N/A	N/A	N/A	N/A
<b>S-SCHIP ENROLLMENT</b>											
# with ONLY S-SCHIP enrollment	N/A	2,118	N/A	2,045	N/A	2,111	N/A	-3.45	3.23	N/A	N/A
% with ONLY S-SCHIP enrollment	N/A	1.28	N/A	1.21	N/A	1.27	N/A	-5.29	4.99	N/A	N/A
# with ANY S-SCHIP enrollment	N/A	6,625	N/A	6,532	N/A	6,704	N/A	-1.40	2.63	N/A	N/A
% with ANY S-SCHIP enrollment	N/A	4.00	N/A	3.87	N/A	4.04	N/A	-3.28	4.39	N/A	N/A
Total PYE ANY S-SCHIP enrollment	N/A	3,116	N/A	2,992	N/A	3,169	N/A	-4.00	5.92	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	160,518	N/A	163,149	N/A	160,651	N/A	1.64	-1.53	10% (+/-)	Yes
Total Medicaid PYE (Person Years of Enrollment)	N/A	127,853	N/A	127,886	N/A	126,944	N/A	0.03	-0.74	10% (+/-)	Yes
# with any M-SCHIP enrollment (Medicaid enrollees)	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	N/A	N/A
Total PYE any M-SCHIP	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	N/A	N/A
<b>Eligibility Demographics</b>											
% Records with Valid SSN Format	>=95%	99.73	Yes	99.72	Yes	99.72	Yes	-0.01	0.00	10% (+/-)	Yes
% Records whose MSIS SSN passed High Group Test (Code 1)	>95%	N/A	No	N/A	No	99.67	No	N/A	N/A	10% (+/-)	No
% Records whose MSIS SSN failed High Group Test due to invalid AAA (Code 2)	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A	N/A
% Records whose MSIS SSN failed High Group Test due to GG = 00 (Code 3)	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A	N/A
% Records whose MSIS SSN failed High Group Test due to SSSS = 0000 (Code 4)	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A	N/A
% Records whose MSIS SSN failed High Group Test due to GG not yet issued (Code 5)	N/A	N/A	N/A	N/A	N/A	0.05	N/A	N/A	N/A	N/A	N/A
% Records whose MSIS SSN failed High Group Test due to RR with invalid DOB (Code 6)	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A	N/A
#SSNs with duplicate records	0	0	Yes	0	Yes	0	Yes	Div by 0	Div by 0	N/A	N/A
% with External SSN from EDB (Code 1)	N/A	N/A	N/A	N/A	N/A	22.18	N/A	N/A	N/A	10% (+/-)	No
% with External SSN from state-provided cross-reference file Code 2)	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	10% (+/-)	No
% with County Code	>=98%	99.02	Yes	98.80	Yes	96.54	No	-0.22	-2.29	10% (+/-)	Yes
% with Valid 5 Digit Zip Code Format	>=95%	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	10% (+/-)	Yes
% Enrollees who Died During Year	0.1-3%	1.19	Yes	1.09	Yes	1.18	Yes	-8.54	8.00	10% (+/-)	Yes
% White	N/A	58.23	N/A	57.63	N/A	0.00	N/A	-1.03	-100.00	10% (+/-)	No
% Black	N/A	0.69	N/A	0.83	N/A	0.00	N/A	21.82	-100.00	10% (+/-)	No
% Native American/Alaskan Native	N/A	0.16	N/A	0.14	N/A	0.00	N/A	-7.12	-100.00	10% (+/-)	No
% Asian	N/A	0.27	N/A	0.25	N/A	0.00	N/A	-8.16	-100.00	N/A	N/A
% Native Hawaiian or other Pacific Islander	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A	N/A
% More than one race	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A	N/A
% Unknown race	<5%	40.48	No	40.96	No	100.00	No	1.189	144.10	N/A	N/A
% Hispanic/Latino (included with race categories prior to 2005)	N/A	0.18	N/A	0.18	N/A	0.00	N/A	2.119	-100.00	10% (+/-)	No
% of Hispanic/Latino with unknown race	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	N/A	N/A
% Age 0	2-8%	2.25	Yes	2.36	Yes	2.28	Yes	5.16	-3.61	10% (+/-)	Yes
% Age 0-20 Years	49-74%	45.71	No	45.00	No	44.99	No	-1.54	-0.03	10% (+/-)	Yes
% Age > 64 Years	5-18%	13.14	Yes	12.91	Yes	12.81	Yes	-1.72	-0.80	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%	53.88	Yes	52.50	Yes	53.97	Yes	-2.55	2.80	10% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: VT

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	30,955	N/A	31,478	N/A	31,489	N/A	1.69	0.03	10% (+/-)	Yes
Total EDB Dual PYE	N/A	27,251	N/A	27,130	N/A	27,526	N/A	-0.44	1.46	15% (+/-)	Yes
% Age > 64 Years who are EDB Duals	>=90%	97.58	Yes	97.53	Yes	97.80	Yes	-0.06	0.28	10% (+/-)	Yes
% MAX Aged Groups (11,21,31,41,51) who are EDB Duals	>=90%	97.79	Yes	98.08	Yes	98.51	Yes	0.29	0.44	10% (+/-)	Yes
% MAX Disabled Groups (12,22,32,42,52) who are EDB Duals	30-55%	56.61	No	56.83	No	56.98	No	0.39	0.27	10% (+/-)	Yes
% EDB Only (50)	<5%	4.86	Yes	2.66	Yes	1.50	Yes	-45.20	-43.60	N/A	N/A
% EDB QMB Only (51)	N/A	0.60	N/A	0.71	N/A	0.56	N/A	17.27	-21.60	N/A	N/A
% EDB QMB Plus (52)	N/A	31.22	N/A	33.61	N/A	35.55	N/A	7.65	5.78	N/A	N/A
% EDB SLMB Only (53)	N/A	1.84	N/A	1.63	N/A	1.76	N/A	-11.30	7.94	N/A	N/A
% EDB SLMB Plus (54)	N/A	3.09	N/A	2.87	N/A	2.86	N/A	-7.41	-0.15	N/A	N/A
% EDB QDWI (55)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A	N/A
% EDB QI-1 (56)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A	N/A
% EDB QI-2 (57)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A	N/A
% EDB Other (58)	N/A	20.03	N/A	20.46	N/A	21.18	N/A	2.13	3.50	N/A	N/A
% EDB dual type unknown (59)	N/A	38.34	N/A	38.06	N/A	36.59	N/A	-0.73	-3.86	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	659	N/A	706	N/A	270	N/A	7.13	-61.80	10% (+/-)	No
% Non-EDB Duals Without Valid SSN	N/A	0.15	N/A	0.14	N/A	0.00	N/A	-6.66	-100.00	10% (+/-)	No
% Non-EDB Duals who are Children/Adults	N/A	24.13	N/A	30.59	N/A	17.04	N/A	26.81	-44.30	10% (+/-)	No
% EDB Duals with Spanish Language	N/A	0.05	N/A	0.07	N/A	0.06	N/A	37.67	-9.56	15% (+/-)	Yes
% EDB Duals with EDB Date of Death During Year	6-10%	6.32	Yes	5.79	No	6.10	Yes	-8.25	5.23	15% (+/-)	Yes
% EDB Duals with Medicaid Reported HIC	N/A	95.16	N/A	97.19	N/A	98.30	N/A	2.14	1.14	15% (+/-)	Yes
% EDB Duals with Medicaid reported HIC = Medicare HIC	N/A	95.81	N/A	96.21	N/A	97.93	N/A	0.42	1.79	15% (+/-)	Yes
TOTAL EDB DUAL ENROLLEES IN JUNE	N/A	29,429	N/A	29,979	N/A	29,991	N/A	1.87	0.04	10% (+/-)	Yes
<b>June Medicare Type</b>											
June % with Part A Medicare	N/A	1.94	N/A	2.16	N/A	2.31	N/A	11.04	7.22	15% (+/-)	Yes
June % with Part B Medicare	N/A	1.14	N/A	1.18	N/A	1.19	N/A	3.42	0.81	15% (+/-)	Yes
June % Part A/B Medicare	N/A	96.91	N/A	96.66	N/A	96.50	N/A	-0.26	-0.17	15% (+/-)	Yes
<b>Original Reason for Medicare Entitlement</b>											
% Aged (Code 0)	N/A	55.76	N/A	54.56	N/A	53.02	N/A	-2.15	-2.81	15% (+/-)	Yes
% Disabled (Code 1)	N/A	43.66	N/A	44.93	N/A	46.46	N/A	2.89	3.42	15% (+/-)	Yes
% ESRD (Code 2)	N/A	0.19	N/A	0.16	N/A	0.16	N/A	-13.50	-3.96	15% (+/-)	Yes
% Disabled with ESRD (Code 3)	N/A	0.39	N/A	0.36	N/A	0.36	N/A	-9.72	1.75	15% (+/-)	Yes
<b>Other Eligibility Characteristics (All Enrollees)</b>											
% MAX Aged Groups (11,21,31,41,51) >64 Years	>=99%	99.71	Yes	99.92	Yes	99.96	Yes	0.21	0.05	10% (+/-)	Yes
% MAX Disabled Groups (12,22,32,42,52) >64 Years	N/A	7.35	N/A	7.02	N/A	6.83	N/A	-4.39	-2.70	10% (+/-)	Yes
% MAX Child Grps (14,16, 24, 34, 44, 48, 54) <21 Years	>=98%	99.33	Yes	99.46	Yes	99.40	Yes	0.13	-0.06	10% (+/-)	Yes
% MAX Adult Groups (15,17,25,35,45,55) >20 Years	>=80%	95.73	Yes	95.67	Yes	95.81	Yes	-0.06	0.15	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	90.82	No	N/A	N/A	N/A	N/A
% MAX 1115 waiver enrollees (Waiver Type=1,5,6,A,F) in MAX 1115 expansion group (MASBOE=51,52,54,55)	N/A	N/A	N/A	N/A	N/A	35.65	N/A	N/A	N/A	N/A	N/A
MAX Aged Total	N/A	19,522	N/A	19,467	N/A	18,918	N/A	-0.28	-2.82	10% (+/-)	Yes
11: Aged, Cash	N/A	1,670	N/A	1,544	N/A	1,433	N/A	-7.54	-7.19	10% (+/-)	Yes
21: Aged, MN	N/A	3,294	N/A	3,410	N/A	3,482	N/A	3.52	2.11	10% (+/-)	Yes
31: Aged, Poverty	N/A	47	N/A	0	N/A	0	N/A	-100.00	Div by 0	10% (+/-)	N/A
41: Other Aged	N/A	3,674	N/A	3,705	N/A	3,739	N/A	0.84	0.92	10% (+/-)	Yes
51: 1115 Aged	N/A	10,837	N/A	10,808	N/A	10,264	N/A	-0.27	-5.03	10% (+/-)	Yes
MAX Disabled Total	N/A	19,940	N/A	20,671	N/A	21,434	N/A	3.67	3.69	10% (+/-)	Yes
12: Disabled, Cash	N/A	12,700	N/A	13,031	N/A	13,325	N/A	2.61	2.26	10% (+/-)	Yes
22: Disabled, MN	N/A	3,302	N/A	3,395	N/A	3,688	N/A	2.82	8.63	10% (+/-)	Yes
32: Disabled, Poverty	N/A	0	N/A	77	N/A	101	N/A	Div by 0	31.17	10% (+/-)	No
42: Other Disabled	N/A	1,802	N/A	1,914	N/A	2,052	N/A	6.22	7.21	10% (+/-)	Yes
52: 1115 Disabled	N/A	2,136	N/A	2,254	N/A	2,268	N/A	5.52	0.62	10% (+/-)	Yes
MAX Child Total	N/A	68,994	N/A	68,669	N/A	67,524	N/A	-0.47	-1.67	10% (+/-)	Yes
14: AFDC Child, Cash	N/A	9,273	N/A	8,819	N/A	8,453	N/A	-4.90	-4.15	10% (+/-)	Yes

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16: AFDC-U Child, Cash	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
24: AFDC Child, MN	N/A	2,312	N/A	2,263	N/A	2,340	N/A	-2.12	3.40	10% (+/-)	Yes
34: Child Poverty	N/A	47,383	N/A	47,313	N/A	46,773	N/A	-0.15	-1.14	10% (+/-)	Yes
44: Other Child	N/A	4,501	N/A	4,797	N/A	4,836	N/A	6.58	0.81	10% (+/-)	Yes
48: Foster Care Child	N/A	2,610	N/A	2,767	N/A	2,848	N/A	6.02	2.93	10% (+/-)	Yes
54: 1115 Child	N/A	2,915	N/A	2,710	N/A	2,274	N/A	-7.03	-16.10	10% (+/-)	No
MAX Adult Total	N/A	52,062	N/A	54,342	N/A	52,775	N/A	4.38	-2.88	10% (+/-)	Yes
15: AFDC Adult, Cash	N/A	4,455	N/A	4,255	N/A	4,044	N/A	-4.49	-4.96	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	5,317	N/A	5,346	N/A	5,649	N/A	0.55	5.67	10% (+/-)	Yes
35: Adult, Poverty	N/A	2,498	N/A	2,524	N/A	2,545	N/A	1.04	0.83	10% (+/-)	Yes
45: Other Adult	N/A	3,392	N/A	3,574	N/A	3,795	N/A	5.37	6.18	10% (+/-)	Yes
55: 1115 Adult	N/A	36,400	N/A	38,643	N/A	36,742	N/A	6.16	-4.92	10% (+/-)	Yes
<b>Long-Term Care Enrollees</b>											
<b>INSTITUTIONAL STATUS</b>											
# enrollees with any ILTC claims (includes NF, ICF/MR, Aged Mental Hospital, IP Psych. < 21 years)	N/A	3,629	N/A	3,688	N/A	3,628	N/A	1.63	-1.63	N/A	N/A
% enrollees with any ILTC claims	N/A	2.26	N/A	2.26	N/A	2.26	N/A	-0.01	-0.10	N/A	N/A
% AGED enrollees with any ILTC claims	N/A	16.29	N/A	16.27	N/A	16.34	N/A	-0.13	0.43	N/A	N/A
% DISABLED enrollees with any ILTC claims	N/A	2.18	N/A	2.42	N/A	2.38	N/A	11.10	-1.63	N/A	N/A
% CHILD enrollees with any ILTC claims	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A	N/A
% ADULT enrollees with any ILTC claims	N/A	0.03	N/A	0.04	N/A	0.05	N/A	36.86	33.86	N/A	N/A
<b>COMMUNITY LONG-TERM CARE STATUS</b>											
# enrollees with any CLTC claims (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	8,518	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	5.30	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	9.62	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	19.54	N/A	N/A	N/A	15% (+/-)	No
% CHILD enrollees with any CLTC claims (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	2.61	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	1.41	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	557	N/A	N/A	N/A	15% (+/-)	No
<b>Section 1915(c) Waiver Enrollment - Most Recent</b>											
# ever enrolled in any Section 1915(c) waiver	N/A	N/A	N/A	N/A	N/A	4,344	N/A	N/A	N/A	15% (+/-)	No
% enrolled in any Section 1915(c) waiver	N/A	N/A	N/A	N/A	N/A	2.70	N/A	N/A	N/A	15% (+/-)	No
% AGED enrollees in Section 1915(c) waiver	N/A	N/A	N/A	N/A	N/A	7.66	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	12.16	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	0.35	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	0.10	N/A	N/A	N/A	15% (+/-)	No
# with Section 1915(c) waiver for Aged and Disabled (Code G)	N/A	N/A	N/A	N/A	N/A	1,938	N/A	N/A	N/A	15% (+/-)	No
# with Section 1915(c) waiver for Aged (Code H)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
# with Section 1915(c) waiver for Physically Disabled (Code I)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
# with Section 1915(c) waiver for People with Brain Injuries (Code J)	N/A	N/A	N/A	N/A	N/A	62	N/A	N/A	N/A	15% (+/-)	No
# with Section 1915(c) waiver for People with HIV/AIDS (Code K)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
# with Section 1915(c) waiver for MR/DD (Code L)	N/A	N/A	N/A	N/A	N/A	2,247	N/A	N/A	N/A	15% (+/-)	No
# with Section 1915(c) waiver for People with M/SED (Code M)	N/A	N/A	N/A	N/A	N/A	97	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	0.64	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	6.70	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	131,305	N/A	N/A	N/A	15% (+/-)	No
% AGED enrollees with any 1115 waiver	N/A	N/A	N/A	N/A	N/A	75.21	N/A	N/A	N/A	15% (+/-)	No
% DISABLED enrollees with any 1115 waiver	N/A	N/A	N/A	N/A	N/A	63.90	N/A	N/A	N/A	15% (+/-)	No
% CHILD enrollees with any 1115 waiver	N/A	N/A	N/A	N/A	N/A	82.47	N/A	N/A	N/A	15% (+/-)	No
% ADULT enrollees with any 1115 waiver	N/A	N/A	N/A	N/A	N/A	90.37	N/A	N/A	N/A	15% (+/-)	No
% with any HMO/HIO enrollment	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
# with any 1915(b) waiver (Code 2)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No

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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
% AGED enrollees with any 1915(b) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% DISABLED enrollees with any 1915(b) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% CHILD enrollees with any 1915(b) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% ADULT enrollees with any 1915(b) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% with any HMO/HIO enrollment	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
# with any combined 1915(b)(c) waiver (Code 4)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
% AGED enrollees with any combined 1915(b)(c) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% DISABLED enrollees with any combined 1915(b)(c) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% CHILD enrollees with any combined 1915(b)(c) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% ADULT enrollees with any combined 1915(b)(c) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% with any HMO/HIO enrollment	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
# with 1115 HIFA waiver (Code 5)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
# with 1115 Pharmacy waiver coverage (Code 6)	N/A	N/A	N/A	N/A	N/A	13,397	N/A	N/A	N/A	15% (+/-)	No
% AGED enrollees with Pharmacy waiver coverage	N/A	N/A	N/A	N/A	N/A	57.11	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	11.99	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	0.05	N/A	N/A	N/A	15% (+/-)	No
% with any HMO/HIO enrollment	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
# with other type of waiver (Code 7)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
# with unknown type of waiver (Code 9)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
# with 1115 disaster-related waiver (Code A)	N/A	N/A	N/A	N/A	N/A	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	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	N/A	N/A
# EDB Duals with ANY restricted benefits enrollment	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	N/A	N/A
# PYE EDB Duals 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
% EDB Duals with ONLY restricted benefits enrollment	N/A	N/A	N/A	N/A	N/A	0.00	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	12,197	N/A	12,200	N/A	11,632	N/A	0.02	-4.66	N/A	N/A
# with ANY Prescription Drug enrollment	N/A	13,899	N/A	14,019	N/A	13,406	N/A	0.86	-4.37	N/A	N/A
# PYE ANY Prescription Drug enrollment	N/A	11,273	N/A	10,727	N/A	10,675	N/A	-4.85	-0.48	N/A	N/A
<i>Dual Prescription Drug Enrollees</i>											
# with ONLY prescription drugs who are also EDB duals	N/A	11,974	N/A	11,997	N/A	11,508	N/A	0.19	-4.08	N/A	N/A
<b>June Eligibility Profile</b>											
<b>TOTAL ENROLLEES IN JUNE</b>											
June % Full Scope Benefits (Code 1)	>80%	97.86	Yes	89.39	Yes	90.11	Yes	-8.65	0.80	15% (+/-)	Yes
June % Restricted Benefits Alien (Code 2)	<5%	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	15% (+/-)	N/A
June % Restricted Benefits Dual (Code 3)	<5%	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	15% (+/-)	N/A
June % Restricted Benefits Pregnant (Code 4)	<5%	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	15% (+/-)	N/A
June % Restricted Benefits Other (Code 5)	0%	2.14	No	2.56	No	1.66	No	19.44	-35.20	15% (+/-)	No
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	0.10	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	0.43	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	7.71	N/A	N/A	N/A	15% (+/-)	No
June % Private Health Insurance (Codes 2-4)	2-12%	15.18	No	14.15	No	13.77	No	-6.77	-2.70	15% (+/-)	Yes

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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
June Total Enrollees with TANF Flag (Code 2)	N/A	12,516	N/A	12,123	N/A	11,285	N/A	-3.14	-6.91	15% (+/-)	Yes
June # with M-SCHIP (Code 2) - Child (<19 Years)	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
June # with M-SCHIP (Code 2) - Adult (>18 Years)	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
June # with S-SCHIP Flag (Code 3) - Child (<19 Years)	N/A	1,581	N/A	1,422	N/A	1,557	N/A	-10.10	9.49	15% (+/-)	Yes
June # with S-SCHIP Flag (Code 3) - Adult (>18 Years)	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
<b>Medicaid Expenditures</b>											
Total Medicaid Amt Paid	N/A	\$662,727,388	N/A	\$770,882,919	N/A	\$845,951,430	N/A	16.32	9.74	15% (+/-)	Yes
Average Medicaid Amt Paid per Enrollee	N/A	\$4,129	N/A	\$4,725	N/A	\$5,266	N/A	14.44	11.44	15% (+/-)	Yes
25th Percentile	N/A	\$163	N/A	\$181	N/A	\$211	N/A	11.04	16.57	15% (+/-)	No
50th Percentile (Median)	N/A	\$689	N/A	\$845	N/A	\$964	N/A	22.64	14.08	15% (+/-)	Yes
75th Percentile	N/A	\$2,903	N/A	\$3,570	N/A	\$4,001	N/A	22.98	12.07	15% (+/-)	Yes
95th Percentile	N/A	\$20,218	N/A	\$23,081	N/A	\$26,080	N/A	14.16	12.99	15% (+/-)	Yes
99th Percentile	N/A	\$55,433	N/A	\$61,147	N/A	\$66,691	N/A	10.31	9.07	15% (+/-)	Yes
<b>AVG MEDICAID AMT PD/ENROLLEE BY MAX ELIGIBILITY GROUP</b>											
MAX Aged	N/A	\$8,020	N/A	\$9,086	N/A	\$10,347	N/A	13.30	13.88	15% (+/-)	Yes
MAX Disabled	N/A	\$13,096	N/A	\$14,495	N/A	\$15,573	N/A	10.68	7.44	10% (+/-)	Yes
MAX Child	N/A	\$2,172	N/A	\$2,407	N/A	\$2,533	N/A	10.81	5.25	10% (+/-)	Yes
MAX Adult	N/A	\$1,828	N/A	\$2,376	N/A	\$2,755	N/A	29.96	15.93	10% (+/-)	No
<b>AVG MEDICAID AMT PD/EDB DUAL ENROLLEE</b>											
All EDB Dual Enrollees	N/A	\$9,141	N/A	\$10,243	N/A	\$11,407	N/A	12.06	11.36	15% (+/-)	Yes
MAX Aged	N/A	\$8,016	N/A	\$9,104	N/A	\$10,349	N/A	13.58	13.68	10% (+/-)	No
MAX Disabled	N/A	\$11,302	N/A	\$12,387	N/A	\$13,221	N/A	9.60	6.73	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	\$38,296	N/A	N/A	N/A	15% (+/-)	No
Enrollees with CLTC claims (excluding CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	\$34,732	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	\$41,361	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	\$47,092	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	\$32,974	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for Aged (Code H)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for Physically Disabled (Code I)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for People with Brain Injuries (Code J)	N/A	N/A	N/A	N/A	N/A	\$73,038	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	\$57,153	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	\$79,548	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	\$28,650	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for Aged and Disabled (Code G)	N/A	N/A	N/A	N/A	N/A	\$11,076	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for Aged (Code H)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for Physically Disabled (Code I)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for People with Brain Injuries (Code J)	N/A	N/A	N/A	N/A	N/A	\$48,740	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	\$42,935	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	\$35,998	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>											
<b>Expenditures for Family Planning enrollees with Restricted Benefits</b>											
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
<b>Expenditures for Aliens with Restricted Benefits</b>											
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
<b>Expenditures for EDB Duals with Restricted Benefits (Medicare Cost Sharing Only - Code 3)</b>											



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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
Expenditures for EDB Duals with only restricted benefits enrollment	N/A	Div by 0	N/A	Div by 0	N/A	\$0	N/A	Div by 0	Div by 0	N/A	N/A
Avg Medicaid Paid for EDB Duals with only restricted benefit 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
<b>Prescription Drug Enrollees</b>											
Expenditures for Prescription Drug ONLY enrollees (may also have a month or more of Code 3)	N/A	\$21,993,872	N/A	\$30,101,364	N/A	\$33,103,178	N/A	36.86	9.97	N/A	N/A
Avg Medicaid Paid for Prescription Drug ONLY enrollees	N/A	\$1,803	N/A	\$2,467	N/A	\$2,846	N/A	36.83	15.34	N/A	N/A
<b>Dual Prescription Drug Enrollees</b>											
Expenditures for Prescription Drug ONLY enrollees who are also EDB duals	N/A	\$21,761,672	N/A	\$29,871,801	N/A	\$32,874,030	N/A	37.27	10.05	N/A	N/A
<b>MEDICAID ENROLLEES - EXCLUDING SELECT RESTRICTED BENEFIT GROUPS (excludes people with missing eligibility information, S-SCHIP only, FP Only, Aliens with only restricted benefits, duals with restricted benefits only, and prescription drug only enrollees) ----</b> <b>NOTE: S-SCHIP only, FP Only, duals with restricted benefits, and Aliens with restricted benefits were NOT excluded prior to 2001. Prescription drug only enrollees were NOT excluded prior to 2003.</b>											
Total Medicaid Enrollees	N/A	148,321	N/A	150,949	N/A	149,019	N/A	1.77	-1.28	10% (+/-)	Yes
MAX Aged Total	N/A	9,078	N/A	9,065	N/A	9,087	N/A	-0.14	0.24	10% (+/-)	Yes
MAX Disabled Total	N/A	18,187	N/A	18,873	N/A	19,633	N/A	3.77	4.03	10% (+/-)	Yes
MAX Child Total	N/A	68,994	N/A	68,669	N/A	67,524	N/A	-0.47	-1.67	10% (+/-)	Yes
MAX Adult Total	N/A	52,062	N/A	54,342	N/A	52,775	N/A	4.38	-2.88	10% (+/-)	Yes
Total Medicaid PYE (Person Years of Enrollment)	N/A	117,302	N/A	117,887	N/A	117,008	N/A	0.50	-0.75	10% (+/-)	Yes
Total EDB Duals	N/A	18,981	N/A	19,481	N/A	19,981	N/A	2.63	2.57	10% (+/-)	Yes
MAX Aged	N/A	8,809	N/A	8,846	N/A	8,875	N/A	0.42	0.33	10% (+/-)	Yes
MAX Disabled	N/A	9,596	N/A	9,998	N/A	10,467	N/A	4.19	4.69	10% (+/-)	Yes
<b>Total Medicaid Amount Paid</b>											
Total Medicaid Amt Paid	N/A	\$640,733,516	N/A	\$740,781,555	N/A	\$812,848,252	N/A	15.61	9.73	15% (+/-)	Yes
Average Medicaid Amt Paid per Enrollee	N/A	\$4,320	N/A	\$4,907	N/A	\$5,455	N/A	13.60	11.15	15% (+/-)	Yes
<b>AVG MEDICAID AMT PD/ENROLLEE BY MAX ELIGIBILITY GROUP</b>											
MAX Aged	N/A	\$15,333	N/A	\$16,921	N/A	\$18,715	N/A	10.36	10.60	15% (+/-)	Yes
MAX Disabled	N/A	\$14,104	N/A	\$15,526	N/A	\$16,624	N/A	10.08	7.08	10% (+/-)	Yes
MAX Child	N/A	\$2,172	N/A	\$2,407	N/A	\$2,533	N/A	10.81	5.25	10% (+/-)	Yes
MAX Adult	N/A	\$1,828	N/A	\$2,376	N/A	\$2,755	N/A	29.96	15.93	10% (+/-)	No
<b>AVG MEDICAID AMT PD/EDB DUAL ENROLLEE</b>											
All EDB Dual Enrollees	N/A	\$13,761	N/A	\$15,018	N/A	\$16,332	N/A	9.13	8.75	15% (+/-)	Yes
MAX Aged	N/A	\$15,417	N/A	\$17,012	N/A	\$18,851	N/A	10.34	10.81	10% (+/-)	No
MAX Disabled	N/A	\$12,821	N/A	\$13,901	N/A	\$14,729	N/A	8.43	5.95	10% (+/-)	Yes
<b>MANAGED CARE PLAN INFORMATION (Enrollees in Capitated Plans - PCCM, HMO, HIO, &amp; PHPs, excludes people with missing eligibility information, S-SCHIP only, FP Only, Aliens with only restricted benefits, duals with restricted benefits only, and prescription drug only enrollees) ---- NOTE: FP Only, duals with restricted benefits, and Aliens with restricted benefits were NOT excluded prior to 2003. Prescription drug only enrollees were NOT excluded prior to 2003.</b>											
% Total Enrollees in MC Anytime During Year	N/A	74.17	N/A	75.14	N/A	75.98	N/A	1.30	1.12	25% (+)	Yes
Total MC Enrollees	N/A	110,016	N/A	113,418	N/A	113,218	N/A	3.09	-0.18	25% (+)	Yes
Aged	N/A	378	N/A	389	N/A	390	N/A	2.91	0.26	25% (+)	Yes
Disabled	N/A	8,475	N/A	9,172	N/A	9,580	N/A	8.22	4.45	25% (+)	Yes
Child	N/A	54,397	N/A	55,376	N/A	55,612	N/A	1.80	0.43	25% (+)	Yes
Adult	N/A	46,766	N/A	48,481	N/A	47,636	N/A	3.67	-1.74	25% (+)	Yes
% of MC Enrollees in HMO/HIO (Dups)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
% of MC Enrollees in Dental (Dups)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
% of MC Enrollees in BHO (Dups)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
% of MC Enrollees in Prenatal (Dups)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
% of MC Enrollees in LTC (Dups)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
% of MC Enrollees in PACE (Dups)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
% of MC Enrollees in PCCM (Dups)	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	25% (+)	Yes
% of MC Enrollees in Other MC (Dups)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
% EDB Duals ever enrolled in HMO/HIOs	<20%	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	25% (+)	N/A
% EDB Duals in PHP only or PHP/PCCM only	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
% EDB Duals in PCCM only	N/A	11.69	N/A	13.83	N/A	14.22	N/A	18.29	2.82	25% (+)	Yes
% Section 1915(c) waiver enrollees ever enrolled in HMO/HIOs	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	25% (+)	No
% Section 1915(c) waiver enrollees in PHP only or PHP/PCCM only	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	25% (+)	No
% Section 1915(c) waiver enrollees in PCCM only	N/A	N/A	N/A	N/A	N/A	18.30	N/A	N/A	N/A	25% (+)	No
TOTAL ENROLLEES IN JUNE	N/A	117,727	N/A	118,119	N/A	116,875	N/A	0.33	-1.05	25% (+)	Yes
June % HMO/HIO only (Code 1)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A

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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
June % Dental Plan only (Code 2)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % BHO only (Code 3)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % PCCM only (Code 4)	N/A	70.12	N/A	70.27	N/A	71.51	N/A	0.22	1.76	25% (+)	Yes
June % Other MC only (Code 5)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % HMO/HIO & Dental (Code 6)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % HMO/HIO & BHO (Code 7)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % HMO/HIO & Other MC (Code 8)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % HMO/HIO & Dental & BHO (Code 9)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % Dental & PCCM (Code 10)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % BHO & PCCM (Code 11)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % Other MC & PCCM (Code 12)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % Dental & BHO & PCCM (Code 13)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % Dental & BHO (Code 14)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % Other Combinations (Code 15)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % FFS Only (Code 16)	N/A	29.88	N/A	29.73	N/A	28.49	N/A	-0.53	-4.15	25% (+)	Yes
June % MC Status Unknown (Code 99)	<5%	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	25% (+)	N/A
<b>CAPITATION CLAIMS</b>											
Total Cap Payments	N/A	\$2,748,325	N/A	\$0	N/A	\$0	N/A	-100.00	Div by 0	15% (+/-)	N/A
HMO/HIO	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
PHP	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
PCCM	N/A	\$2,748,325	N/A	\$0	N/A	\$0	N/A	-100.00	Div by 0	15% (+/-)	N/A
Ratio of Cap Claims to PME (person mo. enroll.) in MC	-9-2	0.56	No	0.00	No	0.00	No	-100.00	Div by 0	15% (+/-)	N/A
HMO/HIO	-9-2	Div by 0	No	Div by 0	No	Div by 0	No	Div by 0	Div by 0	15% (+/-)	N/A
PHP	-9-2	Div by 0	No	Div by 0	No	Div by 0	No	Div by 0	Div by 0	15% (+/-)	N/A
PCCM	-9-2	0.56	No	0.00	No	0.00	No	-100.00	Div by 0	15% (+/-)	N/A
Average Cap Payment for PME in MC	N/A	\$3	N/A	\$0	N/A	\$0	N/A	-100.00	Div by 0	15% (+/-)	N/A
HMO/HIO	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
PHP	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
PCCM	N/A	\$3	N/A	\$0	N/A	\$0	N/A	-100.00	Div by 0	15% (+/-)	N/A
<b>Persons enrolled in PHP only or PHP/PCCM only</b>											
Total Cap Payments	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Total Medicaid Amt Paid	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Count of Enrollees	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
<b>Persons enrolled in PCCM only</b>											
Total Cap Payments	N/A	\$2,748,325	N/A	\$0	N/A	\$0	N/A	-100.00	Div by 0	15% (+/-)	N/A
Count of Enrollees	N/A	110,016	N/A	113,418	N/A	113,218	N/A	3.09	-0.18	15% (+/-)	Yes
<b>Persons ever enrolled in HMO/HIOs during year</b>											
Count of Enrollees	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Aged	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	25% (+)	N/A
Disabled	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	25% (+)	N/A
Child	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	25% (+)	N/A
Adult	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	25% (+)	N/A
Total Ever Enrolled in HMO/HIO PYE	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	25% (+)	N/A
Total Cap Payments	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Average Cap Payments	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Aged	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Disabled	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Child	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Adult	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Total FFS Payments	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Average FFS Payments per enrollee	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Aged	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Disabled	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Child	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Adult	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Total FFS Payments by Type of Service	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
IP	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A

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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
ILTC	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Drug	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
All Other (excluding cap payments)	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Average FFS Payments by Type of Service											
IP	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
ILTC	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Drug	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
All Other (excluding cap payments)	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
<b>FFS INFORMATION FOR NON-DUAL MEDICAID ENROLLEES (excludes EDB Duals, people ever enrolled in HMO/HIOs, with missing eligibility information, S-SCHIP only, FP Only, Aliens with restricted benefits only, and prescription drug only enrollees) ---- NOTE: S-SCHIP only, FP Only, and Aliens with restricted benefits were NOT excluded prior to 2001. Prescription drug only enrollees were NOT excluded prior to 2003.</b>											
Total Non-Dual FFS Enrollees	N/A	129,340	N/A	131,468	N/A	129,038	N/A	1.65	-1.85	15% (+/-)	Yes
Total Non-Dual FFS Recipients	N/A	111,189	N/A	113,045	N/A	112,252	N/A	1.67	-0.70	15% (+/-)	Yes
Total Non-Dual FFS PYE	N/A	100,452	N/A	100,661	N/A	99,331	N/A	0.21	-1.32	15% (+/-)	Yes
MAX Aged Total	N/A	269	N/A	219	N/A	212	N/A	-18.60	-3.20	10% (+/-)	Yes
11: Aged, Cash	N/A	38	N/A	35	N/A	31	N/A	-7.89	-11.40	10% (+/-)	No
21: Aged, MN	N/A	112	N/A	117	N/A	116	N/A	4.46	-0.86	10% (+/-)	Yes
31: Aged, Poverty	N/A	46	N/A	0	N/A	0	N/A	-100.00	Div by 0	10% (+/-)	N/A
41: Other Aged	N/A	68	N/A	64	N/A	59	N/A	-5.88	-7.81	10% (+/-)	Yes
51: 1115 Aged	N/A	5	N/A	3	N/A	6	N/A	-40.00	100.00	10% (+/-)	No
MAX Disabled Total	N/A	8,591	N/A	8,875	N/A	9,166	N/A	3.31	3.28	10% (+/-)	Yes
12: Disabled, Cash	N/A	7,298	N/A	7,530	N/A	7,719	N/A	3.18	2.51	10% (+/-)	Yes
22: Disabled, MN	N/A	595	N/A	551	N/A	578	N/A	-7.39	4.90	10% (+/-)	Yes
32: Disabled, Poverty	N/A	0	N/A	75	N/A	100	N/A	Div by 0	33.33	10% (+/-)	No
42: Other Disabled	N/A	656	N/A	689	N/A	739	N/A	5.03	7.26	10% (+/-)	Yes
52: 1115 Disabled	N/A	42	N/A	30	N/A	30	N/A	-28.60	0.00	10% (+/-)	Yes
MAX Child Total	N/A	68,990	N/A	68,664	N/A	67,516	N/A	-0.47	-1.67	10% (+/-)	Yes
14: AFDC Child, Cash	N/A	9,272	N/A	8,819	N/A	8,452	N/A	-4.89	-4.16	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	2,311	N/A	2,261	N/A	2,337	N/A	-2.16	3.36	10% (+/-)	Yes
34: Child Poverty	N/A	47,382	N/A	47,312	N/A	46,773	N/A	-0.15	-1.14	10% (+/-)	Yes
44: Other Child	N/A	4,501	N/A	4,796	N/A	4,834	N/A	6.55	0.79	10% (+/-)	Yes
48: Foster Care Child	N/A	2,609	N/A	2,767	N/A	2,848	N/A	6.06	2.93	10% (+/-)	Yes
54: 1115 Child	N/A	2,915	N/A	2,709	N/A	2,272	N/A	-7.07	-16.10	10% (+/-)	No
MAX Adult Total	N/A	51,490	N/A	53,710	N/A	52,144	N/A	4.31	-2.92	10% (+/-)	Yes
15: AFDC Adult, Cash	N/A	4,407	N/A	4,202	N/A	3,990	N/A	-4.65	-5.05	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	5,240	N/A	5,257	N/A	5,557	N/A	0.32	5.71	10% (+/-)	Yes
35: Adult, Poverty	N/A	2,490	N/A	2,509	N/A	2,532	N/A	0.76	0.92	10% (+/-)	Yes
45: Other Adult	N/A	3,350	N/A	3,524	N/A	3,747	N/A	5.19	6.33	10% (+/-)	Yes
55: 1115 Adult	N/A	36,003	N/A	38,218	N/A	36,318	N/A	6.15	-4.97	10% (+/-)	Yes
# Non-Dual FFS Enrollees w/ MSIS Dual Code/No EDB Confirmation	N/A	491	N/A	547	N/A	201	N/A	11.41	-63.30	10% (+/-)	No
Total FFS Medicaid Amt Paid	N/A	\$376,847,558	N/A	\$448,219,948	N/A	\$486,526,297	N/A	18.94	8.55	15% (+/-)	Yes
Average FFS Medicaid Amt Paid per Non-Dual FFS Enrollee	N/A	\$2,914	N/A	\$3,409	N/A	\$3,770	N/A	17.01	10.59	15% (+/-)	Yes
Avg FFS Medicaid Amt Paid per Non-Dual FFS Recipient (User of any service)	N/A	\$3,389	N/A	\$3,965	N/A	\$4,334	N/A	16.99	9.31	15% (+/-)	Yes
<b>AVG FFS MEDICAID AMT PD/NON-DUAL FFS ENROLLEE BY MAX ELIG GRP</b>											
All Aged	N/A	\$12,552	N/A	\$13,231	N/A	\$13,011	N/A	5.41	-1.66	15% (+/-)	Yes
11: Aged, Cash	N/A	\$15,853	N/A	\$11,709	N/A	\$16,216	N/A	-26.10	38.49	15% (+/-)	No
21: Aged, MN	N/A	\$4,508	N/A	\$5,244	N/A	\$4,135	N/A	16.33	-21.10	15% (+/-)	No
31: Aged, Poverty	N/A	\$6,524	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
41: Other Aged	N/A	\$28,845	N/A	\$29,207	N/A	\$30,032	N/A	1.26	2.82	15% (+/-)	Yes
51: 1115 Aged	N/A	\$1,526	N/A	\$1,653	N/A	\$687	N/A	8.35	-58.40	15% (+/-)	No
All Disabled	N/A	\$15,513	N/A	\$17,356	N/A	\$18,789	N/A	11.88	8.26	15% (+/-)	Yes
12: Disabled, Cash	N/A	\$14,641	N/A	\$16,453	N/A	\$17,751	N/A	12.38	7.89	15% (+/-)	Yes
22: Disabled, MN	N/A	\$10,323	N/A	\$10,070	N/A	\$14,004	N/A	-2.46	39.07	15% (+/-)	No
32: Disabled, Poverty	N/A	Div by 0	N/A	\$10,220	N/A	\$7,378	N/A	Div by 0	-27.80	15% (+/-)	No
42: Other Disabled	N/A	\$30,329	N/A	\$34,201	N/A	\$35,422	N/A	12.77	3.57	15% (+/-)	Yes
52: 1115 Disabled	N/A	\$9,164	N/A	\$8,618	N/A	\$6,407	N/A	-5.96	-25.70	15% (+/-)	No

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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
All Child	N/A	\$2,150	N/A	\$2,406	N/A	\$2,532	N/A	11.92	5.21	15% (+/-)	Yes
14: AFDC Child, Cash	N/A	\$2,744	N/A	\$3,034	N/A	\$3,105	N/A	10.60	2.33	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	\$2,697	N/A	\$3,307	N/A	\$3,240	N/A	22.64	-2.04	15% (+/-)	Yes
34: Child, Poverty	N/A	\$1,416	N/A	\$1,550	N/A	\$1,639	N/A	9.46	5.76	15% (+/-)	Yes
44: Other Child	N/A	\$2,044	N/A	\$2,499	N/A	\$2,381	N/A	22.30	-4.74	15% (+/-)	Yes
48: Foster Care Child	N/A	\$14,389	N/A	\$15,444	N/A	\$16,199	N/A	7.33	4.89	15% (+/-)	Yes
54: 1115 Child	N/A	\$968	N/A	\$1,080	N/A	\$1,228	N/A	11.61	13.64	15% (+/-)	Yes
All Adult	N/A	\$1,784	N/A	\$2,347	N/A	\$2,697	N/A	31.55	14.89	15% (+/-)	Yes
15: AFDC Adult, Cash	N/A	\$3,485	N/A	\$4,314	N/A	\$4,732	N/A	23.79	9.69	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	\$2,222	N/A	\$2,476	N/A	\$2,602	N/A	11.45	5.08	15% (+/-)	Yes
35: Adult, Poverty	N/A	\$2,468	N/A	\$3,012	N/A	\$2,964	N/A	22.03	-1.60	15% (+/-)	Yes
45: Other Adult	N/A	\$2,048	N/A	\$2,714	N/A	\$2,842	N/A	32.50	4.72	15% (+/-)	Yes
55: 1115 Adult	N/A	\$1,440	N/A	\$2,036	N/A	\$2,454	N/A	41.33	20.55	15% (+/-)	No
FFS EXPENDITURES AND USERS BY MAX TOS											
IP: Total Medicaid Paid (TOS 01)	N/A	\$40,332,741	N/A	\$50,294,310	N/A	\$53,622,773	N/A	24.70	6.62	15% (+/-)	Yes
IP: Number of Users	N/A	6,884	N/A	7,433	N/A	7,461	N/A	7.98	0.38	15% (+/-)	Yes
IP: Average Medicaid Pd per User	N/A	\$5,859	N/A	\$6,766	N/A	\$7,187	N/A	15.49	6.22	15% (+/-)	Yes
IP: Average Medicaid Covered Days Per User	N/A	6	N/A	7	N/A	7	N/A	4.21	-1.13	15% (+/-)	Yes
MH Aged: Total Medicaid Paid (TOS 02)	N/A	\$71,225	N/A	\$0	N/A	\$0	N/A	-100.00	Div by 0	15% (+/-)	N/A
MH Aged: Number of Users	N/A	2	N/A	0	N/A	0	N/A	-100.00	Div by 0	15% (+/-)	N/A
MH Aged: Avg Medicaid Pd per User	N/A	\$35,613	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
IP Psych < 21: Total Medicaid Paid (TOS 04)	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
IP Psych < 21: Number of Users	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
IP Psych<21 :Avg Medicaid Pd per User	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
ICF/MR: Total Medicaid Paid (TOS 05)	N/A	\$384,003	N/A	\$341,238	N/A	\$179,196	N/A	-11.10	-47.50	15% (+/-)	No
ICF/MR: Number of Users	N/A	4	N/A	2	N/A	1	N/A	-50.00	-50.00	15% (+/-)	No
ICF/MR: Avg Medicaid Pd per User	N/A	\$96,001	N/A	\$170,619	N/A	\$179,196	N/A	77.73	5.03	15% (+/-)	Yes
NF: Total Medicaid Paid (TOS 07)	N/A	\$4,219,733	N/A	\$4,418,232	N/A	\$5,209,617	N/A	4.70	17.91	15% (+/-)	No
NF Number of Users	N/A	187	N/A	211	N/A	219	N/A	12.83	3.79	15% (+/-)	Yes
NF:Avg Medicaid Pd per User	N/A	\$22,565	N/A	\$20,939	N/A	\$23,788	N/A	-7.21	13.60	15% (+/-)	Yes
Physician: Total Medicaid Paid (TOS 08)	N/A	\$32,822,193	N/A	\$37,092,353	N/A	\$38,840,997	N/A	13.01	4.71	15% (+/-)	Yes
Physician: Number of Users	N/A	90,270	N/A	92,286	N/A	91,588	N/A	2.23	-0.76	15% (+/-)	Yes
Physician: Avg Medicaid Pd per User	N/A	\$364	N/A	\$402	N/A	\$424	N/A	10.54	5.51	15% (+/-)	Yes
Dental: Total Medicaid Paid (TOS 09)	N/A	\$10,829,695	N/A	\$12,039,803	N/A	\$12,277,992	N/A	11.17	1.98	15% (+/-)	Yes
Dental: Number of Users	N/A	40,235	N/A	41,683	N/A	41,578	N/A	3.60	-0.25	15% (+/-)	Yes
Dental: Avg Medicaid Pd per User	N/A	\$269	N/A	\$289	N/A	\$295	N/A	7.31	2.24	15% (+/-)	Yes
Other Practitioner: Total Medicaid Pd (TOS 10)	N/A	\$4,467,259	N/A	\$4,961,790	N/A	\$4,583,538	N/A	11.07	-7.62	15% (+/-)	Yes
Other Practitioner: Number of Users	N/A	8,568	N/A	10,160	N/A	10,593	N/A	18.58	4.26	15% (+/-)	Yes
Other Practitioner: Avg Medicaid Pd per User	N/A	\$521	N/A	\$488	N/A	\$433	N/A	-6.33	-11.40	15% (+/-)	Yes
OPD: Total Medicaid Paid (TOS 11)	N/A	\$30,776,226	N/A	\$37,811,278	N/A	\$41,948,609	N/A	22.86	10.94	15% (+/-)	Yes
OPD Number of Users	N/A	42,861	N/A	45,973	N/A	45,980	N/A	7.26	0.02	15% (+/-)	Yes
OPD: Avg Medicaid Pd per User	N/A	\$718	N/A	\$822	N/A	\$912	N/A	14.54	10.93	15% (+/-)	Yes
Clinic: Total Medicaid Paid (TOS 12)	N/A	\$7,657,318	N/A	\$9,200,821	N/A	\$9,322,575	N/A	20.16	1.32	15% (+/-)	Yes
Clinic: Number of Users	N/A	21,141	N/A	22,369	N/A	22,669	N/A	5.81	1.34	15% (+/-)	Yes
Clinic: Avg Medicaid Pd per User	N/A	\$362	N/A	\$411	N/A	\$411	N/A	13.56	-0.02	15% (+/-)	Yes
HH: Total Medicaid Paid (TOS 13)	N/A	\$4,614,175	N/A	\$4,829,016	N/A	\$4,885,174	N/A	4.66	1.16	15% (+/-)	Yes
HH: Number of Users	N/A	2,024	N/A	2,199	N/A	2,372	N/A	8.65	7.87	15% (+/-)	Yes
HH: Avg Medicaid Pd per User	N/A	\$2,280	N/A	\$2,196	N/A	\$2,060	N/A	-3.67	-6.22	15% (+/-)	Yes
Lab/Xray: Total Medicaid Paid (TOS 15)	N/A	\$17,481,176	N/A	\$21,180,308	N/A	\$22,563,368	N/A	21.16	6.53	15% (+/-)	Yes
Lab/Xray: Number of Users	N/A	66,791	N/A	68,407	N/A	67,699	N/A	2.42	-1.03	15% (+/-)	Yes
Lab/Xray:Avg Medicaid Pd per User	N/A	\$262	N/A	\$310	N/A	\$333	N/A	18.30	7.64	15% (+/-)	Yes
Drugs: Total Medicaid Paid (TOS 16)	N/A	\$54,670,498	N/A	\$73,703,760	N/A	\$81,507,386	N/A	34.81	10.59	15% (+/-)	Yes
Drugs: Number of Users	N/A	85,908	N/A	87,185	N/A	87,213	N/A	1.49	0.03	15% (+/-)	Yes
Drugs: Avg Medicaid Pd per User	N/A	\$636	N/A	\$845	N/A	\$935	N/A	32.84	10.55	15% (+/-)	Yes
Other Services: Total Medicaid Paid (TOS 19)	N/A	\$84,306,078	N/A	\$54,614,364	N/A	\$59,486,230	N/A	-35.20	8.92	15% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
Other Services: Number of Users	N/A	21,521	N/A	17,971	N/A	18,281	N/A	-16.50	1.73	15% (+/-)	Yes
Other Services: Avg Medicaid Pd per User	N/A	\$3,917	N/A	\$3,039	N/A	\$3,254	N/A	-22.40	7.07	15% (+/-)	Yes
Transportation: Total Medicaid Paid (TOS 26)	N/A	\$2,842,382	N/A	\$2,569,483	N/A	\$4,061,782	N/A	-9.60	58.08	15% (+/-)	No
Transportation: Number of Users	N/A	8,139	N/A	8,055	N/A	8,995	N/A	-1.03	11.67	15% (+/-)	Yes
Transportation: Avg Medicaid Pd per User	N/A	\$349	N/A	\$319	N/A	\$452	N/A	-8.66	41.56	15% (+/-)	No
PCS: Total Medicaid Paid (TOS 30)	N/A	\$9,472,629	N/A	\$11,852,565	N/A	\$14,570,167	N/A	25.12	22.93	15% (+/-)	No
PCS: Number of Users	N/A	1,163	N/A	1,536	N/A	1,827	N/A	32.07	18.95	15% (+/-)	No
PCS: Avg Medicaid Pd per User	N/A	\$8,145	N/A	\$7,717	N/A	\$7,975	N/A	-5.26	3.35	15% (+/-)	Yes
Target Case Management: Total Medicaid Pd (TOS 31)	N/A	\$35	N/A	\$5,919,328	N/A	\$6,348,505	N/A	#####	7.25	15% (+/-)	Yes
Target Case Management: Number of Users	N/A	1	N/A	5,640	N/A	5,841	N/A	564,000.00	3.56	15% (+/-)	Yes
Target Case Management: Avg Medicaid Pd per User	N/A	\$35	N/A	\$1,050	N/A	\$1,087	N/A	2,899.00	3.56	15% (+/-)	Yes
Rehab Services: Total Medicaid Pd (TOS 33)	N/A	\$25,873	N/A	\$107,372	N/A	\$0	N/A	315.00	-100.00	15% (+/-)	No
Rehab Services: Number of Users	N/A	1	N/A	2	N/A	0	N/A	100.00	-100.00	15% (+/-)	No
Rehab Services: Avg Medicaid Pd per User	N/A	\$25,873	N/A	\$53,686	N/A	Div by 0	N/A	107.50	Div by 0	15% (+/-)	N/A
PT/OT/Speech/Hear: Total Medicaid Paid (TOS 34)	N/A	\$586,360	N/A	\$998,421	N/A	\$1,064,359	N/A	70.27	6.60	15% (+/-)	Yes
PT/OT/Speech/Hear: Number of Users	N/A	2,095	N/A	2,804	N/A	2,970	N/A	33.84	5.92	15% (+/-)	Yes
PT/OT/Speech/Hear: Avg Medicaid Pd per User	N/A	\$280	N/A	\$356	N/A	\$358	N/A	27.22	0.65	15% (+/-)	Yes
Hospice: Total Medicaid Paid (TOS 35)	N/A	\$216,130	N/A	\$239,510	N/A	\$242,761	N/A	10.82	1.36	15% (+/-)	Yes
Hospice: Number of Users	N/A	47	N/A	56	N/A	39	N/A	19.15	-30.40	15% (+/-)	No
Hospice: Avg Medicaid Pd per User	N/A	\$4,599	N/A	\$4,277	N/A	\$6,225	N/A	-6.99	45.54	15% (+/-)	No
DME: Total Medicaid Paid (TOS 51)	N/A	\$4,489,528	N/A	\$5,250,504	N/A	\$5,466,797	N/A	16.95	4.12	15% (+/-)	Yes
DME: Number of Users	N/A	9,223	N/A	14,351	N/A	14,534	N/A	55.60	1.28	15% (+/-)	Yes
DME: Avg Medicaid Pd per User	N/A	\$487	N/A	\$366	N/A	\$376	N/A	-24.80	2.81	15% (+/-)	Yes
Residential Care: Total Medicaid Paid (TOS 52)	N/A	\$9,391,518	N/A	\$1,162,452	N/A	\$457,378	N/A	-87.60	-60.70	15% (+/-)	No
Residential Care: Number of Users	N/A	713	N/A	223	N/A	22	N/A	-68.70	-90.10	15% (+/-)	No
Residential Care: Avg Medicaid Pd per User	N/A	\$13,172	N/A	\$5,213	N/A	\$20,790	N/A	-60.40	298.80	15% (+/-)	No
Psych. Services: Total Medicaid Paid (TOS 53)	N/A	\$54,905,911	N/A	\$106,495,923	N/A	\$117,992,320	N/A	93.96	10.80	15% (+/-)	Yes
Psych. Services: Number of Users	N/A	23,674	N/A	26,658	N/A	28,327	N/A	12.60	6.26	15% (+/-)	Yes
Psych. Services: Avg Medicaid Pd per User	N/A	\$2,319	N/A	\$3,995	N/A	\$4,165	N/A	72.25	4.27	15% (+/-)	Yes
Adult Day Care: Total Medicaid Paid (TOS 54)	N/A	\$53,707	N/A	\$0	N/A	\$0	N/A	-100.00	Div by 0	15% (+/-)	N/A
Adult Day Care: Number of Users	N/A	4	N/A	0	N/A	0	N/A	-100.00	Div by 0	15% (+/-)	N/A
Adult Day Care: Avg Medicaid Pd per User	N/A	\$13,427	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	\$312	N/A	\$383	N/A	\$416	N/A	22.68	8.63	15% (+/-)	Yes
Aged	N/A	\$1,447	N/A	\$1,558	N/A	\$751	N/A	7.67	-51.80	15% (+/-)	No
Disabled	N/A	\$1,403	N/A	\$1,658	N/A	\$1,834	N/A	18.17	10.64	15% (+/-)	Yes
Child	N/A	\$153	N/A	\$194	N/A	\$205	N/A	26.99	5.55	15% (+/-)	Yes
Adult	N/A	\$337	N/A	\$408	N/A	\$438	N/A	21.11	7.27	15% (+/-)	Yes
ILTC (TOS=02,04,05,07)	N/A	\$36	N/A	\$36	N/A	\$42	N/A	0.16	15.36	15% (+/-)	No
Aged	N/A	\$5,143	N/A	\$5,823	N/A	\$6,702	N/A	13.22	15.09	15% (+/-)	No
Disabled	N/A	\$380	N/A	\$387	N/A	\$429	N/A	1.97	10.82	15% (+/-)	Yes
Child	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Adult	N/A	\$1	N/A	\$1	N/A	\$1	N/A	54.96	-24.50	15% (+/-)	No
Drugs (TOS=16)	N/A	\$423	N/A	\$561	N/A	\$632	N/A	32.63	12.67	15% (+/-)	Yes
Aged	N/A	\$1,632	N/A	\$2,098	N/A	\$1,907	N/A	28.53	-9.12	15% (+/-)	Yes
Disabled	N/A	\$2,623	N/A	\$2,957	N/A	\$3,089	N/A	12.71	4.48	15% (+/-)	Yes
Child	N/A	\$212	N/A	\$231	N/A	\$252	N/A	9.25	9.00	15% (+/-)	Yes
Adult	N/A	\$332	N/A	\$579	N/A	\$686	N/A	74.64	18.38	15% (+/-)	No
All Other Services	N/A	\$2,143	N/A	\$2,430	N/A	\$2,681	N/A	13.39	10.35	15% (+/-)	Yes
Aged	N/A	\$4,329	N/A	\$3,752	N/A	\$3,652	N/A	-13.30	-2.67	15% (+/-)	Yes
Disabled	N/A	\$11,107	N/A	\$12,354	N/A	\$13,436	N/A	11.22	8.76	15% (+/-)	Yes
Child	N/A	\$1,785	N/A	\$1,981	N/A	\$2,074	N/A	10.95	4.74	15% (+/-)	Yes
Adult	N/A	\$1,115	N/A	\$1,359	N/A	\$1,573	N/A	21.88	15.73	15% (+/-)	No
<b>% OF NON-DUAL FFS ENROLLEES WITH CLAIMS BY SELECTED MAX TOS</b>											
% Non-Dual FFS Enrollees with IP Claims (TOS=01)	N/A	5.32	N/A	5.65	N/A	5.78	N/A	6.23	2.27	15% (+/-)	Yes
Aged	N/A	14.50	N/A	12.79	N/A	12.74	N/A	-11.80	-0.39	15% (+/-)	Yes
Disabled	N/A	12.84	N/A	12.91	N/A	12.91	N/A	0.57	-0.05	15% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: VT

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		2.78	N/A	2.91	N/A	3.00	N/A	4.51	3.28	15% (+/-)	Yes
Adult		7.42	N/A	7.94	N/A	8.10	N/A	6.90	2.06	15% (+/-)	Yes
% Non-Dual FFS Enrollees with ILTC Claims (TOS=02,04,05,07)		0.15	N/A	0.16	N/A	0.17	N/A	8.58	5.23	15% (+/-)	Yes
Aged		20.82	N/A	21.92	N/A	21.23	N/A	5.28	-3.15	15% (+/-)	Yes
Disabled		1.44	N/A	1.65	N/A	1.70	N/A	13.97	3.46	15% (+/-)	Yes
Child		0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Adult		0.03	N/A	0.04	N/A	0.04	N/A	40.11	3.00	15% (+/-)	Yes
% with ratio of ILTC days/enroll days > 1		7.25	N/A	6.57	N/A	5.91	N/A	-9.39	-10.10	15% (+/-)	Yes
% Non-Dual FFS Enrollees with Drug Claims (TOS=16)		66.42	N/A	66.32	N/A	67.59	N/A	-0.16	1.92	15% (+/-)	Yes
Aged		74.35	N/A	70.78	N/A	64.15	N/A	-4.81	-9.36	15% (+/-)	Yes
Disabled		86.30	N/A	86.84	N/A	86.45	N/A	0.63	-0.45	15% (+/-)	Yes
Child		64.94	N/A	63.65	N/A	64.12	N/A	-1.99	0.74	15% (+/-)	Yes
Adult		65.04	N/A	66.32	N/A	68.77	N/A	1.96	3.70	15% (+/-)	Yes
% Non-Dual FFS Enrollees with All Other Claims		83.38	N/A	83.54	N/A	84.52	N/A	0.19	1.17	15% (+/-)	Yes
Aged		75.09	N/A	68.49	N/A	64.15	N/A	-8.79	-6.34	15% (+/-)	Yes
Disabled		92.54	N/A	93.18	N/A	92.66	N/A	0.70	-0.56	15% (+/-)	Yes
Child		88.08	N/A	88.52	N/A	88.50	N/A	0.51	-0.02	15% (+/-)	Yes
Adult		75.61	N/A	75.64	N/A	78.01	N/A	0.04	3.14	15% (+/-)	Yes
Avg # IP Days per Non-Dual FFS User		6	N/A	7	N/A	7	N/A	4.21	-1.13	15% (+/-)	Yes
Aged		12	N/A	12	N/A	8	N/A	-4.73	-28.80	15% (+/-)	No
Disabled		12	N/A	12	N/A	13	N/A	1.61	8.91	15% (+/-)	Yes
Child		6	N/A	6	N/A	6	N/A	9.10	-6.05	15% (+/-)	Yes
Adult		5	N/A	5	N/A	5	N/A	5.50	-5.18	15% (+/-)	Yes
Avg # ILTC Days per Non-Dual FFS User		173	N/A	155	N/A	157	N/A	-10.30	0.74	15% (+/-)	Yes
Aged		237	N/A	240	N/A	240	N/A	1.30	-0.15	15% (+/-)	Yes
Disabled		161	N/A	145	N/A	150	N/A	-9.65	3.30	15% (+/-)	Yes
Child		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		17	N/A	19	N/A	12	N/A	8.51	-35.30	15% (+/-)	No
% Non-Dual FFS Enrollees with Delivery		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	15% (+/-)	No
FFS EXPENDITURES AND USERS BY MAX PGM TYPE											
FP: Total Medicaid Paid (Program Type 2)		\$2,306,367	N/A	\$2,475,187	N/A	\$2,310,286	N/A	7.32	-6.66	15% (+/-)	Yes
FP: Number of Users		11,913	N/A	11,934	N/A	11,435	N/A	0.18	-4.18	15% (+/-)	Yes
FP: Average Medicaid Pd per User		\$194	N/A	\$207	N/A	\$202	N/A	7.13	-2.59	15% (+/-)	Yes
RHC: Total Medicaid Paid (Program Type 3)		\$3,670,827	N/A	\$4,169,374	N/A	\$4,276,635	N/A	13.58	2.57	15% (+/-)	Yes
RHC: Number of Users		13,055	N/A	13,917	N/A	14,102	N/A	6.60	1.33	15% (+/-)	Yes
RHC: Avg Medicaid Pd per User		\$281	N/A	\$300	N/A	\$303	N/A	6.55	1.23	15% (+/-)	Yes
FQHC: Total Medicaid Paid (Program Type 4)		\$3,565,941	N/A	\$4,241,713	N/A	\$4,316,034	N/A	18.95	1.75	15% (+/-)	Yes
FQHC: Number of Users		8,219	N/A	8,562	N/A	8,218	N/A	4.17	-4.02	15% (+/-)	Yes
FQHC: Avg Medicaid Pd per User		\$434	N/A	\$495	N/A	\$525	N/A	14.19	6.01	15% (+/-)	Yes
IHS: Total Medicaid Pd (Program Type 5)		\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
IHS: Number of Users		0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
IHS: Avg Medicaid Pd per User		Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Section 1915(c) Waiver: Total Medicaid Paid (Program Types 6 and 7)		\$35,624,709	N/A	\$39,163,551	N/A	\$40,913,833	N/A	9.93	4.47	15% (+/-)	Yes
Section 1915(c) Waiver: Number of Users		1,295	N/A	1,436	N/A	1,359	N/A	10.89	-5.36	15% (+/-)	Yes
Section 1915(c) Waiver: Avg Medicaid Pd per User		\$27,509	N/A	\$27,273	N/A	\$30,106	N/A	-0.86	10.39	15% (+/-)	Yes
FFS COMMUNITY-BASED LONG-TERM CARE EXPENDITURES AND USERS											
Total FFS CLTC Expenditures (all codes - overestimate)		N/A	N/A	N/A	N/A	\$67,153,864	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	7,784	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	\$8,627	N/A	N/A	N/A	15% (+/-)	No
Aged		N/A	N/A	N/A	N/A	\$6,047	N/A	N/A	N/A	15% (+/-)	No
Disabled		N/A	N/A	N/A	N/A	\$10,670	N/A	N/A	N/A	15% (+/-)	No
Child		N/A	N/A	N/A	N/A	\$5,589	N/A	N/A	N/A	15% (+/-)	No
Adult		N/A	N/A	N/A	N/A	\$1,385	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	6.03	N/A	N/A	N/A	15% (+/-)	No
Aged		N/A	N/A	N/A	N/A	28.77	N/A	N/A	N/A	15% (+/-)	No
Disabled		N/A	N/A	N/A	N/A	57.19	N/A	N/A	N/A	15% (+/-)	No
Child		N/A	N/A	N/A	N/A	2.61	N/A	N/A	N/A	15% (+/-)	No

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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
Adult	N/A	N/A	N/A	N/A	N/A	1.38	N/A	N/A	N/A	15% (+/-)	No
Total FFS CLTC Expenditures (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	\$60,369,174	N/A	N/A	N/A	15% (+/-)	No
Number of Non-Dual CLTC Users (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	4,720	N/A	N/A	N/A	15% (+/-)	No
Average FFS CLTC Expenditures per Non-Dual User (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	\$12,790	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$11,074	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$22,250	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$5,589	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$1,385	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	3.66	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	12.74	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	24.13	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	2.61	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	1.38	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	\$40,913,833	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	1,359	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	\$30,106	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$16,454	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$35,681	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$17,638	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$2,304	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	1.05	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	7.08	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	10.88	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	0.41	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	0.13	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	18,981	N/A	19,481	N/A	19,981	N/A	2.63	2.57	15% (+/-)	Yes
Number of EDB Dual FFS Recipients	N/A	18,211	N/A	18,699	N/A	19,186	N/A	2.68	2.60	15% (+/-)	Yes
Total EDB Dual FFS PYE	N/A	16,850	N/A	17,226	N/A	17,677	N/A	2.23	2.62	15% (+/-)	Yes
% EDB Only Dual (Code 50)	N/A	7.51	N/A	4.07	N/A	2.21	N/A	-45.80	-45.80	15% (+/-)	No
% QMB Only (Code 51)	N/A	0.30	N/A	0.24	N/A	0.14	N/A	-20.00	-40.70	15% (+/-)	No
% QMB Plus (Code 52)	N/A	50.90	N/A	54.29	N/A	56.03	N/A	6.67	3.19	15% (+/-)	Yes
% SLMB Only (Code 53)	N/A	0.38	N/A	0.44	N/A	0.64	N/A	15.03	45.67	15% (+/-)	No
% SLMB Plus (Code 54)	N/A	5.04	N/A	4.63	N/A	4.51	N/A	-8.27	-2.50	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	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	15% (+/-)	N/A
% QI 2 (Code 57)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	15% (+/-)	N/A
% Other Type Dual (Code 58)	N/A	32.53	N/A	32.97	N/A	33.36	N/A	1.35	1.19	15% (+/-)	Yes
% Dual Type Unknown (Code 59)	N/A	3.35	N/A	3.37	N/A	3.12	N/A	0.81	-7.40	15% (+/-)	Yes
MAX Aged EDB Dual FFS Total	N/A	8,809	N/A	8,846	N/A	8,875	N/A	0.42	0.33	10% (+/-)	Yes
11: Aged, Cash	N/A	1,632	N/A	1,509	N/A	1,402	N/A	-7.54	-7.09	10% (+/-)	Yes
21: Aged, MN	N/A	3,182	N/A	3,293	N/A	3,366	N/A	3.49	2.22	10% (+/-)	Yes
31: Aged, Poverty	N/A	1	N/A	0	N/A	0	N/A	-100.00	Div by 0	10% (+/-)	N/A
41: Other Aged	N/A	3,606	N/A	3,641	N/A	3,680	N/A	0.97	1.07	10% (+/-)	Yes
51: 1115 Aged	N/A	388	N/A	403	N/A	427	N/A	3.87	5.96	10% (+/-)	Yes
MAX Disabled EDB Dual FFS Total	N/A	9,596	N/A	9,998	N/A	10,467	N/A	4.19	4.69	10% (+/-)	Yes
12: Disabled, Cash	N/A	5,402	N/A	5,501	N/A	5,606	N/A	1.83	1.91	10% (+/-)	Yes
22: Disabled, MN	N/A	2,707	N/A	2,844	N/A	3,110	N/A	5.06	9.35	10% (+/-)	Yes
32: Disabled, Poverty	N/A	0	N/A	2	N/A	1	N/A	Div by 0	-50.00	10% (+/-)	No
42: Other Disabled	N/A	1,146	N/A	1,225	N/A	1,313	N/A	6.89	7.18	10% (+/-)	Yes
52: 1115 Disabled	N/A	341	N/A	426	N/A	437	N/A	24.93	2.58	10% (+/-)	Yes
Total FFS Medicaid Amt Paid	N/A	\$261,137,363	N/A	\$292,561,607	N/A	\$326,321,955	N/A	12.03	11.54	15% (+/-)	Yes
Average FFS Medicaid Amt Paid per FFS Dual	N/A	\$13,758	N/A	\$15,018	N/A	\$16,332	N/A	9.16	8.75	15% (+/-)	Yes



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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
Average FFS Medicaid Amt Paid per FFS Dual Recipient (User of any service)	N/A	\$14,340	N/A	\$15,646	N/A	\$17,008	N/A	9.11	8.71	15% (+/-)	Yes
<b>AVG FFS MEDICAID AMT PD/FFS DUAL BY MAX ELIGIBILITY GROUP</b>											
All Aged	N/A	\$15,417	N/A	\$17,012	N/A	\$18,851	N/A	10.35	10.81	15% (+/-)	Yes
11: Aged, Cash	N/A	\$8,269	N/A	\$9,243	N/A	\$9,720	N/A	11.79	5.15	15% (+/-)	Yes
21: Aged, MN	N/A	\$4,510	N/A	\$5,123	N/A	\$5,540	N/A	13.58	8.14	15% (+/-)	Yes
31: Aged, Poverty	N/A	\$2,637	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
41: Other Aged	N/A	\$29,583	N/A	\$32,422	N/A	\$36,204	N/A	9.60	11.66	15% (+/-)	Yes
51: 1115 Aged	N/A	\$3,296	N/A	\$4,023	N/A	\$4,216	N/A	22.04	4.80	15% (+/-)	Yes
All Disabled	N/A	\$12,817	N/A	\$13,901	N/A	\$14,729	N/A	8.46	5.95	15% (+/-)	Yes
12: Disabled, Cash	N/A	\$12,982	N/A	\$13,979	N/A	\$14,896	N/A	7.68	6.56	15% (+/-)	Yes
22: Disabled, MN	N/A	\$7,129	N/A	\$7,939	N/A	\$8,498	N/A	11.36	7.03	15% (+/-)	Yes
32: Disabled, Poverty	N/A	Div by 0	N/A	\$11,846	N/A	\$792	N/A	Div by 0	-93.30	15% (+/-)	No
42: Other Disabled	N/A	\$27,774	N/A	\$30,161	N/A	\$31,350	N/A	8.60	3.94	15% (+/-)	Yes
52: 1115 Disabled	N/A	\$5,090	N/A	\$5,959	N/A	\$7,020	N/A	17.07	17.80	15% (+/-)	No
<b>FFS EXPENDITURES AND USERS BY MAX TOS</b>											
IP: Total Medicaid Paid (TOS 01)	N/A	\$5,617,284	N/A	\$5,003,029	N/A	\$6,499,882	N/A	-10.90	29.92	15% (+/-)	No
IP: Number of Users	N/A	3,221	N/A	3,079	N/A	3,201	N/A	-4.41	3.96	15% (+/-)	Yes
IP: Average Medicaid Pd per User	N/A	\$1,744	N/A	\$1,625	N/A	\$2,031	N/A	-6.83	24.97	15% (+/-)	No
IP: Average Medicaid Covered Days Per User	N/A	7	N/A	7	N/A	7	N/A	-3.86	1.45	15% (+/-)	Yes
MH Aged: Total Medicaid Paid (TOS 02)	N/A	\$181,937	N/A	\$40,010	N/A	\$89,791	N/A	-78.00	124.40	15% (+/-)	No
MH Aged: Number of Users	N/A	34	N/A	71	N/A	86	N/A	108.80	21.13	15% (+/-)	No
MH Aged: Avg Medicaid Pd per User	N/A	\$5,351	N/A	\$564	N/A	\$1,044	N/A	-89.50	85.28	15% (+/-)	No
IP Psych < 21: Total Medicaid Paid (TOS 04)	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
IP Psych < 21: Number of Users	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
IP Psych<21 :Avg Medicaid Pd per User	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
ICF/MR: Total Medicaid Pd (TOS 05)	N/A	\$741,729	N/A	\$624,240	N/A	\$766,447	N/A	-15.80	22.78	15% (+/-)	No
ICF/MR: Number of Users	N/A	10	N/A	4	N/A	6	N/A	-60.00	50.00	15% (+/-)	No
ICF/MR: Avg Medicaid Pd per User	N/A	\$74,173	N/A	\$156,060	N/A	\$127,741	N/A	110.40	-18.10	15% (+/-)	No
NF: Total Medicaid Paid (TOS 07)	N/A	\$83,095,262	N/A	\$88,355,168	N/A	\$98,649,327	N/A	6.33	11.65	15% (+/-)	Yes
NF Number of Users	N/A	3,376	N/A	3,394	N/A	3,313	N/A	0.53	-2.39	15% (+/-)	Yes
NF:Avg Medicaid Pd per User	N/A	\$24,614	N/A	\$26,033	N/A	\$29,776	N/A	5.77	14.38	15% (+/-)	Yes
Physician: Total Medicaid Paid (TOS 08)	N/A	\$5,240,752	N/A	\$5,281,048	N/A	\$5,539,531	N/A	0.77	4.90	15% (+/-)	Yes
Physician: Number of Users	N/A	14,971	N/A	15,605	N/A	15,595	N/A	4.24	-0.06	15% (+/-)	Yes
Physician: Avg Medicaid Pd per User	N/A	\$350	N/A	\$338	N/A	\$355	N/A	-3.33	4.96	15% (+/-)	Yes
Dental: Total Medicaid Paid (TOS 09)	N/A	\$924,001	N/A	\$1,053,391	N/A	\$1,098,266	N/A	14.00	4.26	15% (+/-)	Yes
Dental: Number of Users	N/A	4,322	N/A	4,636	N/A	4,791	N/A	7.27	3.34	15% (+/-)	Yes
Dental: Avg Medicaid Pd per User	N/A	\$214	N/A	\$227	N/A	\$229	N/A	6.28	0.89	15% (+/-)	Yes
Other Practitioner: Total Medicaid Pd (TOS 10)	N/A	\$822,363	N/A	\$576,109	N/A	\$697,772	N/A	-29.90	21.12	15% (+/-)	No
Other Practitioner: Number of Users	N/A	3,502	N/A	3,751	N/A	3,759	N/A	7.11	0.21	15% (+/-)	Yes
Other Practitioner: Avg Medicaid Pd per User	N/A	\$235	N/A	\$154	N/A	\$186	N/A	-34.60	20.86	15% (+/-)	No
OPD: Total Medicaid Paid (TOS 11)	N/A	\$5,698,832	N/A	\$5,388,606	N/A	\$6,642,802	N/A	-5.44	23.27	15% (+/-)	No
OPD Number of Users	N/A	9,929	N/A	9,113	N/A	9,981	N/A	-8.22	9.53	15% (+/-)	Yes
OPD: Avg Medicaid Pd per User	N/A	\$574	N/A	\$591	N/A	\$666	N/A	3.02	12.55	15% (+/-)	Yes
Clinic: Total Medicaid Paid (TOS 12)	N/A	\$651,929	N/A	\$982,242	N/A	\$964,094	N/A	50.67	-1.85	15% (+/-)	Yes
Clinic: Number of Users	N/A	3,094	N/A	3,309	N/A	3,901	N/A	6.95	17.89	15% (+/-)	No
Clinic: Avg Medicaid Pd per User	N/A	\$211	N/A	\$297	N/A	\$247	N/A	40.88	-16.70	15% (+/-)	No
HH: Total Medicaid Paid (TOS 13)	N/A	\$3,402,126	N/A	\$3,066,615	N/A	\$2,905,814	N/A	-9.86	-5.24	15% (+/-)	Yes
HH: Number of Users	N/A	1,467	N/A	1,352	N/A	1,382	N/A	-7.84	2.22	15% (+/-)	Yes
HH: Avg Medicaid Pd per User	N/A	\$2,319	N/A	\$2,268	N/A	\$2,103	N/A	-2.19	-7.30	15% (+/-)	Yes
Lab/Xray: Total Medicaid Paid (TOS 15)	N/A	\$1,833,102	N/A	\$3,420,976	N/A	\$3,618,015	N/A	86.62	5.76	15% (+/-)	Yes
Lab/Xray: Number of Users	N/A	9,057	N/A	11,713	N/A	11,796	N/A	29.33	0.71	15% (+/-)	Yes
Lab/Xray:Avg Medicaid Pd per User	N/A	\$202	N/A	\$292	N/A	\$307	N/A	44.30	5.02	15% (+/-)	Yes
Drugs: Total Medicaid Paid (TOS 16)	N/A	\$56,701,448	N/A	\$67,943,057	N/A	\$75,788,026	N/A	19.83	11.55	15% (+/-)	Yes
Drugs: Number of Users	N/A	17,354	N/A	17,853	N/A	18,278	N/A	2.88	2.38	15% (+/-)	Yes
Drugs: Avg Medicaid Pd per User	N/A	\$3,267	N/A	\$3,806	N/A	\$4,146	N/A	16.48	8.95	15% (+/-)	Yes
Other Services: Total Medicaid Paid (TOS 19)	N/A	\$85,290,961	N/A	\$39,882,867	N/A	\$45,303,646	N/A	-53.20	13.59	15% (+/-)	Yes
Other Services: Number of Users	N/A	4,544	N/A	3,432	N/A	5,102	N/A	-24.50	48.66	15% (+/-)	No



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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
Other Services: Avg Medicaid Pd per User	N/A	\$18,770	N/A	\$11,621	N/A	\$8,880	N/A	-38.10	-23.60	15% (+/-)	No
Transportation: Total Medicaid Paid (TOS 26)	N/A	\$3,281,817	N/A	\$3,286,445	N/A	\$4,881,567	N/A	0.14	48.54	15% (+/-)	No
Transportation: Number of Users	N/A	5,897	N/A	5,854	N/A	6,405	N/A	-0.73	9.41	15% (+/-)	Yes
Transportation: Avg Medicaid Pd per User	N/A	\$557	N/A	\$561	N/A	\$762	N/A	0.88	35.76	15% (+/-)	No
PCS: Total Medicaid Paid (TOS 30)	N/A	\$69,979	N/A	\$224,967	N/A	\$362,110	N/A	221.50	60.96	15% (+/-)	No
PCS: Number of Users	N/A	65	N/A	103	N/A	111	N/A	58.46	7.77	15% (+/-)	Yes
PCS: Avg Medicaid Pd per User	N/A	\$1,077	N/A	\$2,184	N/A	\$3,262	N/A	102.90	49.36	15% (+/-)	No
Target Case Management: Total Medicaid Pd (TOS 31)	N/A	\$0	N/A	\$993,386	N/A	\$838,890	N/A	Div by 0	-15.60	15% (+/-)	No
Target Case Management: Number of Users	N/A	0	N/A	465	N/A	544	N/A	Div by 0	16.99	15% (+/-)	No
Target Case Management: Avg Medicaid Pd per User	N/A	Div by 0	N/A	\$2,136	N/A	\$1,542	N/A	Div by 0	-27.80	15% (+/-)	No
Rehab Services: Total Medicaid Pd (TOS 33)	N/A	\$1,841	N/A	\$0	N/A	\$0	N/A	-100.00	Div by 0	15% (+/-)	N/A
Rehab Services: Number of Users	N/A	2	N/A	0	N/A	0	N/A	-100.00	Div by 0	15% (+/-)	N/A
Rehab Services: Avg Medicaid Pd per User	N/A	\$921	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
PT/OT/Speech/Hear: Total Medicaid Paid (TOS 34)	N/A	\$138,209	N/A	\$133,571	N/A	\$185,368	N/A	-3.36	38.78	15% (+/-)	No
PT/OT/Speech/Hear: Number of Users	N/A	421	N/A	603	N/A	738	N/A	43.23	22.39	15% (+/-)	No
PT/OT/Speech/Hear: Avg Medicaid Pd per User	N/A	\$328	N/A	\$222	N/A	\$251	N/A	-32.50	13.39	15% (+/-)	Yes
Hospice: Total Medicaid Paid (TOS 35)	N/A	\$279,344	N/A	\$262,359	N/A	\$291,824	N/A	-6.08	11.23	15% (+/-)	Yes
Hospice: Number of Users	N/A	36	N/A	42	N/A	38	N/A	16.67	-9.52	15% (+/-)	Yes
Hospice: Avg Medicaid Pd per User	N/A	\$7,760	N/A	\$6,247	N/A	\$7,680	N/A	-19.50	22.94	15% (+/-)	No
DME: Total Medicaid Paid (TOS 51)	N/A	\$1,951,713	N/A	\$2,718,448	N/A	\$3,097,766	N/A	39.29	13.95	15% (+/-)	Yes
DME: Number of Users	N/A	3,906	N/A	4,571	N/A	4,625	N/A	17.03	1.18	15% (+/-)	Yes
DME: Avg Medicaid Pd per User	N/A	\$500	N/A	\$595	N/A	\$670	N/A	19.02	12.62	15% (+/-)	Yes
Residential Care: Total Medicaid Paid (TOS 52)	N/A	\$108,651	N/A	\$1,073,519	N/A	\$1,308,130	N/A	888.00	21.85	15% (+/-)	No
Residential Care: Number of Users	N/A	7	N/A	31	N/A	40	N/A	342.90	29.03	15% (+/-)	No
Residential Care: Avg Medicaid Pd per User	N/A	\$15,522	N/A	\$34,630	N/A	\$32,703	N/A	123.10	-5.56	15% (+/-)	Yes
Psych. Services: Total Medicaid Paid (TOS 53)	N/A	\$4,085,308	N/A	\$60,613,715	N/A	\$66,587,201	N/A	1,384.00	9.86	15% (+/-)	Yes
Psych. Services: Number of Users	N/A	4,177	N/A	5,880	N/A	6,208	N/A	40.77	5.58	15% (+/-)	Yes
Psych. Services: Avg Medicaid Pd per User	N/A	\$978	N/A	\$10,308	N/A	\$10,726	N/A	954.00	4.05	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/FFS DUAL BY SELECTED TYPE OF SERVICE</b>											
Inpatient Hospital (TOS=01)	N/A	\$296	N/A	\$257	N/A	\$325	N/A	-13.20	26.67	15% (+/-)	No
Aged	N/A	\$202	N/A	\$205	N/A	\$227	N/A	1.62	10.66	15% (+/-)	Yes
Disabled	N/A	\$362	N/A	\$285	N/A	\$355	N/A	-21.40	24.80	15% (+/-)	No
ILTC (TOS=02,04,05,07)	N/A	\$4,426	N/A	\$4,570	N/A	\$4,980	N/A	3.23	8.98	15% (+/-)	Yes
Aged	N/A	\$8,964	N/A	\$9,428	N/A	\$10,458	N/A	5.18	10.92	15% (+/-)	Yes
Disabled	N/A	\$527	N/A	\$562	N/A	\$637	N/A	6.68	13.42	15% (+/-)	Yes
Drugs (TOS=16)	N/A	\$2,987	N/A	\$3,488	N/A	\$3,793	N/A	16.75	8.76	15% (+/-)	Yes
Aged	N/A	\$2,547	N/A	\$2,971	N/A	\$3,128	N/A	16.67	5.26	15% (+/-)	Yes
Disabled	N/A	\$3,482	N/A	\$4,026	N/A	\$4,396	N/A	15.63	9.21	15% (+/-)	Yes
All Other Services	N/A	\$6,048	N/A	\$6,704	N/A	\$7,233	N/A	10.84	7.90	15% (+/-)	Yes
Aged	N/A	\$3,705	N/A	\$4,408	N/A	\$5,039	N/A	18.99	14.32	15% (+/-)	Yes
Disabled	N/A	\$8,446	N/A	\$9,029	N/A	\$9,340	N/A	6.90	3.44	15% (+/-)	Yes
<b>% OF FFS DUALS WITH CLAIMS BY SELECTED TYPE OF SERVICE</b>											
% FFS Duals with IP Claims (TOS=01)	N/A	16.97	N/A	15.81	N/A	16.02	N/A	-6.86	1.36	15% (+/-)	Yes
Aged	N/A	17.77	N/A	17.12	N/A	17.39	N/A	-3.66	1.58	15% (+/-)	Yes
Disabled	N/A	16.55	N/A	14.95	N/A	14.88	N/A	-9.64	-0.46	15% (+/-)	Yes
% FFS Duals with ILTC Claims (TOS=02,04,05,07)	N/A	18.01	N/A	17.79	N/A	17.02	N/A	-1.23	-4.33	15% (+/-)	Yes
Aged	N/A	35.28	N/A	35.16	N/A	34.25	N/A	-0.35	-2.57	15% (+/-)	Yes
Disabled	N/A	3.23	N/A	3.55	N/A	3.38	N/A	9.91	-4.75	15% (+/-)	Yes
% FFS Duals with Drug Claims (TOS=16)	N/A	91.43	N/A	91.64	N/A	91.48	N/A	0.24	-0.18	15% (+/-)	Yes
Aged	N/A	92.88	N/A	92.66	N/A	91.74	N/A	-0.24	-1.00	15% (+/-)	Yes
Disabled	N/A	90.81	N/A	91.35	N/A	91.57	N/A	0.59	0.25	15% (+/-)	Yes
% FFS Duals with All Other Claims	N/A	89.44	N/A	90.70	N/A	90.85	N/A	1.41	0.16	15% (+/-)	Yes
Aged	N/A	85.96	N/A	87.97	N/A	87.75	N/A	2.34	-0.25	15% (+/-)	Yes
Disabled	N/A	93.01	N/A	93.62	N/A	93.70	N/A	0.66	0.09	15% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: VT

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
Avg # IP Days per FFS Dual User (TOS 01)	N/A	7	N/A	7	N/A	7	N/A	-3.86	1.45	15% (+/-)	Yes
Aged	N/A	7	N/A	7	N/A	7	N/A	1.49	0.59	15% (+/-)	Yes
Disabled	N/A	8	N/A	7	N/A	8	N/A	-10.10	5.73	15% (+/-)	Yes
Avg # ILTC Days per FFS Dual User (TOS 02, 04, 05, 07)	N/A	224	N/A	223	N/A	220	N/A	-0.72	-1.24	15% (+/-)	Yes
Aged	N/A	234	N/A	235	N/A	231	N/A	0.32	-1.30	15% (+/-)	Yes
Disabled	N/A	128	N/A	118	N/A	123	N/A	-8.04	4.32	15% (+/-)	Yes
<b>FFS EXPENDITURES AND USERS BY MAX PROGRAM TYPE</b>											
FP: Total Medicaid Paid (Program Type 2)	N/A	\$86,879	N/A	\$83,334	N/A	\$91,864	N/A	-4.08	10.24	15% (+/-)	Yes
FP: Number of Users	N/A	426	N/A	425	N/A	426	N/A	-0.24	0.24	15% (+/-)	Yes
FP: Average Medicaid Pd per User	N/A	\$204	N/A	\$196	N/A	\$216	N/A	-3.85	9.98	15% (+/-)	Yes
RHC: Total Medicaid Paid (Program Type 3)	N/A	\$315,576	N/A	\$382,004	N/A	\$466,308	N/A	21.05	22.07	15% (+/-)	No
RHC: Number of Users	N/A	1,749	N/A	2,095	N/A	2,311	N/A	19.78	10.31	15% (+/-)	Yes
RHC: Avg Medicaid Pd per User	N/A	\$180	N/A	\$182	N/A	\$202	N/A	1.06	10.66	15% (+/-)	Yes
FQHC: Total Medicaid Paid (Program Type 4)	N/A	\$249,339	N/A	\$330,769	N/A	\$395,002	N/A	32.66	19.42	15% (+/-)	No
FQHC: Number of Users	N/A	1,139	N/A	1,222	N/A	1,635	N/A	7.29	33.80	15% (+/-)	No
FQHC: Avg Medicaid Pd per User	N/A	\$219	N/A	\$271	N/A	\$242	N/A	23.65	-10.70	15% (+/-)	Yes
IHS: Total Medicaid Pd (Program Type 5)	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
IHS: Number of Users	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
IHS: Avg Medicaid Pd per User	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Section 1915(c) Waiver: Total Medicaid Paid (Program Types 6 and 7)	N/A	\$71,618,682	N/A	\$78,072,493	N/A	\$84,781,921	N/A	9.01	8.59	15% (+/-)	Yes
Section 1915(c) Waiver: Number of Users	N/A	2,646	N/A	2,794	N/A	3,187	N/A	5.59	14.07	15% (+/-)	Yes
Section 1915(c) Waiver: Avg Medicaid Pd per User	N/A	\$27,067	N/A	\$27,943	N/A	\$26,602	N/A	3.24	-4.80	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	\$96,883,477	N/A	N/A	N/A	15% (+/-)	No
Number of Dual CLTC Users (all codes - overestimate)	N/A	N/A	N/A	N/A	N/A	9,884	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	\$9,802	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$5,192	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$13,449	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	49.47	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	48.81	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	52.78	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	\$88,049,845	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	3,717	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	\$23,688	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$10,955	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$35,074	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	18.60	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	19.36	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	18.83	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	\$84,781,921	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	3,187	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	\$26,602	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$11,736	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$40,331	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	15.95	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	17.19	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	15.83	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	148,321	N/A	150,949	N/A	149,019	N/A	1.77	-1.28	15% (+/-)	Yes
# FFS Recipients	N/A	129,400	N/A	131,744	N/A	131,438	N/A	1.81	-0.23	15% (+/-)	Yes
% FFS Enrollees who are Recipients	65-90%	87.24	Yes	87.28	Yes	88.20	Yes	0.04	1.06	15% (+/-)	Yes
% Aged who are Recipients	90-100%	96.23	Yes	96.07	Yes	95.98	Yes	-0.17	-0.09	15% (+/-)	Yes
% Disabled who are Recipients	85-100%	95.02	Yes	95.25	Yes	95.04	Yes	0.24	-0.22	15% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: VT

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%	89.79	Yes	90.15	Yes	90.25	Yes	0.40	0.12	15% (+/-)	Yes
% Adults who are Recipients	80-100%	79.58	No	79.41	No	81.69	Yes	-0.21	2.87	15% (+/-)	Yes
Total FFS PYE	N/A	117,302	N/A	117,887	N/A	117,008	N/A	0.50	-0.75	15% (+/-)	Yes
MAX Aged Total	N/A	9,078	N/A	9,065	N/A	9,087	N/A	-0.14	0.24	10% (+/-)	Yes
11: Aged, Cash	N/A	1,670	N/A	1,544	N/A	1,433	N/A	-7.54	-7.19	10% (+/-)	Yes
21: Aged, MN	N/A	3,294	N/A	3,410	N/A	3,482	N/A	3.52	2.11	10% (+/-)	Yes
31: Aged, Poverty	N/A	47	N/A	0	N/A	0	N/A	-100.00	Div by 0	10% (+/-)	N/A
41: Other Aged	N/A	3,674	N/A	3,705	N/A	3,739	N/A	0.84	0.92	10% (+/-)	Yes
51: 1115 Aged	N/A	393	N/A	406	N/A	433	N/A	3.31	6.65	10% (+/-)	Yes
MAX Disabled Total	N/A	18,187	N/A	18,873	N/A	19,633	N/A	3.77	4.03	10% (+/-)	Yes
12: Disabled, Cash	N/A	12,700	N/A	13,031	N/A	13,325	N/A	2.61	2.26	10% (+/-)	Yes
22: Disabled, MN	N/A	3,302	N/A	3,395	N/A	3,688	N/A	2.82	8.63	10% (+/-)	Yes
32: Disabled, Poverty	N/A	0	N/A	77	N/A	101	N/A	Div by 0	31.17	10% (+/-)	No
42: Other Disabled	N/A	1,802	N/A	1,914	N/A	2,052	N/A	6.22	7.21	10% (+/-)	Yes
52: 1115 Disabled	N/A	383	N/A	456	N/A	467	N/A	19.06	2.41	10% (+/-)	Yes
MAX Child Total	N/A	68,994	N/A	68,669	N/A	67,524	N/A	-0.47	-1.67	10% (+/-)	Yes
14: AFDC Child, Cash	N/A	9,273	N/A	8,819	N/A	8,453	N/A	-4.90	-4.15	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	2,312	N/A	2,263	N/A	2,340	N/A	-2.12	3.40	10% (+/-)	Yes
34: Child Poverty	N/A	47,383	N/A	47,313	N/A	46,773	N/A	-0.15	-1.14	10% (+/-)	Yes
44: Other Child	N/A	4,501	N/A	4,797	N/A	4,836	N/A	6.58	0.81	10% (+/-)	Yes
48: Foster Care Child	N/A	2,610	N/A	2,767	N/A	2,848	N/A	6.02	2.93	10% (+/-)	Yes
54: 1115 Child	N/A	2,915	N/A	2,710	N/A	2,274	N/A	-7.03	-16.10	10% (+/-)	No
MAX Adult Total	N/A	52,062	N/A	54,342	N/A	52,775	N/A	4.38	-2.88	10% (+/-)	Yes
15: AFDC Adult, Cash	N/A	4,455	N/A	4,255	N/A	4,044	N/A	-4.49	-4.96	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	5,317	N/A	5,346	N/A	5,649	N/A	0.55	5.67	10% (+/-)	Yes
35: Adult, Poverty	N/A	2,498	N/A	2,524	N/A	2,545	N/A	1.04	0.83	10% (+/-)	Yes
45: Other Adult	N/A	3,392	N/A	3,574	N/A	3,795	N/A	5.37	6.18	10% (+/-)	Yes
55: 1115 Adult	N/A	36,400	N/A	38,643	N/A	36,742	N/A	6.16	-4.92	10% (+/-)	Yes
Total FFS Medicaid Amt Paid	N/A	\$637,984,921	N/A	\$740,781,555	N/A	\$812,848,252	N/A	16.11	9.73	15% (+/-)	Yes
Average FFS Medicaid Amt Paid per FFS Enrollee	N/A	\$4,301	N/A	\$4,907	N/A	\$5,455	N/A	14.09	11.15	15% (+/-)	Yes
Average FFS Medicaid Amt Paid per FFS Recipient (User of any svc)	N/A	\$4,930	N/A	\$5,623	N/A	\$6,184	N/A	14.05	9.98	15% (+/-)	Yes
AVG FFS MEDICAID AMT PD/FFS ENROLLEE BY MAX ELIGIBILITY GROUP											
All Aged	N/A	\$15,332	N/A	\$16,921	N/A	\$18,715	N/A	10.36	10.60	15% (+/-)	Yes
11: Aged, Cash	N/A	\$8,441	N/A	\$9,299	N/A	\$9,860	N/A	10.17	6.03	15% (+/-)	Yes
21: Aged, MN	N/A	\$4,510	N/A	\$5,127	N/A	\$5,493	N/A	13.68	7.14	15% (+/-)	Yes
31: Aged, Poverty	N/A	\$6,442	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
41: Other Aged	N/A	\$29,569	N/A	\$32,367	N/A	\$36,106	N/A	9.46	11.55	15% (+/-)	Yes
51: 1115 Aged	N/A	\$3,274	N/A	\$4,005	N/A	\$4,167	N/A	22.34	4.04	15% (+/-)	Yes
All Disabled	N/A	\$14,091	N/A	\$15,526	N/A	\$16,624	N/A	10.19	7.08	15% (+/-)	Yes
12: Disabled, Cash	N/A	\$13,935	N/A	\$15,409	N/A	\$16,550	N/A	10.57	7.41	15% (+/-)	Yes
22: Disabled, MN	N/A	\$7,705	N/A	\$8,285	N/A	\$9,361	N/A	7.53	12.98	15% (+/-)	Yes
32: Disabled, Poverty	N/A	Div by 0	N/A	\$10,262	N/A	\$7,313	N/A	Div by 0	-28.70	15% (+/-)	No
42: Other Disabled	N/A	\$28,704	N/A	\$31,616	N/A	\$32,817	N/A	10.14	3.80	15% (+/-)	Yes
52: 1115 Disabled	N/A	\$5,537	N/A	\$6,134	N/A	\$6,980	N/A	10.79	13.80	15% (+/-)	Yes
All Child	N/A	\$2,151	N/A	\$2,407	N/A	\$2,533	N/A	11.88	5.25	15% (+/-)	Yes
14: AFDC Child, Cash	N/A	\$2,747	N/A	\$3,034	N/A	\$3,109	N/A	10.47	2.46	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	\$2,696	N/A	\$3,307	N/A	\$3,255	N/A	22.63	-1.55	15% (+/-)	Yes
34: Child, Poverty	N/A	\$1,416	N/A	\$1,550	N/A	\$1,639	N/A	9.47	5.75	15% (+/-)	Yes
44: Other Child	N/A	\$2,044	N/A	\$2,501	N/A	\$2,382	N/A	22.38	-4.76	15% (+/-)	Yes
48: Foster Care Child	N/A	\$14,396	N/A	\$15,444	N/A	\$16,199	N/A	7.28	4.89	15% (+/-)	Yes
54: 1115 Child	N/A	\$968	N/A	\$1,082	N/A	\$1,232	N/A	11.77	13.82	15% (+/-)	Yes
All Adult	N/A	\$1,808	N/A	\$2,376	N/A	\$2,755	N/A	31.41	15.93	15% (+/-)	No
15: AFDC Adult, Cash	N/A	\$3,514	N/A	\$4,333	N/A	\$4,811	N/A	23.30	11.02	15% (+/-)	Yes
17: AFDC-U Adult, Cash	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A

2003-2005 MAX PSF VALIDATION TABLE  
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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
25: AFDC Adult, MN	N/A	\$2,259	N/A	\$2,518	N/A	\$2,690	N/A	11.47	6.82	15% (+/-)	Yes
35: Adult, Poverty	N/A	\$2,468	N/A	\$3,010	N/A	\$2,974	N/A	22.00	-1.21	15% (+/-)	Yes
45: Other Adult	N/A	\$2,101	N/A	\$2,729	N/A	\$2,901	N/A	29.92	6.32	15% (+/-)	Yes
55: 1115 Adult	N/A	\$1,461	N/A	\$2,067	N/A	\$2,508	N/A	41.47	21.33	15% (+/-)	No
<b>FFS EXPENDITURES AND USERS BY MAX TOS</b>											
IP: Total Medicaid Paid (TOS 01)	N/A	\$45,950,025	N/A	\$55,297,339	N/A	\$60,122,655	N/A	20.34	8.73	15% (+/-)	Yes
IP: Number of Users	N/A	10,105	N/A	10,512	N/A	10,662	N/A	4.03	1.43	15% (+/-)	Yes
IP: Average Medicaid Pd per User	N/A	\$4,547	N/A	\$5,260	N/A	\$5,639	N/A	15.68	7.20	15% (+/-)	Yes
IP: Average Medicaid Covered Days Per User	N/A	7	N/A	7	N/A	7	N/A	1.21	-0.27	15% (+/-)	Yes
MH Aged: Total Medicaid Paid (TOS 02)	N/A	\$253,162	N/A	\$40,010	N/A	\$89,791	N/A	-84.20	124.40	15% (+/-)	No
MH Aged: Number of Users	N/A	36	N/A	71	N/A	86	N/A	97.22	21.13	15% (+/-)	No
MH Aged: Avg Medicaid Pd per User	N/A	\$7,032	N/A	\$564	N/A	\$1,044	N/A	-92.00	85.28	15% (+/-)	No
IP Psych < 21: Total Medicaid Paid (TOS 04)	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
IP Psych < 21: Number of Users	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
IP Psych<21 :Avg Medicaid Pd per User	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
ICF/MR: Total Medicaid Pd (TOS 05)	N/A	\$1,125,732	N/A	\$965,478	N/A	\$945,643	N/A	-14.20	-2.05	15% (+/-)	Yes
ICF/MR: Number of Users	N/A	14	N/A	6	N/A	7	N/A	-57.10	16.67	15% (+/-)	No
ICF/MR: Avg Medicaid Pd per User	N/A	\$80,409	N/A	\$160,913	N/A	\$135,092	N/A	100.10	-16.00	15% (+/-)	No
NF: Total Medicaid Paid (TOS 07)	N/A	\$87,314,995	N/A	\$92,773,400	N/A	\$103,858,944	N/A	6.25	11.95	15% (+/-)	Yes
NF Number of Users	N/A	3,563	N/A	3,605	N/A	3,532	N/A	1.18	-2.02	15% (+/-)	Yes
NF:Avg Medicaid Pd per User	N/A	\$24,506	N/A	\$25,735	N/A	\$29,405	N/A	5.01	14.26	15% (+/-)	Yes
Physician: Total Medicaid Paid (TOS 08)	N/A	\$38,062,945	N/A	\$42,373,401	N/A	\$44,380,528	N/A	11.32	4.74	15% (+/-)	Yes
Physician: Number of Users	N/A	105,241	N/A	107,891	N/A	107,183	N/A	2.52	-0.66	15% (+/-)	Yes
Physician: Avg Medicaid Pd per User	N/A	\$362	N/A	\$393	N/A	\$414	N/A	8.59	5.43	15% (+/-)	Yes
Dental: Total Medicaid Paid (TOS 09)	N/A	\$11,753,696	N/A	\$13,093,194	N/A	\$13,376,258	N/A	11.40	2.16	15% (+/-)	Yes
Dental: Number of Users	N/A	44,557	N/A	46,319	N/A	46,369	N/A	3.95	0.11	15% (+/-)	Yes
Dental: Avg Medicaid Pd per User	N/A	\$264	N/A	\$283	N/A	\$288	N/A	7.16	2.05	15% (+/-)	Yes
Other Practitioner: Total Medicaid Pd (TOS 10)	N/A	\$5,289,622	N/A	\$5,537,899	N/A	\$5,281,310	N/A	4.69	-4.63	15% (+/-)	Yes
Other Practitioner: Number of Users	N/A	12,070	N/A	13,911	N/A	14,352	N/A	15.25	3.17	15% (+/-)	Yes
Other Practitioner: Avg Medicaid Pd per User	N/A	\$438	N/A	\$398	N/A	\$368	N/A	-9.16	-7.56	15% (+/-)	Yes
OPD: Total Medicaid Paid (TOS 11)	N/A	\$36,475,058	N/A	\$43,199,884	N/A	\$48,591,411	N/A	18.44	12.48	15% (+/-)	Yes
OPD Number of Users	N/A	52,790	N/A	55,086	N/A	55,961	N/A	4.35	1.59	15% (+/-)	Yes
OPD: Avg Medicaid Pd per User	N/A	\$691	N/A	\$784	N/A	\$868	N/A	13.50	10.72	15% (+/-)	Yes
Clinic: Total Medicaid Paid (TOS 12)	N/A	\$8,309,247	N/A	\$10,183,063	N/A	\$10,286,669	N/A	22.55	1.02	15% (+/-)	Yes
Clinic: Number of Users	N/A	24,235	N/A	25,678	N/A	26,570	N/A	5.95	3.47	15% (+/-)	Yes
Clinic: Avg Medicaid Pd per User	N/A	\$343	N/A	\$397	N/A	\$387	N/A	15.66	-2.37	15% (+/-)	Yes
HH: Total Medicaid Paid (TOS 13)	N/A	\$8,016,301	N/A	\$7,895,631	N/A	\$7,790,988	N/A	-1.51	-1.33	15% (+/-)	Yes
HH: Number of Users	N/A	3,491	N/A	3,551	N/A	3,754	N/A	1.72	5.72	15% (+/-)	Yes
HH: Avg Medicaid Pd per User	N/A	\$2,296	N/A	\$2,223	N/A	\$2,075	N/A	-3.17	-6.66	15% (+/-)	Yes
Lab/Xray: Total Medicaid Paid (TOS 15)	N/A	\$19,314,278	N/A	\$24,601,284	N/A	\$26,181,383	N/A	27.37	6.42	15% (+/-)	Yes
Lab/Xray: Number of Users	N/A	75,848	N/A	80,120	N/A	79,495	N/A	5.63	-0.78	15% (+/-)	Yes
Lab/Xray:Avg Medicaid Pd per User	N/A	\$255	N/A	\$307	N/A	\$329	N/A	20.58	7.26	15% (+/-)	Yes
Drugs: Total Medicaid Paid (TOS 16)	N/A	\$111,371,946	N/A	\$141,646,817	N/A	\$157,295,412	N/A	27.18	11.05	15% (+/-)	Yes
Drugs: Number of Users	N/A	103,262	N/A	105,038	N/A	105,491	N/A	1.72	0.43	15% (+/-)	Yes
Drugs: Avg Medicaid Pd per User	N/A	\$1,079	N/A	\$1,349	N/A	\$1,491	N/A	25.03	10.57	15% (+/-)	Yes
Other Services: Total Medicaid Paid (TOS 19)	N/A	\$169,597,039	N/A	\$94,497,231	N/A	\$104,789,876	N/A	-44.30	10.89	15% (+/-)	Yes
Other Services: Number of Users	N/A	26,065	N/A	21,403	N/A	23,383	N/A	-17.90	9.25	15% (+/-)	Yes
Other Services: Avg Medicaid Pd per User	N/A	\$6,507	N/A	\$4,415	N/A	\$4,481	N/A	-32.10	1.50	15% (+/-)	Yes
Transportation: Total Medicaid Paid (TOS 26)	N/A	\$6,124,199	N/A	\$5,855,928	N/A	\$8,943,349	N/A	-4.38	52.72	15% (+/-)	No
Transportation: Number of Users	N/A	14,036	N/A	13,909	N/A	15,400	N/A	-0.91	10.72	15% (+/-)	Yes
Transportation: Avg Medicaid Pd per User	N/A	\$436	N/A	\$421	N/A	\$581	N/A	-3.51	37.94	15% (+/-)	No
PCS: Total Medicaid Paid (TOS 30)	N/A	\$9,542,608	N/A	\$12,077,532	N/A	\$14,932,277	N/A	26.56	23.64	15% (+/-)	No
PCS: Number of Users	N/A	1,228	N/A	1,639	N/A	1,938	N/A	33.47	18.24	15% (+/-)	No
PCS: Avg Medicaid Pd per User	N/A	\$7,771	N/A	\$7,369	N/A	\$7,705	N/A	-5.17	4.56	15% (+/-)	Yes
Target Case Management: Total Medicaid Pd (TOS 31)	N/A	\$35	N/A	\$6,912,714	N/A	\$7,187,395	N/A	#####	3.97	15% (+/-)	Yes
Target Case Management: Number of Users	N/A	1	N/A	6,105	N/A	6,385	N/A	610,000.00	4.59	15% (+/-)	Yes
Target Case Management: Avg Medicaid Pd per User	N/A	\$35	N/A	\$1,132	N/A	\$1,126	N/A	3,135.00	-0.59	15% (+/-)	Yes

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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
Rehab Services: Total Medicaid Pd (TOS 33)	N/A	\$27,714	N/A	\$107,372	N/A	\$0	N/A	287.40	-100.00	15% (+/-)	No
Rehab Services: Number of Users	N/A	3	N/A	2	N/A	0	N/A	-33.30	-100.00	15% (+/-)	No
Rehab Services: Avg Medicaid Pd per User	N/A	\$9,238	N/A	\$53,686	N/A	Div by 0	N/A	481.10	Div by 0	15% (+/-)	N/A
PT/OT/Speech/Hear: Total Medicaid Paid (TOS 34)	N/A	\$724,569	N/A	\$1,131,992	N/A	\$1,249,727	N/A	56.23	10.40	15% (+/-)	Yes
PT/OT/Speech/Hear: Number of Users	N/A	2,516	N/A	3,407	N/A	3,708	N/A	35.41	8.84	15% (+/-)	Yes
PT/OT/Speech/Hear: Avg Medicaid Pd per User	N/A	\$288	N/A	\$332	N/A	\$337	N/A	15.37	1.44	15% (+/-)	Yes
Hospice: Total Medicaid Paid (TOS 35)	N/A	\$495,474	N/A	\$501,869	N/A	\$534,585	N/A	1.29	6.52	15% (+/-)	Yes
Hospice: Number of Users	N/A	83	N/A	98	N/A	77	N/A	18.07	-21.40	15% (+/-)	No
Hospice: Avg Medicaid Pd per User	N/A	\$5,970	N/A	\$5,121	N/A	\$6,943	N/A	-14.20	35.57	15% (+/-)	No
DME: Total Medicaid Paid (TOS 51)	N/A	\$6,441,241	N/A	\$7,968,952	N/A	\$8,564,563	N/A	23.72	7.47	15% (+/-)	Yes
DME: Number of Users	N/A	13,129	N/A	18,922	N/A	19,159	N/A	44.12	1.25	15% (+/-)	Yes
DME: Avg Medicaid Pd per User	N/A	\$491	N/A	\$421	N/A	\$447	N/A	-14.20	6.15	15% (+/-)	Yes
Residential Care: Total Medicaid Paid (TOS 52)	N/A	\$9,500,169	N/A	\$2,235,971	N/A	\$1,765,508	N/A	-76.50	-21.00	15% (+/-)	No
Residential Care: Number of Users	N/A	720	N/A	254	N/A	62	N/A	-64.70	-75.60	15% (+/-)	No
Residential Care: Avg Medicaid Pd per User	N/A	\$13,195	N/A	\$8,803	N/A	\$28,476	N/A	-33.30	223.50	15% (+/-)	No
Psych. Services: Total Medicaid Paid (TOS 53)	N/A	\$58,991,219	N/A	\$167,109,638	N/A	\$184,579,521	N/A	183.30	10.45	15% (+/-)	Yes
Psych. Services: Number of Users	N/A	27,851	N/A	32,538	N/A	34,535	N/A	16.83	6.14	15% (+/-)	Yes
Psych. Services: Avg Medicaid Pd per User	N/A	\$2,118	N/A	\$5,136	N/A	\$5,345	N/A	142.50	4.07	15% (+/-)	Yes
Adult Day Care: Total Medicaid Paid (TOS 54)	N/A	\$53,707	N/A	\$0	N/A	\$0	N/A	-100.00	Div by 0	15% (+/-)	N/A
Adult Day Care: Number of Users	N/A	4	N/A	0	N/A	0	N/A	-100.00	Div by 0	15% (+/-)	N/A
Adult Day Care: Avg Medicaid Pd per User	N/A	\$13,427	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/FFS ENROLLEE BY SELECTED MAX TOS</b>											
Inpatient Hospital (TOS=01)	N/A	\$310	N/A	\$366	N/A	\$403	N/A	18.25	10.13	15% (+/-)	Yes
Aged	N/A	\$239	N/A	\$238	N/A	\$239	N/A	-0.40	0.59	15% (+/-)	Yes
Disabled	N/A	\$854	N/A	\$930	N/A	\$1,046	N/A	8.99	12.39	15% (+/-)	Yes
Child	N/A	\$153	N/A	\$194	N/A	\$205	N/A	26.97	5.81	15% (+/-)	Yes
Adult	N/A	\$340	N/A	\$410	N/A	\$446	N/A	20.38	8.97	15% (+/-)	Yes
ILTC (TOS=02,04,05,07)	N/A	\$598	N/A	\$621	N/A	\$704	N/A	3.89	13.30	15% (+/-)	Yes
Aged	N/A	\$8,851	N/A	\$9,341	N/A	\$10,370	N/A	5.54	11.02	15% (+/-)	Yes
Disabled	N/A	\$457	N/A	\$480	N/A	\$540	N/A	4.92	12.58	15% (+/-)	Yes
Child	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Adult	N/A	\$1	N/A	\$1	N/A	\$1	N/A	47.56	22.45	15% (+/-)	No
Drugs (TOS=16)	N/A	\$751	N/A	\$938	N/A	\$1,056	N/A	24.97	12.49	15% (+/-)	Yes
Aged	N/A	\$2,520	N/A	\$2,950	N/A	\$3,099	N/A	17.08	5.05	15% (+/-)	Yes
Disabled	N/A	\$3,076	N/A	\$3,523	N/A	\$3,786	N/A	14.52	7.47	15% (+/-)	Yes
Child	N/A	\$212	N/A	\$232	N/A	\$253	N/A	9.20	9.03	15% (+/-)	Yes
Adult	N/A	\$344	N/A	\$598	N/A	\$715	N/A	73.85	19.57	15% (+/-)	No
All Other Services	N/A	\$2,643	N/A	\$2,982	N/A	\$3,292	N/A	12.82	10.41	15% (+/-)	Yes
Aged	N/A	\$3,723	N/A	\$4,392	N/A	\$5,007	N/A	17.97	14.00	15% (+/-)	Yes
Disabled	N/A	\$9,703	N/A	\$10,593	N/A	\$11,252	N/A	9.16	6.23	15% (+/-)	Yes
Child	N/A	\$1,786	N/A	\$1,981	N/A	\$2,075	N/A	10.91	4.75	15% (+/-)	Yes
Adult	N/A	\$1,123	N/A	\$1,368	N/A	\$1,592	N/A	21.74	16.41	15% (+/-)	No
<b>% OF FFS ENROLLEES WITH CLAIMS BY SELECTED MAX TYPE OF SERVICE</b>											
% FFS Enrollees with IP Claims (TOS=01)	N/A	6.81	N/A	6.96	N/A	7.15	N/A	2.22	2.74	15% (+/-)	Yes
Aged	N/A	17.67	N/A	17.01	N/A	17.28	N/A	-3.73	1.57	15% (+/-)	Yes
Disabled	N/A	14.80	N/A	13.99	N/A	13.96	N/A	-5.43	-0.23	15% (+/-)	Yes
Child	N/A	2.78	N/A	2.91	N/A	3.00	N/A	4.45	3.38	15% (+/-)	Yes
Adult	N/A	7.47	N/A	7.97	N/A	8.19	N/A	6.72	2.71	15% (+/-)	Yes
% FFS Enrollees with ILTC Claims (TOS=02,04,05,07)	N/A	2.44	N/A	2.44	N/A	2.43	N/A	0.08	-0.30	15% (+/-)	Yes
Aged	N/A	34.85	N/A	34.84	N/A	33.95	N/A	-0.05	-2.55	15% (+/-)	Yes
Disabled	N/A	2.39	N/A	2.65	N/A	2.60	N/A	11.24	-2.14	15% (+/-)	Yes
Child	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Adult	N/A	0.03	N/A	0.04	N/A	0.05	N/A	36.86	33.86	15% (+/-)	No
% FFS Enrollees with Drug Claims (TOS=16)	N/A	69.62	N/A	69.59	N/A	70.79	N/A	-0.05	1.73	15% (+/-)	Yes
Aged	N/A	92.33	N/A	92.13	N/A	91.10	N/A	-0.22	-1.13	15% (+/-)	Yes
Disabled	N/A	88.68	N/A	89.23	N/A	89.18	N/A	0.62	-0.05	15% (+/-)	Yes
Child	N/A	64.94	N/A	63.65	N/A	64.13	N/A	-1.99	0.75	15% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
Adult	N/A	65.20	N/A	66.50	N/A	68.98	N/A	1.99	3.72	15% (+/-)	Yes
% FFS Enrollees with All Other Claims	N/A	84.16	N/A	84.47	N/A	85.37	N/A	0.37	1.07	15% (+/-)	Yes
Aged	N/A	85.64	N/A	87.50	N/A	87.20	N/A	2.18	-0.34	15% (+/-)	Yes
Disabled	N/A	92.79	N/A	93.41	N/A	93.22	N/A	0.68	-0.21	15% (+/-)	Yes
Child	N/A	88.08	N/A	88.52	N/A	88.50	N/A	0.51	-0.02	15% (+/-)	Yes
Adult	N/A	75.69	N/A	75.73	N/A	78.12	N/A	0.04	3.16	15% (+/-)	Yes
Avg # IP Days per FFS User	N/A	7	N/A	7	N/A	7	N/A	1.21	-0.27	15% (+/-)	Yes
Aged	N/A	7	N/A	7	N/A	7	N/A	0.75	-0.36	15% (+/-)	Yes
Disabled	N/A	9	N/A	9	N/A	10	N/A	-3.04	7.37	15% (+/-)	Yes
Child	N/A	6	N/A	6	N/A	6	N/A	8.97	-5.90	15% (+/-)	Yes
Adult	N/A	5	N/A	5	N/A	5	N/A	6.30	-6.43	15% (+/-)	Yes
Avg # ILTC Days per FFS User	N/A	221	N/A	219	N/A	216	N/A	-1.26	-1.24	15% (+/-)	Yes
Aged	N/A	234	N/A	235	N/A	232	N/A	0.33	-1.29	15% (+/-)	Yes
Disabled	N/A	138	N/A	126	N/A	131	N/A	-8.47	4.29	15% (+/-)	Yes
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	17	N/A	18	N/A	15	N/A	5.00	-19.40	15% (+/-)	No
<b>FFS EXPENDITURES AND USERS BY MAX PGM TYPE</b>											
FP: Total Medicaid Paid (Program Type 2)	N/A	\$2,393,246	N/A	\$2,558,521	N/A	\$2,402,150	N/A	6.91	-6.11	15% (+/-)	Yes
FP: Number of Users	N/A	12,339	N/A	12,359	N/A	11,861	N/A	0.16	-4.03	15% (+/-)	Yes
FP: Average Medicaid Pd per User	N/A	\$194	N/A	\$207	N/A	\$203	N/A	6.73	-2.17	15% (+/-)	Yes
RHC: Total Medicaid Paid (Program Type 3)	N/A	\$3,986,403	N/A	\$4,551,378	N/A	\$4,742,943	N/A	14.17	4.21	15% (+/-)	Yes
RHC: Number of Users	N/A	14,804	N/A	16,012	N/A	16,413	N/A	8.16	2.50	15% (+/-)	Yes
RHC: Avg Medicaid Pd per User	N/A	\$269	N/A	\$284	N/A	\$289	N/A	5.56	1.66	15% (+/-)	Yes
FQHC: Total Medicaid Paid (Program Type 4)	N/A	\$3,815,280	N/A	\$4,572,482	N/A	\$4,711,036	N/A	19.85	3.03	15% (+/-)	Yes
FQHC: Number of Users	N/A	9,358	N/A	9,784	N/A	9,853	N/A	4.55	0.71	15% (+/-)	Yes
FQHC: Avg Medicaid Pd per User	N/A	\$408	N/A	\$467	N/A	\$478	N/A	14.63	2.31	15% (+/-)	Yes
IHS: Total Medicaid Pd (Program Type 5)	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
IHS: Number of Users	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
IHS: Avg Medicaid Pd per User	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Section 1915(c) Waiver: Total Medicaid Paid (Program Types 6 and 7)	N/A	\$107,243,391	N/A	\$117,236,044	N/A	\$125,695,754	N/A	9.32	7.22	15% (+/-)	Yes
Section 1915(c) Waiver: Number of Users	N/A	3,941	N/A	4,230	N/A	4,546	N/A	7.33	7.47	15% (+/-)	Yes
Section 1915(c) Waiver: Avg Medicaid Pd per User	N/A	\$27,212	N/A	\$27,715	N/A	\$27,650	N/A	1.85	-0.24	15% (+/-)	Yes
<b>FFS COMMUNITY-BASED LONG-TERM CARE EXPENDITURES AND USERS</b>											
Total FFS CLTC Expenditures (all codes - overestimate)	N/A	N/A	N/A	N/A	N/A	\$164,037,341	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	17,668	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	\$9,284	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$5,204	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$12,096	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$5,589	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$1,462	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	11.86	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	48.34	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	54.84	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	2.61	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	1.41	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	\$148,419,019	N/A	N/A	N/A	15% (+/-)	No
Number of CLTC Users (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	8,437	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	\$17,591	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$10,956	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$28,293	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$5,589	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$1,462	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	5.66	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	19.20	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	21.31	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	2.61	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	1.41	N/A	N/A	N/A	15% (+/-)	No

2003-2005 MAX PSF VALIDATION TABLE  
STATE: VT

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	\$125,695,754	N/A	N/A	N/A	15% (+/-)	No
Number of CLTC Users (Section 1915(c) claims only - excludes CLTC Codes 11-20)	N/A	N/A	N/A	N/A	N/A	4,546	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	\$27,650	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$11,782	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$38,584	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$17,592	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$2,784	N/A	N/A	N/A	15% (+/-)	No
% FFS Enrollees with CLTC Claims (Section 1915(c) claims only - excludes CLTC Codes 11-20)	N/A	N/A	N/A	N/A	N/A	3.05	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	16.96	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	13.52	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	0.42	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	0.13	N/A	N/A	N/A	15% (+/-)	No